

Feidhmeannacht na Seirbhíse Sláinte Health Service Executive

November 2010 Performance Report on NSP 2010





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The Performance Report (PR) provides an overall analysis of key performance data from finance, HR, Hospital and Primary & Community Services. The activity data reported is based on the Performance Activity and Key Performance Indicators outlined in the NSP 2010.

The PR is used by the Performance Monitoring & Control committee (PMCC), the CEO and the HSE Board to monitor performance against planned activity, as outlined in the NSP, and to highlight areas for improvement. The PR also provides an update to the DoHC on the delivery of the NSP.

A Supplementary Report is also produced each month which provides more detailed data on the metrics covered in the Performance Report. Biannually (June and Dec PR Reports) a report on progress against the Deliverables outlined in NSP 2010 will also be included.

Areas of special focus in NSP 2010

- Fair Deal / NHSS (page 14)
- Emergency Department –access (page 31)

dditional in	formation and cl	arifications this month	

Arrows Explained

- Arrows relate to performance trend against target last month compared to performance trend against target this month. •
- Trends allow a differential of 1% in monthly comparisons

→= Performance being maintained

†= Performance has improved **↓**= Performance has deteriorated

Perf Trend v last mth		Key Performance Measure	Outturn 2009	Target 2010	Target YTD 2010	Reported perf last month	Reported Perf this month/Q	% Var this mth v Tar YTD	Perf Trend v last mth
		$\%$ of children in care who currently have a written care plan (\mathbb{Q})	81%	100%	100%	88.3%	88.3%	-11.7%	→
5 ↑		% of children in care who have an allocated social worker (Q)	83%	100%	100%	92.2%	92.2%	-7.8%	→
→		% Childhood Immunisation (24 months) $(\ensuremath{\mathbb{Q}})$	94%	95%	95%	93.6%	93.6%	-1.5%	→
		MRSA bacteraemia notification rate per 1,000 bed days used (Q)	0.09	5% reduction		0.09	0.09	0.0%	→
. →		Scheduled access to colonoscopy for urgent referral within 4 weeks (\mathbb{M})	N/A	100%	100%	98.6%	99.2%	-0.8%	→
→ →	-	$\%$ of cases compliant with HIQA standard 2 weeks for urgent referrals $({\rm M})$	95%	95%	95%	98.8%	98.7%	3.9%	→
→ >		calls responded to within 14 minutes (M)	59%	63%	63%	57.3%	54.6%	-13.3%	→
ł		procedures conducted on day of	44%	75%	75%	49.0%	50.0%	-33.3%	t
→ →		Mental Health: Inpatient readmission rates to acute MH units per 100,000 population $({\rm Q})$	65.60	59.0	59.0	60	60	2.1%	→
• †		Mental Health: no of readmissions as a % of total admissions (\mathbb{Q})	72%	68%	68%	66.0%	66.0%	-6.3%	→
•		Emergency Activity: No. of emergency admissions (\mathbb{M})	366,960	330,298	301,991	275,423	337,341	11.7%	→
-	-	% day case surgeries as % day case + inpatients for specified basket procedures	44%	75%	75%	68.0%	69.0%	-8.0%	t
1		(Q) Numbers of Medical Assessment Units (MAU) (or equivalent) in operation (Q)	N/A	34	17	15	15	-11.8%	→
_		ALOS for all inpatient discharges+deaths (\mathbb{M})	6.20	5.6	5.60	5.9	6.00	7.1%	→
⇒		Absenteeism (M)	5.03%	3.50%	3.50%	4.87%	4.80%	34.6%	→

Balanced Scorecard

	Key Performance Measure	Outturn 2009	Target 2010	Target YTD 2010	Reported perf last month	Reported Perf this month/Q	% Var this mth v Tar YTD	Perf Trend v last mth
	% waiting < 6 hours from registration to discharge in ED:* (\mathbb{M})							
	· All patients	88.0%	100%	100%	60.6%	62.6%	-37.4%	Ť
SS	Public patients as a % of all elective discharges	78.5%	80%	80%	74.4%	73.8%	-7.8%	→
CE	No. of patients discharged:							
AC	· Inpatient (M)	595,022	540,933	495,990	490,851	540,136	8.9%	→
	· Day case (M)	675,611	689,310	636,173	612,619	679,921	6.9%	→
	Elective Waiting List - Inpatient (M)							
	• % of adults waiting \leq 6 months	77.3%	100%	100%	75.3%	76.1%	-23.9%	→
	• % of children waiting \leq 3 months	43.8%	100%	100%	43.4%	45.5%	-54.5%	ł
	Elective Waiting List – Day Case (\mathbb{M})							
	• % of adults waiting \leq 6 months	85.0%	100%	100%	86.9%	87.7%	-12.3%	→
	• % of children waiting ≤ 3 months	40.8%	100%	100%	46.3%	50.8%	-49.2%	t
	CAMH: % of new cases seen by \leq 3 months to first appointment (M)	66.0%	70%	70%	65.0%	66.0%	-5.7%	t
	No. of PCTs holding clinical meetings	219	395	375	316	328	-12.5%	Ť
	% of medical cards issued within 15 working days of complete application $({\rm Q})$	New	100%			informa avail		
	% Fair Deal applications processed \leq 4 weeks (\mathbb{M})	New	TBD	100%	95.0%	95.0%	-5.0%	→

