

Health Service Executive

**Primary Care Division** 

Key Performance Indicator Metadata 2016

	Office Use Only KPI	Office Use	Key Performance Indicators Service Planning 2016				KPIs	2015						KPIs 2016					
	No. (source target doc)	Only Active or Retired	KPI Title	Reported against NSP / DOP	KPI Type Access/ Quality /Access Activity	Report Frequency	2015 National Target / Expected Activity	2015 Actual Outturn	2016 National Target / Expected Activity	Report ed at Nation al/ CHO	CHO 1	СНО 2	сно з	СНО 4	СНО 5	сно 6	сно 7	CHO 8	СНО 9
	PC122	Active	Community Intervention Teams (number of referrals)				26,355	19,675	24,202		0	900	4,713	1,350	3060	1,200	6,941	1,140	4,898,
	PC122A	Active	Admission Avoidance (includes OPAT)	NSP	Quality	М	1,196	668	914	СНО	0	36	164	108	139	77	141	57	192
	PC122B	Active	Hospital Avoidance	NSP	Quality	М	14,134	11,792	12,932	СНО	0	234	2,598	435	1994	816	4.922	275	1,658
Ē	PC122C	Active	Early discharge (includes OPAT)	NSP	Quality	М	6,375	3,989	6,360	СНО	0	540	935	275	847	253	1,878	694	938
on Tea	PC122D	Active	Unscheduled referrals from community sources	NSP	Quality	М	4,650	3,226	3,996	СНО	0	90	1,016	532	80	54	0	114	2,110
Community Intervention Teams	PC98	Active	Outpatient parenteral Antimicrobial Therapy OPAT Re-admission rate %	DOP	Access /Activity	MQ2	New PI 2016	New PI 2016	≤5%	HG		≤5%	≤5%	≤5%	≤5%	≤5%	≤5%	≤5%	≤5%
ty Inte	PC123		Community Intervention Teams Activity (by referral source)				26,355	19,675	24,202	СНО	0	900	4,713	1,350	3060	1,200	6,941	1140	4,898
nmuni	PC123A	Active	ED / Hospital wards / Units	DOP	Access /Activity	M	17,038	12,289	13,956	СНО	0	504	2,509	392	1,408	646	5,274	740	2,483
S	PC123B	Active	GP Referral	DOP	Access /Activity	M	6,029	4,202	6,386	СНО	0	324	795	352	1,288	449	1,055	259	1,864
	PC123C	Active	Community Referral	DOP	Access /Activity	M	1,455	1,831	2,226	СНО	0	0	1,216	470	0	0	211	50	279
	PC123D	Active	OPAT Referral	DOP	Access /Activity	M	1,833	1,353	1,634	СНО	0	72	193	136	364	105	401	91	272
2			GP Out of Hours																
ООНЅ	PC11	Active	No. of contacts with GP Out of Hours Service	NSP	Access /Activity	М	959,455	980,917	964,770	National									
O.			Tobacco Control																
ТОВАССО	PC99 & PC99A	Active	% of primary care staff to undertake brief intervention training for smoking																
¥	(No.)		cessation	DOP	Quality	Q	New 2016	New 2016	7.50%	CHO	7.50%	7.50%	7.50%	7.50%	7.50%	7.50%	7.50%	7.50%	7.50%
			Physiotherapy																
	PC14	Active	No of patient referrals	DOP	Activity	M	184,596	189,402	193,677	CHO	25,157	20,877	15,802	28,818	24,029	12,215	22,237	27,207	17,335
	PC15	Active	No of patients seen for a first time assessment	DOP	Activity	М	159,260	157,129	160,017	СНО	21,228	15,884	12,062	26,412	20,911	10,049	16,886	23,059	13,526
	PC16	Active	No of patients treated in the reporting month (monthly target)	DOP	Activity	М	34,993	33,582	36,430	СНО	4,721	4,288	2,305	5,646	4,868	2,174	4,171	5,324	2,933
	PC17	Active	No of face to face contacts/visits	DOP	Activity	М	770,878	756,991	775,864	CHO	116,183	84,366	50,877	114,348	103,297	49,304	85,229	109,972	62,288
	PC100	Active	Total No. of physiotherapy patients on the assessment waiting list at the end of the reporting period *	DOP	Access	М	New PI 2016	New PI 2016	28,527	СНО	3,313	4,497	3,294	2,877	3,232	1,484	2,791	3,776	3,263
	PC100A	Active	No. of physiotherapy patients on the assessment waiting list at the end of the reporting period 0 - ≤ 12 weeks	DOP	Access	M	New PI 2016	New PI 2016	No target	СНО									

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	PC100B	Active	No. of physiotherapy patients on the assessment waiting list at the end of the reporting period >12 weeks -≤ 26 weeks	DOP	Access	M	New PI 2016	New PI 2016	No target	СНО									
ıerapy	PC100C		No. of physiotherapy patients on the assessment waiting list at the end of the reporting period >26 weeks but ≤ 39 weeks	DOP	Access	М	New PI 2016	New PI 2016	No target	СНО									
Physiotherapy	PC100D	Active	assessment waiting list at the end of the reporting period >39 weeks but ≤ 52 weeks	DOP	Access	М	New PI 2016	New PI 2016	No target	СНО									
	PC100E	Active	No. of physiotherapy patients on the assessment waiting list at the end of the reporting period > 52 weeks	DOP	Access	M	New PI 2016	New PI 2016	No target	СНО									
	PC15A (No) PC15B (%)	Active	% of new patients seen for assessment within 12 weeks	NSP	Access	М	80%	3.1% Data G	70%	СНО	70%	70%	70%	70%	70%	70%	70%	70%	70%
	PC100F (No) PC100G (%)	Active	% on waiting list for assessment ≤ to 52 weeks	NSP	Access	М	New PI 2016	New PI 2016	100%	СНО	100%	100%	100%	100%	100%	100%	100%	100%	100%
	PC100H(N o) & PC100I (%)	Active	% on waiting lists for assessment ≤ 39	DOP					95%	СНО	95%		95%		95%	95%	95%	95%	95%
	PC100J(NO ) & PC100K(%)	Active	weeks  % on waiting lists for assessment ≤ 26	_	Access		New PI 2016		90%		90%	95%		95%		90%	90%	90%	90%
			weeks Occupational Therapy	DOP	Access	M	New PI 2016	New PI 2016		СНО		90%	90%	90%	90%				
	PC19	Active	No of patient referrals	DOP	Activity	M	85,030	87,582	89,989	СНО	11,698	6,888	7,926	8,984	10,308	5,979	13,286	14,114	10,806
	PC20	Active	No of new patients seen for a first assessment	DOP	Activity	М	83,004	83,063	86,499	СНО	10,306	6,754	7,450	9,620	9,311	6,530	14,611	12,739	9,178
	PC21	Active	No of patients treated (direct and indirect) monthly target	DOP	Activity	M	19,811	18,431	20,291	СНО	2,706	1,924		2,074	1,815	1,274	2,835	3,436	2,753
	PC101	Active	Total No. of occupational therapy patients on the assessment waiting list at the end of the reporting period **	DOP	Access			New PI 2016		СНО	1,161				3,226	900	2,329	3,543	2,187

Office U		•				KPIs	2015						KPIs 2016					
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PC101/	Activ	No. of occupational therapy patients on the assessment waiting list at the end of the reporting period 0 - ≤ 12 weeks	DOP	Access		New PI 201	6New PI 2016	No target	СНО									
PC101I	Activ		DOP	Access			6New PI 2016		СНО									
PC1010	Activ		DOP	Access	M		6New PI 2016		СНО									
Occupational Therapy  Comparison PC1010  PC1010	Activ		DOP	Access	М		6New PI 2016		СНО									
PC101	Activ		DOP	Access	М		6New PI 2016		СНО									
PC20A(N & PC20B(9 PC101	%)	e % of new patients seen for assessment within 12 weeks	NSP	Access	М	80%	i.4% Data Ga	70%	СНО	70%	70%	70%	70%	70%	70%	70%	70%	70%
(No) & PC1010 (%)	G G	% on waiting list for assessment ≤ to 52 weeks	NSP	Access	М	New PI 201	6New PI 2016	100%	СНО	100%	100%	100%	100%	100%	100%	100%	100%	100%
PC101I (N) & PC101I(	%)	% on waiting lists for assessment ≤ 39 weeks	DOP	Access	M	New PI 201	6New PI 2016	95%	СНО	95%	95%	95%	95%	95%	95%	95%	95%	95%
PC101 (No). PC101K (	,	% on waiting lists for assessment ≤ 26 weeks	DOP	Access	M	New PI 201	6New PI 2016	80%	СНО	80%	80%	80%	80%	80%	80%			
PC23	Activ	No. of patients receiving active treatment at the end of the reporting	0.65			24.272	45	16.007	Nationa I/forme r region									
PC24 8 PC24A		e % of referrals seen for assessment within 6 months	DOP NSP	Access	Q Q	21,050 75%	15,460	75%	Nationa I/forme r region									

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	PC25 & PC25A	Active	% on waiting list for assessment ≤ 12 months	DOP	Access	q	100%	98.1%	100%	_	Nationa I/forme r region									
so	PC26 & PC26A	Active	% of patients on the treatment waiting list less than 2 years	DOP	Access	Q	75%	60.4%	75%		Nationa I/forme r region									
Orthodontics	PC27 & PC27A	Active	% of patients on treatment waiting list less than 4 years (grade 4 and 5)	DOP	Access	Q	95%	93.0%	95%		Nationa I/forme r region									
	PC28	Active	No. of patients on the assessment waiting list at the end of the reporting period	DOP	Access	Q	6,165	4,900	5,966		Nationa I/forme r region									
	PC29	Active	No. of patients on the treatment waiting list – grade 4 –at the end of the reporting period	DOP	Access /Activity	Q	9,444	8,250	9,912		Nationa I/forme r region									
	PC30	Active	No. of patients on the treatment waiting list – grade 5 –at the end of the reporting period	DOP	Access /Activity	Q	7,562	7,580	8,194		Nationa I/forme r region									
	PC31 % & PC31A	Active	Reduce the proportion of patients on the treatment waiting list longer than 4 years (grade IV and V)	NSP	Access	Q	<5%	7%	<5%		Nationa I/forme r region									
			Oral Health (Primary Dental Care and Orthodontics)																	
Oral health	PC32	Active	No. of new patients attending for Scheduled Assessment	DOP	Access /Activity	М	o Target 201	15				7500 (data gaps)								
Orall	PC33		No. of new patients attending for Unscheduled Assessment % of new patients who commenced	DOP		М	o Target 201	15 I				(data gaps)								
	PC34 % & PC34A (No)	Active	treatment within 3 months of assessment	NSP	Access	М	o Target 201	Not Available	80%		СНО	80%	80%	80%	80%	80%	80%	80%	80%	
-	PC102	Active	Healthcare Associated Infections: Medication Management Consumption of antibiotics in community settings (defined daily doses								CHO Nationa									
HCAI	PC102		per 1,000 population)	NSP	Quality		<21.7	25.7	<21.7	,	 									

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		Primary Care – Psychology																
PC38	Active	No. of patient referrals	DOP	Activity	M	New	12,264	12,261	CHO	1,443	1,312	416	1,096	1,403	1,179	1,467	2,589	1,356
PC39	Active	Existing patients seen in the month	DOP	Activity	M	o Target 20	1 2,294	2,626	CHO	630	260	118	219	262	226	194	591	126
PC40	Active	New patients seen	DOP	Activity	M	o Target 20	1 9,565	9,367	CHO	1,449	1,147	190	614	880	879	1,368	2,229	611
PC103	Active	Total No. of psychology patients on the treatment waiting list at the end of the reporting period *	DOP	Access	М		6New PI 2016	6,028	СНО	882	702	422	911	727	542	609	1,114	119
PC103A	Active	No. of psychology patients on the treatment waiting list at the end of the reporting period 0 - ≤ 12 weeks	DOP	Access	М	New PI 201	6New PI 2016	No target	СНО									
PC103B	Active	No. of psychology patients on the treatment waiting list at the end of the reporting period >12 weeks - ≤ 26 weeks	DOP	Access	М	New PI 201	6New PI 2016	No target	СНО									
PC103C	Active	No. of psychology patients on the treatment waiting list at the end of the reporting period >26 weeks but ≤ 39 weeks	DOP	Access	М	New PI 201	6New PI 2016	No target	СНО									
PSychology PC103D	Active		DOP	Access	М		6New PI 2016		СНО									
PC103E	Active	No. of psychology patients on the treatment waiting list at the end of the reporting period > 52 weeks	DOP	Access	М	New PI 201	6New PI 2016	No target	СНО									
PC103F(No ) & PC103G (%)		% on waiting list for treatment ≤ to 52 weeks	NSP	Access	M	New PI 201	6New PI 2016	100%	СНО	100%	100%	100%	100%	100%	100%	100%	100%	100%
PC103H (No) & PC103I(%)	Active	% on waiting lists for treatment ≤ 39 weeks	DOP	Access	М		6New PI 2016	90%	СНО	90%	90%	90%	90%	90%	90%	90%	90%	90%
PC103J(No ) &PC103K( %)	Active	% on waiting lists for treatment≤ 26 weeks	DOP	Access	М	New PI 201	6New PI 2016	80%	СНО	80%	80%	80%	80%	80%	80%	80%	80%	80%
PC103L(No ) & PC103M(%		% on waiting lists for treatment ≤ 12 weeks	NSP	Access	M		6New PI 2016	60%	СНО	60%	60%	60%	60%	60%	60%	60%	60%	60%
		Primary Care – Podiatry	1451	7100033	141	1404111201			5110		3370	3370	3370	3370	3370		_	
PC45	Active	No. of patient referrals	DOP	Activity	M	New	9,876	11,589	СНО	2,407	2,010	1,305	1,303	220	No direct service	No direct service	4,344	No direct service

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PC46	Active	Existing patients seen in the month	DOP	Activity	М	o Target 201	4,409	5,210	СНО	1,456	981	570	1,580	60	No direct service	No direct service	563	No direct service
PC47	Active	New patients seen	DOP	Activity	M	o Target 201		8,887	СНО	1,987	3,100	752	1,056	307	No direct service	No direct service	1,685	No direct service
PC104	Active	Total No. of podiatry patients on the treatment waiting list at the end of the reporting period *	DOP	Access		New PI 2016		3,186	СНО	819	522	488	766	22	No direct service	No direct service	569	No direct service
PC104A	Active	No. of podiatry patients on the treatment waiting list at the end of the reporting period 0-12 weeks	DOP	Access	М	New PI 2016	New PI 2016	No target	СНО									
PC104B	Active	No. of podiatry patients on the treatment waiting list at the end of the reporting period 12 weeks ≤ 26 weeks	DOP	Access	M	New PI 2016	New PI 2016	No target	СНО									
PC104C	Active	No. of podiatry patients on the treatment waiting list at the end of the reporting period 26 weeks ≤ 39 weeks	DOP	Access	M	New PI 2016	New PI 2016	No target	СНО									
PC104D PC104D	Active	No. of podiatry patients on the treatment waiting list at the end of the reporting period 39 weeks ≤ 52 weeks	DOP	Access	M	New PI 2016	New PI 2016	No target	СНО									
PC104E	Active	No. of podiatry patients on the treatment waiting list at the end of the reporting period > 52 weeks	DOP	Access	М	New PI 2016	New PI 2016	No target	СНО									
PC104F(No ) & PC104G (%)		% on waiting list for treatment≤ to 52 weeks	NSP	Access	M	New PI 2016	New PI 2016	100%	СНО	100%	100%	100%	100%	100%	100%	100%	100%	100%
PC104H (No) & PC104I(%)	Active	% on waiting lists for treatment≤ 39 weeks	DOP	Access	М	New PI 2016	New PI 2016	95%	СНО	95%	95%	95%	95%	95%	95%	95%	95%	95%
PC104J(No ) &PC104K( %)	Active	% on waiting lists for treatment ≤ 26 weeks	DOP	Access	M	New PI 2016	New PI 2016	90%	СНО	90%	90%	90%	90%	90%	90%	90%	90%	90%
PC104L(No ) & PC104M(%		% on waiting lists for treatment ≤ 12 weeks	NSP	Access			New PI 2016	75%	СНО	75%	75%	75%	75%	75%	75%	75%	75%	75%
PC105	Active	No of patients with Diabetic Active Foot Disease treated in the reporting month	DOP	Quality	M Q3	New PI 2016	New PI 2016	133	СНО	32	28	11	40	2	0	0	20	0

	ice Use nly KPI	Office Use	Key Performance Indicators Service Planning 2016				KPIs	2015							KPIs 2016					
(se	No. ource get doc)	Only Active or Retired	KPI Title	Reported against NSP / DOP	KPI Type Access/ Quality /Access Activity	Report Frequency	2015 National Target / Expected Activity	2015 Actual Outturn	2016 Nat Target Expect Activit	:/ ed	Report ed at Nation al/ CHO	CHO 1	CHO 2	СНО 3	сно 4	сно 5	сно 6	CHO 7	CHO 8	СНО 9
	64.06	Active	No. of treatments for Diabetic Active	DOF	Access	rrequency	Activity	Outturn	Activi	Ly	ai, crio	CHOI	CHOZ	CHOS	CHO 4	CHOS	CHO	CHO 7	CHO 8	CHO 3
P	C106		Foot Disease in the reporting month	DOP	/Activity	M Q3	New PI 2016	New PI 2016	532		СНО	128	112	44	160	8	0	0	80	0
			Primary Care - Ophthalmology																	
F	PC52	Active	No. of patient referrals	DOP	Activity	М	New	22,322	26,913		CHO	6,147	2,613	2,407	4,436	6,810	1,054	0	1000 (Louth)	2,446
F	PC53	Active	Existing patients seen in the month	DOP	Activity	М	o Target 20:	1 4,452	13,807		СНО	1,770	610	509	unavaila ble	10,044	189	0	250 (Louth)	435
F	PC54	Active	New patients seen	DOP	Activity	М	o Target 20:	1 12,950	16,524		СНО	4,620	1,800	1,806	unavaila ble	5,504	751	0	800 (Louth)	1,243
P	C107	Active	Total No. of ophthalmology patients on the treatment waiting list at the end of the reporting period *	DOP	Access	М	New PI 2016	New PI 2016	14,267		сно	2,478	553 (June to Oct data)	1,833	3,484	781	2,397		598 (Louth Oct	2,143
PC	C107A	Active	No. of ophthalmology patients on the treatment waiting list at the end of the reporting period 0-12 weeks	DOP	Access		New PI 2016			get	СНО	2,470	uataj	1,633	3,464	761	2,397		data only)	2,140
PC	С107В	Active	No. of ophthalmology patients on the treatment waiting list at the end of the reporting period 12 weeks ≤ 26 weeks	DOP	Access	М	New PI 2016	New PI 2016	No targ	get	СНО									
A Soloi	C107C	Active	No. of ophthalmology patients on the treatment waiting list at the end of the reporting period 26 weeks ≤ 39 weeks	DOP	Access		New PI 2016				СНО									
Ophthalmology	C107D	Active	No. of ophthalmology patients on the treatment waiting list at the end of the reporting period 39 weeks ≤ 52 weeks	DOP	Access	М	New PI 2016	New PI 2016	No tar	get	СНО									
PC	C107E	Active	No. of ophthalmology patients on the treatment waiting list at the end of the reporting period > 52 weeks	DOP	Access	М	New PI 2016	New PI 2016	No targ	get	СНО									
) & I	.07F(No PC107G (%)	Active	% on waiting list for treatment ≤ to 52 weeks	NSP	Access	М	New PI 2016	New PI 2016	100%	_ <del>_</del>	СНО	100%	100%	100%	100%	100%	100%	100%	100%	100%
(1)	C107H No) & 107I(%)	Active	% on waiting lists for treatment≤ 39 weeks	DOP	Access	М	New PI 2016		90%		СНО	90%	90%	90%	90%	90%	90%	90%	90%	90%
	1071(%) 107J(No )	Active					22310	22310	80%		20	80%	23/3	23/3	23/0	23/4	23/0	80%	80%	80%
&P(	C107K( %)		% on waiting lists for treatment ≤ 26 weeks	DOP	Access	M	New PI 2016	New PI 2016	5		СНО		80%	80%	80%	80%	80%			

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	PC107L(No ) & PC107M(% )	Active	% on waiting lists for treatment≤ 12 weeks	NSP	Access		New PI 2016		60%	СНО	60%	60%	60%	60%	60%	60%	60%	60%	60%
			Primary Care – Audiology																
	PC59	Active	No. of patient referrals	DOP	Activity	M	o Target 201	18,351	18,317	СНО	1,951	2,849	1,189	2,261	2,037	Service included in CHO9 Service	3,100	1,868	3,062
	PC60		Existing patients seen in the month	DOP	Activity	М	o Target 201	2,923	2,850	СНО	499	304	215	439	365	included in CHO9	331	263	434
	PC61	Active	New patients seen	DOP	Activity		o Target 201		16,459	СНО	1,629	1,636	1,390	4,387	2,325	Service included in CHO9	1,840	1,491	1,761
	PC108	Active	treatment waiting list at the end of the reporting period *	DOP	Access	М	New PI 2016	New PI 2016	13,870	СНО	1,894	2,550	803	1,344	1,150	Service included in CHO9	2,036	3,269	824
	PC108A	Active	No. of audiology patients on the treatment waiting list at the end of the reporting period 0-12 weeks	DOP	Access	M	New PI 2016	New PI 2016	No target	СНО									
	PC108B	Active	No. of audiology patients on the treatment waiting list at the end of the reporting period 12 weeks ≤ 26 weeks	DOP	Access	М	New PI 2016	New PI 2016	No target	СНО									
logy	PC108C	Active	No. of audiology patients on the treatment waiting list at the end of the reporting period 26 weeks ≤ 39 weeks	DOP	Access	М	New PI 2016	New Pl 2016	No target	СНО									
Audiology	PC108D	Active	No. of audiology patients on the treatment waiting list at the end of the						J										
	PC108E	Active	reporting period 39 weeks ≤ 52 weeks  No. of audiology patients on the treatment waiting list at the end of the reporting period > 52 weeks	DOP	Access		New PI 2016 New PI 2016		, and the second	СНО									
	PC108F(No ) & PC108G (%)	Active	% on waiting list for treatment ≤ to 52 weeks	NSP	Access		New PI 2016		100%	СНО	100%	100%	100%	100%	100%	100%	100%	100%	100%
	PC108H (No) & PC108I(%)	Active	% on waiting lists for treatment≤ 39 weeks	DOP	Access	М	New PI 2016	New PI 2016	90%	СНО	90%	90%	90%	90%	90%	90%	90%	90%	90%

	Office Use Only KPI	Office Use	Key Performance Indicators Service Planning 2016					KPIs	2015							KPIs 2016					
	No. (source target doc)	Only Active or Retired	KPI Title	Reported against NSP / DOP	KPI Type Access/ Quality /Access Activity		oort	2015 National Target / Expected Activity	2015 Actual Outturn	2016 Natio Target / Expected Activity	d Na	eport d at ation	CHO 1	CHO 2	СНО 3	СНО 4	СНО 5	СНО 6	СНО 7	СНО 8	СНО 9
	PC108J(No	Active								80%			80%						80%	80%	80%
	) &PC108K( %)		% on waiting lists for treatment ≤ 26 weeks	DOP	Access		M	New PI 2010	5New PI 2016		С	СНО		80%	80%	80%	80%	80%			
	PC108L(No	Active								60%			60%						60%	60%	60%
	) & PC108M(% )		% on waiting lists for treatment ≤ 12 weeks	NSP	Access	1	И	New PI 2010	New PI 2016		С	СНО		60%	60%	60%	60%	60%			
			Primary Care – Dietetics						25742												
	PC66	Active	No. of patient referrals	DOP	Activity	Ι Ι,	M	o Target 20	25712 1 (data gap)	27,858	СН	10	3,624	2,720	2,026	7,012	2,811	2,082	2,613	3,022	1,948
		Active	No. of patient reterrais	DOI	Activity	<u> </u>	VI.	o raiget 20	2,960 (data	27,030	Cit		3,024	2,720	2,020	7,012	2,011	2,002	2,010	3,022	1,540
	PC67		Existing patients seen in the month	DOP	Activity	ı	VI	o Target 20		5,209	CH	10	589	1,816	109	1,038	457	415	220	413	152
	PC68	Active	New patients seen	DOP	Activity	1	M	o Target 20	20,117 1 (data gap)	21,707	CH	10	3,335	1,208	975	5,440	2,569	2,018	1,767	3,141	1,254
	PC109	Active	Total No. of dietetics patients on the treatment waiting list at the end of the reporting period *	DOP	Access		М	New PI 2010	8 New 2016	5,479	c	СНО	1,061	554 (June to Oct data)	427	704	669	195	486	1,023	360
	PC109A		No. of dietetics patients on the treatment waiting list at the end of the reporting period 0-12 weeks	DOP	Access		И		New PI 2016			СНО	, -	,							
	PC109B	Active	No. of dietetics patients on the treatment waiting list at the end of the reporting period 12 weeks ≤ 26 weeks	DOP	Access		М	New PI 2010	6New PI 2016	No targe	t C	СНО									
tics	PC109C	Active	No. of dietetics patients on the treatment waiting list at the end of the reporting period 26 weeks ≤ 39 weeks	DOP	Access		М	New Pl 201	6New PI 2016	No targe	t (	СНО									
Dietetics	PC109D	Active	No. of dietetics patients on the treatment waiting list at the end of the reporting period 39 weeks ≤ 52 weeks	DOP	Access		vi M		New PI 2016			СНО									
	PC109E	Active	No. of dietetics patients on the treatment waiting list at the end of the reporting period > 52 weeks	DOP	Access				New PI 2016	_		СНО									
	PC109F(No ) & PC109G (%)	Active	% on waiting list for treatment ≤ to 52 weeks	NSP	Access	,	М	New PI 2010	6New PI 2016	100%	С	СНО	100%	100%	100%	100%	100%	100%	100%	100%	100%

	Office Use Only KPI	Office Use	Key Performance Indicators Service Planning 2016				KPIs	2015						KPIs 2016					
	No. (source target doc)	Only Active or Retired	KPI Title	Reported against NSP / DOP	KPI Type Access/ Quality /Access Activity	Report Frequency	2015 National Target / Expected Activity	2015 Actual Outturn	2016 National Target / Expected Activity	Report ed at Nation al/ CHO	CHO 1	CHO 2	сно з	CHO 4	CHO 5	сно 6	сно 7	CHO 8	СНО 9
	PC109H	Active	% on waiting lists for treatment ≤ 39	DOI	Activity	Trequency	Activity	Outturn	95%	ui/ ciio	95%	CHO 2	CHO 3	CHO 4	CHO 3	CHO	95%	95%	95%
	(No) & PC109I(%)		weeks	DOP	Access	M	New PI 2016	New PI 2016		СНО		95%	95%	95%	95%	95%			
	PC109J(No	Active	% on waiting lists for treatment≤ 26						85%		85%						85%	85%	85%
	) &PC109K(		weeks												0.707				
	%) PC109L(No	Active	% on waiting lists for treatment ≤ 12	DOP	Access	M	New PI 2016	New PI 2016	70%	CHO	70%	85%	85%	85%	85%	85%	70%	70%	70%
	) & PC109M(%	Active	weeks						70%		70%						7070	7070	7076
	)			NSP	Access	М	New PI 2016	New PI 2016		СНО		70%	70%	70%	70%	70%			
			Primary Care – Nursing																
		Active									8351						1,702		
	PC73			202				450.004	450.604	6116	(Data	40 447	47 706	04.400	Unavaila		(Data		24 246
		Active	No. of patient referrals	DOP	Activity	M	o Target 20:	1 159,694	159,694	CHO	Gaps) 3857	18,417	17,796	84,403	ble	7,809	gap) 1,800	Unavailable	21,216
sing	PC74	Active									(Data				Unavaila		(Data		
j j	1074		Existing patients seen in the month	DOP	Activity	М	o Target 20:	64,660	64,660	СНО	Gaps)	5,341	21,934	26,441	ble	1,482	gap)	Unavailable	3,805
PHN Nursing		Active			,			,	,		10960					· ·	1,884		
\$	PC75										(Data				Unavaila		(Data		
			New patients seen	DOP	Activity	M	o Target 20:	1 123,024	123,024	CHO	Gaps)	17,185	16,509	49,450	ble	5,948	gap)	Unavailable	21,088
	DC110	Active	Number of new patients accepted on the																
	PC110		caseload and waiting to be seen over 12 weeks	NSP	Access	М	Now 2016	New 2016	0	СНО	0	0	0	0	0	0	0	0	0
			Primary Care – Speech and Language	NOF	Access	IVI	New 2010	New 2010	Ů	CHO	U	U	U	U	U	U	U	U	0
			Therapy***																
	PC113	Active	No. of patient referrals	DOP	Activity	М	o Target 20:	51,399	50,863	СНО	6,140	4,373	4,062	6,739	4,905	3,333	5,769	7,918	7,624
	PC114	Active									New PI	New PI	New PI	New PI	New PI	New PI	New PI	New PI	New PI
	. 011.		Existing patients seen in the month	DOP	Activity	M Q2	New 2016	New PI 2016	New PI 2016	CHO	2016	2016	2016	2016	2016	2016	2016	2016	2016
<b>∂</b>	PC115	Active	New patients seen for initial assessment	DOP	Activity	М	o Target 20:	1 39,910	41,083	СНО	4,569	3,891	3,381	6,324	4,450	1,862	4,045	6,414	6,147
eral		Active	Total No. of speech and language	DOP	Activity	IVI	o rarget 20.	39,910	41,063	СПО	4,509	3,091	3,361	0,324	4,430	1,002	4,045	0,414	0,147
Ę	PC116	Active	patients waiting initial assessment at																
age			end of the reporting period	DOP	Access	М	New 2016	New PI 2016	13,050	СНО	963	658	832	1,566	1,109	504	3,057	2,223	2,138
ngu		Active	Total No. of speech and language																
r La	PC117		patients waiting initial therapy at end of																
Speech & Language Therapy			the reporting period	DOP	Access	М	New 2016	New PI 2016	8,279	СНО	61	668	393	1,205	2,400	429	1,060	1,121	942
beed	PC116A(N	Active																	
- R	O.) &		% on waiting list for assessment ≤ to 52																
	PC116B (%)		weeks	NSP	Access	М	New PI 2016	New PI 2016	100%	СНО	100%	100%	100%	100%	100%	100%	100%	100%	100%

Office Use Only KPI	Office Use	Key Performance Indicators Service Planning 2016				KPIs	2015						KPIs 2016					
No. (source	Only Active			KPI Type		2015												
target doc)	or Retired	KPI Title	Reported against NSP / DOP	Access/ Quality /Access Activity	Report Frequency	National Target / Expected Activity	2015 Actual Outturn	2016 Nationa Target / Expected Activity	Report ed at Nation al/ CHO		CHO 3	сно з	CHO 4	CHO 5	сно 6	CHO 7	CHO 8	СНО 9
PC117A(N O.) & PC117B (%)		% on waiting list for treatment ≤ to 52 weeks	NSP	Access		New PI 2016			СНО	100%	100%	100%	100%	100%	100%	100%	100%	100%
PC		No. of Hepatitis C patients who were reviewed	NSP	Quality	Q 1 qtr in arrears	820	22	798	СНО	50	70	65%	96	88	65	180	63	121

Office Use	Office Use	Key Performance Indicators Service Planning 2016	Domest d	KPI Type		KPIs	2015	
Only KPI No. (source target doc)	Only Active or Retired	KPI Title	Reported against NSP / DOP	Access/ Quality /Access Activity	Report Frequency	2015 National Target / Expected Activity	2015 Projected outturn	2016 National Target / Expected Activity
		Medical Cards/GP Visit Cards						
PCRS1	Active	No. of persons covered by Medical Cards as at 31 <sup>st</sup> December	NSP	Access	M	1,722,395	1,734,853	1,675,767
PCRS2	Active	No. persons covered by GP Visit Cards as at 31 <sup>st</sup> December	NSP	Access	М	412,588	431,306	485,192*
PCRS3	Active	% of completed Medical / GP Visit Card applications processed within the 15 day turnaround	NSP	Access	М	90%	99.8%	95%
PCRS4	Active	% of Medical Card/GP Visit Card applications, assigned for Medical Officer review, processed within 5 days	NSP	Quality	М	90%	99.7%	90%
PCRS5	Active	% of medical card application which are accurately processed by National Medical Card Unit staff	NSP	Quality	М	New Metric	New Metric	95%
PCRS6	Active	% of applications for medical cards / GP visit cards that are processed from end to end without the need for additional information	DOP	Quality	M	New Metric	New Metric	60%
		Long Term Illness						
PCRS7	Active	No. of claims	DOP	Access	M	1,120,068	1,872,784	2,125,507
PCRS8	Active	No. of line items	DOP	Access	M	3,942,639	6,655,451	7,555,211
		Drug Payment Scheme	DOP					
PCRS9	Active	No. of claims	DOP	Access	M	2,396,604	2,194,200	2,177,935
PCRS10	Active	No. of line items	DOP	Access	M	7,985,416	7,169,019	7,113,927
202011		GMS	505	•	2.4	10.000.022	40.005.205	47.700.402
PCRS11	Active	No. of prescriptions No. of line items	DOP DOP	Access Access	M M	18,696,633 57,727,106	19,005,385 57,861,630	17,780,183 54,229,556
PCRS12 PCRS13	Active Active	No. of claims - special items of service	DOP	Access	M	943,897	1,098,667	999,158
PCRS13	Active	No. of claims - special type of consultations	DOP	Access	M	1,149,957	1,175,946	1,164,844
1 CN314	Active	HiTech	201	Access	141	1,143,337	1,173,340	1,104,044
PCRS15	Active	No. of claims	DOP	Access	М	520,857	550,078	533,824
		DTSS						
PCRS16	Active	No. of treatments (above the line)	DOP	Access	М	1,356,483	1,197,459	1,207,639
PCRS17	Active	No. of treatments (below the line)	DOP	Access	М	70,379	64,909	65,315
PCRS18	Active	No. of patients who have received treatment (above the line)	DOP	Access	M	628,611	563,244	567,728
PCRS19	Active	No. of patients who have received treatment (below the line)	DOP	Access	M	67,907	62,628	63,000
		Community Ophthalmic Scheme						
PCRS20	Active	No. of treatments	DOP	Access		848,747	844,007	832,933
PCRS20A	Active	(a) Adult	DOP	Access	M	767,068	758,139	747,849
PCRS20B	Active	(b) Children	DOP	Access	M	81,679	85,868	85,084