Performance Report November 2010

	Key Performance Measurement Dublin Mid Leinster	Approved Allocation €000	Actual YTD €000	Budget YTD €000	Variance YTD €000	% Var Act v Tar		ISD Region / Other	WTE Dec 2009	Ceiling Nov 2010	WTE Nov 2010	WTE Change since Oct 2010	WTE Change from Dec 2009 to Nov 2010	WTE Variance Nov 2010	% WTE Variance Nov 2010
	Dubin Mid Leinster	2,891,210	2,664,439	2,639,591	24,848	0.9%		ISD DML	32,646.03	32,345.65	32,283.21	-40.97	-362.82	-62.44	-0.19%
	Dublin North East	2,018,591	1,856,809	1,831,216	25,594	1.4%		ISD DNE	22,563.80	22,325.32	22,122.31	-20.98	-441.49	-203.01	-0.91%
	South	2,008,874	1,850,958	1,838,094	12,864	0.7%		ISD South	23,818.78	23,830.68	23,444.11	-48.13	-374.67	-386.57	-1.62%
	West	2,093,215	1,937,056	1,908,613	28,443	1.5%			, 	· · · · · ·					
	Care Group / Other Services	62,174	25,047	54,974	-29,928	-54.4%		ISD West	25,846.64	25,751.33	25,302.43	-35.34	-544.21	-448.90	-1.74%
	Primary Care Reimbursement Serivce	2,779,880	2,452,998	2,503,442	-50,444	-2.0%	ES	ISD National Portion of Ceiling to be allocated	687.52	1,114.45	962.49	+2.52	+274.97	-151.96 -102.39	-13.64%
NCE	ISD Regional Sub Total	11,853,945	10,787,306	10,775,930	11,377	0.1%	OURCI	Other [Corp. Services, QCC, PH etc.]	4,190.13	4,207.14	4,044.24	-44.44	-145.89	-162.90	-3.87%
FINANCE	A Fair Deal 2009 / 2010 Incremental Funding	214,000	232,495	214,000	18,495	8.6%	RES	Total	109,752,90	109,676.96	108,158.79	-187.34	-1,594.11	-1.518.17	-1.38%
	Statutory Pensions	605,936	280,236	295,547	-15,311	-5.2%		Total	103,132.30		100,100.70	Variance	WTE		
	Ambulance	139,904	128,571	128,176	395	0.3%	HUMAN	Select Grade Exempted	WTE Dec 2009	Target Growth to	WTE Nov 2010	from Dec 2012	Change from last	WTE Change	% Change
	Corporate Services	107,699	84,327	96,449	-12,122	-12.6%	문			2012		target	month	2010	2010
	Health Repayment Scheme	20,000	20,514	20,000	514	2.6%				not specified		n/a			
	CIS & Insurance	84,300	71,253	71,253	0	0.0%		Consultants Occupational	2,316.86		2,448.67		+13.66	+131.81	+5.69%
	National Cancer Control							Therapists	1,103.01	n/a	1,204.89	n/a	-0.62	+101.88	+9.24%
	Programme	56,473	45,484	52,945	-7,461	-14.1%		Physiotherapists	1,468.83	n/a	1,537.51	n/a	-2.53	+68.68	+4.68%
	QCC / Population Health Held Funds	217,319	141,672	188,080	-46,408	-24.7%		Speech and Language Therapists	776 46	n/a	832 54	n/a	+4 69	+56.08	+7 22%
		217,319 28,859	141,672	188,080 15,000	-46,408 -15,000	-24.7%		Language Therapists Combined	776.46	n/a +380	832.54	<i>n/a</i> -153.00	+4.69 +1.54	+56.08	+7.22%
			141,672 11,791,859			-24.7% -0.6%		Language Therapists							

M anagement Overview Report on Performance

FINANCE

HSE Vote Position at 31st December 2010 – Post Supplementary Estimate Revenue and Capital Position Net overall expenditure is under profile by €154m of which €150m relates to a saving on the exit schemes leaving a net surplus of €4m.

Comparison to Issues Return

The December issues return submitted on 30th December 2010 is consistent with the December Vote Return.

November Finance Key Messages:

The financial results for November show total expenditure of €11.791 billion against a year to date budget of €11.857 billion. The reported favourable variance is €65.522m. With only 1 reporting period remaining the overall health system is achieving a surplus against budget although significant financial pressures in hospitals have not been eliminated.

• Services within the hospitals are running at a deficit of €86m which is a reduction on the October deficit. Services within the community are running a small deficit of €4.8m. These deficits are being offset by savings in other areas – most significantly in the Primary Care Reimbursement Service.

HUMAN RESOURCES

Human Resources Key Messages:

Health Service at end-November stands at 108,159 WTE which is -1,518 below the approved ceiling of 109,677. Staffing has fallen by -187 WTE since the end-October or -1,594 since the beginning of the year. We will be operating within the end-of-year ceiling.

- Medical/ Dental staffing shows an increase of +0.51% (+42), there is an increase of +132 (5.69%) in the number of medical consultants counterbalanced by a reduction in NCHD numbers with an decrease of -86 WTE (-1.78%)
- Nursing is down -922 WTE (-2.46%) –this change is influenced by student nurses on placement.

NCHDs

As of 11th January 2010, the health service continues to experience approximately 150 Non Consultant Hospital Doctor (NCHD) vacancies. In many instances these vacancies are filled by locums or by other short-term contractual arrangements. The full extent of NCHD vacancies has changed as a number of NCHD posts have been suppressed to allow introduction of additional Consultant posts.

NCHD staffing issues in a range of sites have now been resolved or addressed to ensure continued delivery of the full range of services. Such sites include Beaumont, Limerick, Tralee, Mullingar, Portlaoise and to some extent, Drogheda.

Locations continuing to experiencing difficulties are Drogheda (Paediatrics), Letterkenny (Emergency Medicine and Medicine), Roscommon (Emergency Medicine and Medicine), Cappagh (Orthopaedic Surgery) and Tullamore (Medicine). Posts in Emergency Medicine in Letterkenny are currently filled by locums.

Voluntary Early Retirement Scheme and Voluntary Severance Scheme

2,003 people have availed of these schemes. A further 25 people are on maternity leave have the option of taking up the offer. There may be some minor adjustments to these numbers as pension offices complete outstanding queries. The total payment under the scheme to date is €101m [*Note some further payments will be required*.]

The breakdown across the schemes is:

- 641 Early Retirement Scheme and 1362 Voluntary Severance Scheme;
- HSE staff 1409 and 594 from other organisations;
- 70% Management/Administration (1364) and 30% (639) Support Services staff.
- 141 senior managers; this equates to almost 20% reduction in senior administrative managers.

A national human resources framework has been agreed with the relevant trade unions to ensure that any gaps identified as a result of staff leaving under the exit schemes are being dealt with appropriately. This is being used by local management and local trade union officials to deal with the impact of those staff leaving under the schemes. This process is ongoing at local level and the initial focus is on ensuring critical gaps are adequately covered in the early weeks of January.

Director of Children and Family Services

Mr. Gordon Jeyes has been appointed as the new National Director for Children and Family Services. This is a two-year post that has been established to lead organizational and cultural change in the Child and Family Services in the HSE. A critical role for Mr. Jeyes is the delivery of a clear service model that focuses on providing a safe and high quality child protection service which is consistent with our statutory obligations.

Director of Risk, Quality and Clinical Care

Dr. Philip Crowley has been appointed as the new National Director of Risk, Quality and Clinical Care. His appointment arises as a result of a strategic decision by the Health Service Executive to provide a greater leadership focus for two critical and complementary challenges; the development and implementation of national clinical programmes and the strategic management of risk and quality in clinical care.

Public Service Agreement

The Implementation Body appointed by the Government to oversee the progress of the implementation of actions plans relating to the Public Service Agreement ('Croke Park') have requested, that our Action Plan be reviewed in light of decisions taken by the Government in the context of the Estimates and Budget 2011 in order that the Plan supports the changes to follow from those decisions.

The revised plan has been prepared with the imperatives required to deliver the 2011 Service Plan which is a real litmus test for Croke Park. Specifically it will test the extent to which services can be delivered as planned within the reduced resources approved by Government. This will require pro-active co-operation from staff at all levels with procurement and other economy measures (including local measures to minimise wastage and reduce usage of "consumables") as well as changes in staffing levels / ratios and work practices. Crucially, the revised plan supports the significant developments to clinical services that will improve patient care and access.