Community Intervention Teams		
Community intervention reams		
1	KPI Title	Community Intervention Team Activity
2	KPI Description - PC122	Community Intervention Team Activity (i.e. patients seen) by Activity
	PC122A	Admission Avoidance (includes OPAT)
		Hospital Avoidance
	PC122B	Early Discharge (includes OPAT)
	PC122C	Unscheduled referrals from community sources
	PC122D	These referrals accepted must be recorded per patient, and should be allocated to one category only. (i.e patients can not be reflected in more then one category)
3	KPI Rationale	To capture the services provided by CITs
	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 2016	NSP 2016 Target : National - 24,202
		Admission Avoidance - 914
		Hospital Avoidance - 12,932
		Early Discharge - 6,360 Unscheduled referrals from community services - 3,996
	100	-
_	KPI Calculation	Count. Total Number of Referrals by activity
	Data Source	From 9 CITs and any new CITs established in 2016 – BIU Non- acute team
	Data Completeness Data Quality Issues	100 % data Completeness
	Data Collection Frequency	No □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
,	Data Collection Frequency	Daily Dividency Environting Equations Education Developed Printed Prin
8	Tracer Conditions	Available to catchment population aligned to CIT
	Minimum Data Set	Yes
	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: 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
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	Indicate the level of aggregation – for example over a geographical location:
		☑ National ☐ Regional ☐ Hospital Group ☐ Hospital ☑ CHO ☐ ISA ☑ LHO
		☐ County ☐ Institution ☐ Other – give details: - by CIT
15	KPI is reported in which reports ?	☑Performance Report □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	In CIF
Contact details for Data Manager /		Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie Tel: 046 9251312
Specialist Lead		Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
National	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

Community Intervention Teams			
Community intervention realis			
1	KPI Title	Community Intervention Teams Activity (by Referral Source)	
2	KPI Description PC123	Community Intervention Team Activity (i.e. patients seen) by Referral Source	
	PC123A	ED/Hospital Wards/Units	
	PC123B	GP Referral	
	PC123C	Community Referral	
	PC123D	OPAT Referral	
	1 01235	These referrals accepted must be recorded per patient, and should be allocated to one category only. (i.e	
		patients can not be reflected in more then one category)	
3	KPI Rationale	To capture the source of referrals to CITs	
	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 2016	<b>CIT Number of referrals</b> : DOH 2016 National Target: <b>24202</b> (CHO 1 = 0, CHO 2 = 900, CHO 3 = 4713,	
		CHO 4 = 1350, CHO 5 = 3060, CHO 6 = 1200, CHO 7 = 6941, CHO 8 = 1140, CHO 9 = 4898)	
		ED/Hospital Wards/Units: DOH 2016 National Target= 13956 (CHO 1 = 0, CHO 2 = 504, CHO 3 =	
		2509, CHO 4 = 392, CHO 5 =1408, CHO 6 = 646, CHO 7 = 5274, CHO 8 = 740, CHO 9 = 2483)	
		<b>GP Referral:</b> DOH 2016 Target National = <b>6386</b> (CHO 1 = 0, CHO 2 = 324, CHO 3 = 795, CHO 4 = 352,	
		CHO 5 =1288, CHO 6 = 449, CHO 7 = 1055, CHO 8 = 259, CHO 9 = 1864)	
		Community Referral : DOH 2016 National Target = 2226 (CHO 1 = 0, CHO 2 = 0, CHO 3 = 1216, CHO	
		4 = 470, CHO 5 = 0, CHO 6 = 0, CHO 7 = 211, CHO 8 = 50, CHO 9 = 279)	
		<b>OPAT Referral</b> DOH 2016 National Target = <b>1634</b> (CHO 1 = 0, CHO 2 = 72, CHO 3 = 193, CHO 4 =	
		136, CHO 5 = 364, CHO 6 = 105, CHO 7 = 401, CHO 8 = 91, CHO 9 = 272)	
5	KPI Calculation	Count. Total Number of Referrals by referral source	
6	Data Source	From 9 CITs and any new CITs established in 2016 – BIU Non- acute team	
	Data Completeness	100 % data Completeness	
7	Data Quality Issues  Data Collection Frequency	No	
'	Data Collection Frequency	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:	
8	Tracer Conditions	Available to catchment population aligned to CIT	
9	Minimum Data Set	Yes	
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:	
		This is to be monitored by the Primary Care Division and by RDPIs	
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)	
14	KPI Reporting Aggregation	□Rolling 12 months (previous 12 month period) Indicate the level of aggregation – for example over a geographical location:	
14	Aggregation		
		□ County □ Institution □ Other – give details: - by CIT	
15	KPI is reported in which reports ?	☑Performance Report □Other – give details:	
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html	
17	Additional Information	In CIF	
Contact	details for Data Manager /	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel 046 9251312	
Speciali		Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division	
National	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.	

<b>OPAT</b>	CIT	
UPAI	CII	
1	KPI Title	Outpatient parenteral Antimicrobial Therapy (OPAT) Re-admission rate %
2	KPI Description	The percentage of patients accepted on the OPAT programme (hospital referrals - excluding those with a diagnosis of Cystic Fibrosis) who require re-admission to hospital while undergoing their treatment (related to their IV antibiotic treatment)
3	KPI Rationale	Indicator of safe and clinically effective care
	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 o ☑ Effective Care  Safe Care ✓ Better Health and Wellbeing □Use of Information  Workforce □Use of Resources□Governance, Leadership and Management □
4	KPI Target 2015	DOP 2016 Target: Outpatient parenteral Antimicrobial Therapy OPAT re-admission rate <5%
5	KPI Calculation	No. of patients on the OPAT programme referred from hospitals in the calendar year who require re-
		admission to hospital during their course of treatment, as a percentage of the total no.s referred to the OPAT programme from hospitals in the calendar year. (People with a diagnosis of Cystic Fibrosis are excluded)
6	Data Source	CIT OPAT Management Control Centre
	Data Completeness	Hospital OPAT nurses, CIT's and private providers to the OPAT programme (nursing and compounded) to report patient re-admission to MCC.
	Data Quality Issues	This is a new metric. The readmission rate will be dependent on hospitals identifying appropriate patients for discharge on the OPAT programme and following national guidelines.
7	Data Collection Frequency	□Daily □Weekly Monthly □Quarterly □Bi-annually □Annually ✓Other – monthly Q2
8	Tracer Conditions	
9	Minimum Data Set	Yes
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:
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	Indicate the level of aggregation – for example over a geographical location:
		National □ Regional □ Hospital □ CHO □ ISA □ LHO □ County □ Institution Other – give details: - Data reported by hospital and by model of OPAT. Self administered (SOPAT) and health professional delivered (HOPAT).
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/Performance_Reports_Monthly.html
17	Additional Information	In CIF
	details for Data Manager /	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Noreen Curtin, CIT/ OPAT Programme Manager, Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.
. tational	TOTAL WING DITIONAL	John Homosoy, National Director, I filmary Gare Division, Health Gervice Executive.

1	KPI title	% of primary care staff to undertake brief intervention training for smoking cessation
2	KPI Description	A national training programme is being implemented across the HSE to deliver brief intervention (BI) smooth cessation training to frontline healthcare staff. Frontline staff refers to all grades of staff within the Medica Nursing, Health and Social care professionals and Other Patient and Client Care. BI in smoking cessation involves providing opportunistic advice, discussion, negotiation or encouragement to quit smoking plus or referral to an intensive cessation service, plus or minus referral for/prescription for evidence based treatmetypically takes between 3 and 10 minutes. The training course is designed to develop skills in motivational interviewing for smoking cessation. Motivational Interviewing is an evidence based treatment approach to helping patients/service users find internal motivation for lifestyle behaviour change. The programme is deby specialist trainers from Health Promotion/Acute cessation services.
2	KPI Rationale	The Teheges Free Ireland notice decument commits the UCE to training frontline healthcare staff in hrief
3		The Tobacco Free Ireland policy document commits the HSE to training frontline healthcare staff in brief intervention in smoking cessation so that treating tobacco use becomes a core part of their work. All healt staff have a responsibility to treat tobacco addiction as a care issue and to promote cessation by actively advising, encouraging and supporting smokers to quit. Evidence from a number of surveys in 2014 show approximately 6 in 10 service users who smoke were not offered support to quit when they visited a healt professional in the previous 12 month period. There is considerable evidence that interventions by health
	Indicator Classification	Please tick Indicator Classification this indicator applies to:
	(National Standards for Safer Better HealthCare)	☐ Person Centred Care ☐ Effective Care ☐ Safe Care
		☐ Better Health and Wellbeing ☐ Use of Information ☐ Workforce
4	VDI Torrest	☐ Use of Resources ☐ Governance, Leadership and Management
	KPI Calculation	DOP 2016 Target: National - 7.5%
	KPI Calculation	Count
6	Data Source	Adminstrative databases. Data provided by health promotion trainers to Health Promotion Office to TCFI
	Data Completeness	Project Office. Includes community and acute based trainers.
-	Data Quality Issues	Manual system.
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected:
8	Tracer Conditions	Frontline healthcare staff providing frontline services to patients/service users in hospitals and community who haven't previously undertaken such a course.
9	Minimum Data Set	Number of frontline healthcare staff who have been trained by CHO Area and Hospital Group
9	Dutu Oct	Number of courses planned and delivered in each CHO Area and Hospital Group.
10	International Comparison	Yes, WHO tobacco indicators
11	KPI Monitoring	KPI will be monitored:
		□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
		Please indicate who is responsible at a local level for monitoring this KPI: Health Promotion
12	KPI Reporting Frequency	Indicate how often the KPI will be reported:
40	KDI	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies
		☐ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same n activity)
		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)
		□ Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – for example over a geographical location:
		☑ National Regional ☐ Hospital √ CHO ☐ ISA ☐ LHO
		☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which	Indicate where the KPI will be reported:
		☑ Performance Report (NSP) ☐ Other – give details:
_	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html

Prir	mary Care G.P Out of Hour	s Service
1	KPI Title	No. of contacts with GP Out of Hours co-ops
2	KPI Description PC11	This refers to the total number of patients who made contact with GP Out of Hours Service through Treatment Centres, Home Services, Triage and Other. Other refers to calls which are not triaged by a clinician, they refer to callers looking for information.
3	KPI Rationale	To capture the number of patients who contacted GP Out of Hours Service nationally in order to monitor activity and service pressures.
	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 2016	NSP 2016 Target: National - 964,770
	KPI Calculation	Count. Total Number of Contacts by Treatment Centre, Home Service, Triage Only and Other. This should match the number of contacts by age breakdown i.e. 0 - 16 years, 16 - 65 years, 65 years or over
6	Data Source	from 9 GP co-ops – BIU Non- acute team
	Data Completeness	100 % data Completeness
		This does not include the reduced hour services 6-10pm/weekend services
	Data Quality Issues	No known data quality issues at this point, however a review of OOH services is to take place in 2015
7	Data Collection Frequency	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Available to the patients of GP's linked with an Out of hours service
9	Minimum Data Set	No
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:  'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
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	Indicate the level of aggregation − for example over a geographical location:  ☑ National □ Regional □ Hospital Group □ Hospital □ CHO □ ISA □ LHO □ County □ Institution □ Other − give details: GP Out of Hours Service
15	KPI is reported in which reports?	☑Performance Report (NSP) □CompStat □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
	Additional Information	In CIF
Cont	act details for Data Manager /	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
Specialist Lead		Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
Natio	onal Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

_		
1	KPI Title	Number of Patient Referrals
2	KPI Description PC14	Total Number of patients for whom a Primary Care Physiotherapy referral was accepted in the reporting period (All referrals into Community Services-everything outside acute referrals). This is captured by Age Category (Age Brackets: 0-17yrs; 18-64 yrs; 65+ years) and by Referral Source (Acute Hospital Referrals, GP Referrals and Other Referrals-i.e. PHN, other HSCP, Voluntary Organisations, self and others (including non-acute beds). Referrals include New patients, (ie. not known to the service) and Re-Referrals, (ie. previously discharged).
3	KPI Rationale	This KPI allows for planning and managment of the monthly throughput of referrals in relation to staffing and resource allocation in relation to demand. Review of the throughput also facilitates recognition of emerging trends in referrals and thus a management response to same.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (ir 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 2016	DOP 2016 Target : National - 193677 CHO 1 = 25157 ; CHO 2 = 20877 ; CHO 3 = 15802 ; CHO 4 = 28818 ; CHO 5 = 24029 ; CHO = 12215 ; CHO 7 = 22237 ; CHO 8 = 27207 ; CHO 9 = 17335
5	KPI Calculation	Count of the number of clients for whom a referral was accepted in the reporting month. Total in referrals by source should equal total number of referrals received by Age Category
6	Data Source	Physiotherapist records - Physiotherapy Manager - LHO - CHO - BIU Non- acute team
	Data Completeness	100 % data Completeness
	Data Quality Issues	No known data quality issues at this point
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Community Services Physiotherapy Clients Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families themselves (self referrals). Any person can be referred to Physiotherapy services.
9	Minimum Data Set	Referral note/form which includes details of clients and relevant information relating to the referral Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc. It also includes sections for details on physiotherapy needs medical conditions/diagnosis, and social /living/supports etc.
10	International Comparison	No
	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
	, and the second	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details Please indicate who is responsible for monitoring this KPI: Physiotherapy Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
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	Indicate the level of aggregation – for example over a geographical location:  ☑ National ☐ Regional ☐ Hospital ☐ CHO ☐ ISA ☑ LHO ☐ County ☐ Institution ☐ Other – give details:
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/Performance_Reports_Monthly.html
	Additional Information	In CIF
	act details for Data Manager / ialist Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care
	nal Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

Pri	mary Care : Physiotherapy	Assessments
_	WDI TW	
1	KPI Title KPI Description	Number of patients seen for a first time assessment
2	PC15	The total number of primary care physiotherapy patients seen for a first time Assessment in the reporting period. This includes both new referrals and re-referrals
3	KPI Rationale	The purpose of this metric is to monitor the number of patients seen for a first time assessment.
J		·
	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 Duse of Information
		Workforce ☑ Use of Resources□ Governance, Leadership and Management □
4	KPI Target 2016	DOP 2016 Target: National - 160,017
	Tu Frangot 2010	CHO 1 - 21228 ; CHO 2 - 15884 ; CHO 3 - 12062 ; CHO 4 - 26412 ; CHO 5 - 20911 ; CHO 6 -
		10049 ; CHO 7 - 16886 ; CHO 8 - 23059 ; CHO 9 - 13526
5	KPI Calculation	Count of the number of patients seen for a first time assessment in the reporting month
6	Data Source	Physiotherapist records - Physiotherapy Manager - LHO – CHO – BIU Non- acute team
0	Data Completeness	100 % data Completeness
	Data Quality Issues	No known data quality issues at this point
7	Data Collection Frequency	□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
	Data Concollon Frequency	Douby Efficiency Execution and annually Estimated annually Estimated and annually Estimated annually Es
8	Tracer Conditions	Community Services Physiotherapy Clients
		Referrals are accepted from Health professionals within the HSE, other services/agencies and from
		clients/families themselves (self referrals). Any person can be referred to Physiotherapy services.
9	Minimum Data Set	Referral note/form which includes details of clients and relevant information relating to the referral
		Referrals forms include details of basic demographic information (Name, address, DOB, next of kin,
		contact tel numbers, eligibility details etc. It also includes sections for details on physiotherapy needs,
		medical conditions/diagnosis, and social /living/supports etc.
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
	Train inclined in ig	" '
		□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
		Please indicate who is responsible for monitoring this KPI: Physiotherapy Manager. 'KPI's are
		monitored and reviewed through meetings between the Primary Care Division Operational Team and
		the CHO/LHO
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)
	KDID (I A (I	□Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	Indicate the level of aggregation – for example over a geographical location:
		☑ National ☐ Regional ☐ Hospital Group ☐ Hospital ☑ CHO ☐ ISA ☑ LHO
15	KPI is reported in which reports ?	☐ County ☐ Institution ☐ Other – give details:  ☐ Performance Report (NSP) ☐ Other – give details:
10	it i is reported in willon reports :	En Gromanice Nepolit (NOI ) Double - give details.
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	In CIF
	act details for Data Manager /	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
Specialist Lead		Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care
Natio	onal Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.
INAUUIIAI LEAU AIIU DIVISION		John Helmeder, Hadional Birottor, Filmary Gard Birlottin, Hould Golffoo Excountre.

Prir	nary Care: No of Patients t	reated
	KPI Title	Number of patients treated in the reporting month (monthly target)
2	KPI Description PC16	The metric captures the number of clients that received an intervention in the reporting month and Includes new clients, existing clients, and those from previous caseload who were treated in the month.  Information is captured under the following headings and reported as an overall figure.
		Domiciliary/Principal Setting: To include client's home address or nursing home where the home is the client's main residence or any other setting to which the physiotherapist travels for individual physiotherapy contact/visit/appointment. This includes once-off school visit for an individual.  Other Individual or Clinic Setting: One to one intervention that does not occur in a client's main residence.  Group: Number of individuals who attended for a group session (count = people).
3	KPI Rationale	To monitor the number of individual patients being treated in the month.
	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 2016	DOP 2016 Target National - 36430 CHO 1 - 4721 ; CHO 2 - 4288 ; CHO 3 - 2305 ; CHO 4 - 5646 ; CHO 5 - 4868 ; CHO 6 - 2174 ; CHO 7 - 4171 ; CHO 8 - 5324 ; CHO 9 - 2933
5	KPI Calculation	This is a count of the the number of patients that received an intervention during the month and Includes new clients, existing clients, and those from previous caseload who were treated in the month. Each client is only included once in the count
6	Data Source	Physiotherapist records - Physiotherapy Manager - LHO - CHO - BIU Non- acute team
	Data Completeness	100 % data Completeness
	Data Quality Issues	No known data quality issues at this point
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Community Services Physiotherapy Clients Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families themselves (self referrals). Any person can be referred to Physiotherapy services.
9	Minimum Data Set	Referral note/form which includes details of clients and relevant information relating to the referral Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc. It also includes sections for details on physiotherapy needs, medical conditions/diagnosis, and social /living/supports etc.
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: Physiotherapy Manager. 'KPI's are
		monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
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	Indicate the level of aggregation – for example over a geographical location:  □ National □ Regional □ Hospital Group □ Hospital ☑ CHO □ ISA ☑ LHO □ 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/Performance Reports Monthly.html
	Additional Information	
	act details for Data Manager /	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
	ialist Lead	Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care
Natio	nal Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

		Contacts
1	KPI Title	Number of food to food contacts briging
2	KPI little KPI Description PC17	Number of face to face contacts/visits  Total no. of Primary Care Physiotherapy face to face contacts / visits / appointments that took place in the reporting month by setting i.e.  Domiciliary/Principal Setting-include clients's home address and private nursing home where the home
		is the clients's main residence or any other setting to which the physio travels for individual physiotherapy contact/visit/appointment. This includes once-off school visit for an individual. Other Individual or Clinic Setting-One to one intervention that does not occur in a patient's main residence.
		Group Setting: Total Number of Contacts which took place in a group setting. Each patient contact should only be recorded by one physiotherapist. e.g. groups, joint working  This data includes those seen for a first time assessment
3	KPI Rationale	The purpose of this metric is to capture the number of face to face contacts/visits/appointment, assess the volume of activity and provide information to support staff and resouce allocation.
	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 2016	DOP 2016 Target National - 775864 CHO 1 - 116183 ; CHO 2 - 84366 ; CHO 3 - 50877 ; CHO 4 - 114348 ; CHO 5 - 103297 ; CHO 6 - 49304 ; CHO 7 - 85229 ; CHO 8 - 109972 ; CHO 9 - 62288
5	KPI Calculation	
		This is a count of all face to face contacts/visits. In respect of the total Number of Contacts which took place in a group setting, if 2 groups of 6 patients are seen, this equals 12 contacts). If a person is receving a mixture of individual and group intervention, count in both individual and group settings.
6	Data Source	Physiotherapist records - Physiotherapy Manager - LHO – CHO – BIU Non- acute team
Ĭ	Data Completeness	100 % data Completeness
	Data Quality Issues	No known data quality issues at this point
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Community Services Physiotherapy Clients Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families themselves (self referrals). Any person can be referred to Physiotherapy services.
9	Minimum Data Set	Referral note/form which includes details of clients and relevant information relating to the referral Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc. It also includes sections for details on physiotherapy needs, medical conditions/diagnosis, and social /living/supports etc.
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: Physiotherapy Manager. 'KPI's are
		monitored and reviewed through meetings between the Primary Care Division Operational Team and
12	KPI Reporting Frequency	the CHO/LHO □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give
12	KPI report period	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	Indicate the level of aggregation – for example over a geographical location:
14	ni i neporting Aggregation	☐ Indicate the level of aggregation — for example over a geographical location.  ☐ National ☐ Regional ☐ Hospital Group ☐ Hospital ☐ CHO ☐ ISA ☐ LHO ☐ 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/Performance_Reports_Monthly.html
17	Additional Information	In CIF

Contact details for Data Manager /	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
Specialist Lead	Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care
National Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

Prir	nary Care :Physiotherapy \	Nait List Management
4	KPI Title	Total No. of national on the approximant waiting list of the and of the approximation
		Total No. of patients on the assessment waiting list at the end of the reporting period
2	KPI Description	No of patients waiting for an assessment on the last day of the calendar month
	PC100 PC100A	
	PC 100B	
	PC100C	
	PC100D	
	PC100E	
3	KPI Rationale	To provide information to support staff and resouce allocation decisions in reducing wait times for
		assessment.
	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 2016	DOP 2016 Target National -28527
		CHO 1 - 3313 ; CHO 2 - 4497 ; CHO 3 - 3294 ; CHO 4 - 2877 ; CHO 5 - 3232 ; CHO 6 - 1484 ; CHO 7 - 2791 ; CHO 8 - 3776; CHO 9 - 3263
5	KPI Calculation	Count of the number of patients waiting for an assessment on the last day of the calendar month
-		The waiting time is measured from date of referral i.e. date of receipt of the referral by the service to
		the end of reporting month and includes patients waiting for assessment. There are five waiting time
		bands:
		0 - less than or equal to 12 weeks
		greater than 12 weeks and less than or equal to 26 weeks
		greater than 26 weeks and less than or equal to 39 weeks
		greater than 39 weeks and less than or equal to 52 weeks
		greater than 52 weeks
	Data Source	Physiotherapist records - Physiotherapy Manager - LHO - CHO - BIU Non- acute team
	Data Completeness	100 % data Completeness
	Data Quality Issues	No known data quality issues at this point
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Community Services Physiotherapy Clients
		Referrals are accepted from Health professionals within the HSE, other services/agencies and from
		clients/families themselves (self referrals). Any person can be referred to Physiotherapy services.
9	Minimum Data Set	Referral note/form which includes details of clients and relevant information relating to the referral
		Referrals forms include details of basic demographic information (Name, address, DOB, next of kin,
		contact tel numbers, eligibility details etc. It also includes sections for details on physiotherapy needs,
		medical conditions/diagnosis, and social /living/supports etc.
L		
	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: Physiotherapy Manager. 'KPI's are
		monitored and reviewed through meetings between the Primary Care Division Operational Team and
		the CHO/LHO
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 ☐ Hospital Group ☐ Hospital ☑ CHO ☐ ISA ☑ LHO
		☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports?	☑ Performance Report (NSP/CBP) ☐ Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	In CIF
		In. 2

· · · · · · · · · · · · · · · · · · ·	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
National Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

Prir	Primary Care :Physiotherapy Wait List Management			
1	KPI Title	% of new patients seen for assessment within 12 weeks		
	KPI Description	This is the number of clients referred seen for assessment within 12 weeks as a percentage of all		
	PC15A & PC15B	referrals assessed in the month		
3	KPI Rationale	To provide information to support staff and resouce allocation decisions in reducing wait times for		
	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		
_	VDI T1 0046	Workforce ☑ Use of Resources ☐ Governance, Leadership and Management ☐		
	KPI Target 2016	DOP 2016 Target National - 70%		
5	KPI Calculation	Sum (Number of Patients seen for a first time assessment: $0 \le 1$ weeks + $1 \le 4$ weeks + $4 \le 8$ weeks + $8 \le 12$ weeks) <b>divided</b> by Sum((Number of Patients seen for a first time assessment: $0 \le 1$ weeks + $1 \le 4$ weeks + $4 \le 8$ weeks + $8 \le 12$ weeks + $12$ w		
	Data Source	Physiotherapist records - Physiotherapy Manager - LHO - CHO - BIU Non- acute team		
	Data Completeness	100 % data Completeness		
	Data Quality Issues	No known data quality issues at this point		
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:		
8	Tracer Conditions	Community Services Physiotherapy Clients Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families themselves (self referrals). Any person can be referred to Physiotherapy services.		
9	Minimum Data Set	Referral note/form which includes details of clients and relevant information relating to the referral Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc. It also includes sections for details on physiotherapy needs, medical conditions/diagnosis, and social /living/supports etc.		
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: Physiotherapy Manager. 'KPI's are		
		monitored and reviewed through meetings between the Primary Care Division Operational Team and		
12	KPI Reporting Frequency	the CHO/LHO □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		
13	Ar Treport period	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 □ Hospital Group □ Hospital ☑ CHO □ ISA ☑ LHO □ County □ Institution □ Other – give details:		
15	KPI is reported in which reports?	☑ Performance Report (NSP/CBP) □Other – give details:		
	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html		
17	Additional Information	In CIF		
	act details for Data Manager /	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312		
Spec	ialist Lead	Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care		
Natio	nal Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.		

1	KPI Title	% on waiting list for assessment less than or equal to 52 weeks
2	KPI Description	The percentage of patients on the waiting list for assessment less than 52 weeks
	PC100F & PC100G	
3	KPI Rationale	To provide information to support staff and resouce allocation decisions in reducing wait times for assessment.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (ir
		some cases you may need to choose two).
		□Person Centred Care □Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐Use of Information
	VDI T	Workforce ☑ Use of Resources□ Governance, Leadership and Management □
4	KPI Target 2016	DOP 2016 Target National - 100%
5	KPI Calculation	Sum (Number of Patients waiting for assessment: $0 \le 1$ weeks $+ 1 \le 4$ weeks $+ 4 \le 8$ weeks $+ 8 \le 12$ weeks $+ 12$ weeks $\le 26$ weeks $+ 26$ weeks $\le 39$ weeks $+ 39$ weeks $\le 52$ weeks ) divided by Sum((Number of Patients waiting for assessment: $0 \le 1$ weeks $+ 1 \le 4$ weeks $+ 4 \le 8$ weeks $+ 8 \le 12$ weeks $+ 12$ weeks $\le 26$ weeks $+ 26$ weeks $\le 39$ weeks $+ 39$ weeks $\le 52$ weeks $+ > 52$ weeks) $100$
	Data Source	Physiotherapist records - Physiotherapy Manager - LHO - CHO - BIU Non- acute team
	Data Completeness	100 % data Completeness
	Data Quality Issues	No known data quality issues at this point
7	Data Collection Frequency	□ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually □ Other – give details:
8	Tracer Conditions	Community Services Physiotherapy Clients Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families themselves (self referrals). Any person can be referred to Physiotherapy services.
9	Minimum Data Set	Referral note/form which includes details of clients and relevant information relating to the referral Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc. It also includes sections for details on physiotherapy needs medical conditions/diagnosis, and social /living/supports etc.
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: Physiotherapy Manager. 'KPI's are
		monitored and reviewed through meetings between the Primary Care Division Operational Team and
40	KDI Danasitina Francisco	the CHO/LHO
	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 (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 ☐ Hospital Group ☐ Hospital ☑ CHO ☐ ISA ☑ LHO
45	Wall Company	☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports?	☑ Performance Report (NSP/CBP) □Other – give details:
	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	In CIF
ont	act details for Data Manager /	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
	ialist Lead	Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care
	ialist Leau	Division

Prir	mary Care :Physiotherapy	Wait List Management
1	KPI Title	% on waiting list for assessment less than or equal to 39 weeks
	KPI Description PC100H & PC100I	The percentage of patients on the waiting list for assessment less than 39 weeks
3	KPI Rationale	To provide information to support staff and resouce allocation decisions in reducing wait times for assessment.
	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 2016	DOP 2016 Target National - 95%
5	KPI Calculation	Sum (Number of Patients waiting for assessment: $0 \le 1$ weeks $+ 1 \le 4$ weeks $+ 4 \le 8$ weeks $+ 8 \le 12$ weeks $+ 12$ weeks $\le 26$ weeks $+ 26$ weeks $\le 39$ weeks ) divided by Sum((Number of Patients waiting for assessment: $0 \le 1$ weeks $+ 1 \le 4$ weeks $+ 4 \le 8$ weeks $+ 8 \le 12$ weeks $+ 12$ weeks $\le 26$ weeks $+ 26$ weeks $+ 39$ weeks $+ 39$ weeks $\le 52$ weeks $+ 52$ weeks) * 100
	Data Source	Physiotherapist records - Physiotherapy Manager - LHO - CHO - BIU Non- acute team
	Data Completeness	100 % data Completeness
	Data Quality Issues	No known data quality issues at this point
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Community Services Physiotherapy Clients Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families themselves (self referrals). Any person can be referred to Physiotherapy services.
9	Minimum Data Set	Referral note/form which includes details of clients and relevant information relating to the referral Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc. It also includes sections for details on physiotherapy needs, medical conditions/diagnosis, and social /living/supports etc.
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: Physiotherapy Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
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 ☐ Hospital Group ☐ Hospital ☑ CHO ☐ ISA ☑ LHO ☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports?	☑ Performance Report (NSP/CBP) ☐ Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html
	Additional Information	In CIF
	act details for Data Manager / ialist Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
	onal Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

	mary Care :Physiotherapy	Walt List management
1	KPI Title	% on waiting list for assessment less than or equal to 26 weeks
2	KPI Description	The percentage of patients on the waiting list for assessment less than 26 weeks
	PC100J & PC100K	
3	KPI Rationale	To provide information to support staff and resouce allocation decisions in reducing wait times for assessment.
	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
4	KDI Tarrest 2040	Workforce ☑ Use of Resources ☐ Governance, Leadership and Management ☐
4	KPI Target 2016 KPI Calculation	DOP 2016 Target National - 90%
5	KPI Calculation	Sum (Number of Patients waiting for assessment: $0 \le 1$ weeks $+ 1 \le 4$ weeks $+ 4 \le 8$ weeks $+ 8 \le 12$ weeks $+ 12$ weeks $\le 26$ weeks ) divided by Sum((Number of Patients waiting for assessment: $0 \le 1$
		1 weeks + 1 $\leq$ 4 weeks + 4 $\leq$ 8 weeks + 8 $\leq$ 12 weeks + 12 weeks $\leq$ 26 weeks + 26 weeks $\leq$ 39
		weeks + 39 weeks ≤ 52 weeks + > 52 weeks) * 100
	Data Source	Physiotherapist records - Physiotherapy Manager - LHO - CHO - BIU Non- acute team
	Data Completeness	100 % data Completeness
	Data Quality Issues	No known data quality issues at this point
7	Data Collection Frequency	□ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually □ Other – give details:
8	Tracer Conditions	Community Services Physiotherapy Clients
		Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families themselves (self referrals). Any person can be referred to Physiotherapy services.
9	Minimum Data Set	Referral note/form which includes details of clients and relevant information relating to the referral Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc. It also includes sections for details on physiotherapy needs, medical conditions/diagnosis, and social /living/supports etc.
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: Physiotherapy Manager. 'KPI's are
		monitored and reviewed through meetings between the Primary Care Division Operational Team and
12	KPI Reporting Frequency	the CHO/LHO  □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 ☐ Hospital Group ☐ Hospital ☑ CHO ☐ ISA ☑ LHO ☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports ?	✓ Performance Report (NSP/CBP) □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html
17	Additional Information	In CIF
	act details for Data Manager / ialist Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
Vatio	onal Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.
<b>Tutt</b>	mai Edau ana DividiOn	positi Figure 2, radional Director, Filmary Care Division, Fiedun Cervice Executive.