SERVICE DELIVERY

Hospital Activity

The number of Inpatient Discharges has decreased by 0.7% compared to the same period in 2009 and is now 8.9% above target for 2010. Day cases continue to grow and are now running 9.9% higher compared to the same period last year. This is in line with the strategic direction of the HSE to shift from inpatient to day case work. Day cases are running 6.9% ahead of target at the end of November.

Children in care with an allocated Social Worker

Nationally for November 2010 the percentage of children in care with an allocated social worker is 92.6% (this figure is based on 27 out of 32 LHO). This compares to 91.9% in October.

Child and Adolescent Mental Health Services (CAMHS) Second Annual Report Launched

The Chairman of the HSE launched the Health Service Executive's second annual report on Child and Adolescent Mental Health Services (CAMHS) on the 23rd of November. The report provides vital data on: the number of new cases seen; waiting time to be seen; and mental health problems presented by age and gender. In addition, the report provides data on the admission of young people under the age of 18 years for inpatient treatment.

Disability Act Compliance

At the end of November, there were 733 assessments overdue for completion compared to a figure of 922 at the end of May. This represents a reduction of 189 assessment reports. Further improvement is anticipated to year end.

Standardising and Improving Home Care Services

In October 2010, the HSE began a national procurement process for the provision of enhanced home care services from 2011. This tender is currently underway. When completed in the New Year it will result in a range of 'Approved Providers' for home care services being in place in every HSE region. Approved Providers will meet the required minimum standards and will be identified and widely available to all clients by February 2011.

Emergency Departments

The 4th of January saw a surge where patients awaiting admission nationally rose. A full review is being carried out of the factors which contributed to this surge and of the measures taken in the contingency plans. Whilst there has been a significant improvement in the numbers awaiting admission this week, there continues to be significant challenges and the ED situation continues to be managed on a daily basis. The HSE has in place a revised framework for managing admission, discharge and a framework to support the implementation of escalation procedures when the hospital is unable to manage the demand being placed on it. This escalation framework is based on agreed trigger points and actions on each site.

Influenza

In addition to the normal post Christmas/New Year surge in ED presentations, widespread influenza activity was reported most significantly in the East, North East, North West, Mid West and Southern areas. Smaller and more localized effects were reported in other areas. The number of hospitalized cases for H1N1 continued to increase in early January, with 114 cases hospitalized for the week up to January 5th 2011. There were 33 cases admitted to ICU. The impact of H1N1 is a contributing factor to increased admissions levels in hospitals and a contributing factor (albeit limited) to ED presentation levels. The most immediate impact on acute services is the need for increased isolation facilities and critical care capacity. The concomitant impact of winter vomiting bug (and required isolation facilities) is exacerbating this effect further. Levels presenting with flu virus has increase significantly and on week ending the 14th of January have reached rates as high as the peak in the pandemic.

The National Steering Committee for Oversight of ICU Surge Capacity has been reactivated. A bed monitoring process has been put in place and will be used to monitor ICU capacity on a daily basis. If necessary and where possible closed ICU beds should be re-opened, on temporary basis, for a period of up to six weeks with a review in place at four weeks. Eight hundred and thirty five nurses have been up-skilled in ICU. These nurses should, in so far as possible, be redirected to assist with managing the critical care surge.

ITEMS FOR UPDATE

National Service Plan 2011

The HSE on Wednesday the 22nd December 2010 published its National Service Plan 2011 which sets out the type and volume of service the Health Service Executive (HSE) will provide directly and through a range of funded agencies during 2011, within the funding provided by Government (≤ 13.457 billion) and within the stipulated employment levels. The National Service plan will be rolled out at a regional level a set of Regional Service plans which will be in place by the end of January.

HSE Corporate Plan 2011-2013

An immediate priority in the first months of the year will be the preparation of a new three year HSE Corporate Plan for the period 2011-2013. This will be based on the funding outlook published by the government in the *National Recovery Plan 2011-2014*.

HSE Publishes National Report into Unreported X-rays

This survey of all hospitals and steps to ensure compliance with new standards for reporting on x-rays are detailed in the report published on the 22nd December 2010.

Reconfiguration Workshop

A national reconfiguration workshop was held on 21st December at which all of the regions presented on their progress to date and plans for reconfiguration in their areas.

Joint Committee Health and Children

18th November HSE attended the JCHC (Joint Oireachtas Committee on Health and Children) Sub Committee on Children to discuss HSE role in Child Protection.

25th of November HSE attended quarterly meeting of JCHC to discuss a range of health care issues – CEO and Senior management team members.

30th November JCHC meeting to discuss Stroke Care.

Public Accounts Committee

6th December 2010, the HSE met with the Public Accounts Committee (PAC) on the SKILL Programme. It was attended by the CEO and members of the Management Team.

Parliamentary Questions

The total number of PQs received between January and November 2010 was 2,398. 1234 of these (51%) were answered within the 15 day target. Non- answering of PQs was one of the actions of the industrial dispute during the first half of the year. Overall 2,221 (93%) have now been answered and there is an outstanding 177 unanswered. This is currently the focus of management attention.

December Severe Weather Conditions

With the impact of the severe weather conditions across the country, our staff made extraordinary efforts to continue to get to work to provide our services to patients and clients in the face of sub zero temperatures and very difficult road conditions. This was often with the help and support of many other statutory and voluntary agencies including the Civil Defence, Irish Defence Forces, Order of Malta and many others. We are grateful to all of these agencies for their help and support.

Detailed Finance Report

Finance Kev Performance The financial results for November show total expenditure of €11.791 Messages billion against a year to date budget of €11.857 billion. The reported favourable variance of €65.522m is illustrated in table 1. With only 1 reporting period remaining, the overall health system is achieving a surplus against budget although significant financial pressures in hospitals have not been eliminated. • Services within the hospitals are running at a deficit of €86m which is a reduction on the October deficit. Services within the community are running a small deficit of €4.8m. These deficits are being offset by savings in other areas - most significantly in the Primary Care Reimbursement Service and in Care Group/Other Services where some contingency funding is being applied. Expenditure on medical cards and other drugs schemes is €50m less • than budgeted. This arises because the profile of medical card recipients was less expensive than the budgeted profile and also because of a significant surplus on the Drug Payment Scheme. At the end of November Quality and Clinical Care is showing a positive • variance of €46m. This is primarily a technical surplus relating to H1N1 vaccines which were paid for with the 2010 vote. At the end of the November, pensions are in surplus due to the fact that guarter 4 pension payments/retirements have not followed the trend experienced in guarter 4 of 2009. We have however seen a 56% increase in lump sum payments in the month of November. This is not related to the Exit Scheme but reflects the decisions of nonadministrative personnel to leave before the year end. We are therefore cautious about declaring the overall pensions outturn until the full December numbers are known. Pension levy receipts are ahead of budget to the end of November. Given that Appropriations-in-Aid overall are not in surplus, the HSE will be allowed to retain this surplus.