1	KPI Title	Number of patient referrals
2	KPI Description	Number of clients for whom a referral was accepted to your service in a particular month – includes new referrals, re-referrals are
2	Ta i Bescription	reviews.
		Each client is counted only once in the reporting month
		This covers all Occupational Therapy services provided within Primary and Community Services. This does not include clients in
		Mental Health, Acute Hospital care or voluntary agency settings.
		This metric is recorded by age band. Age Bands: 0-4yrs and 11mths; 5-17yrs & 11mths; 18-64yrs & 11mths; 65yrs+.
	PC19	
3	KPI Rationale	This KPI allows for planning and managment of the monthly throughput of referrals in relation to staffing and resource allocation in
٠	Tr Tradionale	relation to demand. Review of the throughput also facilitates recognition of emerging trends in referrals and thus a management
		response to same.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to
	malcator Glassification	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 2016	DOP 2016 Target National - 89989
	3	CHO 1 - 11698 ; CHO 2 - 6888 ; CHO 3 - 7926 ; CHO 4 - 8984 ; CHO 5 - 10308 ; CHO 6 - 5979 ; CHO 7 - 13286 ; CHO
		- 14114 : CHO 9 - 10806
5	KPI Calculation	Count of the Number of clients for whom a referral was accepted in the reporting month.
6	Data Source	Source - OT Therapist records - OT Managers - LHO - CHO - BIU
	Data Completeness	Completeness - 100% data available from all HSE Areas Nationally
	Data Quality Issues	No known data quality issues at this point
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families themselves
·	Tracer conditions	(self referrals). Any person can be referred to OT. Referrals must be received in writing, using the official referral form when
		available. Referrals which must be completed in full, with as much detail as possible, in order to assess appropriatness of referrals
		and aid accurate prioritisation.
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility
-		g-p
		details etc. It also includes sections for details on occupational needs, medical conditions/diagnosis, and social /living/supports etc
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: Occupational Therapy Manager. 'KPI's are monitored and reviewed
		through meetings between the Primary Care Division Operational Team and the CHO/LHO
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)
14	KPI Reporting Aggregation	□Rolling 12 months (previous 12 month period) □ National □ Regional □Hospital Group □ Hospital □ CHO □ ISA □ LHO
14	Ki i Keporting Aggregation	□ County □ Institution □ Other – give details:
15	KPI is reported in which reports ?	☑ Performance Assurance 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 / Specialist	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
.ead		Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
	I Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

Prima	rv Care : Occupational The	rapy First Time Assessment
1	KPI Title	Number of new patients seen for a first time assessment
2	KPI Description	Number of new clients seen for a first time assessment – refers to number of clients seen for a first time/initial assessment in this
		episode of care. i.e. includes re referrals to the service in the reporting month.
		This covers all Occupational Therapy services provided within Primary and Community Services. This does not include clients in
		Mental Health, Acute Hospital care or voluntary agency settings.
		This metric is recorded by age band. Age Bands: 0-4yrs and 11mths; 5-17yrs & 11mths; 18-64yrs & 11mths; 65yrs+.
	PC20	
3	KPI Rationale	This KPI allows for planning and managment of first time/initial assessments in relation to staffing and resource allocation in
		relation to demand. Review of the throughput also facilitates recognition of emerging trends and allows for a management
		response to same.
	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 2016	DOP 2016 Target National - 86499
		CHO 1 - 10306 ; CHO 2 - 6754 ; CHO 3 - 7450 ; CHO 4 - 9620 ; CHO 5 - 9311 ; CHO 6 - 6530 ; CHO 7 - 14611 ; CHO 8
	KDI O I I I I	12739 ; CHO 9 - 9178
5	KPI Calculation  Data Source	Count of the Number of clients seen for a first time assessment in the reporting month  Source - OT Therapist records - OT Managers - LHO - CHO - BIU
6	Data Source	Source - OT Therapist records - OT Managers - LHO - CHO - BIO
	Data Completeness	Completeness - 100% data available from all HSE Areas Nationally
	Data Quality Issues	No known data quality issues at this point
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families themselves
		(self referrals). Any person can be referred to OT. Referrals must be received in writing, using the official referral form when
		available. Referrals which must be completed in full, with as much detail as possible, in order to assess appropriatness of referrals
		and aid accurate prioritisation.
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility
		details etc. It also includes sections for details on occupational needs, medical conditions/diagnosis, and social /living/supports etc.
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: Occupational Therapy Manager. 'KPI's are monitored and reviewed
		through meetings between the Primary Care Division Operational Team and the CHO/LHO
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)
14	KDI Deporting Assurantion	Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	☑ National □ Regional □Hospital Group □ Hospital ☑ CHO □ ISA ☑ LHO □ County □ Institution □ Other – give details:
15	KPI is reported in which reports ?	☐ County ☐ Institution ☐ Other – give details:  ☐Performance Assurance Report (NSP) ☐ Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performancereports
17	Additional Information	International and a superior desired and a su
	details for Data Manager / Specialist	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
Lead	actano for Data manager / opecianst	Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.
Hauvilai	Leau and Division	John Frennessy, realional Director, Entitlary Gale Division, Freath Service Executive.

1	KPI Title	No of patients treated (direct and indirect) (monthly target)
2	KPI Description	Total Number of patients who received a service (direct and indirect) in the reporting month
		a. No. of clients who received a direct service in the reporting month (per month)
		The number of individual named clients who have received direct interventions during month.
		Direct interventions refers to face to face interventions, delivered directly to, or on behalf of a named client. The Client does
		have to be present but the intervention is on their behalf and of a 'face to face' nature. Examples of direct interventions. eg • A
		face to face sessions; • Client specific parent/family training; • School/pre-school visit to or on behalf of a client; • Domiciliary \
		to client; • Attendance at Case conference; • School visit in advance of child attending school; • Pre-discharge visit to client's l
		• Site meeting with Co Council/builder regarding housing adaptations. Each client is counted only once in the reporting month
		This covers all Occupational Therapy services provided within Primary and Community Services. This does not include client
		Mental Health, Acute Hospital care or voluntary agency settings.
	PC21	This metric is recorded by age band. Age Bands: 0-4yrs and 11mths; 5-17yrs & 11mths; 18-64yrs & 11mths; 65yrs+.
	FG21	b. No of clients who received an indirect service in the reporting month
		This is the number of clients who received indirect interventions only and nil direct contacts during the reporting month
		Indirect interventions refers to meaningful interventions to, or on behalf of, a client in an indirect way. This implies it is of non
		to face nature via telephone, e-mail, written, etc.
		(Note: if client receives direct interventions they are not counted in this question)
3	KPI Rationale	Occupational therapy is a client centred health profession concerned with promoting health and well being through occupation
J	KPI Rationale	
		primary goal of occupational therapy is to enable people to participate in the activities of everyday life. Occupational therapist
		achieve this outcome by working with people and communities to enhance their ability to engage in the occupations they war
		need to, or are expected to do, or by modifying the occupation or the environment to better support their occupational engage
		Occupational therapy is carried out in Primary Care by assessing people and providing interventions, both directly and indirect either home or clinic locations or other community settings e.g. community centres, day centres, community hospital etc. Hon
		based interventions are an essential component of service delivery where assessing/treating the person performance within the person
		own environment is integral to successful outcomes. Service activity data (both direct and indirect) reflects the number of con
		with people but does not reflect the amount of time this involves.
	1 5 6 01 35 6	
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may n
		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 2016	DOP 2016 Target National - 20291
		CHO 1 - 2706 ; CHO 2 - 1924 ; CHO 3 - 1474 ; CHO 4 - 2074 ; CHO 5 - 1815 ; CHO 6 - 1274 ; CHO 7 - 2835 ; CHO
		3436 ; CHO 9 - 2753
5	KPI Calculation	This is a count of the number of clients who have received a direct service, plus clients who have received an indirect interve
		only in the reporting month.
		Each client is counted only once in the reporting month.
		As the same clients may be recorded over a period of time, consecutative months cannot be added together to provide a annual state of the same clients may be recorded over a period of time, consecutative months cannot be added together to provide a annual state of the same clients may be recorded over a period of time, consecutative months cannot be added together to provide a annual state of the same clients may be recorded over a period of time, consecutative months cannot be added together to provide a annual state of the same clients.
		view.
6	Data Source	Source - OT Therapist records - OT Managers - LHO - CHO - BIU
	Data Completeness	Completeness - 100% data available from all HSE Areas Nationally
	Data Quality Issues	No known data quality issues at this point
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families themselve
		(self referrals). Any person can be referred to OT. Referrals must be received in writing, using the official referral form when
		available. Referrals which must be completed in full, with as much detail as possible, in order to assess appropriatness of ref
		and aid accurate prioritisation.
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eliq
		details etc. It also includes sections for details on occupational needs, medical conditions/diagnosis, and social /living/suppor
10	International Comparison	No 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: Occupational Therapy Manager. "KPI's are monitored and review
		through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
12 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)
	Ta Troport poriou	
		☐Monthly in arrears (June data reported in July)
		□Quarterly in arrears (quarter 1 data reported in quarter 2)
1.4	KDI Deporting Aggregation	Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	☑ National □ Regional □ Hospital Group □ Hospital ☑ CHO □ ISA ☑ LHO
45	MDI is assessed 12 12 12 1	□ County □ Institution □ Other – give details:
15	KPI is reported in which reports?	☑Performance Assurance Report (NSP) □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performancereports
17	Additional Information	In CIF
	details for Data Manager / Specialist	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
d		Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
	l Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

1	KPI Title	Total no. of patients on the assessment waiting list at the end of the reporting period
2	KPI Description PC101	Refers to the number of client referrals on waiting list for a first time/initial assessment in this episode of care. Includes re referr
2	PC101A	to the service on last working day of the month.
	PC101B	to the solving of the Working day of the month.
	PC101C	
	PC101D	
	PC101E	
3	KPI Rationale	To monitor waiting lists and reduce the length of time patients are waiting for an assessment
3	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may nee
	indicator Classification	
		choose two).
		□Person Centred Care □Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐ Use of Information
	LED TO A COLO	Workforce □ Use of Resources□ Governance, Leadership and Management□
4	KPI Target 2016	DOP 2016 Target National -19932
		CHO 1 - 1161 ; CHO 2 - 1958 ; CHO 3 - 874 ; CHO 4 - 3754 ; CHO 5 - 3226 ; CHO 6 - 900 ; CHO 7 - 2329 ; CHO 8 - 35
		CHO 9 - 2187
5	KPI Calculation	Count of number of clients on waiting list for assessment at the end of the reporting month
		The waiting time is measured from date of referral i.e. date of receipt of the referral by the service to the end of reporting month
		includes patients waiting for assessment. There are five waiting time bands:
		0 - less than or equal to 12 weeks
		greater than 12 weeks and less than or equal to 26 weeks
		greater than 26 weeks and less than or equal to 39 weeks
		greater than 39 weeks and less than or equal to 52 weeks
		greater than 52 weeks
6	Data Source	Source - OT Therapist records - OT Managers - LHO - CHO - BIU
	Data Completeness	Completeness - 100% data available from all HSE Areas Nationally
	Data Quality Issues	No known data quality issues at this point
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families themselves
-		(self referrals). Any person can be referred to OT. Referrals must be received in writing, using the official referral form when
		available. Referrals which must be completed in full, with as much detail as possible, in order to assess appropriatness of referr
		and aid accurate prioritisation.
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligib
•	Millimani Bata Oct	Telestata terma mende details of basic demographic mioritation (Name, address, 2002, Text of kin, contact termaniscis, engin
		details etc. It also includes sections for details on occupational needs, medical conditions/diagnosis, and social /living/supports
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
	3	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
		Please indicate who is responsible for monitoring this KPI: Occupational Therapy Manager. 'KPI's are monitored and reviewed
		through meetings between the Primary Care Division Operational Team and the CHO/LHO
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)
	Ta Troport period	
		☐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 ☐ Hospital Group ☐ Hospital ☑ CHO ☐ ISA ☑ LHO
		□ County □ Institution □ Other – give details:
15	KPI is reported in which reports ?	☑Performance Assurance 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 / Specialist	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
ead		Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
		oposition and an interpretation of the mining, the business required to operations of the mining out of bivioletic

1 KPI Title  % of new patients seen for assessment within 12 weeks 2 KPI Description	Primary Care : Occupational Therapy Wait List Management		
This is the number of clients referred seen for assessment within 12 weeks as a percentage of all referrals assessed in PC20A & PC20B  XFPI Rationale  Indicator Classification  Please tick which indicator Classification this indicator applies to, ideally choose one classification (in some cases you 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 2016  DOP 2016 Target National - 10%  Sum (Number of Patients seen for a first time assessment: 0 ≤ 12 weeks) divided by Sum(Number of Patients seen time assessment: 0 ≤ 12 weeks + 26 weeks ≤ 39 weeks ≤ 52 weeks + > 51 to 0 ≥ 10			
PC20A & PC20B  3 KPI Rationale  To monitor waiting lists and reduce the length of time patients are waiting for an assessment  Indicator Classification  Please tick which indicator Classification this indicator applies to, ideally choose one classification (in some cases you 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 2016  □DOP 2016 Target National - 70%  XPI Calculation  Sum (Number of Patients seen for a first time assessment: 0≤ 12 weeks ) divided by Sum(Number of Patients seer time assessment: 0≤ 12 weeks > 28 weeks + >28 weeks ≤ 39 weeks + >39 weeks ≤ 52 weeks + > 5.  □Data Source  □Data Source  □Data Completeness  □Data Completeness  □Data Quality Issues  No known data quality issues at this point  □Data Collection Frequency  □Data Useks   20 weeks   20			
To monitor waiting lists and reduce the length of time patients are waiting for an assessment   Please tick which Indicator Classification   Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you choose two).	the month		
To monitor waiting lists and reduce the length of time patients are waiting for an assessment   Please tick which Indicator Classification   Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you choose two).			
Indicator Classification			
□Person Centred Care	may need to		
Safe Care □ Better Health and Wellbeing ☑ Use of Information  Workforce □ Use of Resources□ Governance, Leadership and Management □  4 KPI Target 2016 DOP 2016 Target National - 70%  Sum (Number of Patients seen for a first time assessment: 0 ≤ 12 weeks ) divided by Sum(Number of Patients seen time assessment: 0 ≤ 12 weeks > 26 weeks + > 26 weeks + > 39 weeks + > 39 weeks ≤ 52 weeks + > 51 200  Bata Source Source - OT Therapist records - OT Managers - LHO - CHO - BIU  Data Completeness Completeness - 100% data available from all HSE Areas Nationally  Data Quality Issues No known data quality issues at this point  7 Data Collection Frequency □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Other - give details:  8 Tracer Conditions Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families th (self referrals). Any person can be referred to OT. Referrals must be received in writing, using the official referral form available. Referrals which must be completed in full, with as much detail as possible, in order to assess appropriates and aid accurate prioritisation.  9 Minimum Data Set Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numb details etc. It also includes sections for details on occupational needs, medical conditions/diagnosis, and social /living No International Comparison No 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: Occupational Team and the CHOLHO  12 KPI Reporting Frequency □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other - give details:  □Monthly in arrears (June data reported in July)  □Quarterly in arrears (June data reported in quarter 2)  □Rolling 12 months (previous 12 month period)  14 KPI Reporting Aggregation □ Regional □Hospital Group □ Hospital ☑CHO □ISA ☑ LHO			
Workforce			
KPI Target 2016   DOP 2016 Target National - 70%			
Sum (Number of Patients seen for a first time assessment: 0≤ 12 weeks ) divided by Sum(Number of Patients seen time assessment: 0≤ 12 weeks +>26 weeks ≤ 26 weeks ≤ 39 weeks +>39 weeks ≤ 52 weeks +>5 100  6 Data Source Source OT Therapist records - OT Managers - LHO - CHO - BIU  Data Completeness Completeness - 100% data available from all HSE Areas Nationally  Data Quality Issues No known data quality issues at this point  7 Data Collection Frequency □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Other - give details:  8 Tracer Conditions Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families the (self referrals). Any person can be referred to OT. Referrals must be received in writing, using the official referral for available. Referrals which must be completed in full, with as much detail as possible, in order to assess appropriatives and aid accurate prioritisation.  9 Minimum Data Set Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numb details etc. It also includes sections for details on occupational needs, medical conditions/diagnosis, and social /living  10 International Comparison No  KPI Will be monitored on a (please indicate below) basis: □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other - give details: □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other - give details: □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other - give details: □Current (e.g. daily data reported on tha same day of activity, monthly data reported within the same month of activity in arrears (quarter 1 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 □Hospital Group □ Hospital ☑ CHO □ ISA ☑ LHO			
time assessment: 0 ≤ 12 weeks +> 12 weeks ≤ 26 weeks +> 26 weeks +> 39 weeks +> 39 weeks +> 52 weeks +> 5.    100			
Data Completeness   Completeness - 100% data available from all HSE Areas Nationally			
Data Quality Issues			
Tracer Conditions  Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families th (self referrals). Any person can be referred to OT. Referrals must be received in writing, using the official referral form available. Referrals which must be completed in full, with as much detail as possible, in order to assess appropriatnes and aid accurate prioritisation.  9 Minimum Data Set  Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numb details etc. It also includes sections for details on occupational needs, medical conditions/diagnosis, and social /living  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: Occupational Therapy Manager. 'KPI's are monitored and through meetings between the Primary Care Division Operational Team and the CHO/LHO  12 KPI Reporting Frequency  □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 active □Monthly in arrears (June data reported in July)  □Quarterly in arrears (June data reported in July)  □Rolling 12 months (previous 12 month period)  14 KPI Reporting Aggregation			
Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families th (self referrals). Any person can be referred to OT. Referrals must be received in writing, using the official referral form available. Referrals which must be completed in full, with as much detail as possible, in order to assess appropriatnes and aid accurate prioritisation.  Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numb details etc. It also includes sections for details on occupational needs, medical conditions/diagnosis, and social /living No  International Comparison  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: Occupational Therapy Manager. 'KPI's are monitored and through meetings between the Primary Care Division Operational Team and the CHO/LHO  KPI Reporting Frequency   Daily   Weekly   Monthly   Quarterly   Bi-annually   Annually   Other – give details:    KPI report period   Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity 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   Hospital Group   Hospital   CHO   ISA   LHO			
(self referrals). Any person can be referred to OT. Referrals must be received in writing, using the official referral form available. Referrals which must be completed in full, with as much detail as possible, in order to assess appropriatnes and aid accurate prioritisation.  9 Minimum Data Set  Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numb details etc. It also includes sections for details on occupational needs, medical conditions/diagnosis, and social /living  No  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: Occupational Therapy Manager. 'KPI's are monitored and through meetings between the Primary Care Division Operational Team and the CHO/LHO  12 KPI Reporting Frequency □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other − give details: □Monthly in arrears (June data reported on that same day of activity, monthly data reported within the same month of active □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 □Hospital ⊡CHO □ISA ☑LHO			
9 Minimum Data Set   Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numb details etc. It also includes sections for details on occupational needs, medical conditions/diagnosis, and social /living   10   International Comparison   No   KPI Monitoring   KPI will be monitored on a (please indicate below) basis:	when		
10			
KPI Monitoring   KPI will be monitored on a (please indicate below) basis:	supports etc		
Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details: Please indicate who is responsible for monitoring this KPI: Occupational Therapy Manager. 'KPI's are monitored and through meetings between the Primary Care Division Operational Team and the CHO/LHO  12 KPI Reporting Frequency □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 activ □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 □Hospital ☑ CHO □ ISA ☑ LHO			
Please indicate who is responsible for monitoring this KPI: Occupational Therapy Manager. 'KPI's are monitored and through meetings between the Primary Care Division Operational Team and the CHO/LHO  12 KPI Reporting Frequency			
through meetings between the Primary Care Division Operational Team and the CHO/LHO  12 KPI Reporting Frequency  □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:  □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 □Hospital ☑ CHO □ ISA ☑ LHO	roviowod		
12 KPI Reporting Frequency	Tevieweu		
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)   □ Regional □ Hospital □ CHO □ ISA □ LHO			
□ Quarterly in arrears (quarter 1 data reported in quarter 2) □ Rolling 12 months (previous 12 month period)  14 KPI Reporting Aggregation □ National □ Regional □ Hospital □ CHO □ ISA □ LHO	ity)		
□ Quarterly in arrears (quarter 1 data reported in quarter 2) □ Rolling 12 months (previous 12 month period)  14 KPI Reporting Aggregation □ National □ Regional □ Hospital □ CHO □ ISA □ LHO	**		
□Rolling 12 months (previous 12 month period)  14 KPI Reporting Aggregation □ Regional □ Hospital □ CHO □ ISA □ LHO			
14 KPI Reporting Aggregation ☐ National ☐ Regional ☐ Hospital Group ☐ Hospital ☑ CHO ☐ ISA ☑ LHO			
15 KPI is reported in which reports? ☑Performance Assurance 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 / Specialist Lead Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division			
National Lead and Division John Hennessy, National Director, Primary Care Division, Health Service Executive.			

1	KPI Title	% on waiting list for assessment less than or equal to 52 weeks
2	KPI Description	Wait band - refers to the length of time in weeks that clients referred are awaiting for a first time/initial assessment following
-	•	acceptance of referral. This metric counts the No of clients in each wait band, by age group, at the end of the month
3	PC101F & PC101G KPI Rationale	To monitor waiting lists and reduce the length of time patients are waiting for an assessment
3	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need
	indicator classification	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 2016	DOP 2016 Target National - 100%
5	KPI Calculation	Sum(Number of Patients waiting for a first time assessment: 0≤ 12 weeks +> 12 weeks ≤ 26 weeks +> 26 weeks ≤ 39 weeks +
		>39 weeks ≤ 52 weeks) divided by Sum(Number of Patients waiting for a first time assessment: 0 ≤ 12 weeks +> 12 weeks ≤ 2
		weeks + >26 weeks ≤ 39 weeks + >39 weeks ≤ 52 weeks + > 52 weeks) *100
6	Data Source	Source - OT Therapist records - OT Managers - LHO - CHO - BIU
	Data Completeness	Completeness - 100% data available from all HSE Areas Nationally
	Data Quality Issues	No known data quality issues at this point
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families themselves
		(self referrals). Any person can be referred to OT. Referrals must be received in writing, using the official referral form when
		available. Referrals which must be completed in full, with as much detail as possible, in order to assess appropriatness of referrals
		and aid accurate prioritisation.
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility
		details etc. It also includes sections for details on occupational needs, medical conditions/diagnosis, and social /living/supports etc
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: Occupational Therapy Manager. "KPI's are monitored and reviewed
12	KPI Reporting Frequency	through meetings between the Primary Care Division Operational Team and the CHO/LHO  □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)
10	itt i report period	
		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 □ Hospital Group □ Hospital ☑ CHO □ ISA ☑ LHO
		☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports?	☑Performance Assurance 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 / Specialist	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
_ead		Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division

-mna	ry Gare . Occupational The	rapy Wait List Management
1	KPI Title	% on waiting list for assessment less than or equal to 39 weeks
2	KPI Description	Wait band - refers to the length of time in weeks that clients referred are awaiting for a first time/initial assessment following
_	PC101H & PC101I	acceptance of referral. This metric counts the No of clients in each wait band, by age group, at the end of the month
3	KPI Rationale	To monitor waiting lists and reduce the length of time patients are waiting for an assessment
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need
		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 2016	DOP 2016 Target National - 95%
5	KPI Calculation	Sum(Number of Patients waiting for a first time assessment: 0≤ 12 weeks +> 12 weeks ≤ 26 weeks +> 26 weeks ≤ 39 weeks )
		divided by Sum(Number of Patients waiting for a first time assessment : 0≤ 12 weeks +> 12 weeks ≤ 26 weeks + >26 weeks ≤
		39 weeks + >39 weeks ≤ 52 weeks + > 52 weeks) *100
6	Data Source	Source - OT Therapist records - OT Managers - LHO - CHO - BIU
	Data Completeness	Completeness - 100% data available from all HSE Areas Nationally
	Data Quality Issues	No known data quality issues at this point
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families themselves
		(self referrals). Any person can be referred to OT. Referrals must be received in writing, using the official referral form when
		available. Referrals which must be completed in full, with as much detail as possible, in order to assess appropriatness of referrals
		and aid accurate prioritisation.
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility
		details etc. It also includes sections for details on occupational needs, medical conditions/diagnosis, and social /living/supports etc
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: Occupational Therapy Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI reporting requestry	☐ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)
	Ta Froport period	
		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 □ Hospital Group □ Hospital ☑ CHO □ ISA ☑ LHO
		☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports?	☑Performance Assurance Report (NSP) □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performancereports
17	Additional Information	Information Applied Methods and Commenced Health after accommendation in the OAC 0054040
	details for Data Manager / Specialist	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
Lead		Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

1	KPI Title	% on waiting list for assessment less than or equal to 26 weeks
2	KPI Description	Wait band - refers to the length of time in weeks that clients referred are awaiting for a first time/initial assessment following
2	'	acceptance of referral. This metric counts the No of clients in each wait band, by age group, at the end of the month
	PC101J & PC101K	
3	KPI Rationale	To monitor waiting lists and reduce the length of time patients are waiting for an assessment
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need
		choose two).  □Person Centred Care □Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐ Use of Information
	KDI T	Workforce ☐ Use of Resources☐ Governance, Leadership and Management☐
4	KPI Target 2016 KPI Calculation	DOP 2016 Target National - 80%
5	KPI Calculation	Sum(Number of Patients waiting for a first time assessment: 0 ≤ 12 weeks +> 12 weeks ≤ 26 weeks ) divided by Sum(Number
		of Patients waiting for a first time assessment: 0 ≤ 12 weeks +> 12 weeks ≤ 26 weeks +> 26 weeks ≤ 39 weeks +> 39 weeks
		52 weeks +> 52 weeks) *100
6	Data Source	Source - OT Therapist records - OT Managers - LHO - CHO - BIU
	Data Completeness	Completeness - 100% data available from all HSE Areas Nationally
	Data Quality Issues	No known data quality issues at this point
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families themselves
•		(self referrals). Any person can be referred to OT. Referrals must be received in writing, using the official referral form when
		available. Referrals which must be completed in full, with as much detail as possible, in order to assess appropriatness of referra
		and aid accurate prioritisation.
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibil
•	Initialia Bata Got	Total all includes detailed a basis delingraphic minimation (ratine, address, 2005, mox or fair, contact or named a
		details etc. It also includes sections for details on occupational needs, medical conditions/diagnosis, and social /living/supports e
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: Occupational Therapy Manager. 'KPI's are monitored and reviewed
		through meetings between the Primary Care Division Operational Team and the CHO/LHO
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)
	100	□Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	☑ National □ Regional □ Hospital Group □ Hospital ☑ CHO □ ISA ☑ LHO
	1571	□ County □ Institution □ Other – give details:
15	KPI is reported in which reports ?	☑Performance Assurance Report (NSP) □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performancereports
17	Additional Information	Information Applied Mathematica Commence with health after account Object to India Octobrila
	details for Data Manager / Specialist	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
ead		Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division

Ort	Orthodontics - Active Treatment		
4	MDI Title	Number of Defeate and in the state of the st	
1	KPI Title	Number of Patients receiving active treatment at the end of the reporting period	
2	KPI Description PC23	Active Treatment: Any patient in treatment with an Orthodontist who has a comprehensive treatment plan with fixed functional or removal appliance in situ. It also includes patients who are in retention and excludes patients receiving interceptive treatment. Count at the end of each quarter, i.e. last day of March, June, September and December.	
3	KPI Rationale	To monitor the number of eligibile patients receiving orthodontic treatment in the reporting month.	
	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 ☐Workforce ☐Use of Resources ☐Governance, Leadership and Management	
4	KPI Target 2016	DOP 2016 Target National - 16887	
5	KPI Calculation	Count the number of patients who are in the process of receiving orthodontic treatment at the end of the reporting	
6	Data Source	Data is submitted by the Orthodontic Services (in the former Health Board areas) to the National Business Intelligence Unit. The National BIU will liaise with the National Oral Health Lead for validation purposes.	
	Data Completeness	Complete	
	Data Quality Issues	KPI definitions have also been further defined to ensure data integrity nationally. Work is ongoing on new IT solution to standardise data management.	
7	Data Collection Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually	
8	Tracer Conditions	All children under 16 years of age are eligible for dental care. To receive orthodontic treatment a child must satisfy the clinical guidelines for orthodontic care and be referred for treatment	
9	Minimum Data Set	Referral form from primary care dental service containing demographic and clinical details.	
10	International Comparison	No	
11	KPI Monitoring	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually KPI is monitored by: Consultant Orthodontist/Orthodontic Manager	
12	KPI Reporting Frequency	□ Daily □ Weekly □ Monthly ☑ Quarterly □ Bi-annually □ Annually □ Other – give details:	
13	KPI report period	□Current ☑Quarterly Current (e.g. data reported in each qtr up to and including the last day of that qtr) □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) □Other - give details:	
14	KPI Reporting Aggregation	☑ National ☑ Regional LHO Area □Hospital □ County □ Institution ☑ Other – give details: former Health Board Area	
15	KPI is reported in which reports?	☑Performance Assurance Report (NSP) □Other – give details:	
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html	
	Additional Information		
	act details for Data Manager /	Katherine Cregan, Information Analyst email: katherine.cregan@hse.ie tel: 046 9251312	
	ialist Lead	Dympna Kavanagh, National Oral Health Office, dympna.kavanagh@hse.ie, tel: 061 461302	
Natio	onal Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.	

Ort	Orthodontics - Patient Assessments		
1	KPI Title	% of referrals seen for assessment within 6 months	
2	KPI Description PC24 & PC24A	This is the number of patients seen for assessment within 6 months of referral	
3	KPI Rationale	To reduce the length of time patients are waiting for an assessment following referral	
	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 2016	NSP 2016 Target National 75%	
5	KPI Calculation	The number of patients assessed within 6months x 100 Total number of patients assessed within the reporting period	
6	Data Source	Data is submitted by the Orthodontic Services (in the former Health Board areas) to the National Business Intelligence	
	Data Completeness	New 2015	
	Data Quality Issues	KPI definitions have also been further defined to ensure data integrity nationally. Work is ongoing on new IT solution to	
7	Data Collection Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually	
8	Tracer Conditions	All children under 16 years of age are eligible for dental care. To receive orthodontic treatment a child must satisfy the clinical guidelines for orthodontic care and be referred for treatment	
9	Minimum Data Set	Referral form from primary care dental service containing demographic and clinical details.	
10	International Comparison	No	
11	KPI Monitoring	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually KPI is monitored by: Consultant Orthodontist/Orthodontic Manager	
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually □Other – give details:	
13	KPI report period	□Current □Quarterly Current (e.g. data reported in each qtr up to and including the last day of that qtr) □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) □Other - give details:	
14	KPI Reporting Aggregation	Indicate the level of aggregation — for example over a geographical location:  ☑ National ☐ Regional ☐ Hospital Group ☐ Hospital ☑ CHO ☐ ISA ☑ LHO	
		☐ County ☐ Institution ☐ Other – give details:	
15	KPI is reported in which reports?	☑Performance Assurance Report (NSP) ☐Other – give details:	
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html	
	Additional Information		
Cont	act details for Data Manager /	Katherine Cregan, Information Analyst email: katherine.cregan@hse.ie tel: 046 9251312	
Natio	onal Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.	

Ort	Orthodontics - Reduce Assessment Waiting Times		
1	KPI Title	% on waiting list for assessment less than or equal to 12 months	
2	KPI Description	This the number of patients waiting for assessment following referral. Wait time is from the date of referral date to date	
	PC25 & PC25A	of assessment.	
		i) no. of patients waiting 1-6 months	
		ii)no. of patients waiting 7-12 months	
		iii)no. of patients waiting 13-24 months	
		iv)no. of patiients waiting over 2 years	
3	KPI Rationale	To reduce the length of time patients are waiting for an assessment following referral	
Ü	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 2016	NSP 2016 Target National 100% on waiting list ≤ 12 months	
5	KPI Calculation	The number of patients on the assessment waiting list <= 12 months x 100	
		Total number of patients on the assessment waiting list	
6	Data Source	Data is submitted by the Orthodontic Services (in the former Health Board areas) to the National Business Intelligence	
		Unit. The National BIU will liaise with the National Oral Health Lead for validation purposes.	
	Data Completeness	Complete	
	Data Quality Issues	KPI definitions have also been further defined to ensure data integrity nationally. Work is ongoing on new IT solution to	
		standardise data management.	
7	Data Collection Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually	
8	Tracer Conditions	All children under 16 years of age are eligible for dental care. To receive orthodontic treatment a child must satisfy the	
		clinical guidelines for orthodontic care and be referred for treatment	
9	Minimum Data Set	Referral form from primary care dental service containing demographic and clinical details.	
10	International Comparison	No	
11	KPI Monitoring	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually	
		KPI is monitored by: Consultant Orthodontist/Orthodontic Manager	
	WD1 D		
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually	
40	KDI association of a d	□Other – give details:	
13	KPI report period	Current  Constant Constant (and date would discount a soul including the last door (that state)	
		☐ Quarterly Current (e.g. data reported in each qtr up to and including the last day of that qtr) ☐ 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)	
		Other - give details:	
14	KPI Reporting Aggregation	Indicate the level of aggregation – for example over a geographical location:	
1-7	Ta Treporting Aggregation	☑ National □ Regional □Hospital Group □ Hospital ☑ CHO □ ISA ☑ LHO	
		□ County □ Institution □ Other – give details:	
15	KPI is reported in which reports?	☑ Southy ☑ Institution ☑ South = give details:  ☑Performance Assurance Report (NSP) ☐ Other – give details:	
L	· · · · · · · · · · · · · · · · · · ·		
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html	
17 Cont	Additional Information	Ketherine Crosses Information Applied amaily ketherine argon- Chan in tall 040 0054240	
		Katherine Cregan, Information Analyst email: katherine.cregan@hse.ie tel: 046 9251312	
		Dympna Kavanagh, National Oral Health Office, dympna.kavanagh@hse.ie, tel: 061 461302	
Natio	ational Lead and Division John Hennessy, National Director, Primary Care Division, Health Service Executive.		

Ort	hodontics - Percentage on	Treatment Waiting List
4	KPI Title	Percentage of patients on the treatment waiting list
	Krifide	< 2 years
		< 4 years (grade 4 and 5)
2	KPI Description	Waiting times for patients on the Orthodontic Treatment - Grade 4 and Grade 5 - waiting lists. This is the number of
	PC26 & PC26A	patients waiting for treatment following assessment within the following wait bands.
	PC27 & PC27A	i) no. of patients within 1-6 months
		ii) no. of patients within 7-12 months
		iii) no. of patients within 13-24 months vi) no. of patients over 4 years
		v) no. of patients over 4 years v) no. of patients within 2 - 3 years
		<b>Grade 4</b> patients have severe degrees of irregularity that require treatment for health reasons, traumatic bites or
		functional problems. Patients waiting for growth to be completed are included.
		Grade 5 patients have very severe dental health problems, e.g. cleft lip & palate, upper front teeth that protrude more
		than 9mm, teeth cannot come into the mouth because of overcrowding, additional incisors or canines or any other
		cause. Patients waiting for growth to be completed are included.
3	KPI Rationale	To monitor the waiting times for patients on the Orthodontic Treatment - Grade 4 and Grade 5 - waiting lists
	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 2016	DOP 2016 Target % on treatment waiting list < 2 years - 75%
7	Target 2010	% on treatment waiting list < 4 years (Grade 4 and 5) - 95%
5	KPI Calculation	Count the number of patients within each wait band waiting to commence treatment following assessment (Wait time
		count begins from assessment date) Data in Orthodontic Services (in the former Health Board areas) in each HSE
		region will be collated to provide a Regional View. In order to get the yearly outturn the 4th Quarter is taken. This is
6	Data Source	Point in Time information.  Data is submitted by the Orthodontic Services (in the former Health Board areas) to the National Business Intelligence
U	Data Source	Unit. The National BIU will liaise with the National Oral Health Lead for validation purposes.
	Data Completeness	Complete
	Data Quality Issues	KPI definitions have also been further defined to ensure data integrity nationally. Work is ongoing on new IT solution to
		standardise data management.
7	Data Collection Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually
8	Tracer Conditions	All children under 16 years of age are eligible for dental care. To receive orthodontic treatment a child must satisfy the
0	Minimum Data Cat	clinical guidelines for orthodontic care and be referred for treatment
9 10	Minimum Data Set International Comparison	Referral form from primary care dental service containing demographic and clinical details.  No
11	KPI Monitoring	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually
		KPI is monitored by: Consultant Orthodontist/Orthodontic Manager
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually
12	Kri Keporting Frequency	Other – give details:
13	KPI report period	□Current □
		☑Quarterly Current (e.g. data reported in each qtr up to and including the last day of that qtr)
		□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)
		Other - give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – for example over a geographical location:
		☑ National □ Regional □ Hospital Group □ Hospital ☑ CHO □ ISA ☑ LHO
4.5	KBI is non-outed in orbigh you out 2	□ County □ Institution □ Other – give details:
15	KPI is reported in which reports?	☑Performance Assurance Report (NSP) ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
	Additional Information	
	act details for Data Manager /	Katherine Cregan, Information Analyst email: katherine.cregan@hse.ie tel: 046 9251312
	ialist Lead	Dympna Kavanagh, National Oral Health Office, dympna.kavanagh@hse.ie, tel: 061 461302
Natio	onal Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

OIL	hodontics - Assessment V	valuing List
1	KPI Title	Number of patients on the assessment waiting list at the end of the reporting period
2	KPI Description	Total number of patients who are awaiting assessment for eligibility and categorisation of their orthodontic treatment
	PC28	requirements at the end of quarter (Grades 4 & 5).
		Grade 4 patients have severe degrees of irregularity that require treatment for health reasons, traumatic bites or
		functional problems.
		Grade 5 patients have very severe dental health problems, e.g. cleft lip & palate, upper front teeth that protrude more
		than 9mm, teeth cannot come into the mouth because of overcrowding, additional incisors or canines or any other
		cause. Count at the end of each quarter, i.e. last day of March, June, September and December.
3	KPI Rationale	To monitor the number of patients on the Orthodontic Assessment waiting list.
	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
4	KPI Target 2016	DOP 2016 Target National - 5966
5	KPI Calculation	Count of the number of patients on the Orthodontic Assessment waiting lists in each Orthodontic Service at the end of
		each quarter. Data in Orthodontic Services (in the former Health Board areas) in each HSE region will be collated to
		provide a Regional View. In order to get the yearly outturn the 4th Quarter is taken. This is Point in Time data.
6	Data Source	Data is submitted by the Orthodontic Services in former health board areas and regionally from DNE to the National
		Business Information Unit, IPPB. The national data analyst BIU quality assures the validated data with the data
		providers and links with the National Oral Health Lead and Directorate.
	Data Completeness	Complete
	Data Quality Issues	KPI definitions have also been further defined to ensure data integrity nationally. Work is ongoing on new IT solution to
	,	standardise data management.
7	Data Collection Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually
8	Tracer Conditions	All children under 16 years of age are eligible for dental care. To receive orthodontic treatment a child must satisfy the
		clinical guidelines for orthodontic care and be referred for treatment
9	Minimum Data Set	Referral form from primary care dental service containing demographic and clinical details.
10	International Comparison	No
11	KPI Monitoring	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually
		KPI is monitored by: Consultant Orthodontist/Orthodontic Manager
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually
		□Other – give details:
13	KPI report period	□Current □
		☑Quarterly Current (e.g. data reported in each qtr up to and including the last day of that qtr)
		☐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)
		□Other - give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – for example over a geographical location:
		☑ National □ Regional □Hospital Group □ Hospital ☑ CHO □ ISA ☑ LHO
		☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports?	☑Performance Assurance Report (NSP) □Other – give details:
46	Wah link to date	http://www.hos.is/anglesoises/Dublications/someonts/Dod-
16 17	Web link to data Additional Information	http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html
	Manager / Specialist Lead	Katherine Cregan, Information Analyst email: katherine.cregan@hse.ie tel: 046 9251312
Dala	manager / Opecialist Leau	Dympna Kavanagh, National Oral Health Office, dympna.kavanagh@hse.ie, tel: 061 461302
Me4!	and Lood and Division	
	onal Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

Orthodo	Orthodontics - Treatment Waiting List - Grade 4		
1 KPI Ti	itle	Number of patients on the treatment waiting list - Grade 4 - at the end of the reporting period	
2 KPI Do PC29		Number of patients on the treatment waiting list - Grade 4 - at the end of the reporting period. Patients waiting for growth to be completed are excluded. The Modified Index of Treatment Need is used by the Orthodontic Services to establish cases that are eligibile to receive treatment by the HSE Orthodontic Services. <b>Grade 4</b> patients have severe degrees of irregularity that require treatment for health reasons, traumatic bites or functional problems.	
3 KPI R	ationale	To monitor the number of patients on the treatment waiting list - Grade 4	
Indica	ator 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	
	arget 2016	DOP 2016 Target National - 9912	
5 KPI C	alculation	Count of the number of patients on the Orthodontic Treatment waiting list - Grade 4 - in each Orthodontic Service.  Data in Orthodontic Services (in the former Health Board areas) in each HSE region will be collated to provide a Regional View. In order to get the yearly outturn the 4th Quarter is taken. This is Point in Time.	
6 Data S	Source	Data is submitted by the Orthodontic Services (in the former Health Board areas) to the National Business Intelligence Unit. The National BIU will liaise with the National Oral Health Lead for validation purposes.	
Data (	Completeness	Complete	
Data (	Quality Issues	KPI definitions have also been further defined to ensure data integrity nationally. Work is ongoing on new IT solution to standardise data management.	
7 Data 0	Collection Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually	
8 Trace	er Conditions	All children under 16 years of age are eligible for dental care. To receive orthodontic treatment a child must satisfy the clinical guidelines for orthodontic care and be referred for treatment	
9 Minim	num Data Set	Referral form from primary care dental service containing demographic and clinical details.	
10 Intern	national Comparison	No	
11 KPI M	lonitoring	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually KPI is monitored by: Consultant Orthodontist/Orthodontic Manager	
12 KPI R	eporting Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually □Other – give details:	
	eport period	□Current □Quarterly Current (e.g. data reported in each qtr up to and including the last day of that qtr) □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) □Other - give details:	
14 KPI R	eporting Aggregation	Indicate the level of aggregation – for example over a geographical location:  ☑ National □ Regional □ Hospital Group □ Hospital ☑ CHO □ ISA ☑ LHO □ County □ Institution □ Other – give details:	
15 KPI is	reported in which reports?	☐ County ☐ Institution ☐ Other – give details: ☐ Performance Assurance Report (NSP) ☐ Other – give details:	
16 Web li	link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html	
	ional Information		
	tails for Data Manager /	Katherine Cregan, Information Analyst email: katherine.cregan@hse.ie tel: 046 9251312 Dympna Kavanagh, National Oral Health Office, dympna.kavanagh@hse.ie, tel: 061 461302	
National Lead and Division John Hennessy, National Director, Primary Care Division, Health Service Executive.		John Hennessy, National Director, Primary Care Division, Health Service Executive.	

Ort	hodontics - Treatment Wai	ting List Grade 5
4	I/DI Title	Number of a first and the trade of the State
1	KPI Title	Number of patients on the treatment waiting list - <b>Grade 5</b> - at the end of the reporting period
2	KPI Description PC30	Number of patients on the treatment waiting list - Grade 5 - at the end of the reporting period.  The Modified Index of Treatment Need is used by the Orthodontic Services to establish cases that are eligibile to receive treatment by the HSE Orthodontic Services. <b>Grade 5</b> patients have very severe dental health problems, e.g. cleft lip & palate (DML patients attend St James's Hospital and are not included in the returns), upper front teeth that protrude more than 9mm, teeth cannot come into the mouth because of overcrowding, additional incisors or canines or any other cause. Patients waiting for growth to be completed are included.
3	KPI Rationale	To monitor the number of patients on the treatment waiting list - Grade 5
	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 2016	DOP 2016 Target National - 8194
5	KPI Calculation	Count of the number of patients on the Orthodontic Treatment waiting lists - Grade 5 - in each Orthodontic Service.  Data in Orthodontic Services (in the former Health Board areas) in each HSE region will be collated to provide a Regional View. In order to get the yearly outturn the 4th Quarter is taken. This is Point in Time data.
6	Data Source	Data is submitted by the Orthodontic Services (in the former Health Board areas) to the National Business Intelligence Unit. The National BIU will liaise with the National Oral Health Lead for validation purposes.
	Data Completeness	Complete
	Data Quality Issues	KPI definitions have also been further defined to ensure data integrity nationally. Work is ongoing on new IT solution to standardise data management.
7	Data Collection Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually
8	Tracer Conditions	All children under 16 years of age are eligible for dental care. To receive orthodontic treatment a child must satisfy the clinical guidelines for orthodontic care and be referred for treatment
9	Minimum Data Set	Referral form from primary care dental service containing demographic and clinical details.
10	International Comparison	No
11	KPI Monitoring	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually KPI is monitored by: Consultant Orthodontist/Orthodontic Manager
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	□Current □Quarterly Current (e.g. data reported in each qtr up to and including the last day of that qtr) □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) □Other - give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – for example over a geographical location:
		☑ National □ Regional □ Hospital Group □ Hospital ☑ CHO □ ISA ☑ LHO
		☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports?	☑Performance Assurance Report (NSP) ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html
17	Additional Information	
	act details for Data Manager / ialist Lead	Katherine Cregan, Information Analyst email: katherine.cregan@hse.ie tel: 046 9251312  Dympna Kavanagh, National Oral Health Office, dympna.kavanagh@hse.ie, tel: 061 461302
Natio	nal Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

Ort	hodontics - Reduce Treatm	nent Waiting List
1	KPI Title	Reduce the proportion reduced of patients on the treatment waiting list longer than 4 years (Grade 4 and 5)
2	KPI Description PC31 & PC31A	To measure the proportion of patients waiting longer than 4 years for treatment
3	KPI Rationale	To monitor the number of patients on the treatment waiting list and reduce the number waiting longer than four years
	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 5	KPI Target 2016	DOP 2016 Target <5% of patients waiting over 4 years
	KPI Calculation	No. of patients waiting longer than four years (Grade 4 and 5) x 100 Total number of patients waiting (Grade 4 and 5)
6	Data Source	Data is submitted by the Orthodontic Services (in the former Health Board areas) to the National Business Intelligence Unit. The National BIU will liaise with the National Oral Health Lead for validation purposes.
	Data Completeness	Complete
	Data Quality Issues	KPI definitions have also been further defined to ensure data integrity nationally. Work is ongoing on new IT solution to standardise data management.
7	Data Collection Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually
8	Tracer Conditions	All children under 16 years of age are eligible for dental care. To receive orthodontic treatment a child must satisfy the clinical guidelines for orthodontic care and be referred for treatment
9 10	Minimum Data Set	Referral form from primary care dental service containing demographic and clinical details.
10	International Comparison	No
11	KPI Monitoring	□ Daily □ Weekly □ Monthly ☑ Quarterly □ Bi-annually □ Annually KPI is monitored by: Consultant Orthodontist/Orthodontic Manager
12	KPI Reporting Frequency	□ Daily □ Weekly □ Monthly ☑ Quarterly □ Bi-annually □ Annually □ Other – give details:
13	KPI report period	□Current □Quarterly Current (e.g. data reported in each qtr up to and including the last day of that qtr) □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) □Other - give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – for example over a geographical location:
		☑ National □ Regional □ Hospital Group □ Hospital ☑ CHO □ ISA ☑ LHO
		☐ County ☐ Institution ☐ Other – give details:
	KPI is reported in which reports?	☑Performance Assurance Report (NSP) □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html
17	Additional Information act details for Data Manager /	
	act details for Data Manager / cialist Lead	Katherine Cregan, Information Analyst email: katherine.cregan@hse.ie tel: 046 9251312 Dympna Kavanagh, National Oral Health Office, dympna.kavanagh@hse.ie, tel: 061 461302
National Lead and Division		John Hennessy, National Director, Primary Care Division, Health Service Executive.

<b>Prima</b>	ry Care - Oral Health	Scheduled Assessment
	,	
1	KPI title	Number of new patients attending for Scheduled Assessment
2	KPI Description PC32	A 'New Patient' is any patient who is being seen for the first time in any particular course of treatment and therefore does not have an existing treatment plan. 'Course of treatment' in this instance may refer to an examination only and does not imply that any active treatment is required. It should be noted that where any existing course of treatment exceeds 12 months in length it must be considered to have expired/been completed and the patient should be (re)assessed as a "new patient".  A 'Scheduled Assessment' is any assessment or examination of a patient which has been organised in a planned way such as for children in targeted school classes or patients accessed in a planned manner through any special needs centre/unit etc. In essence, any assessment which is not unscheduled falls into this category.
3	KPI Rationale	To monitor the number of new patients accessing the dental service in the reporting period as a proportion of those eligible.
	Indicator Classification	Please tick Indicator Classification this indicator applies to:  ☑ 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 2016	The target will relate only to children in the three 'target classes', including home-schooled, and will be equal to 100% of an appropriate single year of age in each case as per the 2011 census.
5	KPI Calculation	The number of patients assessed will be returned separately for children and adults with the cut-off point being their 16th birthday. Children will be further sub-divided according to the age group/targeted school class to which they belong as follows- 6-8 years of age / 1st or 2nd Class, 9-10 years of age / 3rd or 4th Class, 11-13 years of age / 5th or 6th Class, Any other patient less than 16 years of age. Classes should be chosen such that in general the children could be expected to be aged 11-13, 9-10, and 6-8 years of age. The term 'assessment' should be considered as encompassing any screening, inspection or examination with the person being counted and returned once even if the service arrangements include a two (or more)-stage process such as screening or inspection in school followed by an examination in the dental surgery.
6	Data Source Data Completeness Data Quality Issues	Data is submitted by each Service Area to the National Business Intelligence Unit. The BIU will liaise with the National Oral Health Lead for validation purposes. Data to be received from all areas nationally - Data incomplete
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected: □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	All children under 16 years of age and adult medical-card holders are eligible for dental care. In general the only adults who attend HSE dental clinics will have special needs.
9	Minimum Data Set	Demographic and clinical details are captured electronically or manually
10	International Comparison KPI Monitoring	KPI will be monitored :
	_	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details: Please indicate who is responsible at a local level for monitoring this KPI: Principal Dental Surgeon
12	KPI Reporting Frequency	Indicate how often the KPI will be reported:  □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies  □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)  □ Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation − for example over a geographical location:  □ National □ Regional □ Hospital Group □ Hospital □ CHO □ ISA □ LHO □ County □ Institution □ Other − give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported:  ☑ Performance Assurance Report □Other – give details:
16	Web link to data	gra account.
17	Additional Information	
Contact /Speciali	details for Data Manager st Lead	Katherine Cregan, Information Analyst email: katherine.cregan@hse.ie tel: 046 9251312  Dympna Kavanagh, National Oral Health Office, dympna.kavanagh@hse.ie, tel: 061 461302
	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.
		point retinessy, inational director, Frinary Gare Division, fleatith Service executive.

1	KPI title	Number of your action to ettending for Unacheduled Accessment
2	KPI Description	Number of new patients attending for Unscheduled Assessment  A 'New Patient' is any patient who is being seen for the first time in any particular course of treatment and therefore doe
2	PC33	not have an existing treatment plan. 'Course of treatment' in this instance may refer to an examination only and does
	F033	
		not imply that any active treatment is required. It should be noted that where any existing course of treatment exceeds
		12 months in length it must be considered to have expired/been completed and the patient should be (re)assessed as a
		"new patient".
		An 'Unscheduled Assessment' is any assessment or examination of a patient which has not been organised or initiated
		by the service. An 'Unscheduled Assessment' is one which has been initiated by the patient/parent/carer who contacts
		the dental service seeking care or advice. Such an attendance is often considered to be an 'emergency' or 'casual'
		attendance. The patient may have been given an appointment to attend for this unscheduled assessment or may turn up without any appointment.
3	KPI Rationale	To improve the underlying health of the population. A low proportion of unscheduled assessments accessing the service
3	KFI Kationale	is an indicator of better underlying health.
	Indicator Classification	Please tick Indicator Classification this indicator applies to:
	indicator Classification	Prease tick indicator classification this indicator applies to.  ☐ 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 2016	< 20% of the number seen for scheduled assessment
5	KPI Calculation	The number of patients assessed will be returned separately for children and adults, with the cut-off point being their
٠	Na i Galculation	16th birthday. These will then be collated to provide the overall total.
6	Data Source	Data is submitted by each Service Area to the National Business Intelligence Unit. The BIU will liaise with the National
٠	Data Completeness	Oral Health Lead for validation purposes. Data to be received from all areas nationally - Data incomplete
	Data Quality Issues	Total House Education validation purposes. But to be received from all droug hattering but incomplete
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected:
•	,	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	All children under 16 years of age and adult medical-card holders are eligible for dental care. In general the only adults
		who attend HSE dental clinics will have special needs.
9	Minimum Data Set	Demographic and clinical details are captured electronically or manually
10	International Comparison	
11	KPI Monitoring	KPI will be monitored :
		□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
		Please indicate who is responsible at a local level for monitoring this KPI: Principal Dental Surgeon
12	KPI Reporting Frequency	Indicate how often the KPI will be reported:
	ra rasporting resquency	□ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually □ Other – give details:
13	VDI non out noniced	
13	KPI report period	Indicate the period to which the data applies
		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)
		Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – for example over a geographical location:
14	KFI Reporting Aggregation	☑ National □ Regional □ Hospital Group □ Hospital ☑ CHO □ ISA ☑ LHO
		□ County □ Institution □ Other – give details:
15	KPI is reported in which	Indicate where the KPI will be reported:
	reports?	□ Performance Assurance Report □ Other – give details:
16	Web link to data	giro admid.
17	Additional Information	
	•	Katherine Cregan, Information Analyst email: katherine.cregan@hse.ie tel: 046 9251312
	details for Data Manager	Dympna Kavanagh, National Oral Health Office, dympna.kavanagh@hse.ie, tel: 061 461302
Special	ist Lead	- Student Landing Control of the Con
	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

Prima	ry Care - Oral Health	New patients who commenced treament
1	KPI title	Percentage of new patients who commenced treatment within 3 months of assessment
	KPI Description	This metric is a subset of the those patients who attend for scheduled assessment.
	PC34 & PC34A	As the HSE's routine dental services are delivered in a planned way based on need rather than demand, every patient
	1 004 01 0047	who attends for "unscheduled assessment" is seeking emergency care and will require some treatment, even if that
		treatment consists of no more than reassurance or advice. In the majority of such cases the treatment is commenced,
		often completed, on the day of the unscheduled assessment, therefore unscheduled assessment is not included.
		on pictor, on the day of the unsolved assessment, therefore unsolved assessment is not included.
3	KPI Rationale	To monitor waiting time from assessment to commencement of treatment.
	Indicator Classification	Please tick Indicator Classification this indicator applies to:
		☐ 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 2016	NSP 2016 Target National - 80%
5	KPI Calculation	No of new patients needing further care who commenced treatemnt within 3 months
		Total number of patients needing further care who commenced treatment
6	Data Source	Data is submitted by each Service Area to the National Business Intelligence Unit. The BIU will liaise with the National
	Data Completeness	Oral Health Lead for validation purposes. Data to be received from all areas nationally - Data incomplete
	Data Quality Issues	
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected:
_	T 0 1111	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	All children under 16 years of age and adult medical-card holders are eligible for dental care. In general the only adults
		who attend HSE dental clinics will have special needs.
9	Minimum Data Set	Demographic and clinical details are captured electronically or manually
10	International Comparison	
11	KPI Monitoring	KPI will be monitored:
		□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
		Please indicate who is responsible at a local level for monitoring this KPI: Prinicipal Dental Surgeon
12	KPI Reporting Frequency	Indicate how often the KPI will be reported:
		□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies
		©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	Undicate the level of pagagation of a every a geographical location:
14	KPI Reporting Aggregation	Indicate the level of aggregation – for example over a geographical location:  ☑ National □ Regional □ Hospital Group □ Hospital ☑ CHO □ ISA ☑ LHO
		□ County □ Institution □ Other – give details:
15	KPI is reported in which	Indicate where the KPI will be reported:
13	reports?	☑ Performance Report □ Other – give details:
16	Web link to data	gire detaile.
17	Additional Information	
		Katherine Cregan, Information Analyst email: katherine.cregan@hse.ie tel: 046 9251312
	details for Data Manager	Dympna Kavanagh, National Oral Health Office, dympna.kavanagh@hse.ie, tel: 061 461302
/Speciali	St Lead	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
National	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

1111	nary Care: Healthc	are Associated Infections: Medication Management
1	KPI Title	Healthcare Associated Infections: Medication Management - Consumption of antibiotics in community settings (defined daily doses per 1,000 inhabitants per day)
	KPI Description PC102	Consumption of antibiotics in ambulatory (non-hospital) setting. Monthly rate reported as defined daily doses (DDD) per 1,000 population per day (DID)
		Numerator data: Aggregate data on wholesale supply of systemic antimicrobials to community pharmacies, purchased from IMS Health Inc. (Accounts for at least 95% of community antibiotic sales. Prescription level data not available). Updated ATC coding and DDD definitions from World Health Organisation (WHO) (Changes to ATC coding and DDD definitions from WHO can impact on interpretation of results).
3	KPI Rationale	Community antibiotic use is strongly linked to antimicrobial resistance, which is a major public health threat.
	KPI Rationale Indicator Classification	To monitor waiting time from assessment to commencement of treatment.  Please tick Indicator Classification this indicator applies to:  ☑ 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 2016	NSP 2016 Target <21.7
5	KPI Calculation	Monthly rate reported as defined daily doses (DDD) per 1,000 population per day (DID)  Numerator data: Aggregate data on wholesale supply of systemic antimicrobials to community pharmacies, purchased from IMS Health Inc.  Denominator data: CSO census data  Other data: Updated ATC coding and DDD definitions from World Health Organisation (WHO)
6	Data Source	Since March 2007 the Health Protection Surveillance Centre (HPSC) has been co-ordinating the publication of data relating to antimicrobial consumption for acute public hospitals in Ireland.
	Data Completeness	100% Complete
	Data Quality Issues	Changes to ATC coding and DDD definitions from WHO can impact on interpretation of results. Does not represent prescription level data.
7	Data Collection Frequency	Daily Weekly Monthly ☑ Quarterly Bi-annually Annually Other – give details:
8	Tracer Conditions	Rates of penicillin and macrolide resistance among invasive strains of Streptococcus pneumoniae (EARS-Net data, via HPSC)
9	Minimum Data Set	Quarterly data supply from IMS Health
10	International Comparison	Uses WHO-approved methodology. Part of Europe-wide standardised surveillance programme (European Surveillance o Antimicrobial Consumption (ESAC) network). National data from all participating European countries available for 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: LHO Managers
12	KPI Reporting Frequency	
13	KPI report period	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)
		Biannually
14	KPI Reporting Aggregation	☑ National ☐ Regional ☐ Hospital Group ☐ Hospital ☐ CHO ☐ ISA ☐ LHO ☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports ?	Corporate Plan Report ☑ Performance Report Other – give details:
16	Web link to data	http://www.hpsc.ie/hpsc/A-
17	Additional Information	Z/MicrobiologyAntimicrobialResistance/EuropeanSurveillanceofAntimicrobialConsumptionESAC/SurveillanceReports/ Reports on community antibiotic consumption for participating European countries available at www.ecdc.eu
	 act details for Data ager /Specialist Lead	Dr. Robert Cunney, HPSC robert.cunney@hse.ie Tel: 01 8765300 Katherine Cregan, Information Analyst email: katherine.cregan@hse.ie tel: 046 9251312
latio	onal Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

Prima	ry Care - Psychology	
1	KPI title	No of patients referrals
2	KPI Description PC38	The number of referrals (by age band) received in the month that have been accepted. To include new and re- referrals (ie. previously discharged). Each referral should be date stamped on the day it is received and this is used
	PG30	las the referral date.
3	KPI Rationale	This KPI allows for planning and managment in relation to staffing and resource allocation in relation to demand.
· ·	THE TRACTORIAN	Review of the throughput also facilitates recognition of emerging trends and allows for a management response to
		same.
	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 2016	DOP 2016 Target National -12261
		CHO 1 - 1443 ; CHO 2 - 1312 ; CHO 3 - 416 ; CHO 4 - 1096 ; CHO 5 - 1403 ; CHO 6 - 1179 ; CHO 7 - 1467 ;
		CHO 8 - 2589; CHO 9 - 1356
5	KPI Calculation	This is a count of the number of referrals accepted in the reporting month
6	Data Source	Patient records - Psychology Manager - LHO - CHO - BIU
	Data Completeness	
7	Data Quality Issues	Indicate have after the date to consent the I/DI will be called a
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected  □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	1 1 1 1
9	Minimum Data Set	As per HSE eligibility guidelines  Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel
9	Willimum Data Set	numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom
	· ·	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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored
		and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the
		NSP).
40	I/DI	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies:
		☑ 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)
		Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance
	.1	for example over a geographical location.
		☑ National ☐ Regional ☑ CHO ☑ LHO Area ☐ Hospital
		☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which	Indicate where the KPI will be reported for example:
	reports?	□Performance Assurance Report □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
Contact	details for Data Manager	Katherine Cregan, Information Analyst email: katherine.cregan@hse.ie tel: 046 9251312
/Speciali		Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
National	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

Primary Care - Psychology		
Tillia	ly dure it dyonology	
1	KPI title	Existing patients seen in the month
2	KPI Description	An existing patient is a patient who has already attended the service and is an open case. Each patient is only
	PC39	included once in the count for the reporting month. This includes individuals who attend individual appointments or
		group sessions.
3	KPI Rationale	This KPI allows for planning and managment in relation to staffing and resource allocation in relation to demand.
		Review of the throughput also facilitates recognition of emerging trends and allows for a management response to
		same.
	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
		☐ Person Centred Care ☐ Ellective Care ☐ Sale Care ☐ Sale Care ☐ Workforce
		☐ Use of Resources ☐ Governance, Leadership and Management
4	KPI Target 2016	DOP 2016 Target National -2626
-	Titl Turget 2010	CHO 1 - 630 ; CHO 2 - 260 ; CHO 3 - 118 ; CHO 4 - 219 ; CHO 5 - 262 ; CHO 6 - 226; CHO 7 - 194 ; CHO 8 -
		591; CHO 9 - 126
5	KPI Calculation	This is a count of the number of existing patients seen in the month. Each patient is only included once in the count.
6	Data Source	Patient records - Psychology Manager - LHO - CHO - BIU
	Data Completeness	To commence reporting in 2015
	Data Quality Issues	
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected
		□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel
40	latera d'anal Orana d'ana	numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom
		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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored
		and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the
	g.roquono,	NSP).
		□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies:
		☑ 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)
		☐ Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance
		for example over a geographical location.
		☑ National ☐ Regional ☑ CHO ☑ LHO Area ☐ Hospital
15	KPI is reported in which	☐ County ☐ Institution ☐ Other – give details:  Indicate where the KPI will be reported for example:
13	reports?	☐ Performance Assurance Report ☐ Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
		and the state of t
17	Additional Information	
Contact	details for Data Manager	Katherine Cregan, Information Analyst email: katherine.cregan@hse.ie tel: 046 9251312
/Specialis		Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
National	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

Prima	ry Care - Psychology	
1	KPI title	New Patients Seen in the Month
2	KPI Description PC40	This is a count of the number of new patients seen in the reporting month. A new patient is a patient that is seen for the first time in this episode of care i.e includes re-referrals to the service. An appointment is considered to be face face contact with a patient and may be for assessment/treatment/service.
3	KPI Rationale	This KPI allows for planning and managment in relation to staffing and resource allocation in relation to demand. Review of the throughput also facilitates recognition of emerging trends and allows for a management response to same.
	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  Governance, Leadership and Management
4	KPI Target 2016	DOP 2016 Target National -9367 CHO 1 - 1449 ; CHO 2 - 1147 ; CHO 3 - 190 ; CHO 4 - 614 ; CHO 5 - 880 ; CHO 6 - 879; CHO 7 -1368 ; CHO 8 - 2229; CHO 9 - 611
5	KPI Calculation	This is a count of the number of new patients seen in the reporting month.
6	Data Source Data Completeness Data Quality Issues	Patient records - Psychology Manager - LHO - CHO - BIU To commence reporting in 2015
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom 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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).  □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies:  ☑ 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)  ☐ Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location.  ☑ National ☐ Regional ☑ CHO ☑ LHO Area ☐ Hospital ☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported for example:  ☑Performance Assurance Report
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
Contact (	details for Data Manager st Lead	Katherine Cregan, Information Analyst email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
National	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

Prima	ry Care - Psychology	
4	KPI title	Total No. Of nationto on the treatment waiting list at the and of the repetition and in
2	KPI Description PC103 PC103A	Total No. Of patients on the treatment waiting list at the end of the reporting period  The purpose of this metric is to capture the number of patients (by age band and wait time) awaiting treatment (either individual or in a group environment) at the end of the reporting month and the length of time (in weeks) they are
	PC103B PC103C PC103D	waiting. It includes all patients on the waiting list at the end of the reporting month. Patients are only removed from the waiting list when they have been seen for a first appointment, it is not sufficient for a patient to have been offered an appointment.
	PC103E	Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment may occur at the same appointment. However, where a patient is assessed and must still wait for treatment it is this waiting time that is reported from referral date.  Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged and must be re-referred. This metric should not include patients overdue for review
3	KPI Rationale Indicator Classification	The purpose of this metric is to monitor waiting lists and reduce wait times for patients.  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 2016	DOP 2016 Target National -6028 CHO 1 - 882 ; CHO 2 - 702 ; CHO 3 - 422 ; CHO 4 - 911 ; CHO 5 - 727 ; CHO 6 - 542; CHO 7 -609 ; CHO 8 - 1114; CHO 9 - 119
5	KPI Calculation	The waiting time is measured from date of referral i.e. date of receipt of the referral by the service to the end of reporting month and includes patients waiting for assessment. There are five waiting time bands:  0 - less than or equal to 12 weeks greater than 12 weeks and less than or equal to 26 weeks greater than 26 weeks and less than or equal to 39 weeks
		greater than 39 weeks and less than or equal to 52 weeks greater than 52 weeks
6	Data Source Data Completeness Data Quality Issues	Patient records - Psychology Manager - LHO - CHO - BIU
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set  International Comparison	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.  Not applicable
11	•	Indicate how often the KPI will be monitored and by whom
	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:  Daily
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).  □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies:  ☑ 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)
14	KPI Reporting Aggregation	□ Rolling 12 months (previous 12 month period) □ Other – give details: Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance
		for example over a geographical location. ☑ National □ Regional ☑ CHO ☑ LHO Area □ Hospital □ County □ Institution □ Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported for example:  Performance Assurance Report Other – give details: Operational Plan
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
Contact o	details for Data Manager st Lead	Katherine Cregan, Information Analyst email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
National	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

Prima	ry Care - Psychology	
1	KPI title	% on waiting list for treatment less than or equal to 52 weeks
2	KPI Description PC103F (No) & PC103G (%)	The purpose of this metric is to capture the number of patients (by age band and wait time) awaiting treatment (either individual or in a group environment) at the end of the reporting month and the length of time (in weeks) they are waiting. It includes all patients on the waiting list at the end of the reporting month. Patients are only removed from the waiting list when they have been seen for a first appointment, it is not sufficient for a patient to have been offered an appointment.
		Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment may occur at the same appointment. However, where a patient is assessed and must still wait for treatment it is this waiting time that is reported from referral date.  Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged and
		must be re-referred. This metric should not include patients overdue for review
3	KPI Rationale	The purpose of this metric is to monitor waiting lists and reduce wait times for patients.
	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
4	KPI Target 2016	☑ Use of Resources ☐ Governance, Leadership and Management
5	KPI Calculation	NSP 2016 Target National - 100%
Ü		sum(No of psychology patients on the treatment waiting list at the end of the reporting period by wait band $0 - < 12$ weeks, $>12$ weeks, $>26$ weeks, $>26$ weeks but $\le 39$ weeks, $>39$ weeks but $\le 52$ weeks and agebands $0$ -4yrs, $5$ -17yrs, 18-64yrs and $65$ yrs+) / sum (No of psychology patients on the treatment waiting list at the end of the reporting period by wait band $0 - < 12$ weeks, $>12$ weeks, $>26$ weeks, $>26$ weeks but $\le 39$ weeks, $>39$ weeks but $\le 52$ weeks, $>52$ weeks and agebands $0$ -4yrs, $5$ -17yrs, 18-64yrs and $65$ yrs+) *100
6	Data Source	Patient records - Psychology Manager - LHO - CHO - BIU
	Data Completeness	
7	Data Quality Issues Data Collection Frequency	Indicate how often the data to support the KPI will be collected
8	Tracer Conditions	□ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually □ Other – give details:  As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel
		numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom 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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).
13	KPI report period	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details: Indicate the period to which the data applies:
13	RETTEPORT PERIOU	<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> <li>□ Other – give details:</li> </ul>
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location.  ☑ National ☐ Regional ☑ CHO ☑ LHO Area ☐ Hospital ☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported for example:  ☑Performance Assurance Report □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
/Specialis		Katherine Cregan, Information Analyst email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.
National	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