 There is a deficit of €18.4m showing on the Fair Deal 2009/2010 incremental funding. This relates to budget movement from the 4 areas to Fair Deal. Significant work was undertaken in 2010 to

	Approved			Variance	
	Allocation	Actual YTD	Budget YTD	YTD	% Var Act
Table 1.	€000	€000	€000	€000	v Tar
Acute Hospital					
Services	4,039,715	3,771,897	3,684,952	86,945	2.3%
Primary &					
Community	4,972,175	4,537,365	4,532,561	4,804	0.1%
Care Group /					
Other Services	62,174	25,047	54,974	-29,928	-119.5%
Primary Care					
Reimbursement			0 500 440		0 404
Service	2,779,880	2,452,998	2,503,442	-50,444	-2.1%
ISD Total	11,853,945	10,787,306	10,775,930	11,377	0.1%
A Fair Deal 2009 /					
2010 Incremental					
Funding	214,000	232,495	214,000	18,495	8.0%
Statutory Pensions	605,936	280,236	295,547	-15,311	-5.5%
Ambulance	139,904	128,571	128,176	395	0.3%
Corporate					
Services	107,699	84,327	96,449	-12,122	-14.4%
Health Repayment					
Scheme	20,000	20,514	20,000	514	2.5%
CIS & Insurance	84,300	71,253	71,253	-0	0.0%
National Cancer					
Control					
Programme	56,473	45,484	52,945	-7,461	-16.4%
Population Health / QCC	217 210	141 670	100 000	46 409	20 00/
Held Funds	217,319	141,672	188,080	-46,408	-32.8%
	28,859		15,000	-15,000	
Total HSE	13,328,435	11,791,859	11,857,381	-65,522	-0.6%

Integrated Services	 estimate the movement of budget out of the 4 areas and into Tullamore for Fair Deal. To the extent that a deficit is showing in the Performance Report in November it relates to an underestimation of budget movement. There will be no deficit on the Fair Deal subhead within the vote. Funding for the voluntary redundancy and retirement scheme of €250m has now been provided by way of a 2010 supplementary vote estimate. This amount is included with statutory pensions in the performance report. All payments relating to these exit schemes were actioned prior to the end of the year and expenditure relating to the schemes will be reflected in the December results. Within the corporate directorates there is a significant overrun in Commercial & Support Services. A review of expenditure within the Estates function is being undertaken with a view to establishing the 2011 budget provision in light of the movement of rent/lease and legal costs to the Commercial & Support Services directorate. Hospital Services & Primary and Community Services 	
Directorate (ISD)		
	Year to date expenditure in Hospitals was €3.771 billion compared with a budget of €3.684 billion – leading to an adverse variance of €86.9 million. Table 2 illustrates the position by Region to the end of November 2010. Community Services within Regions have year to date expenditure of €4.537 billion compared with a budget of €4.532 billion – leading to a variance of €4.8m (table 3).	
Schemes	There has been no significant change in the financial position of the schemes which are operating with a surplus.	

Table 2.			YTI)	
Hospital Services	Approved Allocation	Actual	Plan	Variance	%
	€000	€000	€000	€000	
Dublin Mid Leinster Hospitals	1,438,420	1,322,775	1,309,834	12,941	1.0%
Dublin North East Hospitals	912,600	848,312	831,570	16,741	2.0%
South Hospitals	827,635	767,029	756,394	10,634	1.4%
West Hospitals	861,061	833,781	787,153	46,628	5.9%
Hospitals Total	4,039,715	3,771,897	3,684,952	86,945	2.4%

Table 3.			Y	TD	
Primary & Community Services	Approved Allocation	Actual	Plan	Variance	%
Dublin/Mid Leinster	1,452,790	1,341,663	1,329,756	11,907	0.9%
Dublin/North East	1,105,992	1,008,498	999,645	8,852	0.9%
South	1,181,239	1,083,929	1,081,699	2,230	0.2%
West	1,232,154	1,103,275	1,121,461	(18,186)	-1.6%
Community Total	4,972,175	4,537,365	4,532,561	4,804	0.1%

Table 4.	Approved	YTD						
Schemes	Allocation €000	Actual €000	Budget €000	Variance €000	%			
Medical Card Schemes	1,924,843	1,710,325	1,723,254	(12,929)	-0.8%			
Community Schemes	855,037	742,673	780,188	(37,515)	-4.8%			
PCRS Total	2,779,880	2,452,998	2,503,442	(50,444)	-2.0%			

		YTD					
Table 5. Aids & Appliances	Approved Allocation	Actual	Plan	Variance	%		
	€000	€000	€000	€000			
HSE Total	24,364	47,462	21,552	25,910	120%		

Integrated	Hospital Services & Primary and Community Services	
Services Directorate (ISD)		Table
Capital	The net capital cash profile for the period Jan to Nov 2010 was €340.900m. The capital cash draw down less appropriations in aid for this period was €319.320m. The net capital position is that capital is under profile for the period by €21,580m.	2010 C1/C2 Facilit C3 Inf Agend
	Construction (C1/C2) Expenditure under this subhead is running below profile by €20.911m for the period Jan-Nov. Progress on most construction projects has been sluggish to date with progress behind original cash flow projects on nearly all projects. However momentum is picking up and it is expected that this allocation will be drawn down by year end.	C4 Me the Sa Dorma A in A Net C
	ICT (C3) Expenditure under this subhead is running below profile by €25.580m for the period Jan-Nov.	Table Approp
	Mental Health (C4) Expenditure under this subhead is running below profile by €21.500m for the period Jan-Nov. However this allocation can only be drawn down if a similar amount is realised from sale of assets.	Mainte
	Dormant Accounts (B13) On target.	Miscel
	Appropriations in Aid A in A's are behind target by €49.361m.	Pensio Total Source: N

Table 6. 2010 Capital Vote Subhead	2010 Approved Allocation	YTD Actual	YTD Allocation	YTD Variance
C1/C2 Building Equipping and Furnishing of Health Facilities	346,792	294,801	315,712	20,911
C3 Information Systems and Related Services for Health Agencies	40,000	3,008	28,588	25,580
C4 Mental Health and other Health Facilities Funded from the Sale of Surplus Assets	50,000	22,500	44,000	21,500
Dormant Accounts	7,000	2,926	5,877	2,951
A in A	-65,800	-3,916	-53,277	-49,361
Net Capital	377,992	319,320	340,900	21,580

Table 7. Appropriations-in-Aid	Estimate Provision	REV Profile to 1 Nov 2010	Receipts to 30 Nov2010	Shortfall / (Surplus)
Maintenance Charges	376,000	342,491	301,548	40,943
Superannuation	205,000	185,586	183,982	1,604
Miscellaneous Receipts	167,000	153,077	116,353	36,724
Pension Levy	341,206	308,894	324,510	- 15,616
Total	1,089,206	990,048	926,393	63,655

Source: Vote CRS at 31st October 2010 and estimate for November 2010. Figures agree with November Vote Expenditure Return.