- mila	ry Care - Psychology	
1	KPI Title	% on waiting list for treatment less than or equal to 39 weeks
	KPI Description	The purpose of this metric is to capture the number of patients (by age band and wait time) awaiting treatment (either individual or in a group environment) at the end of the reporting month and the length of time (in weeks) they are waiting. It includes all patients on the waiting list at the end of the reporting month. Patients are only removed from the waiting list when they have been seen for a first appointment, it is not sufficient for a patient to have been offered an appointment.  Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment may occur at the same appointment. However, where a patient is assessed and must still wait for treatment it is this waiting time that is reported from referral date.  Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged and must be re-referred. This metric should not include patients overdue for review
	PC103H (No) & PC103I (%)	
3	KPI Rationale	To monitor waiting lists and reduce the length of time patients are waiting for an assessment
	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
		·
4	KPI Target 2016	Workforce ☐ Use of Resources☐ Governance, Leadership and Management ☐ DOP 2016 Target National - 90%
	KPI Calculation	sum(No of psychology patients on the treatment waiting list at the end of the reporting period by wait band 0 - < 12 weeks, >12 weeks - ≤ 26 weeks, >26 weeks but ≤ 39 weeks, and agebands 0-4yrs, 5-17yrs, 18-64yrs and 65yrs+) / sum (No of psychology patients on the treatment waiting list at the end of the reporting period by wait band 0 - < 12 weeks, >12 weeks - ≤ 26 weeks, >26 weeks but ≤ 39 weeks, >39 weeks but ≤ 52 weeks, >52 weeks and agebands 0-4yrs, 5-17yrs, 18-64yrs and 65yrs+) * 100
6	Data Source	Patient records - Psychology Manager - LHO - CHO - BIU
	Data Completeness	Completeness - 100% data available from all HSE Areas Nationally
	Data Quality Issues	No known data quality issues at this point
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
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: Occupational Therapy Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
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)
	KPI Reporting Aggregation	☑ National ☐ Regional ☐ Hospital Group ☐ Hospital ☑ CHO ☐ ISA ☑ LHO ☐ County ☐ Institution ☐ Other – give details:
	KPI is reported in which reports ?	☑Performance Assurance Report ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performancereports
	Additional Information	
Contact of Specialis	details for Data Manager / t Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
National	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

Prima	ry Care - Psychology	
riilidi	y Care - Psychology	
1	KPI Title	% on waiting list for treatment less than or equal to 26 weeks
2	KPI Description	The purpose of this metric is to capture the number of patients (by age band and wait time) awaiting treatment (either individual or in a group environment) at the end of the reporting month and the length of time (in weeks) they are waiting. It includes all patients on the waiting list at the end of the reporting month. Patients are only removed from the waiting list when they have been seen for a first appointment, it is not sufficient for a patient to have been offered an appointment. Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment may occur at the same appointment. However, where a patient is assessed and must still wait for treatment it is this waiting time that is reported from referral date.  Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged and must be re-referred. This metric should not include patients overdue for review
	PC103J (No) & PC103K (%)	
3	KPI Rationale	To monitor waiting lists and reduce the length of time patients are waiting for an assessment
	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
4	KDI Tamat 2040	Workforce ☐ Use of Resources☐ Governance, Leadership and Management ☐
5	KPI Target 2016 KPI Calculation	DOP 2016 Target National - 80%
5	RPI Calculation	sum(No of psychology patients on the treatment waiting list at the end of the reporting period by wait band $0 - < 12$ weeks, $>12$ weeks, $> 26$ weeks, and agebands 0-4yrs, 5-17yrs,18-64yrs and 65yrs+) / sum (No of psychology patients on the treatment waiting list at the end of the reporting period by wait band $0 - < 12$ weeks, $>12$ weeks, $>26$ weeks, $>26$ weeks but $\le 39$ weeks, $>39$ weeks but $\le 52$ weeks, $>52$ weeks and agebands 0-4yrs, 5-17yrs,18-64yrs and 65yrs+) *100
6	Data Source	Patient records - Psychology Manager - LHO - CHO - BIU
	Data Completeness	Completeness - 100% data available from all HSE Areas Nationally
	Data Quality Issues	No known data quality issues at this point
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
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: Occupational Therapy Manager. 'KPI's are monitored and
12	KPI Reporting Frequency	reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO  □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)
	KPI Reporting Aggregation	☑ National ☐ Regional ☐ Hospital Group ☐ Hospital ☑ CHO ☐ ISA ☑ LHO ☐ County ☐ Institution ☐ Other – give details:
	KPI is reported in which reports ?	☑Performance Assurance Report ☐Other – give details:
	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performancereports
	Additional Information	
Contact of Specialis	details for Data Manager / t Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
National	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

individual or in a group environment) at the end of the reporting month and the length of time (in weeks) they are waiting. It includes all patients on the waiting list at the end of the reporting month. Patients are only removed from the waiting list when they have been seen for a first appointment, it is not sufficient for a patient to have been offered an appointment. Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment ma occur at the same appointment. However, where a patient is assessed and must still wait for treatment it is this waiting time that is reported from referral date.  Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged and must be re-referred. This metric should not include patients overdue for review  PC103L (No) & PC103M (%)  3 KPI Rationale		ry Care - Psychology	
The purpose of this metric is to capture the number of patients (by age band and wait time) availing treatment (with individual or in a group environment) at the end of the reporting month. Patients are only removed from the waiting list when they have been seen for a first appointment, it is not sufficient for a patient to have been offered an appointment.  Note the focus of this metric is on patients waiting ist at the end of the reporting month. Patients are only removed from the waiting list. When they have been seen for a first appointment, it is not sufficient for a patient to have been offered an appointment. However, where a patient is assessed and must still wait for treatment it is this waiting time the is reported from referred adia.  Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged and must still wait for treatment it is this waiting time. If they do not respond within four weeks then they are discharged and must still wait for treatment it is this waiting time. If they do not respond within four weeks then they are discharged and must still wait for treatment was the re-referred. This metric should not include patients overdue for review.  PC 1031L (No) & PC 103M (%)  To monitor vaiting lists and reduce the length of time patients are waiting for an assessment.  To monitor vaiting lists and reduce the length of time patients are waiting for an assessment.  To monitor vaiting lists and reduce the length of time patients are waiting for an assessment.  To monitor vaiting lists and reduce the length of time patients are waiting for an assessment.  To monitor vaiting lists and reduce the length of time patients are waiting for an assessment.  To monitor vaiting lists and reduce the length of time patients are waiting for an assessment.  To monitor vaiting lists and reduce the length of time patients are waiting for an assessment.  To monitor vaiting lists and reduce the length of time patients are waiting for an assessment.  To monitor	1	KPI Title	% on waiting list for treatment less than or equal to 12 weeks
RPI Rationale	2	KPI Description	The purpose of this metric is to capture the number of patients (by age band and wait time) awaiting treatment (eithe individual or in a group environment) at the end of the reporting month and the length of time (in weeks) they are waiting. It includes all patients on the waiting list at the end of the reporting month. Patients are only removed from the waiting list when they have been seen for a first appointment, it is not sufficient for a patient to have been offered an appointment.  Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment may occur at the same appointment. However, where a patient is assessed and must still wait for treatment it is this waiting time that is reported from referral date.  Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged and
RPI Rationale		PC103L (No) & PC103M (%)	
Indicator Classification Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases yo may need to choose two).  □Person Centred Care □Effective Care  Safe Care □ □Effective Care □Effective Care  Safe Care □ □Effective Care □Company  □	3		To monitor waiting lists and reduce the length of time patients are waiting for an assessment
Workforce	-	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
4 KPI Target 2016  KPI Calculation  Sum(No of psychology patients on the treatment waiting list at the end of the reporting period by wait band 0 - < 12 weeks, and agebands 0-4yrs, 5-17yrs, 18-64yrs and 65yrs+) / sum (No of psychology patients on the treatment waiting list at the end of the reporting period by wait band 0 - < 12 weeks, and agebands 0-4yrs, 5-17yrs, 18-64yrs and 65yrs+) / sum (No of psychology patients on the treatment waiting list at the end of the reporting period by wait band 0 - < 12 weeks, -> 12 weeks, -> 26 weeks, -> 26 weeks, but ≤ 52 weeks, -> 52 weeks and agebands 0-4yrs, 5-17yrs, 18-64yrs and 65yrs+) *1000  Data Completeness  Completeness - 100% data available from all HSE Areas Nationally  Data Coulity Issues No known data quality issues at this point  Data Collictor Frequency  Data Collictor Frequency  Data Collictor Frequency  Data Collictor Frequency  Minimum Data Set Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tell numbers, eligibility details etc.)  No  No  KPI Monitoring  KPI will be monitored on a (please indicate below) basis:  Daily □Weekly ②Monthly □Quarterfy □Bi-annually □Annually □Other - give details:  Please indicate who is responsible for monitoring this KPI: Occupational Therapy Manager. 'KPI's are monitored an reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO  12 KPI Reporting Frequency  Daily □Weekly ②Monthly □Quarterfy □Bi-annually □Annually □Other - give details:  28 Current (e.g. daily data reported in that same day of activity, monthly data reported within the same month of activity)  □Quarterfy in arrears (June data reported in quarter 2)  □Rolling 12 months (previous 12 months)  Please indicate who is responsible of month period)  Weekly ②Monthly □Quarterfy □Bi-annually □Annually □Other - give details:  Contact details			
Sum(No of psychology patients on the treatment waiting list at the end of the reporting period by wait band 0 - < 12 weeks, and agebands 0-4yrs, 5-17yrs, 18-6yrs and 65yrs+) / sum (No of psychology patients on the treatment waiting list at the end of the reporting period by wait band 0 - < 12 weeks, >12 weeks, >26 we		VDI Tarred 0040	· · · · · · · · · · · · · · · · · · ·
weeks, and agebands 0-4yrs, 5-17yrs, 18-64yrs and 65yrs+) / sum (No of psychology patients on the treatment waiting list at the end of the reporting period by wait band 0 - < 12 weeks, >26 weeks < >26 weeks but ≤ 39 weeks but ≤ 52 weeks, >52 weeks and agebands 0-4yrs, 5-17yrs, 18-64yrs and 65yrs+) *100  Bata Source Patient records - Psychology Manager - LHO - CHO - BIU  Data Completeness Completeness - 100% data available from all HSE Areas Nationally  Data Quality Issues No known data quality issues at this point  To bata Collection Frequency Data Quality issues at this point  Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.)  No  Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility pulselines Please indicate who is responsible for monitoring this KPI: Occupational Therapy Manager. 'KPI's are monitored an reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO  Please indicate who is responsible for monitoring this KPI: Occupational Therapy Manager. 'KPI's are monitored an reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO  Clourent (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)  Nettorial Preformance Assurance Report □Other – give details:  Periormance Assurance Report □Other –			
Data Completeness Completeness - 100% data available from all HSE Areas Nationally  Data Quality Issues No known data quality issues at this point  7 Data Collection Frequency	5	KPI Calculation	weeks, and agebands 0-4yrs, 5-17yrs,18-64yrs and 65yrs+) / sum (No of psychology patients on the treatment waiting list at the end of the reporting period by wait band $0 - < 12$ weeks, >12 weeks - $\leq 26$ weeks, >26 weeks but
Data Quality Issues  No known data quality issues at this point  Data Collection Frequency  Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:  **Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.  No  International Comparison  KPI will be monitored on a (please indicate below) basis: □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details: □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details: □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details: □Experiment (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 □Reporting Aggregation □Mational □Regional □Hospital Group □Hospital ☑ CHO □ ISA ☑ LHO □County □ Institution □ Other – give details: □Performance Assurance Report □Other – give details: □Performance A	6		
Data Collection Frequency			
Tracer Conditions		•	
Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.    No   International Comparison   No	7	Data Collection Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
numbers, eligibility details etc.    10   International Comparison   No	8	Tracer Conditions	
International Comparison   No	9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel
KPI Monitoring			numbers, eligibility details etc.
Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:  Please indicate who is responsible for monitoring this KPI: Occupational Therapy Manager. 'KPI's are monitored an reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO  12 KPI Reporting Frequency □Daily □Weekly ☑Monthly □Quarterly □Bi-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 □ Hospital Group □ Hospital ☑ CHO □ ISA ☑ LHO  □ County □ Institution □ Other – give details:  15 KPI is reported in which reports?  16 Web link to data http://www.hse.ie/eng/services/Publications/corporate/performancereports  17 Additional Information  Contact details for Data Manager / Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division	10	International Comparison	No
Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:  Please indicate who is responsible for monitoring this KPI: Occupational Therapy Manager. 'KPI's are monitored an reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO  12 KPI Reporting Frequency □Daily □Weekly ☑Monthly □Quarterly □Bi-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 □ Hospital Group □ Hospital ☑ CHO □ ISA ☑ LHO  □ County □ Institution □ Other – give details:  15 KPI is reported in which reports?  16 Web link to data http://www.hse.ie/eng/services/Publications/corporate/performancereports  17 Additional Information  Contact details for Data Manager / Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division	11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
Please indicate who is responsible for monitoring this KPI: Occupational Therapy Manager. 'KPI's are monitored an reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO    Very Reporting Frequency   Daily   Weekly   Monthly   Quarterly   Bi-annually   Annually   Other – give details:		· ·	i '
reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO  12 KPI Reporting Frequency			
KPI Reporting Frequency			Please indicate who is responsible for monitoring this KPI: Occupational Therapy Manager. 'KPI's are monitored and
Meditional Information   Meditional Information   Meditional Information   Meditional Information   Meditional Information   Information   Meditional Information   Medit			reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
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   Hospital Group   Hospital Group G	12	KPI Reporting Frequency	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
County ☐ Institution ☐ Other – give details:    SPerformance Assurance Report ☐ Other – give details:   Performance Assurance Report ☐ Other – give details:   Performance Assurance Report ☐ Other – give details:   Reports ?	13	KPI report period	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)
reports?  16 Web link to data <a href="http://www.hse.ie/eng/services/Publications/corporate/performancereports">http://www.hse.ie/eng/services/Publications/corporate/performancereports</a> 17 Additional Information  Contact details for Data Manager / Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division	14	KPI Reporting Aggregation	☐ County ☐ Institution ☐ Other – give details:
16 Web link to data <a href="http://www.hse.ie/eng/services/Publications/corporate/performancereports">http://www.hse.ie/eng/services/Publications/corporate/performancereports</a> 17 Additional Information  Contact details for Data Manager / Specialist Lead  Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312  Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division	15		☑Performance Assurance Report ☐Other – give details:
17 Additional Information Contact details for Data Manager / Specialist Lead Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division	16		http://www.hse.ie/eng/services/Publications/corporate/performancereports
Contact details for Data Manager / Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division			
	Contact o	details for Data Manager /	, , , , , , , , , , , , , , , , , , , ,

Prima	ry Care - Podiatry	
4	KPI title	No of a first suffered
2	KPI Description	No of patients referrals
2	PC45	The number of referrals (by age band) received in the month that have been accepted. To include new and re-referrals (ie. previously discharged). Each referral should be date stamped on the day it is received and this is used as the referral date.
	F043	previously discharged). Each referral should be date stamped on the day it is received and this is used as the referral date.
3	KPI Rationale	This KPI allows for planning and management in relation to staffing and resource allocation in relation to demand. Review of the throughput also facilitates recognition of emerging trends and allows for a management response to same.
	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 2016	DOP 2016 Target National -11589
		CHO 1 - 2407 ; CHO 2 - 2010 ; CHO 3 - 1305 ; CHO 4 - 1303 ; CHO 5 - 220 ; CHO 6 - No direct service ; CHO 7 - No direct
		service ; CHO 8 - 4344; CHO 9 - No direct service
5	KPI Calculation	This is a count of the number of referrals accepted in the reporting month
6	Data Source	Patient records - Podiatry Manager - LHO - CHO - BIU
	Data Completeness	Only collecting data from HSE direct services - system of collections of contract services in development
	Data Quality Issues	
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected
		□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility
		details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom
		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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed
		through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).
		□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies:
		☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)
		Monthly in agree (June date recented in July)
		☐ 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)
4.4	KPI Reporting Aggregation	Other – give details:
14	KET Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location.
		over a geographical location.  ☑ National □ Regional ☑ CHO ☑ LHO Area □ Hospital
		□ County □ Institution □ Other – give details:
15	KPI is reported in which	Indicate where the KPI will be reported for example:
13	reports?	□ Performance Assurance Report □ Other – give details: Operational Plan
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
		Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
Contact	details for Data Manager	Information Analyst: Katherine Cregan email: katherine.cregan@nse.le tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
/Speciali	ist Lead	popedatist Lead. Ditait Mulphy, flead of Planning, Pat Dunne, flead of Operations - Primary Care DIVISION
National	Load and Division	John Hannacov, National Director, Primary Cara Division, Health Carries Executive
ivational	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

Prima	ry Care - Podiatry			
Tima				
1	KPI title	Existing patients seen in the month		
2	KPI Description PC46	An existing patient is a patient who is currently attending the service and is an open case. This includes individuals who attend individual appointments or group sessions. Each patient is only included once in the count. Do not include patients that have been included under new patients seen for that months return.  Group sessions - If a patient attends three group sessions in a month, they will be counted once under 'No of patients seen' and three times under 'No of face to face contacts/visits/appointments'  For the purpose of recording this metric an appointment is considered to be face face contact with a patient.		
	KPI Rationale	This KPI allows for planning and managment in relation to staffing and resource allocation in relation to demand. Review of the throughput also facilitates recognition of emerging trends and allows for a management response to same.		
3	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 2016	DOP 2016 Target National -5210 CHO 1 - 1456 ; CHO 2 - 981 ; CHO 3 - 570 ; CHO 4 - 1580 ; CHO 5 - 60 ; CHO 6 - No direct service ; CHO 7 - No direct service ; CHO 8 - 563; CHO 9 - No direct service		
5	KPI Calculation	This is a count of the number of existing patients seen in the month. Each patient is only included once in the count.		
6	Data Source Data Completeness Data Quality Issues	Patient records - Podiatry Manager - LHO - CHO - BIU Only collecting data from HSE direct services - system of collections of contract services in development		
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:		
8	Tracer Conditions	As per HSE eligibility guidelines		
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.		
10	International Comparison	Not applicable		
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom 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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO		
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).  □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:		
13	KPI report period	Indicate the period to which the data applies:  ☐ 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)  ☐ Other – give details:		
	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location.  ☑ National □ Regional ☑ CHO ☑ LHO Area □ Hospital □ County □ Institution □ Other – give details:		
15	KPI is reported in which reports?	Indicate where the KPI will be reported for example:  ☑Performance Assurance Report (NSP) □Other – give details:		
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/		
17	Additional Information			
Contact o	details for Data Manager st Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division		
National	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.		

Prima	ry Care - Podiatry	
1	KPI title	New Patients Seen in the Month
2	KPI Description	This is a count of the number of new patients seen in the reporting month. A new patient is a patient that is seen for the first time
	PC47	in this episode of care i.e includes re-referrals to the service. An appointment is considered to be face face contact with a patient and may be for assessment/treatment/service.
3	KPI Rationale	This KPI allows for planning and managment in relation to staffing and resource allocation in relation to demand. Review of the throughput also facilitates recognition of emerging trends and allows for a management response to same.
	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	DOP 2016 Target National -8887
		CHO 1 - 1987 ; CHO 2 - 3100 ; CHO 3 - 752 ; CHO 4 - 1056 ; CHO 5 - 307 ; CHO 6 - No direct service ; CHO 7 - No direct service ; CHO 8 - 1685; CHO 9 - No direct service
5	KPI Calculation	This is a count of the number of new patients seen in the reporting month.
6	Data Source	Patient records - Podiatry Manager - LHO - CHO - BIU
	Data Completeness	Only collecting data from HSE direct services - system of collections of contract services in development
	Data Quality Issues	, , ,
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected
_	T 0 00	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom
	•	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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed
		through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).
		□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies:
		☑ 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)
		☐ Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example
		over a geographical location.
		☑ National ☐ Regional ☑ CHO ☑ LHO Area ☐ Hospital
		□ County □ Institution □ Other – give details:
15	KPI is reported in which	Indicate where the KPI will be reported for example:
	reports?	☑Performance Assurance Report ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
Contact	details for Data Manager	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
	details for Data Manager ist Lead	Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
National	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.
		position to the control of the contr

Prima	ry Care - Podiatry	
4	KPI title	No. Of nationals on the treatment waiting that at the and of the reposition points
2	KPI Description PC104	No. Of patients on the treatment waiting list at the end of the reporting period  The purpose of this metric is to capture the number of patients (by age band and wait time) awaiting treatment (either individual or
2	PC104A	in a group environment) at the end of the reporting month and the length of time (in weeks) they are waiting. It includes all
	PC104B	patients on the waiting list at the end of the reporting month. Patients are only removed from the waiting list when they have been
	PC104C	seen for a first appointment, it is not sufficient for a patient to have been offered an appointment.
	PC104D	Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment may occur at the
	PC104E	same appointment. However, where a patient is assessed and must still wait for treatment it is this waiting time that is reported
		from referral date.
		Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged and must be re-
		referred. This metric should not include patients overdue for review
3	KPI Rationale	The purpose of this metric is to monitor waiting lists and reduce wait times for patients.
٦	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to
	indicator Glassification	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 2016	DOP 2016 Target National -3186
	• •	CHO 1 - 819 ; CHO 2 -522 ; CHO 3 - 488 ; CHO 4 - 766 ; CHO 5 -22 ; CHO 6 - No direct service ; CHO 7 - No direct service
		; CHO 8 - 569; CHO 9 - No direct service
5	KPI Calculation	The waiting time is measured from date of referral i.e. date of receipt of the referral by the service to the end of reporting month
		and includes patients waiting for assessment. There are five waiting time bands:
		0 - less than or equal to 12 weeks
		greater than 12 weeks and less than or equal to 26 weeks
		greater than 26 weeks and less than or equal to 39 weeks
		greater than 39 weeks and less than or equal to 52 weeks
		greater than 52 weeks
6	Data Source	Patient records - Podiatry Manager - LHO - CHO - BIU
	Data Completeness	Only collecting data from HSE direct services - system of collections of contract services in development
	Data Quality Issues	
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected
_	Tona on One distance	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions Minimum Data Set	As per HSE eligibility guidelines
9	Winimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
10	International Comparison	Not applicable
	·	
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom
		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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed
12	KPI Reporting Frequency	through meetings between the Primary Care Division Operational Team and the CHO/LHO Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).
12	KET Reporting Frequency	indicate now often the KFT will be reported (at a National level tills will aligh with the agreed reporting unleitable in the NoF).
		□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies:
	port portou	☐ 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)
		☐ Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example
		over a geographical location.
		☑ National □ Regional ☑ CHO ☑ LHO Area □ Hospital
		□ County □ Institution □ Other – give details:
15	KPI is reported in which	Indicate where the KPI will be reported for example:
	reports?	☑Performance Assurance Report ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
		Information Analysts Katharina Cragge amails batharing gragge (%) as in tall 046 0054242
Contact	details for Data Manager	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
/Speciali	ist Lead	Operations Lead. Dualt Mulphy, nead of Flatilling, Fat Dutilie, nead of Operations - Primary Care Division
National	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.
Hauviidi	Lead and Division	ponin nennessy, ivalional bilector, Frinally Gate Division, nealth Service Executive.

	ry Care - Podiatry	
1	KPI title	% on waiting list for treatment less than or equal to 52 weeks
2	KPI Description PC104F(No) &PC104G(%)	The purpose of this metric is to capture the number of patients (by age band and wait time) awaiting treatment (either individual or in a group environment) at the end of the reporting month and the length of time (in weeks) they are waiting. It includes all patients on the waiting list at the end of the reporting month. Patients are only removed from the waiting list when they have been seen for a first appointment, it is not sufficient for a patient to have been offered an appointment.  Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment may occur at the
		same appointment. However, where a patient is assessed and must still wait for treatment it is this waiting time that is reported from referral date.  Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged and must be rereferred. This metric should not include patients overdue for review
3	KPI Rationale	The purpose of this metric is to monitor waiting lists and reduce wait times for patients.
	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  Welter Health and Wellbeing  Use of Information  Workforce
4	KPI Target 2016	☑ Use of Resources ☐ Governance, Leadership and Management  NSP 2016 Target National - 100%
5	KPI Calculation	sum(No of podiatry patients on the treatment waiting list at the end of the reporting period by wait band $0 - < 12$ weeks, >12 weeks - $\leq 26$ weeks, >26 weeks but $\leq 39$ weeks, >39 weeks but $\leq 52$ weeks and agebands 0-4yrs, 5-17yrs, 18-64yrs and 65yrs+)/sum (No of podiatry patients on the treatment waiting list at the end of the reporting period by wait band $0 - < 12$ weeks, >12 weeks, >26 weeks, >26 weeks but $\leq 39$ weeks, >39 weeks but $\leq 52$ weeks, >52 weeks and agebands 0-4yrs, 5-17yrs, 18 64yrs and 65yrs+) *100
6	Data Source	Patient records - Podiatry Manager - LHO - CHO - BIU
0	Data Completeness Data Quality Issues	Only collecting data from HSE direct services - system of collections of contract services in development
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom 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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).  □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies:  ☐ 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) □ Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location.  ☑ National □ Regional ☑ CHO ☑ LHO Area □ Hospital □ County □ Institution □ Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported for example:  ☑Performance Assurance Report ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
Contact (	details for Data Manager st Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
National	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

I IIIIIa	ry Care - Podiatry	
1	KPI title	% on waiting list for treatment less than or equal to 39 weeks
2	KPI Description PC104H(No) & PC104I(%)	The purpose of this metric is to capture the number of patients (by age band and wait time) awaiting treatment (either individual or in a group environment) at the end of the reporting month and the length of time (in weeks) they are waiting. It includes all patients on the waiting list at the end of the reporting month. Patients are only removed from the waiting list when they have been seen for a first appointment, it is not sufficient for a patient to have been offered an appointment.  Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment may occur at the same appointment. However, where a patient is assessed and must still wait for treatment it is this waiting time that is reported from referral date.  Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged and must be re-referred. This metric should not include patients overdue for review
3	KPI Rationale	The purpose of this metric is to monitor waiting lists and reduce wait times for patients.
	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  Setter Health and Wellbeing  Use of Information  Workforce  Use of Resources  Governance, Leadership and Management
4	KPI Target 2016	DOP 2016 Target National - 95%
5	KPI Calculation	sum(No of podiatry patients on the treatment waiting list at the end of the reporting period by wait band 0 - < 12 weeks, >12 weeks - ≤ 26 weeks, >26 weeks but ≤ 39 weeks, and agebands 0-4yrs, 5-17yrs, 18-64yrs and 65yrs+) / sum (No of podiatry patients on the treatment waiting list at the end of the reporting period by wait band 0 - < 12 weeks, >12 weeks - ≤ 26 weeks, >26 weeks but ≤ 39 weeks, >39 weeks but ≤ 52 weeks, >52 weeks and agebands 0-4yrs, 5-17yrs, 18-64yrs and 65yrs+)
6	Data Source	Patient records - Podiatry Manager - LHO - CHO - BIU
	Data Completeness Data Quality Issues	Only collecting data from HSE direct services - system of collections of contract services in development
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom 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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).
13	KPI report period	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Other – give details:  Indicate the period to which the data applies: ☑ 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) □ Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location.  ☑ National □ Regional ☑ CHO ☑ LHO Area □ Hospital □ County □ Institution □ Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported for example:  ☑Performance Assurance Report □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
	details for Data Manager st Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division

1	LEDI 411	
	KPI title	% on waiting list for treatment less than or equal to 26 weeks
2	KPI Description PC104J (No) & PC104K (%)	The purpose of this metric is to capture the number of patients (by age band and wait time) awaiting treatment (either individual or in a group environment) at the end of the reporting month and the length of time (in weeks) they are waiting. It includes all patients on the waiting list at the end of the reporting month. Patients are only removed from the waiting list when they have been seen for a first appointment, it is not sufficient for a patient to have been offered an appointment.  Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment may occur at the same appointment. However, where a patient is assessed and must still wait for treatment it is this waiting time that is reported from referral date.  Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged and must be re-referred. This metric should not include patients overdue for review
3	KPI Rationale Indicator Classification	The purpose of this metric is to monitor waiting lists and reduce wait times for patients.  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 2016	DOP 2016 Target National - 90%
5	KPI Calculation	sum(No of podiatry patients on the treatment waiting list at the end of the reporting period by wait band 0 - < 12 weeks, >12 weeks - ≤ 26 weeks, and agebands 0-4yrs, 5-17yrs,18-64yrs and 65yrs+) / sum (No of podiatry patients on the treatment waiting list at the end of the reporting period by wait band 0 - < 12 weeks, >12 weeks - ≤ 26 weeks, >26 weeks but ≤ 39 weeks, >39 weeks but ≤ 52 weeks, >52 weeks and agebands 0-4yrs, 5-17yrs,18-64yrs and 65yrs+)*100
6	Data Source Data Completeness Data Quality Issues	Patient records - Podiatry Manager - LHO - CHO - BIU Only collecting data from HSE direct services - system of collections of contract services in development
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom 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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).
13	KPI report period	Indicate the period to which the data applies:  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	□ Other – give details:  Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location.  ☑ National □ Regional ☑ CHO ☑ LHO Area □ Hospital □ County □ Institution □ Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported for example:  ☑Performance Assurance Report □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
	details for Data Manager st Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division

1	KPI title	% on waiting list for treatment less than or equal to 12 weeks
2	KPI Description PC104L (No) & PC104M(%)	The purpose of this metric is to capture the number of patients (by age band and wait time) awaiting treatment (either individual in a group environment) at the end of the reporting month and the length of time (in weeks) they are waiting. It includes all patients on the waiting list at the end of the reporting month. Patients are only removed from the waiting list when they have bee seen for a first appointment, it is not sufficient for a patient to have been offered an appointment.  Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment may occur at the same appointment. However, where a patient is assessed and must still wait for treatment it is this waiting time that is reported from referral date.  Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged and must be referred. This metric should not include patients overdue for review
3	KPI Rationale	The purpose of this metric is to monitor waiting lists and reduce wait times for patients.
·	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need choose two).  Person Centred Care
4	KPI Target 2016	NSP 2016 Target National - 75%
5	KPI Calculation	sum(No of podiatry patients on the treatment waiting list at the end of the reporting period by wait band $0 - < 12$ weeks, and agebands 0-4yrs, 5-17yrs,18-64yrs and 65yrs+) / sum (No of podiatry patients on the treatment waiting list at the end of the reporting period by wait band $0 - < 12$ weeks, >12 weeks - $\leq 26$ weeks, >26 weeks but $\leq 39$ weeks, >39 weeks but $\leq 52$ weeks, >52 weeks and agebands 0-4yrs, 5-17yrs,18-64yrs and 65yrs+)
6	Data Source	Patient records - Podiatry Manager - LHO - CHO - BIU
	Data Completeness Data Quality Issues	Only collecting data from HSE direct services - system of collections of contract services in development
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibil details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom 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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).  □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies:  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) □ Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for examp over a geographical location.  ☑ National ☐ Regional ☑ CHO ☑ LHO Area ☐ Hospital ☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported for example:  ☑Performance Assurance Report □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
	L details for Data Manager st Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division

1	KPI title	No of patients with Diabetic Active Foot Disease treated in the reporting month
2	KPI Description PC105	This KPI counts the number of daibetic active foot disease patients seen by Podiatry services in the reporting month. Diabetic Active Foot Disease is described by the HSE National Diabetes Program as: A patient with an active foot ulcer (full break in the thickness of the skin) or Charcot foot Each client will be counted once. This is a count of new and existing patients.
3	KPI Rationale	Management of Diabetic foot wounds in the community is essential in the battle to reduce ever increasing amputation rates in Diabetic clients in Ireland. Early detection and intervention of diabetic foot wounds can significantly reduce the morbidity and mortality rates associated with this condition. This KPI allows for planning and Management in relation to staffing and resource allocation in relation to demand. It also allows for definition of the services provided in each area to support comparison. It facilitates the recognition of emerging trends and allows for a management response to same.
	Indicator Classification	Please tick Indicator Classification this indicator applies to:  ✓ 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	DOP 2016 Target: National - 133 CHO 1 = 32 patients CHO 2= 28 patients CHO 3 = 11 patients CHO 4= 40 patients CHO 5= 2 patients CHO 6= 0 patients CHO 7= 0 patients CHO 8= 20 patients CHO 9= 0 patients
5	KPI Calculation	This is a count of the number of patients with Diabetic Active Foot Disease provided with a service by Podiatry. An individual client
6	Data Source Data Completeness Data Quality Issues	will only be counted once within the reporting month. This will be reported as a subset of the overall count of podiatry contacts  The data source is the Patient Records / Clinical Diary. The podiatry service in each LHO will keep account of this data. The CHOs will return one completed CIF template which will include this data, each month.
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected: □Daily □Weekly ✓Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Terms to be used: Diatetic Active Foot Disease as described the HSE National Diabetes Program
9	Minimum Data Set	All Patients accessing podiatry services with Diabetic Active Foot Disease
10	International Comparison	
11	KPI Monitoring	KPI will be monitored: □Daily □Weekly ✓ Monthly □Quarterly □Bi-annually □Annually □Other – give details: Please indicate who is responsible at a local level for monitoring this KPI: CHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported: □Daily □Weekly ✓ Monthly □Quarterly □Bi-annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies  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)  Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – for example over a geographical location:  □ National □ Regional □ Hospital Group □ Hospital □ CHO □ ISA ✓ LHO □ County □ Institution □ Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported:  □ Performance Assurance Report □Other – give details: In development commence reporting Q3
16	Web link to data	
17	Additional Information	Is the data for this KPI available through Corporate Information Facility (CIF)? To be added to CIF template 2016
	details for Data Manager ist Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead:David Watterson david.watterson@hse.ie
Nationa	Lead and Division	National Lead: John Hennessy, National Director Division: Primary Care

Prima	ry Care - Podiatry	
1	KPI title	No of treatments for Diabetic Active Foot Disease in the reporting month
2	KPI Description PC106	This KPI counts the number of daibetic active foot disease treatement contacts each month. Diabetic Active Foot Disease is described by the HSE National Diabetes Program as: A patient with an active foot ulcer (full break in the thickness of the skin) or Charcot foot. This condition can result in multiple visits each month to the podiatry service. This is a count of all contacts including both new and existing patient.
3	KPI Rationale	Management of Diabetic foot wounds in the community is essential in the battle to reduce ever increasing amputation rates in Diabetic clients in Ireland. Early detection and intervention of diabetic foot wounds can significantly reduce the morbidity and mortality rates associated with this condition. This KPI allows for planning and Management in relation to staffing and resource allocation in relation to demand. It also allows for definition of the services provided in each area to support comparison. It facilitates the recognition of emerging trends and allows for a management response to same.
	Indicator Classification	Please tick Indicator Classification this indicator applies to:
		✓ 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	DOP 2016 Target: Total treatment contacts per Month: 521. CHO Area 1 = 126 contacts CHO Area 2= 108 contacts CHO Area 3= 43 contacts CHO Area 4= 158 contacts CHO Area 5= 8 contacts CHO Area 6= 0 contacts CHO Area 7= 0 contacts CHO Area 8= 78 contacts CHO Area 9= 0 contacts
5	KPI Calculation	
		This is a count of the number of treatment contacts provided to clients with Diabetic Active Foot Disease. An individual client can result in several contacts within the reporting month. This will be reported as a subset of the overall count of podiatry contacts
6	Data Source Data Completeness Data Quality Issues	The data source is the Patient Records / Clinical Diary. The podiatry service in each LHO will keep account of this data. The CHOs will return one completed CIF template which will include this data, each month.
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected: □Daily □Weekly ✓Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Terms to be used: Diatetic Active Foot Disease as described the HSE National Diabetes Program
9	Minimum Data Set	All treatment contacts for Diabetic Active Foot Disease
10	International Comparison	
11	KPI Monitoring	KPI will be monitored: □Daily □Weekly ✓ Monthly □Quarterly □Bi-annually □Annually □Other – give details: Please indicate who is responsible at a local level for monitoring this KPI: CHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported:  □Daily □Weekly ✓ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies  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) □ Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – for example over a geographical location:  □ National □ Regional □ Hospital Group □ Hospital □ CHO □ ISA ✓ LHO □ County □ Institution □ Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported:  □ Performance Assurance Report □Other – give details: In development commence reporting Q3
16	Web link to data	
17	Additional Information	Is the data for this KPI available through Corporate Information Facility (CIF)? To be added to CIF template 2016
Contact /Speciali	details for Data Manager st Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead:David Watterson david.watterson@hse.ie
National	Lead and Division	National Lead: John Hennessy, National Director Division: Primary Care

Prima	ry Care - Ophthalmo	logy		
1	KPI title	No of patients referrals		
2	KPI Description	The number of referrals (by age band) received in the month that have been accepted. To include new and re-		
-	PC52	referrals (ie. previously discharged). Each referral should be date stamped on the day it is received and this is		
		used as the referral date.		
3	KPI Rationale	This KPI allows for planning and managment in relation to staffing and resource allocation in relation to demand.		
		Review of the throughput also facilitates recognition of emerging trends and allows for a management response to		
		same.		
	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		
4	KPI Target 2016	☑ Use of Resources ☐ Governance, Leadership and Management  DOP 2016 Target National -26913		
4	KFI Target 2010	CHO 1 - 6147; CHO 2 - 2613 ; CHO 3 - 2407 ; CHO 4 - 4436 ; CHO 5 - 6810 ; CHO 6 - 1054; CHO 7 -0 ;		
		CHO 8 - Louth (1000); CHO 9 - 2446		
5	KPI Calculation	This is a count of the number of referrals accepted in the reporting month		
6	Data Source	Patient records - Ophthalmology Manager - LHO - CHO - BIU		
	Data Completeness	1 0/		
	Data Quality Issues			
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected		
		□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:		
8	Tracer Conditions	As per HSE Optical and Ophthalmic services eligibility criteria.		
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eliqibility details etc.		
10	International Comparison	Not applicable		
	-			
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom		
		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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored		
		and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO		
		and to how a through modelings between the Filmbary out o Bindion operational routin and the orioteno		
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in		
		the NSP).		
		□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:		
13	KPI report period	Indicate the period to which the data applies:		
		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)		
		U Other – give details:		
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of		
		performance for example over a geographical location.		
		☑ National ☐ Regional ☑ CHO ☑ LHO Area ☐ Hospital		
		☐ County ☐ Institution ☐ Other – give details:		
15	KPI is reported in which	Indicate where the KPI will be reported for example:		
	reports?	□Performance Assurance Report □ Other – give details:		
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/		
17	Additional Information			
	L	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312		
Contact	details for Data Manager	Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division		
/Speciali	_			
National	John Hennessy, National Director, Primary Care Division, Health Service Executive.			