LHOs with most significant Favourable Financial Variances								
LHO	Allocation €000	Actual YTD €000	Budget YTD €000	Variance €000	% Var			
LHO Limerick	174,248	153,625	159,329	-5,704	-3.6%			
LHO Dublin South	109,470	95,611	100,249	-4,638	-4.6%			
LHO 8 Dublin North	208,012	186,359	190,431	-4,072	-2.1%			
LHO Sligo / Leitrim	161,048	143,681	146,480	-2,798	-1.9%			
LHO Mayo	158,347	139,214	140,393	-1,179	-0.8%			
LHOs with most significan	t Adverse F	inancial Va	riances					
LHO	Allocation €000	Actual YTD €000	Budget YTD €000	Variance €000	% Var			
LHO Galway	248,861	223,640	220,112	3,529	1.6%			
LHO 6 Dublin North	177,644	165,691	162,573	3,117	1.9%			
LHO Laois / Offaly	168,526	156,123	154,608	1,515	1.0%			
LHO Longford / Westmeath	140,624	129,571	128,556	1,016	0.8%			
LHO Donegal	167,679	153,604	152,596	1,008	0.7%			

Hospitals with most significant Favourable Financial Variances								
Hospital	Allocation €000	Actual YTD €000	Budget YTD €000	Variance €000	% Var			
Monaghan General Hospital	16,917	14,722	15,484	-762	-4.9%			
Louth County Hospital	27,728	24,567	25,195	-628	-2.5%			
National Maternity Hospital	47,115	42,450	43,039	-589	-1.4%			
St Luke's Hospital	35,112	31,385	31,800	-415	-1.3%			
Kilcreene Orthopaedic Hospital	6,217	5,613	5,682	-70	-1.2%			
Hospitals with most significant A	dverse Fina	ncial Varia	nces					
Hospital	Allocation €000	Actual YTD €000	Budget YTD €000	Variance €000	% Var			
Regional Hospital Dooradoyle	148,176	147,298	135,047	12,25	1 9.1%			
Galway College University Hospital	266,141	255,041	242,908	12,134	4 5.0%			
Our Lady of Lourdes Hospital	109,193	105,603	100,037	5,56	7 5.6%			
Mater Misericordiae University Hospital	220,412	207,407	202,160	5,248	3 2.6%			
Sligo General Hospital	105,003	100,482	96,110	4,372	2 4.5%			

A Fair Deal (Table 8)	The Nursing Homes Support Scheme (Fair Deal) commenced on the 27th October 2009. A total of 17,325 applications have been received to date and nearly 75% of these applications have been processed at this stage. In addition 2,643 applications have been received for Ancillary State Support (Nursing Home Loan), of which nearly 2,165 or 82% have been completed.
	The total funding for long term residential care in 2010 is €979 million (subhead B12 in Vote 40 refers). This is effectively the budget for the Nursing Homes Support Scheme albeit that transitional arrangements must be facilitated from within the subhead (i.e. people in contract beds and people who choose to remain on subvention). The additional allocation of €152m received in 2010 for the Nursing Homes Support Scheme is included in the €979m Vote allocation.
	At present, and based on payments to date under the scheme, it is envisaged that there is sufficient funding available to meet the scheme's requirement in the current year, this is also based on estimated subvention and contract bed savings being realised and allocated for expenditure on Fair Deal.

		Applicants		%	Budget			
Table 8		No.	No.	processed within 4	Month Actual	YTD Actual		
A Fair Deal	Applicants from Oct 09	applicants this month	applicants YTD	weeks	€000	€000		
Dublin / Mid Leinster	4,321	101	3,063					
Dublin / North East	3,301	182	2,268	PR detail by RDO will be available in Q4.				
South	4,941	417	3,502					
West	4,762	151	3,240					
Total	17,325	851	12,073	*95%	€81m	€897m		
*Estimate								

Value for Mo	ue for Money (VFM)		Item	Adjustment Total	Adjustment YTD	Reduction YTD
				<u>€m</u>	<u>€m</u>	<u>€m</u>
Key Messages	•	The required Year to Date (YTD) total adjustment has been	Medical & Surgical Supplies	10.3	9.42	12.01
		delivered and the full year VfM projection indicates delivery of the	Payments to Voluntary Providers	10.0	9.12	9.12
		full adjustment when profiled to last year's rate of expenditure for the remaining months.	Insurance	10.0	9.12	9.12
			Drug Cost Management	9.3	8.49	8.49
	Surgical, Bedding & Clothing as well as the usual L&S. Education & 👘 🗖	Energy Management and Costs	9.7	8.85	5.60	
Training etc. to compensate for under or non delivery in areas such		Office Expenses and Administrative Overheads	7.8	7.11	0.91	
	Maintenance	6.5	5.89	8.97		
	Maintenance has also also also attack and increased	Legal	5.0	4.56	0.33	
	•	Maintenance has also shown significant continued improvement since September.	Patient transport	4.3	3.92	0.83
			Catering	4.2	3.80	7.34
	•	However, there is a reducing or static rate of saving in Office, Travel	Laboratory	4.0	3.67	0.00
		& Subsistence, Energy and Patient Transport.	Travel and Subsistence	3.5	3.19	5.00
	•	The areas that are now not expected to deliver the required savings	Professional Services - reduced rates and usage	2.4	2.21	2.21
		in 2010 are Legal, Laboratory and Computers. These and other headings where there is a reduced rate of saving will be considered	Child Care Placements	3.1	2.81	2.81
		in the context of the 2011 targeted reductions.	Agency Fees and Costs	1.4	1.28	1.28
			Computer costs	2.6	2.35	0.00
			Cleaning / washing	2.5	2.31	2.82
			Blood / Blood Products	2.3	2.10	4.69
			Improved management of Security costs	1.5	1.37	1.37
			X-Ray / Imaging	0.8	0.73	2.90
			Medical Gases	0.8	0.73	1.62
			Banking Costs	0.6	0.50	0.97

TOTAL

Education and Training

Furniture, Crockery Bedding and clothing

Improved income collection in Non Acute facilities

Other miscellaneous non-pay reductions

0.46

0.27

0.18

0.12

2.10

96.67

0.46

2.76

0.90

2.07

2.10

96.67

0.5

0.3

0.2

0.1

2.3

106.0

Detailed Human Resources Report

Chart 1

- Health Service at end-November stands at 108,159 WTE which is
 -1,518 below the approved ceiling of 109,677. Staffing has fallen by -187 WTE since the end-October or -1,594 since the beginning of the year.
- The Statutory Sector (HSE) recorded -119 WTE decrease while the Voluntary Acute Hospital Sector recorded a decrease of -75 WTE, while the Primary & Community Services Voluntary Sector increased by 7 WTE.
- The Integrated Services Directorate in overall terms recorded a decrease of -143 WTEs, with a decrease in combined Acute Hospital Services of -157 WTE, National Ambulance Service shows a further increase of +20 WTE and Primary and Community Services fell by just -5 WTE. Combined figures equate to a fall -1.5% in the year to date and -3.2% (-3,611 WTE) since the introduction of the Government moratorium.
- Accordingly, there is little doubt that we will be operating within the end-of-year ceiling.

For 2010, we also have made good progress in recruitment to key positions in line with NSP

- While Medical/ Dental staffing shows an increase of +0.51% (+42), there is an increase of +132 (5.69%) in the number of medical consultants counterbalanced by a reduction in NCHDs numbers with an decrease of -86 WTE (-1.78%)
- Nursing is down -922 WTE (-2.46%) –this change is influenced by student nurses on placement.

Other notable changes since year-end include the following:

- Social Workers +207 (+9.67%) in 2010 with 39 WTE added in October alone. Arising out of some back-filling of existing SW posts to fill these positions coupled with retirements and resignations there has been considerable additional SW numbers recruited beyond the simple WTE increase shown in the PR.
- Physiotherapists +69 (4.86%) in 2010 [however a fall of -3 WTE was recorded in October]

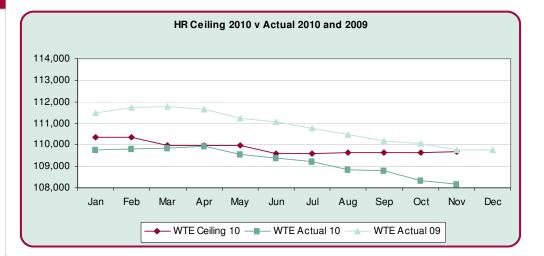


Table 1 Service Area	WTE Dec 2009	Ceiling Nov 2010	WTE Nov 2010	WTE Change since Oct 2010	WTE Change from Dec 2009 to Nov 2010	WTE Variance Nov 2010	% WTE Variance Nov 2010
Hospital Services	50,540	49,432	49,407	-157	-1,133	-25	-0.05%
Ambulance Services	1,465	1,463	1,495	+20	+29	+32	+2.17%
National Cancer Control Programme	490	740	763	-1	+273	+23	+3.09%
Primary and Community Services	53,068	53,356	52,450	-5	-618	-906	-1.70%
Portion of Ceiling to be allocated		479		+0	+0	-479	-100.00%
Corporate	3,108	3,119	2,993	-8	-115	-126	-4.04%
Population Health	1,082	1,088	1,051	-36	-31	-37	-3.40%
Total	109,753	109,677	108,159	-187	-1,594	-1,518	-1.38%

Key

Performance

Messages

≻	Occupational therapists	+102 (9.24%) [-1 WTE in October]
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Occupational therapists +102 (9.24%) [-1 WTE in October]
 Speech & language therapists +56 (7.22%) [+5 WTE in October]
 Management & Administrative -256 (-1.46%) [Note: the addition of NCSS to reporting skews this figure and the actual decrease can be viewed as -379 WTE or 2.15%]
 General Support -437 (-3.67%)
 Other Patient & Client Care -364 (-1.95%)

Table 2 LHOs with Most significant Adverse WTE Variances	WTE Nov 2010	WTE Change since Oct 2010	WTE Change from Dec 2009 to Nov 2010	WTE Variance Nov 2010	% WTE Variance Nov 2010
Kildare/ West Wicklow	1006	+2	+12	+55	+5.82%
Dublin West	956	+3	+32	+40	+4.35%
Meath	1003	+5	+41	+37	+3.83%
Tipperary, North/ Limerick, East	719	+2	-7	+21	+2.96%
Dun Laoghaire	701	-2	+21	+15	+2.17%
Table 3	WTE Nov	WTE Change	WTE Change	WTE Variance	% WTE
LHOs with Most significant Favourable WTE Variances	2010	since Öct 2010	from Dec 2009 to Nov 2010	Nov 2010	Variance Nov 2010
		since Oct	2009 to		
Favourable WTE Variances	2010	since Öct 2010	2009 to Nov 2010	2010	Nov 2010
Favourable WTE Variances	2010 1072	since Öct 2010 -4	2009 to Nov 2010 -61	2010 -97	Nov 2010 -8.33%
Favourable WTE Variances Louth Dublin South-East	2010 1072 662	since Oct 2010 -4 +4	2009 to Nov 2010 -61 +2	2010 -97 -53	Nov 2010 -8.33% -7.44%

Table 4 Hospitals with Most significant Adverse WTE Variances	WTE Nov 2010	WTE Change since Oct 2010	WTE Change from Dec 2009 to Nov 2010	WTE Variance Nov 2010	% WTE Variance Nov 2010
Galway University Hospital	3124	-5	-99	+124	+4.14%
Our Lady's Hospital, (Crumlin)	1635	+0	+5	+71	+4.54%
St. Vincent's Hospital	2476	+4	+20	+62	+2.59%
Children's Hospital, Temple Street	984	-7	+8	+56	+5.98%
Rotunda Hospital, (Dublin)	749	-1	-3	+46	+6.54%
Table 5 Hospitals with Most significant Favourable WTE Variances	WTE Nov 2010	WTE Change since Oct 2010	WTE Change from Dec 2009 to Nov 2010	WTE Variance Nov 2010	% WTE Variance Nov 2010
St. James's Hospital	3527	-12	-111	-101	-2.80%
Our Lady of Lourdes (NE)	1386	+25	+73	-67	-4.64%
Letterkenny General Hospital	1378	-18	-61	-44	-3.11%
Cork University Hospital	3252	-44	-41	-40	-1.20%
Cavan General Hospital	749	-2	-21	-32	-4.08%

Staff Category	WTE Dec 2009	WTE Oct 2010	WTE Nov 2010	WTE change since Oct 2010	% change since Oct 2010	WTE change since Dec 2009	% change since Dec 2009
Medical/ Dental	8,083	8,120	8,125	+5	+0.06%	+42	+0.51%
Nursing	37,466	36,670	36,544	-126	-0.34%	-922	-2.46%
Health & Social Care Professionals	15,973	16,274	16,316	+42	+0.26%	+344	+2.15%
Management/ Admin	17,611	17,377	17,354	-23	-0.13%	-256	-1.45%
General Support Staff	11,906	11,520	11,470	-50	-0.43%	-437	-3.67%
Other Patient & Client Care	18,714	18,385	18,350	-35	-0.19%	-364	-1.95%
Total Health Service Staffing	109,753	108,346	108,159	-187	-0.17%	-1,594	-1.45%

Exempted Staff Group change since Dec 2009	Dublin Mid- Leinster	Dublin North- East	South	West	National	WTE change since Dec 2009	% change since Dec 2009
Clinical Engineering	-1	-5	+2	-2	+4	-2	-0.42%
Dosimetrists			+2	-1	-2	-1	-8.10%
Emergency Medical Technicians	+36	+0	-1	-2		+33	+2.65%
Occupational Therapists	+31	+25	+23	+23		+102	+9.24%
Physiotherapists	+20	+27	+2	+21	-2	+69	+4.68%
Speech and Language Therapists	+12	+11	+11	+22		+56	+7.22%
Social Workers	+42	+70	+57	+38	+0	+207	+9.67%
Psychologists & Counsellors	-8	+1	+11	+7	+0	+11	+1.18%