Prima	ry Care - Ophthalmol	ogy
4	KPI title	Eviating nationts occur in the month
2	KPI title KPI Description PC53	Existing patients seen in the month  An existing patient is a patient who is currently attending the service and is an open case. This includes individuals who attend individual appointments or group sessions. Each patient is only included once in the count. Do not include patients that have been included under new patients seen for that months return.  Group sessions - If a patient attends three group sessions in a month, they will be counted once under 'No of patients seen' and three times under 'No of face to face contacts/visits/appointments'  For the purpose of recording this metric an appointment is considered to be face face contact with a patient.
3	KPI Rationale	This KPI allows for planning and managment in relation to staffing and resource allocation in relation to demand. Review of the throughput also facilitates recognition of emerging trends and allows for a management response to same.
	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 □ Better Health and Wellbeing □ Use of Information □ Workforce □ Use of Resources □ Governance, Leadership and Management
4	KPI Target 2016	DOP 2016 Target National -13807 CHO 1 - 1770; CHO 2 - 610; CHO 3 - 509; CHO 4 - unavailable; CHO 5 - 10044; CHO 6 - 189; CHO 7 - 0; CHO 8 - Louth (250); CHO 9 - 435
5	KPI Calculation	This is a count of the number of existing patients seen in the month. Each patient is only included once in the count.
6	Data Source Data Completeness Data Quality Issues	Patient records - Ophthalmology Manager - LHO - CHO - BIU Incomplete
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected  □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE Optical and Ophthalmic services eligibility criteria.
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom 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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).  □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies:  ☑ 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)  ☐ Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location.  ☑ National ☐ Regional ☑ CHO ☑ LHO Area ☐ Hospital ☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported for example:  ☑Performance Assurance Report ☐Other – give details: Operational Plan
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
Contact /Speciali	I details for Data Manager ist Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
National	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

	ry Care - Ophthalmo	
1	KPI title	New Patients Seen in the Month
2	KPI Description	This is a count of the number of new patients seen in the reporting month. A new patient is a patient that is seen
	PC54	for the first time in this episode of care i.e includes re-referrals to the service. An appointment is considered to be
		face face contact with a patient and may be for assessment/treatment/service.
3	KPI Rationale	This KPI allows for planning and managment in relation to staffing and resource allocation in relation to demand.
		Review of the throughput also facilitates recognition of emerging trends and allows for a management response to
		same.
	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 2016	DOP 2016 Target National -16524
7	Tit Turget 2010	CHO 1 - 4620 ; CHO 2 - 1800 ; CHO 3 - 1806 ; CHO 4 - unavailable ; CHO 5 - 5504 ; CHO 6 - 751; CHO 7 -0
		; CHO 8 - Louth (800); CHO 9 - 1243
5	KPI Calculation	This is a count of the number of new patients seen in the reporting month.
6	Data Source	Patient records - Ophthalmology Manager - LHO - CHO - BIU
	Data Completeness	Incomplete
	Data Quality Issues	
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected
		□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE Optical and Ophthalmic services eligibility criteria.
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel
10	International Comparison	numbers, eligibility details etc.
	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom
		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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored
		and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in
	ggoquooj	the NSP).
		□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies:
		☑ 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)
44	KDI Danasilan Amaran dan	Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location.
		☑ National □ Regional ☑ cho ☑ LHO Area □ Hospital
		□ County □ Institution □ Other – give details:
15	KPI is reported in which	Indicate where the KPI will be reported for example:
	reports?	✓ Performance Assurance Report □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
17	Additional information	
ontact	details for Data Manager	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
		Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
Special	ist Lead	

Prima	ry Care - Ophthalmol	logy
	KPI title	No. Of patients on the treatment waiting list at the end of the reporting period
2	KPI Description PC107	The purpose of this metric is to capture the number of patients (by age band and wait time) awaiting treatment
	PC107A PC107B	(either individual or in a group environment) at the end of the reporting month and the length of time (in weeks) they are waiting. It includes all patients on the waiting list at the end of the reporting month. Patients are only
	PC107C	removed from the waiting list when they have been seen for a first appointment, it is not sufficient for a patient to
	PC107D	have been offered an appointment.
	PC107E	Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment
		may occur at the same appointment. However, where a patient is assessed and must still wait for treatment it is
		this waiting time that is reported from referral date.
		Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged
		and must be re-referred. This does not include patients overdue for review.
3	KPI Rationale	The purpose of this metric is to monitor waiting lists and reduce wait times for patients.
	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 2016	DOP 2016 Target National - 14267
5	KPI Calculation	The waiting time is measured from date of referral i.e. date of receipt of the referral by the service to the end of
		reporting month and includes patients waiting for assessment. There are five waiting time bands: 0 - less than or equal to 12 weeks
		greater than 12 weeks and less than or equal to 26 weeks
		greater than 26 weeks and less than or equal to 39 weeks
		greater than 39 weeks and less than or equal to 52 weeks
		greater than 52 weeks
6	Data Source	Patient records - Ophthalmology Manager - LHO - CHO - BIU
	Data Completeness	Incomplete
	Data Quality Issues	Yes
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected
		□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE Optical and Ophthalmic services eligibility criteria.
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel
		numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom
		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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
		land reviewed through meetings between the Primary Care Division Operational Team and the Cho/Lho
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in
		the NSP).
		□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies:
		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)
		U Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of
	, : 5 53-53-51	performance for example over a geographical location.
		☑ National ☐ Regional ☑ CHO ☑ LHO Area ☐ Hospital
		□ County □ Institution □ Other – give details:
15	KPI is reported in which	Indicate where the KPI will be reported for example:
- 10	reports?	☑Performance Assurance Report □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
Contact	dotaile for Data Managar	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
/Specialis	details for Data Manager	Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
National	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

Prima	ry Care - Ophthalmo	logy
1	KPI title	% on waiting list for treatment less than or equal to 52 weeks
2	KPI Description PC107F (No) & PC107G (%)	The purpose of this metric is to capture the number of patients (by age band and wait time) awaiting treatment (either individual or in a group environment) at the end of the reporting month and the length of time (in weeks) they are waiting. It includes all patients on the waiting list at the end of the reporting month. Patients are only removed from the waiting list when they have been seen for a first appointment, it is not sufficient for a patient to have been offered an appointment.  Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment may occur at the same appointment. However, where a patient is assessed and must still wait for treatment it is this waiting time that is reported from referral date.  Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged and must be re-referred. This metric should not include patients overdue for review
3	KPI Rationale Indicator Classification	The purpose of this metric is to monitor waiting lists and reduce wait times for patients.  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  Wellbeing  Use of Information  Workforce
		☑ Use of Resources ☐ Governance, Leadership and Management
4	KPI Target 2016	NSP 2016 Target National - 100%
5	KPI Calculation	sum(No of Opthalmology patients on the treatment waiting list at the end of the reporting period by wait band 0 - < 12 weeks, >12 weeks - $\leq$ 26 weeks, >26 weeks but $\leq$ 39 weeks, >39 weeks but $\leq$ 52 weeks and agebands 0-4yrs, 5-17yrs,18-64yrs and 65yrs+)/sum (No of Opthalmology patients on the treatment waiting list at the end of the reporting period by wait band 0 - < 12 weeks, >12 weeks - $\leq$ 26 weeks, >26 weeks but $\leq$ 39 weeks, >39 weeks but $\leq$ 52 weeks and agebands 0-4yrs, 5-17yrs,18-64yrs and 65yrs+)
6	Data Source Data Completeness Data Quality Issues	Patient records - Ophthalmology Manager - LHO - CHO - BIU Incomplete
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE Optical and Ophthalmic services eligibility criteria.
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom 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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).
13	KPI report period	□ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually □ Other – give details:  Indicate the period to which the data applies: □ 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) □ Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location.  ☑ National □ Regional ☑ CHO ☑ LHO Area □ Hospital □ County □ Institution □ Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported for example:  ☑Performance Assurance Report ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
/Speciali		Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
National	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

Prima	ry Care - Ophthalmo	ogy
4	KDI titlo	% on waiting list for treatment less than or equal to 20 weeks
2	KPI title KPI Description PC107H (No) & PC107I (%)	% on waiting list for treatment less than or equal to 39 weeks  The purpose of this metric is to capture the number of patients (by age band and wait time) awaiting treatment (either individual or in a group environment) at the end of the reporting month and the length of time (in weeks)
		they are waiting. It includes all patients on the waiting list at the end of the reporting month. Patients are only removed from the waiting list when they have been seen for a first appointment, it is not sufficient for a patient to have been offered an appointment.
		Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment may occur at the same appointment. However, where a patient is assessed and must still wait for treatment it is
		this waiting time that is reported from referral date.  Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged and must be re-referred. This metric should not include patients overdue for review
3	KPI Rationale Indicator Classification	The purpose of this metric is to monitor waiting lists and reduce wait times for patients.  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 2016	DOP 2016 Target National - 90%
5	KPI Calculation	sum(No of Opthalmology patients on the treatment waiting list at the end of the reporting period by wait band $0 - < 12$ weeks, $>12$ weeks - $\le 26$ weeks, $>26$ weeks but $\le 39$ weeks, and agebands 0-4yrs, 5-17yrs,18-64yrs and 65yrs+) / sum (No of Opthalmology patients on the treatment waiting list at the end of the reporting period by wait band $0 - < 12$ weeks, $>12$ weeks - $\le 26$ weeks, $>26$ weeks but $\le 39$ weeks, $>39$ weeks but $\le 52$ weeks, $>52$ weeks and agebands 0-4yrs, 5-17yrs,18-64yrs and 65yrs+)
6	Data Source Data Completeness Data Quality Issues	Patient records - Ophthalmology Manager - LHO - CHO - BIU Incomplete
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE Optical and Ophthalmic services eligibility criteria.
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom 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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).  □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies:  ☑ 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)  ☑ Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location.  ☑ National ☐ Regional ☑ CHO ☑ LHO Area ☐ Hospital ☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported for example:  ☑Performance Assurance Report □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
Contact o	details for Data Manager st Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division

Prima	ry Care - Ophthalmol	ogy
2	KPI title KPI Description PC107J (No) & PC107K (%)	% on waiting list for treatment less than or equal to 26 weeks  The purpose of this metric is to capture the number of patients (by age band and wait time) awaiting treatment (either individual or in a group environment) at the end of the reporting month and the length of time (in weeks)
	PCIOTO (NO) & PCIOTA (%)	they are waiting. It includes all patients on the waiting list at the end of the reporting month. Patients are only removed from the waiting list when they have been seen for a first appointment, it is not sufficient for a patient to have been offered an appointment.
		Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment may occur at the same appointment. However, where a patient is assessed and must still wait for treatment it is this waiting time that is reported from referral date.
		Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged and must be re-referred. This metric should not include patients overdue for review
3	KPI Rationale Indicator Classification	The purpose of this metric is to monitor waiting lists and reduce wait times for patients.  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
4	KPI Target 2016	☐ Better Health and Wellbeing ☐ Use of Information ☐ Workforce ☐ Use of Resources ☐ Governance, Leadership and Management ☐ DOP 2016 Target National - 80%
5	KPI Calculation	sum(No of Opthalmology patients on the treatment waiting list at the end of the reporting period by wait band 0 - <
J	THE TOURGUIST	12 weeks, >12 weeks - $\leq$ 26 weeks, and agebands 0-4yrs, 5-17yrs,18-64yrs and 65yrs+) / sum (No of Opthalmology patients on the treatment waiting list at the end of the reporting period by wait band 0 - < 12 weeks, >12 weeks - $\leq$ 26 weeks, >26 weeks but $\leq$ 39 weeks, >39 weeks but $\leq$ 52 weeks, >52 weeks and agebands 0-4yrs, 5-17yrs,18-64yrs and 65yrs+)
6	Data Source Data Completeness Data Quality Issues	Patient records - Ophthalmology Manager - LHO - CHO - BIU Incomplete
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE Optical and Ophthalmic services eligibility criteria.
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom 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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).  □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies:  ☐ 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) □ Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location.  ☑ National ☐ Regional ☑ CHO ☑ LHO Area ☐ Hospital ☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported for example:  ☑Performance Assurance Report ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
		Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
Contact (	details for Data Manager st Lead	Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
N. C. I	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

Prima	ry Care - Ophthalmol	ogy
_	MDI 4:41-	Of an uniform light for treatment less than an annual to 40 uniform
2	KPI title KPI Description	% on waiting list for treatment less than or equal to 12 weeks  The purpose of this metric is to capture the number of patients (by age band and wait time) awaiting treatment
	PC107L (No) & PC107M (%)	(either individual or in a group environment) at the end of the reporting month and the length of time (in weeks) they are waiting. It includes all patients on the waiting list at the end of the reporting month. Patients are only
		removed from the waiting list when they have been seen for a first appointment, it is not sufficient for a patient to have been offered an appointment.
		Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment may occur at the same appointment. However, where a patient is assessed and must still wait for treatment it is
		this waiting time that is reported from referral date.  Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged
		and must be re-referred. This metric should not include patients overdue for review
3	KPI Rationale Indicator Classification	The purpose of this metric is to monitor waiting lists and reduce wait times for patients.  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
4	KPI Target 2016	☐ Use of Resources ☐ Governance, Leadership and Management
5	KPI Calculation	NSP 2016 Target National - 60% sum(No of Opthalmology patients on the treatment waiting list at the end of the reporting period by wait band 0 - <
ŭ	Re i Calculation	12 weeks, and agebands 0-4yrs, 5-17yrs,18-64yrs and 65yrs+) / sum (No of Opthalmology patients on the treatment waiting list at the end of the reporting period by wait band 0 - < 12 weeks, >12 weeks - $\leq$ 26 weeks, >26 weeks but $\leq$ 39 weeks, >39 weeks but $\leq$ 52 weeks, >52 weeks and agebands 0-4yrs, 5-17yrs,18-64yrs and 65yrs+)
6	Data Source	Patient records - Ophthalmology Manager - LHO - CHO - BIU
Ü	Data Completeness Data Quality Issues	Incomplete
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected
·	Sum concentration requestor	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE Optical and Ophthalmic services eligibility criteria.
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom 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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).
13	KPI report period	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:  Indicate the period to which the data applies:
		☑ 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) □ Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of
		performance for example over a geographical location.
		☑ National ☐ Regional ☑ CHO ☑ LHO Area ☐ Hospital ☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which	Indicate where the KPI will be reported for example:
	reports?	☑Performance Assurance Report ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
Contact (	details for Data Manager st Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division

1	KPI title	No of patients referrals
2	KPI Description	The number of referrals (by age band) received in the month that have been accepted. To include new and re-referrals (ie.
2	PC59	previously discharged). Each referral should be date stamped on the day it is received and this is used as the referral date.
3	KPI Rationale	This KPI allows for planning and managment in relation to staffing and resource allocation in relation to demand. Review of the throughput also facilitates recognition of emerging trends and allows for a management response to same.
	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  Wethorce  Use of Information  Use of Resources  Governance, Leadership and Management
4	KPI Target 2016	DOP 2016 Target National -18317 CHO 1 - 1951 ; CHO 2 - 2849 ; CHO 3 - 1189 ; CHO 4 - 2261 ; CHO 5 - 2037 ; CHO 6 - (Service inc. CHO 9) ; CHO 3100 ; CHO 8 - 1868; CHO 9 - 3062
5	KPI Calculation	This is a count of the number of referrals accepted in the reporting month
6	Data Source	Patient records - Audiology Manager - LHO - CHO - BIU
	Data Completeness	
	Data Quality Issues	
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected  □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom 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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP)  □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies:  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)  Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location.  ☑ National □ Regional ☑ CHO ☑ LHO Area □ Hospital □ County □ Institution □ Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported for example:  □Performance Assurance Report □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
	t details for Data Manager list Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division

<b>Prima</b>	ry Care - Audiology	
2	KPI title KPI Description PC60	Existing patients seen in the month  An existing patient is a patient who is currently attending the service and is an open case. This includes individuals who attend individual appointments or group sessions. Each patient is only included once in the count. Do not include patients that have been included under new patients seen for that months return.  Group sessions - If a patient attends three group sessions in a month, they will be counted once under 'No of patients seen' and three times under 'No of face to face contacts/visits/appointments'  For the purpose of recording this metric an appointment is considered to be face face contact with a patient.
3	KPI Rationale	This KPI allows for planning and managment in relation to staffing and resource allocation in relation to demand. Review of the throughput also facilitates recognition of emerging trends and allows for a management response to same.
	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 2016	DOP 2016 Target National -2850 CHO 1 - 499 ; CHO 2 - 304 ; CHO 3 - 215 ; CHO 4 - 439 ; CHO 5 - 365 ; CHO 6 - (Service inc. CHO 9) ; CHO 7 - 331 ; CHO 8 - 263; CHO 9 - 434
5	KPI Calculation	This is a count of the number of existing patients seen in the month. Each patient is only included once in the count.
6	Data Source Data Completeness Data Quality Issues	Patient records - Audiology Manager - LHO - CHO - BIU Incomplete
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom 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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).
13	KPI report period	□ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually □ Other – give details:  Indicate the period to which the data applies:  ☑ 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) □ Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location.  ☑ National □ Regional ☑ CHO ☑ LHO Area □ Hospital □ County □ Institution □ Other – give details:
15	KPI is reported in which	Indicate where the KPI will be reported for example:
	reports?	☑Performance Assurance Report ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
Contact /	details for Data Manager st Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
National	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

THITE	ry Care - Audiology	
1	KPI title	New Patients Seen in the Month
2	KPI Description PC61	This is a count of the number of new patients seen in the reporting month. A new patient is a patient that is seen for the first time in this episode of care i.e includes re-referrals to the service. An appointment is considered to be face face contact with patient and may be for assessment/treatment/service.
3	KPI Rationale	This KPI allows for planning and managment in relation to staffing and resource allocation in relation to demand. Review of the throughput also facilitates recognition of emerging trends and allows for a management response to same.
	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 2016	DOP 2016 Target National -16459 CHO 1 - 1629; CHO 2 - 1636; CHO 3 - 1390; CHO 4 - 4387; CHO 5 - 2325; CHO 6 - (Service inc. CHO 9); CHO 7 1840; CHO 8 - 1491; CHO 9 - 1761
5	KPI Calculation	This is a count of the number of new patients seen in the reporting month.
6	Data Source Data Completeness Data Quality Issues	Patient records - Audiology Manager - LHO - CHO - BIU Incomplete
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected  □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other − give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom 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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP)  □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)   Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location.  ☑ National □ Regional ☑ CHO ☑ LHO Area □ Hospital □ County □ Institution □ Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported for example:  ☑Performance Assurance Report □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
	details for Data Manager ist Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division

Prima	ry Care - Audiology	
	y our radiology	
1	KPI title	No. Of patients on the treatment waiting list at the end of the reporting period
2	KPI Description	The purpose of this metric is to capture the number of patients (by age band and wait time) awaiting treatment (either
	PC108	individual or in a group environment) at the end of the reporting month and the length of time (in weeks) they are waiting. It
	PC108A	includes all patients on the waiting list at the end of the reporting month. Patients are only removed from the waiting list when
	PC108B	they have been seen for a first appointment, it is not sufficient for a patient to have been offered an appointment.
	PC108C	Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment may occur at
	PC108D	the same appointment. However, where a patient is assessed and must still wait for treatment it is this waiting time that is
	PC108E	reported from referral date.
		Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged and must be
		re-referred. This does not include patients overdue for review.
3	KPI Rationale	The purpose of this metric is to monitor waiting lists and reduce wait times for patients.
	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 2016	DOP 2016 Target National - 13870
5	KPI Calculation	The waiting time is measured from date of referral i.e. date of receipt of the referral by the service to the end of reporting
		month and includes patients waiting for assessment. There are five waiting time bands:
		0 - less than or equal to 12 weeks
		greater than 12 weeks and less than or equal to 26 weeks
		greater than 26 weeks and less than or equal to 39 weeks
		greater than 39 weeks and less than or equal to 52 weeks greater than 52 weeks
6	Data Source	Patient records - Audiology Manager - LHO - CHO - BIU
Ů	Data Completeness	Some areas may be including patients overdue for review on waiting list
	Data Quality Issues	Como di dad may bo molading pationio ovoldad for fovior on realing libit
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected
		□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers,
		eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom
		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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and
12	KPI Reporting Frequency	reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).
12	iti i requency	intotate now orten the rain will be reported (at a reational level this will align with the agreed reporting amonatine in the raor).
		□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies:
		☑ 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	VDI Departing Assessed 1	Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for
		example over a geographical location.  ☑ National □ Regional ☑ CHO ☑ LHO Area □ Hospital
		□ County □ Institution □ Other – give details:
15	KPI is reported in which	Indicate where the KPI will be reported for example:
	reports?	□ Performance Assurance Report     □ Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
		Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
Contact	details for Data Manager	Information Analyst: Natherine Gregan email: katherine.cregan@nse.le tel: 046 9251312   Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
/Speciali	st Lead	popularios abade. Diran manpiny, nicad on manning, nas bunne, nicad on Operations - Fillinary Gare Division
Notional	Lead and Division	John Hannacov, National Director, Primary Cara Division, Health Consider Executive
ivational	Leau and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

Prima	ry Care - Audiology	
1	KPI title	% on waiting list for treatment less than or equal to 52 weeks
2	KPI Description PC108F(No) & PC108G(%)	The purpose of this metric is to capture the number of patients (by age band and wait time) awaiting treatment (either individual or in a group environment) at the end of the reporting month and the length of time (in weeks) they are waiting. It includes all patients on the waiting list at the end of the reporting month. Patients are only removed from the waiting list when they have been seen for a first appointment, it is not sufficient for a patient to have been offered an appointment. Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment may occur at the same appointment. However, where a patient is assessed and must still wait for treatment it is this waiting time that is reported from referral date.  Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged and must be re-referred. This metric should not include patients overdue for review
3	KPI Rationale	The purpose of this metric is to monitor waiting lists and reduce wait times for patients.
	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 Calaulatian	NSP 2016 Target National - 100%
5	KPI Calculation	sum(No of audiology patients on the treatment waiting list at the end of the reporting period by wait band $0 - < 12$ weeks, $>12$ weeks $< \le 26$ weeks, $>26$ weeks but $\le 39$ weeks, $>39$ weeks but $\le 52$ weeks and agebands $0 - 4$ yrs, $5 - 17$ yrs, $18 - 64$ yrs and $65$ yrs+)/sum (No of audiology patients on the treatment waiting list at the end of the reporting period by wait band $0 - < 12$ weeks, $>12$ weeks, $>26$ weeks, $>26$ weeks but $\le 39$ weeks, $>39$ weeks but $\le 52$ weeks, $>52$ weeks and agebands $0 - 4$ yrs, $5 - 17$ yrs, $18 - 64$ yrs and $65$ yrs+)
6	Data Source	Patient records - Audiology Manager - LHO - CHO - BIU
	Data Completeness Data Quality Issues	Some areas may be including patients overdue for review on waiting list
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected  □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom KPI will be <u>monitored</u> on a (please indicate below) basis:  □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:  Please indicate who is responsible at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CH0/LH0
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).
- 10	100	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies:  ☐ 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)  ☐ Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location.  ☑ National ☐ Regional ☑ CHO ☑ LHO Area ☐ Hospital ☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported for example:  ☑Performance Assurance Report □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
Contact /Speciali	details for Data Manager ist Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
National	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

Prima	ry Care - Audiology	
_	MDI COL	N
1 2	KPI title KPI Description PC108H(No) & PC108I(%)	% on waiting list for treatment less than or equal to 39 weeks  The purpose of this metric is to capture the number of patients (by age band and wait time) awaiting treatment (either individual or in a group environment) at the end of the reporting month and the length of time (in weeks) they are waiting. It includes all patients on the waiting list at the end of the reporting month. Patients are only removed from the waiting list when they have been seen for a first appointment, it is not sufficient for a patient to have been offered an appointment.  Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment may occur at the same appointment. However, where a patient is assessed and must still wait for treatment it is this waiting time that is reported from referral date.  Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged and must be re-referred. This metric should not include patients overdue for review
3	KPI Rationale	The purpose of this metric is to monitor waiting lists and reduce wait times for patients.
	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 2016	DOP 2016 Target National - 90%
5	KPI Calculation	sum(No of audiology patients on the treatment waiting list at the end of the reporting period by wait band $0 - < 12$ weeks, $>12$ weeks $< \le 26$ weeks, $>26$ weeks but $\le 39$ weeks, and agebands $0-4$ yrs, $5-17$ yrs, $18-64$ yrs and $65$ yrs+) / sum (No of audiology patients on the treatment waiting list at the end of the reporting period by wait band $0 - < 12$ weeks, $>12$ weeks $< \le 26$ weeks, $>26$ weeks but $\le 39$ weeks, $>39$ weeks but $\le 52$ weeks, $>52$ weeks and agebands $0-4$ yrs, $5-17$ yrs, $18-64$ yrs and $65$ yrs+)
6	Data Source Data Completeness Data Quality Issues	Patient records - Audiology Manager - LHO - CHO - BIU Some areas may be including patients overdue for review on waiting list
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom 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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CH0/LH0
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).
13	KPI report period	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details: Indicate the period to which the data applies:
		☐ 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) ☐ Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location.  ☑ National □ Regional ☑ CHO ☑ LHO Area □ Hospital □ County □ Institution □ Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported for example:  ☑Performance Assurance Report □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
/Special	details for Data Manager ist Lead Lead and Division	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division  John Hennessy, National Director, Primary Care Division, Health Service Executive.