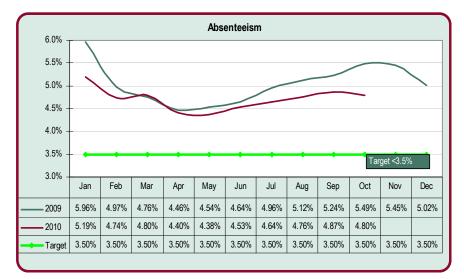
Other Key Staff Group change since Dec 2009	Dublin Mid- Leinster	Dublin North-East	South	West	National	WTE change since Dec 2009	% change since Dec 2009
NCHDs	-27	-40	-9	-19	+10	-86	-1.78%
Consultant Anaesthesia	+4	-1	+0	+6	+4	+13	+3.87%
Consultant Dentistry	+0	+0	+1	+0		+1	+9.01%
Consultant Emergency Medicine	+1	+1	-1	+5		+7	+12.69%
Consultant Medicine	-18	+13	+5	+3	+0	+3	+0.53%
Consultant Obstetrics & Gynaecology	+0	+1	-1	+1		+0	+0.34%
Consultant Paediatrics	+21	-1	+1	+3	+1	+24	+21.08%
Consultant Pathology	+3	+3	+3	+0	+4	+12	+6.79%
Consultant Psychiatry	+2	+5	+7	+4		+18	+5.11%
Consultant Radiology	+5	+2	+3	+2	+17	+29	+14.26%
Consultant Surgery	+5	+5	-1	+6	+6	+22	+5.28%
Consultant, Other	+2	+0			+0	+3	+24.73%
Physicists	+4	+1	+0	-1	+2	+6	+4.63%
Pre-registration Nurse Students	+64	-4	+27	+32		+120	+156.32%
Public Health Nursing	+2	+11	-9	-6		-2	-0.10%
Radiation Therapists			-5	+0	+4	-1	-0.50%
Social Care Grades	-37	-18	-13	-24	+1	-91	-2.68%
Therapy Aides/Assistants	-2	+2	-1	-3		-4	-2.72%
Staff Midwives	+15	-1	-15	+27		+26	+2.31%
Staff Nurse [Intellectual Disability]	+6	+62	-3	-9		+56	+3.87%
Staff Nurse [Psychiatric]	-3	-40	-24	-46		-113	-2.96%
Staff Nurses [General/ Children's]	-223	-185	-192	-229	-16	-846	-4.10%

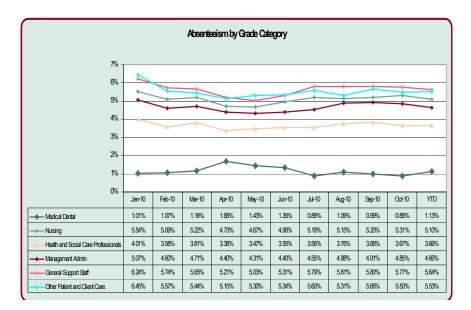
Note: some changes in consultant specialty are reflective of corrections in paediatric hospital locations e.g. consultant surgeon to consultant paediatric surgeon.

Source: Health Service Personnel Census excluding Home Helps *National refers to NPRO (National Plan Radiation Oncology)

*Absenteeism •	Combined absenteeism levels have reduced from 5.03% in 2009 to 4.71% for the year to October. This represents a fall of 6.73% on 2009 or 18.23% on 2008 (5.76%). A rate below 5% has been maintained since January 2010. October has seen a further marginal decrease to 4.80% with reported absenteeism falling in both the HSE & the voluntary hospitals but an increase in Other Voluntary Agencies.
•	Regional & Staff Category variations can be seen the summary tables.

Table 6 Absenteeism Ievels August 2010	Acute Services	Ambulance Services	Primary and Community Services	Corporate	Population Health	National Cancer Control Program me	Total
DML	3.98%	6.88%		4.99%	6.52%	2.52%	4.49%
DNE	4.46%	5.09%		4.39%	2.83%	2.66%	4.40%
South	5.41%	6.84%		5.26%	4.22%	7.93%	5.36%
West	4.93%	6.48%		5.07%	4.74%	2.84%	5.01%
National			3.71%	7.19%	6.29%		5.21%
Total	4.61%	6.52%	3.71%	4.95%	5.23%	3.68%	4.80%





Detailed Service Delivery Report

Key Messages

Primary Care Teams

328 teams are holding clinical team meetings which indicate an increase of 12 teams since October 2010. This is 76% above the same period last year (186 teams) and 13% below the year to date target of 375.

Approved Foster Cares with an allocated/link Social Worker

85.6% of approved foster carers have an allocated social worker. This is a 7.3% increase over the same period last year (79.7%).

Children in care with an allocated Social Worker

Nationally for November 2010 the percentage of children in care with an allocated social worker is 92.6% (this figure is based on 27 out of 32 LHO's). This compares to 91.9% in October.

Child and Adolescent Mental Health Services (CAMHS) Second Annual Report Launched

The Chairman of the HSE, launched the Health Service Executive's second annual report on Child and Adolescent Mental Health Services (CAMHS) on the 23rd of November. The report provides vital data on: the number of new cases seen; waiting time to be seen; and mental health problems presented by age and gender. In addition, the report provides data on the admission of young people under the age of 18 years for inpatient treatment.

Disability Act Compliance

At the end of November, there were 733 assessments overdue for completion compared to a figure of 922 at the end of May. This represents a reduction of 189 assessment reports. Further improvement is anticipated to year end.

Hospital Activity

The number of Inpatient Discharges has decreased by 0.7% compared to the same period in 2009 and is now 8.9% above target for 2010.

Day cases continue to grow and are now running 9.9% higher compared to the same period last year. This is in line with the strategic direction of the HSE to shift from inpatient to day case work. Day cases are running 6.9% ahead of target at the end of November.

The number of delayed discharges reported nationally in November 2010 was 576. This is an increase on the position at the end of October (539) but a significant decrease on the numbers reported at the end of November 2009 which was 817.

Day of Surgery admission rates have increased in all regions compared to the same period last year. The national figure for day of surgery admission rates was 49% compared to 45% for the previous rolling 12 months.

Emergency Departments

The 4th of January saw a surge where patients awaiting admission nationally rose. A full review is being carried out of the factors which contributed to this surge and of the measures taken in the contingency plans. Whilst there has been a significant improvement in the numbers awaiting admission this week, there continues to be significant challenges and the ED situation continues to be managed on a daily basis. The HSE has in place a revised framework for managing admission, discharge and a framework to support the implementation of escalation procedures when the hospital is unable to manage the demand being placed on it. This escalation framework is based on agreed trigger points and actions on each site.

Key Messages

Out Patient Activity

Outpatient activity continues to grow with an increase of 6.8% compared to last year and attendances are currently 5.0% above target.