1	KPI title	% on waiting list for treatment less than or equal to 26 weeks
2	KPI Description PC108J(No) & PC108K(%)	The purpose of this metric is to capture the number of patients (by age band and wait time) awaiting treatment (either individual or in a group environment) at the end of the reporting month and the length of time (in weeks) they are waiting. It includes all patients on the waiting list at the end of the reporting month. Patients are only removed from the waiting list where they have been seen for a first appointment, it is not sufficient for a patient to have been offered an appointment. Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment may occur at the same appointment. However, where a patient is assessed and must still wait for treatment it is this waiting time that is reported from referral date.  Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged and must be re-referred. This metric should not include patients overdue for review
3	KPI Rationale	The purpose of this metric is to monitor waiting lists and reduce wait times for patients.
ŭ	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  Better Health and Wellbeing  Use of Information  Workforce  Use of Resources  Governance, Leadership and Management
4	KPI Target 2016	DOP 2016 Target National - 80%
5	KPI Calculation	sum(No of audiology patients on the treatment waiting list at the end of the reporting period by wait band $0 - < 12$ weeks, $> 1$ weeks - $\le 26$ weeks, and agebands 0-4yrs, 5-17yrs,18-64yrs and 65yrs+) / sum (No of audiology patients on the treatment waiting list at the end of the reporting period by wait band $0 - < 12$ weeks, $> 12$ weeks, $- \le 26$ weeks, $> 26$ weeks but $\le 39$ weeks, $> 39$ weeks but $\le 52$ weeks, $> 52$ weeks and agebands 0-4yrs, 5-17yrs,18-64yrs and 65yrs+)
6	Data Source Data Completeness Data Quality Issues	Patient records - Audiology Manager - LHO - CHO - BIU Some areas may be including patients overdue for review on waiting list
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom 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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).  □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies:
		□ 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)     □ Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location.  ☑ National □ Regional □ CHO ☑ LHO Area □ Hospital □ County □ Institution □ Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported for example:  ☑Performance Assurance Report □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
	details for Data Manager	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division

	ry Care - Audiology	
1	KPI title	% on waiting list for treatment less than or equal to 12 weeks
2	KPI Description PC108L(No) & PC108M(%)	The purpose of this metric is to capture the number of patients (by age band and wait time) awaiting treatment (either individual or in a group environment) at the end of the reporting month and the length of time (in weeks) they are waiting. It includes all patients on the waiting list at the end of the reporting month. Patients are only removed from the waiting list whe they have been seen for a first appointment, it is not sufficient for a patient to have been offered an appointment. Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment may occur the same appointment. However, where a patient is assessed and must still wait for treatment it is this waiting time that is reported from referral date.  Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged and must at
		re-referred. This metric should not include patients overdue for review
3	KPI Rationale	The purpose of this metric is to monitor waiting lists and reduce wait times for patients.
	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 2016	NSP 2016 Target National - 60%
5	KPI Calculation	sum(No of audiology patients on the treatment waiting list at the end of the reporting period by wait band $0 - < 12$ weeks, and agebands 0-4yrs, 5-17yrs,18-64yrs and 65yrs+) / sum (No of audiology patients on the treatment waiting list at the end the reporting period by wait band $0 - < 12$ weeks, >12 weeks - $\le 26$ weeks, >26 weeks but $\le 39$ weeks, >39 weeks but $\le 52$ weeks, >52 weeks and agebands 0-4yrs, 5-17yrs,18-64yrs and 65yrs+)
6	Data Source	Patient records - Audiology Manager - LHO - CHO - BIU
	Data Completeness	Some areas may be including patients overdue for review on waiting list
	Data Quality Issues	
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected  □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, elioibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom
		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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and
		reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).
		□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies:
		☑ 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)
		Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for
	g., gg. eganon	example over a geographical location.
		☑ National □ Regional ☑ CHO ☑ LHO Area □ Hospital
		□ County □ Institution □ Other – give details:
15	KPI is reported in which	Indicate where the KPI will be reported for example:
	reports?	☑Performance Assurance Report ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
	I .	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
ontact	details for Data Manager	Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
peciali	st Lead	Specialist 2000. Drian marphy, flood of Flaming, Fat Dainio, flood of Operations - Finitary Gale Division
		Liberthoon Alaborat Photo River And Physics Bernard River Andrews River and Physics Bernard River and Physics Bernard Rive
ational	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

Prima	ry Care - Dietetics	
1	KPI title	No of patients referrals
2	KPI Description PC66	The number of referrals (by age band) received in the month that have been accepted. To include new and re-referrals (ie. previously discharged). Each referral should be date stamped on the day it is received and this is used as the referral date.
	KPI Rationale	This KPI allows for planning and managment in relation to staffing and resource allocation in relation to demand. Review of the throughput also facilitates recognition of emerging trends and allows for a management response to same.
3	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	DOP 2016 Target National -27858 CHO 1 - 3624 ; CHO 2 - 2720 ; CHO 3 - 2026 ; CHO 4 - 7012 ; CHO 5 - 2811 ; CHO 6 -2082 ; CHO 7 - 2613 ; CHO 8 - 3022 CHO 9 - 1948
5	KPI Calculation	This is a count of the number of referrals accepted in the reporting month
6	Data Source Data Completeness Data Quality Issues	Patient records - Dietician- Dietetics Manager - LHO - CHO - BIU
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom 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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).  □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies:  ☐ 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)  ☐ Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location.  ☑ National ☐ Regional ☑ CHO ☑ LHO Area ☐ Hospital ☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported for example:  □Performance Assurance Report □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
	l details for Data Manager	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
National	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

Prima	ry Care - Dietetics	
1	KPI title	Existing patients seen in the month
2	KPI Description PC67	An existing patient is a patient who is currently attending the service and is an open case. This includes individuals who attend individual appointments or group sessions. Each patient is only included once in the count. Do not include patients that have been included under new patients seen for that months return.  Group sessions - If a patient attends three group sessions in a month, they will be counted once under 'No of patients seen' and three times under 'No of face to face contacts/visits/appointments'  For the purpose of recording this metric an appointment is considered to be face face contact with a patient.
3	KPI Rationale	This KPI allows for planning and managment in relation to staffing and resource allocation in relation to demand. Review of the throughput also facilitates recognition of emerging trends and allows for a management response to same.
	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	DOP 2016 Target National -5209 CHO 1 - 589 ; CHO 2 - 1816 ; CHO 3 - 109 ; CHO 4 - 1038 ; CHO 5 - 457 ; CHO 6 -415 ; CHO 7 - 220 ; CHO 8 - 413 CHO 9 - 152
5	KPI Calculation	This is a count of the number of existing patients seen in the month. Each patient is only included once in the count.
6	Data Source Data Completeness Data Quality Issues	Patient records - Dietician- Dietetics Manager - LHO - CHO - BIU Incomplete
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom 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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).
13	KPI report period	□ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually □ Other – give details:  Indicate the period to which the data applies: ☑ 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	□ Other – give details:  Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location.  ☑ National □ Regional ☑ CHO ☑ LHO Area □ Hospital □ County □ Institution □ Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported for example:  ☑Performance Assurance Report □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
Contact o	details for Data Manager st Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
National	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

Prima	ry Care - Dietetics	
1	KPI title	New Patients Seen in the Month
2	KPI Description	This is a count of the number of new patients seen in the reporting month. A new patient is a patient that is seen for the first time
	PC68	in this episode of care i.e includes re-referrals to the service. An appointment is considered to be face face contact with a patient and may be for assessment/treatment/service.
3	KPI Rationale	This KPI allows for planning and managment in relation to staffing and resource allocation in relation to demand. Review of the throughput also facilitates recognition of emerging trends and allows for a management response to same.
	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	DOP 2016 Target National -21707
		CHO 1 - 3335 ; CHO 2 - 1208 ; CHO 3 - 975 ; CHO 4 - 5440 ; CHO 5 -2569 ; CHO 6 -2018 ; CHO 7 - 1767 ; CHO 8 - 3141 CHO 9 - 1254
5	KPI Calculation	This is a count of the number of new patients seen in the reporting month.
6	Data Source	Patient records - Dietician- Dietetics Manager - LHO - CHO - BIU
	Data Completeness	Incomplete
	Data Quality Issues	
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom
	• •	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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed
		through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).
		□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies:
		☑ 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)
		☐ Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example
		over a geographical location.
		☑ National □ Regional ☑ CHO ☑ LHO Area □ Hospital
		□ County □ Institution □ Other – give details:
15	KPI is reported in which	Indicate where the KPI will be reported for example:
40	reports?	☑Performance Assurance Report □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
Contact	details for Data Manager	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
/Speciali	•	Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
National	Load and Division	John Hannocky National Director Primary Care Division, Health Consider Eventure
ivational	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

IIIIIai	ry Care - Dietetics	
1	KPI title	No. Of nations on the treatment waiting list at the and of the reporting period
	KPI title KPI Description	No. Of patients on the treatment waiting list at the end of the reporting period  The purpose of this metric is to capture the number of patients (by age band and wait time) awaiting treatment (either individual of
	PC109	in a group environment) at the end of the reporting month and the length of time (in weeks) they are waiting. It includes all
	PC109A	patients on the waiting list at the end of the reporting month. Patients are only removed from the waiting list when they have beer
	PC109B	seen for a first appointment, it is not sufficient for a patient to have been offered an appointment.
	PC109C	Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment may occur at the
	PC109D	same appointment. However, where a patient is assessed and must still wait for treatment it is this waiting time that is reported
ŀ	PC109E	from referral date.
		Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged and must be re-
		referred. This does not include patients overdue for review.
3	KPI Rationale	The purpose of this metric is to monitor waiting lists and reduce wait times for patients.
ŀ	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need
ŀ		to choose two).
ŀ		□ Person Centred Care □ Effective Care □ Safe Care
ŀ		☑Better Health and Wellbeing □ Use of Information □ Workforce
		☑ Use of Resources ☐ Governance, Leadership and Management
4	KPI Target 2016	DOP 2016 Target National -5479
ŀ		CHO 1 - 1061 ; CHO 2 - 554 ; CHO 3 - 427 ; CHO 4 - 704 ; CHO 5 -669 ; CHO 6 -195 ; CHO 7 - 486 ; CHO 8 - 1023 CHO
		9 - 360
5	KPI Calculation	The waiting time is measured from date of referral i.e. date of receipt of the referral by the service to the end of reporting month
ŀ		and includes patients waiting for assessment. There are five waiting time bands:
ŀ		0 - less than or equal to 12 weeks
ŀ		greater than 12 weeks and less than or equal to 26 weeks
ŀ		greater than 26 weeks and less than or equal to 39 weeks
ŀ		greater than 39 weeks and less than or equal to 52 weeks
		greater than 52 weeks
	Data Source	Patient records - Dietician- Dietetics Manager - LHO - CHO - BIU
	Data Completeness	Incomplete
	Data Quality Issues	
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected
	T 0 1111	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility and the state of
10	International Comparison	details etc.
	•	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom
ŀ		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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed
		through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).
		□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies:
ŀ		☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)
ŀ		
ŀ		☐ Monthly in arrears (June data reported in July)
ŀ		☐ Quarterly in arrears (quarter 1 data reported in quarter 2)
ŀ		☐ Rolling 12 months (previous 12 month period)
		□ Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example
ŀ		over a geographical location.
ŀ		☑ National ☐ Regional ☑ CHO ☑ LHO Area ☐ Hospital
		☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which	Indicate where the KPI will be reported for example:
	reports?	☑Performance Assurance Report ☐Other – give details:
	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
	Web link to data	
	Additional Information	
16 17	Additional Information	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
16 17	Additional Information	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division

Tillia	ry Care - Dietetics	
1	KPI title	% on waiting list for treatment less than or equal to 52 weeks
2	KPI Description PC109F(No) & PC109G (%)	The purpose of this metric is to capture the number of patients (by age band and wait time) awaiting treatment (either individual of in a group environment) at the end of the reporting month and the length of time (in weeks) they are waiting. It includes all patients on the waiting list at the end of the reporting month. Patients are only removed from the waiting list when they have been seen for a first appointment, it is not sufficient for a patient to have been offered an appointment.  Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment may occur at the same appointment. However, where a patient is assessed and must still wait for treatment it is this waiting time that is reported from referral date.  Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged and must be re-
3	KPI Rationale	referred. This metric should not include patients overdue for review  The purpose of this metric is to monitor waiting lists and reduce wait times for patients.
	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 2016	NSP 2016 Target National 100%
5	KPI Calculation	sum(No of dietetics patients on the treatment waiting list at the end of the reporting period by wait band $0 - < 12$ weeks, $>12$ weeks - $\leq 26$ weeks, $>26$ weeks but $\leq 39$ weeks, $>39$ weeks but $\leq 52$ weeks and agebands 0-4yrs, 5-17yrs,18-64yrs and 65yrs+)/sum (No of dietetics patients on the treatment waiting list at the end of the reporting period by wait band $0 - < 12$ weeks, $>12$ weeks - $\leq 26$ weeks, $>26$ weeks but $\leq 39$ weeks, $>39$ weeks but $\leq 52$ weeks, $>52$ weeks and agebands 0-4yrs, 5-17yrs,18 (64yrs and 65yrs+)
	Data Source Data Completeness Data Quality Issues	Patient records - Dietician- Dietetics Manager - LHO - CHO - BIU Incomplete
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected  □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom 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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).  □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies:  ☐ 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)  ☐ Other – give details:
	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location.  ☑ National □ Regional ☑ CHO ☑ LHO Area □ Hospital □ County □ Institution □ Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported for example:  ☑Performance Assurance Report □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
Contact o	details for Data Manager st Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
National	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

TIIIId	ry Care - Dietetics	
1	KPI title	% on waiting list for treatment less than or equal to 39 weeks
2	KPI Description PC109H(No) & PC109I (%)	The purpose of this metric is to capture the number of patients (by age band and wait time) awaiting treatment (either individual or in a group environment) at the end of the reporting month and the length of time (in weeks) they are waiting. It includes all patients on the waiting list at the end of the reporting month. Patients are only removed from the waiting list when they have been seen for a first appointment, it is not sufficient for a patient to have been offered an appointment.  Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment may occur at the same appointment. However, where a patient is assessed and must still wait for treatment it is this waiting time that is reported from referral date.
		Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged and must be re- referred. This metric should not include patients overdue for review
3	KPI Rationale Indicator Classification	The purpose of this metric is to monitor waiting lists and reduce wait times for patients.  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
5	KPI Target 2016 KPI Calculation	DOP 2016 Target National 95% sum(No of dietetics patients on the treatment waiting list at the end of the reporting period by wait band 0 - < 12 weeks, >12 weeks - ≤ 26 weeks, >26 weeks but ≤ 39 weeks, and agebands 0-4yrs, 5-17yrs,18-64yrs and 65yrs+) / sum (No of dietetics patients on the treatment waiting list at the end of the reporting period by wait band 0 - < 12 weeks, >12 weeks - ≤ 26 weeks, >26 weeks but ≤ 39 weeks but ≤ 52 weeks, >52 weeks and agebands 0-4yrs, 5-17yrs,18-64yrs and 65yrs+)
6	Data Source Data Completeness Data Quality Issues	Patient records - Dietician- Dietetics Manager - LHO - CHO - BIU Incomplete
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom 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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).  □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies:  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)  Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location.  ☑ National □ Regional ☑ CHO ☑ LHO Area □ Hospital □ County □ Institution □ Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported for example:  ☑Performance Assurance Report ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
Contact o	details for Data Manager st Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
National	Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

	ry Care - Dietetics	
1	KPI title	% on waiting list for treatment less than or equal to 26 weeks
2	KPI Description PC109J(No) & PC109K (%)	The purpose of this metric is to capture the number of patients (by age band and wait time) awaiting treatment (either individual of in a group environment) at the end of the reporting month and the length of time (in weeks) they are waiting. It includes all patients on the waiting list at the end of the reporting month. Patients are only removed from the waiting list when they have been seen for a first appointment, it is not sufficient for a patient to have been offered an appointment.  Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment may occur at the same appointment. However, where a patient is assessed and must still wait for treatment it is this waiting time that is reported from referral date.  Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged and must be referred. This metric should not include patients overdue for review
3	KPI Rationale	The purpose of this metric is to monitor waiting lists and reduce wait times for patients.
ŭ	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 2016	DOP 2016 Target National 85%
5	KPI Calculation	sum(No of dietetics patients on the treatment waiting list at the end of the reporting period by wait band $0 - < 12$ weeks, $>12$ weeks - $\leq 26$ weeks, and agebands 0-4yrs, 5-17yrs,18-64yrs and 65yrs+) / sum (No of dietetics patients on the treatment waiting list at the end of the reporting period by wait band $0 - < 12$ weeks, $>12$ weeks - $\leq 26$ weeks, $>26$ weeks but $\leq 39$ weeks, $>39$ weeks but $\leq 52$ weeks, $>52$ weeks and agebands 0-4yrs, 5-17yrs,18-64yrs and 65yrs+)
6	Data Source	Patient records - Dietician- Dietetics Manager - LHO - CHO - BIU
	Data Completeness Data Quality Issues	Incomplete
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected
	,	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom 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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).
		□ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually □ Other – give details:
13	KPI report period	Indicate the period to which the data applies:  ☐ 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)
		☐ Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location.  ☑ National □ Regional ☑ CHO ☑ LHO Area □ Hospital □ County □ Institution □ Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported for example:  ☑Performance Assurance Report ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
		Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
	details for Data Manager	Information Analyst: Katherine Gregan email: katherine.cregan@nse.le tel: 046 9251312   Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division

4	IZDI 641-	W W F 15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
1	KPI title	% on waiting list for treatment less than or equal to 12 weeks
2	KPI Description PC109L(No) & PC109M (%)	The purpose of this metric is to capture the number of patients (by age band and wait time) awaiting treatment (either individual in a group environment) at the end of the reporting month and the length of time (in weeks) they are waiting. It includes all patients on the waiting list at the end of the reporting month. Patients are only removed from the waiting list when they have be seen for a first appointment, it is not sufficient for a patient to have been offered an appointment.  Note the focus of this metric is on patients waiting for treatment, within some services assessment and treatment may occur at same appointment. However, where a patient is assessed and must still wait for treatment it is this waiting time that is reported from referral date.  Opt in patients are included on the waiting list. If they do not respond within four weeks then they are discharged and must be referred. This metric should not include patients overdue for review
3	KPI Rationale	The purpose of this metric is to monitor waiting lists and reduce wait times for patients.
3	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  Governance, Leadership and Management
4	KPI Target 2016	NSP 2016 Target National 70%
5	KPI Calculation	sum(No of dietetics patients on the treatment waiting list at the end of the reporting period by wait band $0 - < 12$ weeks, and agebands $0-4$ yrs, $5-17$ yrs, $18-64$ yrs and $65$ yrs+) / sum (No of dietetics patients on the treatment waiting list at the end of the reporting period by wait band $0 - < 12$ weeks, $>12$ weeks, $>26$ weeks but $\le 39$ weeks, $>39$ weeks but $\le 52$ weeks and agebands $0-4$ yrs, $5-17$ yrs, $18-64$ yrs and $65$ yrs+)
6	Data Source Data Completeness Data Quality Issues	Patient records - Dietician- Dietetics Manager - LHO - CHO - BIU Incomplete
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligi details etc.
10	International Comparison	Not applicable
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom 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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and review through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).  □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	Indicate the period to which the data applies:  Solution of the data applies:  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) □ Other – give details:
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for exa over a geographical location.  ☑ National □ Regional ☑ CHO ☑ LHO Area □ Hospital □ County □ Institution □ Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported for example:  ☑Performance Assurance Report ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
	details for Data Manager ist Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division

1	KPI Title	No of patients referrals
2	KPI Description	The number of referrals (by age band) received in the month that have been admitted to caseload. To include new and referrals (ie. previously discharged). Each referral should be date stamped on the day it is received and this is used as
		referral date.Categories covered: 65 years and over
		18 - 64 years 5 - 17 years
		Patients with a disability (physical/sensory/intellectual) 18 - 64 years Patients with a disability (physical/sensory/intellectual) 5 - 17 years
		Clinical nursing activity for sick children 0 - 4 years (This does not include children seen under the core child health
	PC73	screening and surveillance programme)
3	KPI Rationale	This KPI allows for planning and managment in relation to staffing and resource allocation in relation to demand. Revie the throughput also facilitates recognition of emerging trends and allows for a management response to same.
	Indicator Classification (National Standards for	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you need to choose two).
	Safer Better Healthcare)	□Person Centred Care □Effective Care
	Carol Dottor Flourificato)	Safe Care ☐ Better Health and Wellbeing ☐ Use of Information ☐
		Workforce□ Use of Resources□ Governance, Leadership and Management □
4	KPI Target 2016	DOP 2016 Target National - 159694
	KPI Calculation	This is a count of the number of referrals accepted in the reporting month.
6	Data Source	PHN Nurses - DOPHN - CHO - BIU
_	Data Completeness	
	Data Quality Issues	First year of data collection
7	Data Collection	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details: This data is
	Frequency	reported monthly in arrears
8	Tracer Conditions	As per HSE eligibility guidelines
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbe eliqibility details etc.
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: Please indicate who is responsible at a local level for
		monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Car Division Operational Team and the CHO/LHO
	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 reported in compstat monthly
		✓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	□National □Regional ☑ LHO Area □Hospital
	Aggregation	☐ County ☐ Institution ☐ Other – give details:
	KPI is reported in which reports ?	☑Performance Report ☐Other – give details:
	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
	Additional Information	
	tact details for Data	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
lana	ager / Specialist Lead	Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division

	,	Health Nursing
1	KPI Title	Existing patients seen in the month
	KPI Description	An existing patient is a patient who is currently in receipt of the PHN service from a PHN/RGN and who receives a direct contact (face to face) service for an existing episode of care in the reporting month. Each patient is only included once in the count for the reporting month. This does not include new patients seen. Categories covered:  65 years and over  18 - 64 years  5 - 17 years  Patients with a disability (physical/sensory/intellectual) 18 - 64 years
		Patients with a disability (physical/sensory/intellectual) 5 - 17 years  Clinical nursing activity for sick children 0 - 4 years (This does not include children seen under the core child health screening and surveillance programme)
	PC74	
3	KPI Rationale	This KPI allows for planning and managment in relation to staffing and resource allocation in relation to demand. Review of the throughput also facilitates recognition of emerging trends and allows for a management response to same.
	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 2016	DOP 2016 Target National - 64660
	KPI Calculation	This is a count of the number of existing patients seen in the month. Each patient is only included once in the count.
6	Data Source	PHN Nurses - DOPHN - CHO - BIU
	Data Completeness	
	Data Quality Issues	First year of data collection
7	Data Collection	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details: <u>This data is</u>
	Frequency	reported monthly in arrears
	Tracer Conditions	As per HSE eligibility guidelines
	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
10	International Comparison	
	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: Please indicate who is responsible at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
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) - reported in compstat monthly ☑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 ☑ LHO Area □ Hospital □ County □ Institution □ Other – give details:
15	KPI is reported in which reports ?	☑Performance Report ☐Other – give details:
_	Web link to data Additional Information	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
Conta	act details for Data ager / Specialist Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
	nal Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

Prin	mary Care - Public I	Health Nursing
	ilary care - i ubilc i	licatifi Nationing
1	KPI Title	New Patients Seen in the Month
		This is a count of the number of new patients seen in the reporting month. A new patient is a patient that is seen for the first time in this episode of care i.e includes re-referrals to the service. An appointment is considered to be face face contact with a patient and may be for assessment/treatment/service.Categories covered: 65 years and over 18 - 64 years 5 - 17 years Patients with a disability (physical/sensory/intellectual) 18 - 64 years Patients with a disability (physical/sensory/intellectual) 5 - 17 years Clinical nursing activity for sick children 0 - 4 years (This does not include children seen under the core child health screening and surveillance programme)
3	KPI Rationale	This KPI allows for planning and managment in relation to staffing and resource allocation in relation to demand. Review of the throughput also facilitates recognition of emerging trends and allows for a management response to same.
	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□
4	KPI Target	Workforce ☐ Use of Resources ☐ Governance, Leadership and Management ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
	KPI Calculation	V
5		This is a count of the number of new patients seen in the reporting month.
6	Data Source	PHN Nurses - DOPHN - CHO - BIU
	Data Completeness	
	Data Quality Issues	First year of data collection
7	Data Collection	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details: This data is
	Frequency	reported monthly in arrears
8	Tracer Conditions	As per HSE eligibility guidelines
	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc.
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: Please indicate who is responsible at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
12	KPI Reporting Frequency	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) - reported in compstat monthly ☑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	□National □Regional ☑ LHO Area □Hospital
L	Aggregation	☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports?	☑Performance Report □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/
17	Additional Information	
	act details for Data	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
	iger / Specialist Lead	Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division
Natio	nal Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.
		1

KPI title	Pri	mary Care - Public	Health Nursing
Verification   Number of new patients waiting more than 12 weeks for nursing assessment/intervention			
RPI Rationale   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			
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     Selecter Health and Wellbeing   Use of Information   Workforce     Use of Resources   Governance, Leadership and Management			Number of new patients waiting more than 12 weeks for nursing assessment/intervention
need to choose two)     Person Centred Care   Effective Care   Safe Care	3		
Person Centred Care		Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may
Better Health and Wellbeing			
Buse of Resources			
4 KPI Target 2016   NSP 2016 Target National - 0			<b>3</b>
Second Count of the the number of new patients waiting more than 12 weeks for nursing assessment/intervention			
Data Source   Data Completeness   Incomplete   Incomplete   Data Completeness   Data Quality Issues			
Data Completeness Data Quality Issues  7 Data Collection   Indicate how often the data to support the KPI will be collected   Frequency   Daily   Dweekly   Monthly   Quarterly   Bi-annually   Annually   Other – give details:    8 Tracer Conditions   As per HSE eligibility guidelines    9 Minimum Data Set    10 International Comparison   Not applicable    11 KPI Monitoring   Indicate how often the KPI will be monitored and by whom   KPI will be monitored on a (please indicate below) basis:   Daily   Dweekly   Monthly   Quarterly   Bi-annually   Annually   Other – give details:   Daily   Weekly   Monthly   Quarterly   Bi-annually   Annually   Other – give details:   Please indicate who is responsible at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO    12 KPI Reporting Frequency   Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).   Daily   Weekly   Monthly   Quarterly   Bi-annually   Annually   Other – give details:   Indicate the period to which the data applies:   Quarterly   Bi-annually   Annually   Other – give details:   Current (e.g. daily data reported in that same day of activity, monthly data reported within the same month of activity)   Monthly in arrears (June data reported in quarter 2)   Rolling 12 months (previous 12 month period)   Other – give details:   Indicate the level of aggregation   Indicate the level of aggregation   ChO   LHO   LHO			
Data Quality Issues  7 Data Collection	6		
Indicate how often the data to support the KPI will be collected   Prequency   Daily   Weekly   Monthly   Quarterly   Bi-annually   Annually   Other - give details:			Incomplete
Frequency			
8 Tracer Conditions	1		
10   International Comparison   Not applicable	_		
International Comparison   Not applicable	_		As per HSE eligibility guidelines
Indicate how often the KPI will be monitored and by whom KPI will be monitored and by whom 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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO  12 KPI Reporting Frequency Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP). □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:  13 KPI report period Indicate the period to which the data applies: □ □ 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) □ Other – give details:  14 KPI Reporting Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location. ☑ National □ Regional ☑ CHO ☑ LHO Area □ Hospital □ County □ Institution □ Other – give details:  15 KPI is reported in which reports?  Web link to data hitp://www.hse.le/leng/services/Publications/corporate/performanceassurancereports/  Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Brisin Murphy Head of Planning Pat Duppe Head of Operations - Primary Care Division	_		Net applicable
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 at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO    12   KPI Reporting Frequency   Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).   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)   Other - give details:   14   KPI Reporting   Aggregation   Regional   ChO   LhO Area   Hospital   County   Institution   Other - give details:   15   KPI is reported in which   reported   Regional   ChO   LhO Area   Hospital   Regional   ChO   LhO Area   Hospital   Regional   ChO   Reported   Reported   Regional   Regional   ChO   Reported   Reported   Reported   Reported   Regional   Regional   ChO   Reported   Report			
Daily	11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom
Please indicate who is responsible at a local level for monitoring this KPI: Service Manager. 'KPI's are monitored and reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO  12 KPI Reporting Frequency Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).    Daily   Weekly   Monthly   Quarterly   Bi-annually   Annually   Other – give details:			
reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO    Reporting Frequency   Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).   Daily   Weekly   Monthly   Quarterly   Bi-annually   Annually   Other – give details:			
Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP).   Daily   Weekly   Monthly   Quarterly   Bi-annually   Annually   Other – give details:			
NSP .   Daily   Weekly   Monthly   Quarterly   Bi-annually   Annually   Other – give details:			reviewed through meetings between the Primary Care Division Operational Team and the CHO/LHO
NSP .   Daily   Weekly   Monthly   Quarterly   Bi-annually   Annually   Other – give details:		1/DI D	
Daily   Weekly   Monthly   Quarterly   Bi-annually   Annually   Other – give details:	12	KPI Reporting Frequency	
Indicate the period to which the data applies:  □ 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) □ Other – give details:  Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location. □ National □ Regional □ CHO □ LHO Area □ Hospital □ County □ Institution □ Other – give details:  Indicate where the KPI will be reported for example: □ Performance Assurance Report □ Other – give details:  It Web link to data http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/  Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312  Specialist Lead: Brian Murphy, Head of Planning Pat Dunne, Head of Operations - Primary Care Division			,
□ 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) □ Other – give details:  14 KPI Reporting	42	KDI report period	
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) □ Other – give details:  14 KPI Reporting Aggregation  Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location. □ National □ Regional □ CHO □ LHO Area □ Hospital □ County □ Institution □ Other – give details:  15 KPI is reported in which reports? □ Performance Assurance Report □ Other – give details:  16 Web link to data http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/  17 Additional Information  Contact details for Data  Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312  Specialist Lead: Brian Murphy Head of Planning Pat Dunne Head of Operations - Primary Care Division	13	KPI report period	
□ Quarterly in arrears (quarter 1 data reported in quarter 2) □ Rolling 12 months (previous 12 month period) □ Other – give details:  14 KPI Reporting Aggregation Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location. □ National □ Regional □ CHO □ LHO Area □ Hospital □ County □ Institution □ Other – give details:  15 KPI is reported in which reports? □ Regional □ CHO □ LHO Area □ Hospital □ County □ Institution □ Other – give details: □ Regional □			Current (e.g. daily data reported on trial same day of activity, monthly data reported within the same month of activity)
□ Quarterly in arrears (quarter 1 data reported in quarter 2) □ Rolling 12 months (previous 12 month period) □ Other – give details:  14 KPI Reporting Aggregation Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location. □ National □ Regional □ CHO □ LHO Area □ Hospital □ County □ Institution □ Other – give details:  15 KPI is reported in which reports? □ Reported for example: □ Performance Assurance Report □ Other – give details:  16 Web link to data  http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/  17 Additional Information  Contact details for Data  □ Control Planning Pat Dunne Head of Operations - Primary Care Division			Monthly in arrears ( lune data reported in luly)
Rolling 12 months (previous 12 month period)   Other – give details:   14   KPI Reporting   Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location.   National   Regional   CHO   LHO Area   Hospital     County   Institution   Other – give details:   15   KPI is reported in which reports?   Indicate where the KPI will be reported for example:   Performance Assurance Report   Other – give details:   16   Web link to data   http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/   17   Additional Information   Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312   Specialist Lead Brian Murphy Head of Planning Pat Dunne Head of Operations Primary Care Division			
Other – give details:    14   KPI Reporting   Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location.   National   Regional   CHO   LHO Area   Hospital   Hospital   Regional   Indicate where the KPI will be reported for example:   15   KPI is reported in which reports?   Indicate where the KPI will be reported for example:   Performance Assurance Report   Other – give details:   16   Web link to data   http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/   17   Additional Information   Information   Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312   Specialist Lead Brian Murphy Head of Planning Pat Dunne Head of Operations - Primary Care Division   Primary Car			
KPI Reporting   Indicate the level of aggregation — this refers to the combination of results to provide a broader picture of performance for example over a geographical location.    National   Regional   CHO   LHO Area   Hospital     County   Institution   Other – give details:			
Aggregation  example over a geographical location.  ☑ National ☐ Regional ☑ CHO ☑ LHO Area ☐ Hospital ☐ County ☐ Institution ☐ Other – give details:  Indicate where the KPI will be reported for example: ☐ Performance Assurance Report ☐ Other – give details:  Indicate where the KPI will be reported for example: ☐ Performance Assurance Report ☐ Other – give details:  It Web link to data	14	KPI Reporting	
National	14		
County ☐ Institution ☐ Other – give details:  Indicate where the KPI will be reported for example: ☐ Performance Assurance Report ☐ Other – give details:  Indicate where the KPI will be reported for example: ☐ Performance Assurance Report ☐ Other – give details:  It Web link to data		/ tggrogution	
15 KPI is reported in which reports? Indicate where the KPI will be reported for example:  □ Performance Assurance Report □ Other – give details:  16 Web link to data http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/  17 Additional Information  Contact details for Data Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312  Specialist Lead: Brian Murphy Head of Planning Pat Dunne, Head of Operations - Primary Care Division			i i
reports?	15	KPI is reported in which	
16   Web link to data   http://www.hse.ie/eng/services/Publications/corporate/performanceassurancereports/   17   Additional Information			
Contact details for Data  Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312  Specialist Lead: Brian Murphy Head of Planning Pat Dunne, Head of Operations - Primary Care Division	16	<u> </u>	
Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division	17	Additional Information	
Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division			Information Applicat Vethering Cropps amaily kethering groups whose is taly 046 0351212
Manager /Specialist Lead Specialist Lead: Bhan Murphy, nead of Planning, Pat Dunne, nead of Operations - Primary Care Division	Cont	act details for Data	
	Mana	ager /Specialist Lead	Specialist Lead. Diran Mulphy, Flead of Franting, Fat Dunine, flead of Operations - Primary Care Division
National Lead and Division John Hennessy, National Director, Primary Care Division, Health Service Executive.	Natio	onal Lead and Division	John Hennessy, National Director, Primary Care Division, Health Service Executive.

Prir	mary Care, Communi	ty (Demand-Led) Schemes and other Community Services
	Medical Cards	
1	KPI Title	Medical Cards - Number of persons covered
2	KPI Description	Based on an extract from Card & Patient Tables as at 1st of each month, records are retrieved where the type card is a medical card, with type being medical card. The card expiry date must be null or greater than 1st of the month chosen and the card or some details on the card must be active.
2	PCRS1	
3	KPI Rationale	Medical Cards allow people to access Family Doctor or GP services, community health services, dental services, hospital care and a range of other benefits free of charge. On the 1st of October the government introduced a charge of fifty cent per item dispensed by pharmacists under the Medical Card Scheme. Most people who get a Medical Card do so because their income is below a certain level. It is also possible to get a Medical Card if the costs of meeting your medical needs cause you undue financial hardship, or if you have entitlement under EU regulations. Drugs, medicines and appliances supplied under the Scheme are provided through Community Pharmacies. In most cases a Doctor completes a prescription for his/her client and the client takes this prescription to any pharmacy that has an agreement with the HSE to dispense GMS prescription forms. In rural areas a Doctor may dispense for those persons who opt to have their medicines dispensed by him/her. All GMS claims are processed and paid by the Primary Care Reimbursement 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□
	1201	Workforce□Use of Resources☑ Governance, Leadership and Management □
	KPI Target 2016	NSP 2016 Target National - 1,675,767
	KPI Calculation	Count
6	Data Source	Source PCRS
	Data Completeness	Completeness 100%
	Data Quality Issues	Subject to ongoing validation of HSE's GPVC database
7	Data Collection Frequency	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Completed application form for Medical Card. Eligibility determined by current guidelines
9	Minimum Data Set	Application form contains basic demographic information and financial information
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:PCRS
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 □ Regional □ CHO □ LHO Area □ Hospital □ County □ Institution □ Other – give details:
15	KPI is reported in which reports ?	☑Performance Assurance Report ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html
	Additional Information	and the state of t
	act details for Data Manager /	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
	ialist Lead	Specialist Lead: Lynn Carberry Email: lynn.carberry@hse.ie Tel: 01 8915720
	nal Lead and Division	
ivalio	mai Leau anu DIVISIUN	Ann Marie Hoey, Assistant National Director, Primary Care Schemes & Eligibility

Prir	Primary Care, Community (Demand-Led) Schemes and other Community Services		
	GP Visit Cards		
1	KPI Title	GP Visit Cards - Number of persons covered	
	KPI Description	This refers to the net number of GP Visit Cards, after new GP Visit Cards have been issued and other GPVC, as appropriate have been deleted from the Executive's database.  Based on an extract from Card & Patient Tables as at 1st of each month, records are retrieved where the type card is a medical card, with subtype being Doctor Visit. The card expiry date must be null or greater than 1st of the month chosen and the card or some details on the card must be active.	
	PCRS2		
3	KPI Rationale	To capture the number of persons with a GPVC on a given date. General Practitioner Visit Cards allow eligible clients and their families in Ireland to visit their family doctor for free. Only the costs of visits to the family doctor are free; prescribed drugs must be paid for. Clients with GP Visit Card can also apply for a Drugs Payment Scheme Card. All GP claims are processed and paid by the Primary Care Reimbursement 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 ☐	
		Workforce□Use of Resources☑ Governance, Leadership and Management □	
	KPI Target 2016	NSP 2016 Target National - 485,192	
5	KPI Calculation	Count	
6	Data Source	Source PCRS	
	Data Completeness	Completeness 100%	
	Data Quality Issues	Subject to ongoing validation of HSE's GPVC database	
7	Data Collection Frequency	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:	
8	Tracer Conditions	Completed application form for Medical Card. Eligibility determined by current guidelines	
9	Minimum Data Set	Applicattion form contains basic demographic information and financial information	
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:PCRS	
12	KPI Reporting Frequency	1 loade indicate who is responsible for monitoring this ref or to	
		□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)	
4.4	KDI Donorting Aggregation	□Rolling 12 months (previous 12 month period)	
	KPI Reporting Aggregation	☑ National □ Regional □ CHO □ LHO Area □ Hospital □ County □ Institution □ Other – give details:	
15	KPI is reported in which	☑Performance Assurance Report □Other – give details:	
	reports ?		
	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html	
	Additional Information		
		Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312	
	ialist Lead	Specialist Lead: Lynn Carberry Email: lynn.carberry@hse.ie Tel: 01 8915720	
Natio	nal Lead and Division	Ann Marie Hoey, Assistant National Director, Primary Care Schemes & Eligibility	

Prir	nary Care, Communi	ty (Demand-Led) Schemes and other Community Services
	Medical Card/GP Visit Card - 15	
	day turnaround	
1	KPI Title	Percentage of completed Medical/GP visit card applications processed within the 15 day turnaround
2	KPI Description	This refers to the percentage of Medical Cards applications received by the HSE where Medical Cards are issued
		within 15 working days of receipt of a complete application in order to ascertain the efficiency of the application
	PCRS3	system.
3	KPI Rationale	To capture the percentage of Medical Cards issued within 15 working days of receipt by the HSE of a complete
		application.
	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 2016	NSP 2016 Target National - 95%
5	KPI Calculation	No. of medical cards issued within 15 days x 100 =
		No. of complete applications received
6	Data Source	Source PCRS
	Data Completeness	Completeness 100%
	Data Quality Issues	Subject to ongoing validation of HSE's GPVC database
7	Data Collection Frequency	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Completed application form for Medical Card. Eligibility determined by current guidelines
9	Minimum Data Set	Yes
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:PCRS
12	KPI Reporting Frequency	Flease indicate who is responsible for mornioring this KFIFCKS
	iti i reporting i requency	□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 □ LHO Area □ Hospital
	ita i responding reggiogation	□ County □ Institution □Other – give details:
15	KPI is reported in which	☑Performance Assurance Report ☐Other – give details:
	reports ?	3.10 SOURCE   SOURCE
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html
17	Additional Information	
	act details for Data Manager /	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
	ialist Lead	Specialist Lead: Lynn Carberry Email: lynn.carberry@hse.ie Tel: 01 8915720
Natio	nal Lead and Division	Ann Marie Hoey, Assistant National Director, Primary Care Schemes & Eligibility

Prir	mary Care, Communi	ty (Demand-Led) Schemes and other Community Services
	Medical Card/GP Visit Card - MO	
	review within 5 days	
1	KPI Title	Percentage of Medical Card/GP visit card applications, assigned for Medical Officer review, processed within 5 days
2	KPI Description	This refers to the percentage of Medical Cards/GP visit card applications assigned for Medical Officer review and
	PCRS4	processed within 5 days in order to ascertain the efficiency of the application system.
3	KPI Rationale	To capture the percentage of Medical Cards/GP visit card applications processed within 5 days of receipt by the assigned Medical Officer
	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 2016	NSP 2016 Target National - 90%
5	KPI Calculation	No. of applications completed within 0-5 days and 5+ days x 100 =
		No. of complete applications completed
6	Data Source	Source PCRS
	Data Completeness	Completeness 100%
	Data Quality Issues	Subject to ongoing validation of HSE's GPVC database
7	Data Collection Frequency	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Completed application form for Medical Card. Eligibility determined by current guidelines
9	Minimum Data Set	Yes
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:PCRS
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 □ LHO Area □ Hospital
		☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports ?	☑Performance Assurance Report ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	In CIF
Cont	act details for Data Manager /	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
	ialist Lead	Specialist Lead: Lynn Carberry Email: lynn.carberry@hse.ie Tel: 01 8915720
Natio	onal Lead and Division	Ann Marie Hoey, Assistant National Director, Primary Care Schemes & Eligibility
		r

Prin	Primary Care - PCRS		
1	KPI title	% of Medical Card / GP visit card applications which are accurately processed by National Medical Card Unit staff	
2	KPI Description PCRS5	% of medical card / GP visit card applications processed without error by National Medical Card Unit staff	
3	KPI Rationale		
	Indicator Classification	Please tick Indicator Classification this indicator applies to:	
		V Person Centred Care  □ Effective Care  □ Safe Care	
		□ Better Health and Wellbeing □ Use of Information □ Workforce	
4	KPI Target	V Use of Resources ☐ Governance, Leadership and Management	
4	Kri raiget	NSP 2016 Target National - 95%	
5	KPI Calculation	A sample size of between 5 and 10% of all applications received by NMCU are quality checked and a score assigned to each. This KPI measures how many of that sample of applications score 100% (target is 95%)	
6	Data Source Data Completeness	Currently reports are complied manually. IT development work is required to automate this process.	
	Data Quality Issues		
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected:	
8	Tracer Conditions	Daily √Weekly ☐ Monthly ☐Quarterly ☐Bi-annually ☐Annually ☐Other – give details:	
9	Minimum Data Set		
10	International Comparison		
11	KPI Monitoring	KPI will be monitored:	
		Daily √Weekly ☐ Monthly ☐Quarterly ☐Bi-annually ☐Annually ☐Other – give details:	
		Please indicate who is responsible at a local level for monitoring this KPI:	
12	KPI Reporting Frequency	Indicate how often the KPI will be reported:	
40	I/DI / I	□Daily □Weekly vMonthly □Quarterly □Bi-annually □Annually □Other – give details:	
13	KPI report period	Indicate the period to which the data applies  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)	
		☐ Other – give details:	
14	KPI Reporting Aggregation	Indicate the level of aggregation – for example over a geographical location:	
		□ National □ Regional □ Hospital Group □ Hospital □ CHO □ ISA □ LHO	
		□ County □ Institution vOther – give details: NMCU	
15	KPI is reported in which reports?	Indicate where the KPI will be reported:	
16	Web link to data	□ Performance Assurance Report □ Other – give details:	
17	Additional Information	In CIF	
Cont	act details for Data Manager /	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312	
Specialist Lead		Specialist Lead: Lynn Carberry Email: lynn.carberry@hse.ie Tel: 01 8915720	
Natio	nal Lead and Division	Ann Marie Hoey, Assistant National Director, Primary Care Schemes & Eligibility	

Prir	Primary Care - PCRS		
1	KPI title	% of applications for medical cards / GP visit cards that are processed from end to end without the need for additional information	
2	KPI Description PCRS6	% of applications for medical cards / GP visit cards that are processed from end to end without the need to write to the client for additional information	
3	KPI Rationale		
	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	DOP 2016 Target National - 60%	
5	KPI Calculation	Number of applications where card status goes to "approved" at the time of first processing / Total number of applications processed (new, review, self assessment, U6, +70)	
6	Data Source Data Completeness Data Quality Issues	Report to be developed	
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected: □Daily □Weekly ✓ Monthly □Quarterly □Bi-annually □Annually □Other – give details:	
8	Tracer Conditions		
9	Minimum Data Set		
	International Comparison		
11	KPI Monitoring	KPI will be monitored: □Daily □Weekly v Monthly □Quarterly □Bi-annually □Annually □Other – give details: Please indicate who is responsible at a local level for monitoring this KPI:	
12	KPI Reporting Frequency	Indicate how often the KPI will be reported:  □Daily □Weekly □Monthly □Quarterly □Bi-annually □Annually □Other – give details:	
13	KPI report period	Indicate the period to which the data applies  ☐ 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)  ☐ Other – give details:	
14	KPI Reporting Aggregation	Indicate the level of aggregation — for example over a geographical location:  □ National □ Regional □ Hospital Group □ Hospital □ CHO □ ISA □ LHO □ County □ Institution v Other — give details: NMCU	
15	KPI is reported in which reports?	Indicate where the KPI will be reported: ☐ Performance Assurance Report ☐ Other – give details:	
16	Web link to data		
17	Additional Information	In CIF	
	act details for Data Manager / ialist Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Lynn Carberry Email: lynn.carberry@hse.ie Tel: 01 8915720	
Natio	onal Lead and Division	Ann Marie Hoey, Assistant National Director, Primary Care Schemes & Eligibility	

Pri	mary Care, Community (Demand-L	ed) Schemes and other Community Services	
1	KPI Title	Long Term Illness - Number of claims	
2	KPI Description	Based on LTI database of paid claims and month/year specified, count all unique claim numbers (unique claim	
	PCRS7	identifier) on the database for the particular month.	
3	KPI Rationale	Clients with certain long-term illnesses or disabilities (Acute Leukaemia, Mental handicap, Cerebral Palsy, Mental Illness in a persons under 16, Cystic Fibrosis, Multiple Sclerosis, Diabetes Insipidus, Muscular Dystrophies, Diabetes Mellitus, Parkinsonism, Epilepsy, Phenylketonuria, Haemophilia, Spina Bifida, Hydrocephalus and conditions arising from the use of Thalidomide) may apply to join the Long Term Illness Scheme. Once approved by the HSE clients are supplied with a Long Term Illness book. This book allows the client to get drugs, medicines, and medical and surgical appliances directly related to the treatment of the illness, free of charge. It does not depend on a person's income or other circumstances and is separate from the Medical Card Scheme and the GP Visit Card Scheme. Clients with Medical Cards do not need to apply for a Long Term Illness book	
		unless they become ineligible for a Medical Card at any stage and have one of the medical conditions listed above then they should apply to join the Long Term Illness scheme to cover the cost of their medication. All LTI claims are processed and paid by PCRS.	
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases	
	indicator olassification	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 2016	DOP 2016 Target National - 2,125,507	
5	KPI Calculation	Count	
6	Data Source	Source PCRS	
	Data Completeness	Completeness 100%	
	Data Quality Issues	Subject to ongoing validation of HSE's GPVC database	
7	Data Collection Frequency	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:	
8	Tracer Conditions	Completed application form available from local health office	
9	Minimum Data Set	Completed application form which includes demographic information and details of illness	
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:PCRS	
	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 □ LHO Area □ Hospital □ County □ Institution □ Other – give details:	
15	KPI is reported in which reports ?	☑Performance Assurance Report □Other – give details:	
	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html	
17	Additional Information	In CIF	
	act details for Data Manager / Specialist Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Lynn Carberry Email: lynn.carberry@hse.ie Tel: 01 8915720	
Natio	lational Lead and Division  Ann Marie Hoey, Assistant National Director, Primary Care Schemes & Eligibility		

Prii	nary Care, Community (Demand-L	ed) Schemes and other Community Services
4	VDI Title	Lang Town Warren Allerth on City and
1	KPI December 2	Long Term Illness - Number of items
2	KPI Description	Based on LTI database of paid claims and month/year specified, count all drug codes on the database for the
3	PCRS8 KPI Rationale	particular month.
3	API Kationale	The number of items will facilitate monitoring of demand for prescription items by Long Term Illness Cardholders. The average ingredient cost will enable both the HSE and the Department to monitor the impact of initiatives to reduce the prices of medicines and non-drug items. Clients with certain long-term illnesses or disabilities (Acute Leukaemia, Mental handicap, Cerebral Palsy, Mental Illness in a persons under 16, Cystic Fibrosis, Multiple Sclerosis, Diabetes Insipidus, Muscular Dystrophies, Diabetes Mellitus, Parkinsonism, Epilepsy, Phenylketonuria, Haemophilia, Spina Bifida, Hydrocephalus and conditions arising from the use of Thalidomide) may apply to join the Long Term Illness Scheme. Once approved by the HSE clients are supplied with a Long Term Illness book.
		This book allows the client to get drugs, medicines, and medical and surgical appliances directly related to the treatment of the illness, free of charge. It does not depend on a person's income or other circumstances and is separate from the Medical Card Scheme and the GP Visit Card Scheme. Clients with Medical Cards do not need to apply for a Long Term Illness book unless they become ineligible for a Medical Card at any stage and have one of the medical conditions listed above then they should apply to join the Long Term Illness scheme to cover the cost of their medication. All LTI claims are processed and paid by PCRS.
	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 2016	DOP 2016 Target National - 7,555,211
	KPI Calculation	Count
3	Data Source	Source PCRS
	Data Completeness	Completeness 100%
	Data Quality Issues	Subject to ongoing validation of HSE's GPVC database
7	Data Collection Frequency	□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
	Tracer Conditions	Completed application form available from local health office
9	Minimum Data Set	Completed application form which includes demographic information and details of illness
	International Comparison	No
	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
	Ç	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:  Please indicate who is responsible for monitoring this KPI:PCRS
	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 □ LHO Area □ Hospital □ County □ Institution □ Other – give details:
15	KPI is reported in which reports ?	☑Performance Assurance Report □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
	act details for Data Manager / Specialist Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Lynn Carberry Email: lynn.carberry@hse.ie Tel: 01 8915720
Natio	nal Lead and Division	Ann Marie Hoey, Assistant National Director, Primary Care Schemes & Eligibility

Pri	mary Care, Community (Demand-L	ed) Schemes and other Community Services
1	KPI Title	Drug Payment Scheme: No of claims
2		Based on DPS database of paid claims and month/year specified, count all unique claim numbers (unique claim
-	PCRS 9	identifier) on the database for the particular month.
3	KPI Rationale	Under the Drugs Payment Scheme, an individual or family in Ireland only has to pay €132 each month for approved prescribed drugs, medicines and certain appliances for use by that person or his or her family in that month. The amount is determined from time to time by the Minister for Health and Children. This scheme is aimed at those who don't have a Medical Card and normally have to pay the full cost of their medication. It also applies to those who have a GP Visit Card. Anyone ordinarily resident in Ireland can apply to join the scheme, regardless of family, financial circumstances or nationality. Eligible persons can avail of this Scheme by registering themselves and their dependants with their Local Health Office. Where people need to use two or more pharmacies in one month, they can claim back the amount paid over the threshold centrally from PCRS. Plans are being progressed to centralise the DPS registration process to PCRS with effect from April this year. All DPS claims will be processed and paid by PCRS.
	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□
_	V717	Workforce ☐ Use of Resources ☑ Governance, Leadership and Management ☐
4	KPI Target 2016	DOP 2016 Target National - 2,177,935
5	KPI Calculation	Count of number of claims
6	Data Source	Source PCRS
	Data Completeness	Completeness 100%
	Data Quality Issues	Subject to ongoing validation of HSE's GPVC database
7	Data Collection Frequency	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Completed application form available online or from local health office
9	Minimum Data Set	Basic demographic information provided in application form
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: PCRS
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 □ LHO Area □ Hospital □ County □ Institution □ Other – give details:
15	KPI is reported in which reports ?	☑ Performance Assurance Report ☐ Other – give details:
	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
	Additional Information	In CIF
	tact details for Data Manager / Specialist Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Lynn Carberry Email: lynn.carberry@hse.ie Tel: 01 8915720
Nati	onal Lead and Division	Ann Marie Hoey, Assistant National Director, Primary Care Schemes & Eligibility

Pri	mary Care, Community (Demand-L	ed) Schemes and other Community Services
1	KPI Title	Drug Payment Scheme: No of items
2	KPI Description PCRS10	Based on DPS database of paid claims and month/year specified, count all drug codes on the database for the particular month.
3	KPI Rationale	Under the Drugs Payment Scheme, an individual or family in Ireland only has to pay €132 each month for approved prescribed drugs, medicines and certain appliances for use by that person or his or her family in that month. The amount is determined from time to time by the Minister for Health and Children. This scheme is aimed at those who don't have a Medical Card and normally have to pay the full cost of their medication. It also applies to those who have a GP Visit Card. Anyone ordinarily resident in Ireland can apply to join the scheme, regardless of family, financial circumstances or nationality. Eligible persons can avail of this Scheme by registering themselves and their dependants with their Local Health Office. Where people need to use two or more pharmacies in one month, they can claim back the amount paid over the threshold centrally from PCRS. Plans are being progressed to centralise the DPS registration process to PCRS with effect from April this year. All DPS claims will be processed and paid by PCRS.
	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 2016	DOP 2016 Target National - 7,113,927
5	KPI Calculation	Count of number of items
6	Data Source	Source PCRS
	Data Completeness	Completeness 100%
	Data Quality Issues	Subject to ongoing validation of HSE's GPVC database
7	Data Collection Frequency	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Completed application form available online or from local health office
9	Minimum Data Set	Basic demographic information provided in application form
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: PCRS
12	KPI Reporting Frequency	Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
	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)
	KPI Reporting Aggregation	☑ National □ Regional □ CHO □ LHO Area □ Hospital □ County □ Institution □ Other – give details:
15	KPI is reported in which reports ?	☑Performance Assurance Report □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	In CIF
Con	tact details for Data Manager / Specialist Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Lynn Carberry Email: lynn.carberry@hse.ie Tel: 01 8915720
Nati	onal Lead and Division	Ann Marie Hoey, Assistant National Director, Primary Care Schemes & Eligibility

Pri	mary Care, Community (Demand-L	ed) Schemes and other Community Services
1	KPI Title	GMS: Number of prescriptions
2	KPI Description	Based on the GMS database of paid claims and month/year specified, count all unique claim numbers (unique
-		claim identifier) on the database for the particular month.
	PCRS 11	,
3	KPI Rationale	Drugs, medicines and appliances supplied under the GMS Scheme are provided through Community
		Pharmacies. In most cases a Doctor completes a prescription for his/her client and the client takes this
		prescription to any pharmacy that has an agreement with the HSE to dispense GMS prescription forms. In rural
		areas a Doctor may dispense for those persons who opt to have their medicines dispensed by him/her. All GMS
		claims are processed and paid by the Primary Care Reimbursement 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 ☐
		Workforce□Use of Resources☑ Governance, Leadership and Management □
4	KPI Target 2016	DOP 2016 Target National - 17,780,183
5	KPI Calculation	Count
6	Data Source	Source PCRS
	Data Completeness	Completeness 100%
	Data Quality Issues	Subject to ongoing validation of HSE's GPVC database
7	Data Collection Frequency	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Yes
9	Minimum Data Set	Yes
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:PCRS
	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 □ LHO Area □ Hospital
		☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports ?	☑Performance Assurance Report □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
	Additional Information	
Con	tact details for Data Manager / Specialist Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Lynn Carberry Email: lynn.carberry@hse.ie Tel: 01 8915720
Mat!	and Load and Division	
Nati	onal Lead and Division	Ann Marie Hoey, Assistant National Director, Primary Care Schemes & Eligibility

Caim number associated with it).	Pri	mary Care, Community (Demand-Lo	ed) Schemes and other Community Services
PCRS 12		VDI Title	OMO Allendary of the control of the
Identifier) on the database for the particular month. (For clarification: each item on a prescription has the same claim number associated with it).    Fig.   Particular	1		GMS: Number of items
Pharmacies. In most cases a Doctor completes a prescription for his/her client takes this prescription to any pharmacy that has an agreement with the HSE to dispense GMS prescription forms. In rur areas a Doctor may dispense for those persons who op to have their medicines dispensed by him/her. All GM claims are processed and paid by the Primary Care Reimbursement 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    Workforce/Use of Resources/E Governance, Leadership and Management   DOP 2016 Target National - 54,229,556  KPI Calculation   Count   Data Completeness   Completeness   Source PCRS   Data Completeness   Completeness   Subject to ongoing validation of HSE's GPVC database   Data Quilly Issues   Subject to ongoing validation of HSE's GPVC database   Data Collidation   Person   Minimum Data Set   Yes   Minimum Data Se	2	KPI Description	identifier) on the database for the particular month. (For clarification: each item on a prescription has the same
Cases you may need to choose twol.   □Person Centred Care   □Effective Care   □Ef	3	KPI Rationale	Pharmacies. In most cases a Doctor completes a prescription for his/her client and the client takes this prescription to any pharmacy that has an agreement with the HSE to dispense GMS prescription forms. In rural areas a Doctor may dispense for those persons who opt to have their medicines dispensed by him/her. All GMS claims are processed and paid by the Primary Care Reimbursement Service.
KPI Target 2016   DOP 2016 Target National - 54,229,556		Indicator Classification	cases you may need to choose two).  □Person Centred Care □Effective Care  Safe Care□ Better Health and Wellbeing □Use of Information□
Source PCRS	4	KPI Target 2016	
Data Source   Data Completeness   Completeness   Completeness   Completeness   Completeness   Completeness   Completeness   Completeness   Subject to ongoing validation of HSE's GPVC database			
Data Completeness   Completeness   100%			
Data Quality Issues   Subject to ongoing validation of HSE's GPVC database	Ů		<b>_</b>
Data Collection Frequency			<del></del>
Tracer Conditions	7		
9 Minimum Data Set 10 International Comparison No 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: PCRS  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 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 □ Mational □Regional □ CHO □ LHO Area □ Hospital □ □ County □ Institution □ Other – give details: 15 KPI is reported in which reports? □Performance Assurance Report □Other – give details: 16 Web link to data http://www.hse.ie/eng/services/Publications/corporate/Performance Reports_Monthly.html 17 Additional Information Contact details for Data Manager / Specialist Lead Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Lynn Carberry Email: lynn.carberry@hse.ie Tel: 01 8915720			
International Comparison			
KPI Monitoring			
Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:  Please indicate who is responsible for monitoring this KPI: PCRS  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 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 □Regional □CHO□LHO Area □Hospital □County □Institution □Other – give details:  15 KPI is reported in which reports? ☑Performance Assurance Report □Other – give details:  16 Web link to data http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html  17 Additional Information In CIF  Contact details for Data Manager / Specialist Lead Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Lynn Carberry Email: lynn.carberry@hse.ie Tel: 01 8915720	11	KDI Monitoring	
Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month activity)		RETINIONING	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:  Please indicate who is responsible for monitoring this KPI:PCRS
Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month activity)	12	KPI Reporting Frequency	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
County	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>
16     Web link to data     http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html       17     Additional Information     In CIF       Contact details for Data Manager / Specialist Lead     Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312       Specialist Lead: Lynn Carberry Email: lynn.carberry@hse.ie Tel: 01 8915720	14	KPI Reporting Aggregation	
16     Web link to data     http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html       17     Additional Information     In CIF       Contact details for Data Manager / Specialist Lead     Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312       Specialist Lead: Lynn Carberry Email: lynn.carberry@hse.ie Tel: 01 8915720	15	KPI is reported in which reports ?	☑Performance Assurance Report □Other – give details:
17 Additional Information In CIF Contact details for Data Manager / Specialist Lead Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Lynn Carberry Email: lynn.carberry@hse.ie Tel: 01 8915720			http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
Specialist Lead: Lynn Carberry Email: lynn.carberry@hse.ie Tel: 01 8915720			
National Lead and Division  Ann Marie Hoey, Assistant National Director, Primary Care Schemes & Eliqibility	Cont	act details for Data Manager / Specialist Lead	
	Natio	onal Lead and Division	Ann Marie Hoey, Assistant National Director, Primary Care Schemes & Eligibility

Pri	mary Care, Community (Demand-Le	ed) Schemes and other Community Services
1	KPI Title	GMS: Number of claims – special items of service
	KPI Description	Based on the Special Item of Service database of paid claims and month/year specified, count all unique claim
	PCRS 13	numbers (unique claim identifier) on the database for the particular month.
	KPI Rationale	Drugs, medicines and appliances supplied under the GMS Scheme are provided through Community
3	Kri Kauonale	Pharmacies. In most cases a Doctor completes a prescription for his/her client and the client takes this
		prescription to any pharmacy that has an agreement with the HSE to dispense GMS prescription forms. In rural
		areas a Doctor may dispense for those persons who opt to have their medicines dispensed by him/her. All GMS
		claims are processed and paid by the Primary Care Reimbursement Service.
		ciamis are processed and paid by the rinnary date reimbursement dervice.
	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 2016	DOP 2016 Target National - 999,158
	KPI Calculation	Count
6	Data Source	Source PCRS
	Data Completeness	Completeness 100%
	Data Quality Issues	Subject to ongoing validation of HSE's GPVC database
	Data Collection Frequency	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
	Tracer Conditions	Yes
	Minimum Data Set	Yes
	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:PCRS
	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 □ LHO Area □ Hospital
		☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports ?	☑Performance Assurance Report ☐Other – give details:
	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
	Additional Information	In CIF
Cont	act details for Data Manager / Specialist Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
		Specialist Lead: Lynn Carberry Email: lynn.carberry@hse.ie Tel: 01 8915720
Natio	nal Lead and Division	Ann Marie Hoey, Assistant National Director, Primary Care Schemes & Eligibility

1	KPI Title	GMS: Number of claims – special type consultations
2	KPI Description	Based on the Special Type Consultations database of paid claims and month/year specified, where the STC type is EC resident, Emergency and Temporary resident, count all unique claim numbers (unique claim identifier) on
		the database for the particular month. Out of Hours, STC claims are reported separately.
	PCRS 14	
3	KPI Rationale	Drugs, medicines and appliances supplied under the GMS Scheme are provided through Community Pharmacies. In most cases a Doctor completes a prescription for his/her client and the client takes this prescription to any pharmacy that has an agreement with the HSE to dispense GMS prescription forms. In rural areas a Doctor may dispense for those persons who opt to have their medicines dispensed by him/her. All GMS claims are processed and paid by the Primary Care Reimbursement 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☐
		Workforce□Use of Resources☑ Governance, Leadership and Management □
4	KPI Target 2016	DOP 2016 Target National - 1,164,844
5	KPI Calculation	Count
6	Data Source	Source PCRS
	Data Completeness	Completeness 100%
	Data Quality Issues	Subject to ongoing validation of HSE's GPVC database
7	Data Collection Frequency	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Yes
9	Minimum Data Set	Yes
	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:PCRS
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 □ Regional □ CHO □ LHO Area □ Hospital □ County □ Institution □ Other – give details:
15	KPI is reported in which reports ?	☑Performance Assurance Report □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
	Additional Information	In CIF
Contact details for Data Manager / Specialist Lead		Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312 Specialist Lead: Lynn Carberry Email: lynn.carberry@hse.ie Tel: 01 8915720
loti	onal Lead and Division	Ann Marie Hoey, Assistant National Director, Primary Care Schemes & Eligibility

Primary Care, Community (Demand-Led) Schemes and other Community Services					
Prii	mary Care, Community (Demand-L	ed) Schemes and other Community Services			
	VDI THE	U. Tark Nambur of delice			
1	KPI Title	Hi - Tech: Number of claims			
2	KPI Description	Based on the High Tech database of paid claims and month/year specified, where the drug code relates			
		to High Tech Medicines only, count all unique claim numbers (unique claim identifier) on the database for			
	PCRS 15	the particular month.			
3	KPI Rationale	Arrangements are in place for the supply and dispensing of High Tech medicines through Community			
		Pharmacies. Such medicines are generally only prescribed or initiated in hospital and would include item			
		such as anti-rejection drugs for transplant patients or medicines used in conjunction with chemotherapy o			
		growth hormones. These medicines are purchased by the HSE and supplied through Community			
		Pharmacies for which Pharmacies are paid a patient care fee. The cost of the medicines and patient care			
		fees are paid by the Primary Care Reimbursement Service.			
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in			
	indicator Glassification	some cases you may need to choose two).			
		□Person Centred Care □Effective Care			
4	KDI T+ 2040	Workforce□Use of Resources☑ Governance, Leadership and Management□			
	KPI Calculation	DOP 2016 Target National - 533,824			
5	KPI Calculation	Count			
6	Data Source	Source PCRS			
	Data Completeness	Completeness 100%			
_	Data Quality Issues	Subject to ongoing validation of HSE's GPVC database			
7	Data Collection Frequency	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:			
8	Tracer Conditions	Yes			
9	Minimum Data Set	Yes			
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: PCRS			
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 □ LHO Area □ Hospital			
	. 5 55 5	☐ County ☐ Institution ☐ Other – give details:			
15	KPI is reported in which reports?	☑Performance Assurance Report ☐Other – give details:			
	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html			
	Additional Information	In CIF			
Contact details for Data Manager / Specialist Lead		Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312			
		Specialist Lead: Lynn Carberry Email: lynn.carberry@hse.ie Tel: 01 8915720			
Natio	onal Lead and Division	Ann Marie Hoey, Assistant National Director, Primary Care Schemes & Eligibility			
	phili mane ricey, Assistant National Director, Filling y Care Scriences & Ligibility				

Pri	mary Care, Community (Demand-L	ed) Schemes and other Community Services
1	KPI Title	DTSS: Number of treatments (above the line)
١.	INT I TILLE	Number of treatments (below the line)
2	KPI Description	Routine - Based on the ATL & Tooth Dental database of paid claims for the month/year specified, where the
_		patients are medical card patients count all treatments on the database for the particular month/year
		Complex Based on the BTL Dental database of paid claims for the month/year specified, where the patients are
	PCRS 16 & 17	medical card patients count all treatments on the database for the particular month/year.
3	KPI Rationale	This will allow us to monitor how many patients have availed of DTSS in a given month. Under the Dental
		Treatment Services Scheme GMS eligible adults have access to a range of treatments and clinical procedures
		comprised of routine treatments and full upper and lower dentures. Dentists may also prescribe a range of
		medicines to eligible persons. All DTSS claims are processed and paid by PCRS.
	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 ☐
4	KPI Target 2016	Workforce□Use of Resources☑ Governance, Leadership and Management □ DOP 2016 Target National - (Above the line - 1,207,639) (Below the line - 65,315)
	KPI Calculation	Count
6	Data Source	Source PCRS
Ů	Data Completeness	Completeness 100%
	Data Quality Issues	Subject to ongoing validation of HSE's GPVC database
7	Data Collection Frequency	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Under the Dental Treatment Services Scheme GMS eligible adults have access to a range of treatments and
		clinical procedures comprised of routine treatments and full upper and lower dentures.
9	Minimum Data Set	Yes
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:
		Diagon indicate who is responsible for monitoring this KDI. DCDC
12	KPI Reporting Frequency	Please indicate who is responsible for monitoring this KPI:PCRS
	KPI report period	☐ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of
	Treport period	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 □ LHO Area □ Hospital
		□ County □ Institution □Other – give details:
15	KPI is reported in which reports ?	☑Performance Assurance Report □Other – give details:
	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
	Additional Information	In CIF
Cont	act details for Data Manager / Specialist Lead	Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
		Specialist Lead: Lynn Carberry Email: lynn.carberry@hse.ie Tel: 01 8915720
Natio	onal Lead and Division	Ann Marie Hoey, Assistant National Director, Primary Care Schemes & Eligibility

1	KPI Title	DTSS: Number of patients who have received treatment (above the line)
		Number of patients who have received treatment (below the line)
2	KPI Description	Above the line - Based on the ATL Dental database of paid claims for the month/year specified, where the patient
		are medical card holders count unique patient card details on the database for the particular month/year.
		Below the line – Based on the BTL Dental database of paid claims for the month/year specified, where the patient
		are medical card holders count unique patient card details on the database for the particular month/year.
	PCRS 18 & 19	
3	KPI Rationale	This will allow us to monitor how many patients have availed of DTSS in a given month
		Under the Dental Treatment Services Scheme GMS eligible adults have access to a range of treatments and
		clinical procedures comprised of routine treatments and full upper and lower dentures. Dentists may also prescrib
		a range of medicines to eligible persons. All DTSS claims are processed and paid by PCRS.
	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 2016	DOP 2016 Target National - (Above the line - 567,728) (Below the line - 63,000)
5	KPI Calculation	Count
6	Data Source	Source PCRS
	Data Completeness	Completeness 100%
	Data Quality Issues	Subject to ongoing validation of HSE's GPVC database
7	Data Collection Frequency	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Under the Dental Treatment Services Scheme GMS eligible adults have access to a range of treatments and
		clinical procedures comprised of routine treatments and full upper and lower dentures.
9	Minimum Data Set	
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: PCRS
	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 □ LHO Area □ Hospital
45	VDL:	□ County □ Institution □ Other – give details:
	KPI is reported in which reports ?	☑Performance Assurance Report □Other – give details:
	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
	Additional Information	In CIF
Contact details for Data Manager / Specialist Lead		Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
		Specialist Lead: Lynn Carberry Email: lynn.carberry@hse.ie Tel: 01 8915720
Motio	nal Lead and Division	Ann Marie Hoey, Assistant National Director, Primary Care Schemes & Eligibility

Pri	mary Care, Community (Dema	nd-Led) Schemes and other Community Services
1	KPI Title	Community Ophthalmic Scheme - Number of treatments:
		i) Adult
	KDI Dagarintian DODO 00 0 00 A 0 00D	ii) Children
2	KPI Description PCRS 20 & 20A & 20B	Based on the Optical database of paid claims for the month/year specified, where the patients are
		medical card patients, count claim numbers (unique claim identified) on the database for the particular month.
		Adult – Based on the Optical database of paid claims for the month/year specified, where the patients
		are medical card patients and the patient indicator is 'A' (Adult), count claim numbers (unique claim
		identified) on the database for the particular month.
		Children - Based on the Optical database of paid claims for the month/year specified, where the
		patients are medical card patients and the patient indicator is 'C' (Child), count claim numbers (unique
		claim identified) on the database for the particular month.
3	KPI Rationale	Under the Health Service Executive Community Ophthalmic Services Scheme, adult medical card
		holders and their dependants are entitled, free of charge, to eye examinations and necessary
		spectacles/appliances. Claims by Optometrists/Ophthalmologists are paid by Primary Care
		Reimbursement Service. Claims for spectacles provided under the Children's Scheme are also paid by
		the Primary Care Reimbursement 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 ☐
		Workforce ☐ Use of Resources ☑ Governance, Leadership and Management ☐
4	KPI Target 2016	DOP 2016 Target Community Ophthalmic Scheme - Number of treatments - 832,933
		i) Adult - 747,849
		ii) Children - 85,084
	KPI Calculation	Count
6	Data Source	Source PCRS
	Data Completeness  Data Quality Issues	Completeness 100%
7	Data Collection Frequency	Subject to ongoing validation of HSE's GPVC database  □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
Ľ	Suita Goliconon Frequency	
8	Tracer Conditions	Under the Health Service Executive Community Ophthalmic Services Scheme, adult medical card
		holders and their dependants are entitled, free of charge, to eye examinations and necessary
_	Minimum Data Set	spectacles/appliances.
9 10	International Comparison	Yes No
	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
	3	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
		Please indicate who is responsible for monitoring this
40	VDID (I F	KPI: PCRS
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 □ LHO Area □ Hospital
	LIDIU III III III III III III III III III	☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports?	☑Performance Assurance Report □Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	In CIF
		Information Analyst: Katherine Cregan email: katherine.cregan@hse.ie tel: 046 9251312
		Specialist Lead: Lynn Carberry Email: lynn.carberry@hse.ie Tel: 01 8915720
National Lead and Division		Ann Marie Hoey, Assistant National Director, Primary Care Schemes & Eligibility