Elective Procedures

At the end of November there are 47,587 listed for elective procedures as reported on the National Treatment Register. Of these, 80.5% (38,310 referrals) are within the targeted time for treatment: i.e. Children 3 months and adults 6 months.

Colonoscopy

99.2% of people waiting for an urgent Colonoscopy at the end of November were waiting less than 28 days.

Home Help and Home Care Packages

While overall the number of Home Help Hours provided is -3.9% (10,384,545 actual YTD) below the year to date target, there is a 1.1% increase on the October figure of -5%. It is anticipated that as demand for Home Help increases in the winter the target of 11.98m hours for 2010 will be met, and the number of persons in receipt of home help will be achieved. The number in receipt of Home Care Packages is 3.8% above target at November including 'new' (587) clients. This will be closely monitored for the remainder of the year.

Standardising and Improving Home Care Services

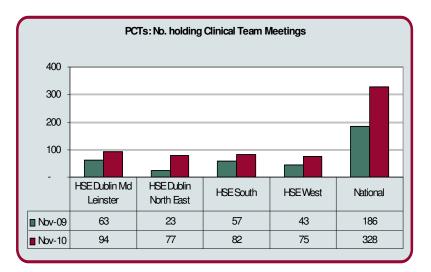
In October 2010, the HSE began a national procurement process for the provision of enhanced home care services from 2011. This tender is currently underway. When completed in the New Year it will result in a range of 'Approved Providers' for home care services being in place in every HSE region. Approved Providers will meet the required minimum standards and will be identified and widely available to all clients by February 2011.

Table 1.		Human	Resources			Budget	
Primary & Community Services by Region	Ceiling Nov 2010	WTE Nov 2010	WTE Change from Dec 2009 to Nov 2010	% WTE Variance Nov 2010	Actual €000	Budget €000	% Var
DML	15,102	14,944	-188	-1.05%	1,341,663	1,329,756	0.9%
DNE	11,269	11,241	-121	-0.24%	1,008,498	999,645	0.9%
South	12,266	12,187	-92	-0.65%	1,083,929	1,081,699	0.2%
West	14,386	13,879	-218	-3.52%	1,103,275	1,121,461	-1.6%
National	333	200	+2	-40.00%			
Total	53,356	52,450	-618	-1.70%	4,537,365	4,532,561	0.1%

Table 2.		Human Re	esources			Budget	
Hospital Services by Region	Ceiling Nov 2010	WTE Nov 2010	WTE Change from Dec 2009 to Nov 2010	% WTE Variance Nov 2010	Actual €000	Budget €000	% Var
DML	16,770	16,855	-209	+0.51%	1,322,775	1,309,834	1.0%
DNE	10,772	10,713	-319	-0.55%	848,312	831,570	2.0%
South	10,930	10,861	-282	-0.64%	767,029	756,394	1.4%
West	10,934	10,978	-323	+0.40%	833,781	787,153	5.9%
National	26			+0.00%			
Total	49,432	49,407	-1,133	-0.05%	3,771,897	3,684,952	2.4%

Primary & Community Services

Primary & Commu	inity Care analysis & action points
Primary Care Team (PCT's) (Chart 1) M)	 Primary Care Teams As at November 2010, 328 teams are holding clinical team meetings which indicate an increase of 12 teams since October 2010. This is 76% above the same period last year (186 teams) and 13% below the year to date target of 375. A further 199 teams are in varying stages of development (this is a reducing figure as teams commence clinical team meetings). Clients with a Care Plan
	 The number of patients/clients with a care plan developed during November 2010 is 1,010. This is defined as the number of patients discussed at a clinical team meeting, generally those requiring multi-disciplinary care. The year to date cumulative figure from January to November 2010 is 7,183 (however, January to May figures incomplete due to industrial action).
GP Out of Hours (Chart 2) (M)	 During the month of November 2010, 75,911 contacts were made to the GP OOH service. Year to date figure is 795,643 which is 1% below the projected activity of 806,052 and 4% below the same period last year (827,200). Breakdown of the nature of contact with the OOH Service: 58% - GP Treatment Centre 31% - Triage 11% - Home Visit 1% - Other



Community (Demand Led) Schemes

Medical / GP Visit Cards (Chart 3 & 4) (M) The number of individuals covered by medical cards continues to rise with 1,611,138 reported at the end of November 2010 (an additional 132,578 since December 2009). In November there were 578 more persons covered by a Medical Card than year to date projected target (1,610,560). The total number of discretionary medical cards in the system at the end of November was 80,593. This compares with 79,729 issued in November 2009, an increase of (1%). Discretionary medical cards represent 5% of cards issued year to date.

The number of individuals covered by GP Visit Cards at the end of November is 116,399 which is 3% above projected target for end November (113,093). An additional 18,074 cards have been issued since December 2009. The total number of discretionary GP visit cards in the system at the end of November was 17,543. This compares with 17,217 cards issued in November 2009, an increase of 326 cards (1.9 %). Discretionary GP visit cards represent 15% of cards issued year to date.



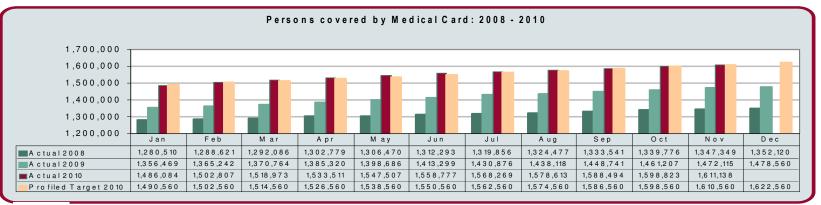
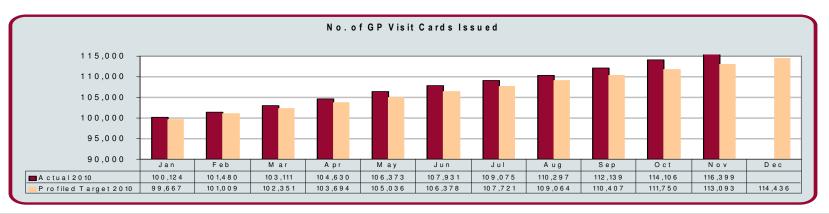


Chart 4



*Community (Der	mand Led) Schemes
Long Term Illness (Chart 5 & 6) (M)	 The number of LTI claims made during November was 70,763 (22% below the monthly target of 90,388). The total YTD figure is 807,449 (19% below the projected YTD figure of 994,268). Compared with the same period last year (824,038 claims) there has been a decrease of 2%. Total number of LTI Items in November was 221,362 (23% below the monthly target of 287,434).
Drug Payment Scheme (Chart 5 & 6) (M)	 The number of DPS claims made during November was 296,960 (29% below the monthly target of 419,182). The total YTD figure is 3,527,944 (23% below the YTD target of 4,611,000). Compared with the same period last year (4,608,483 claims) there has been a decrease of 1,080,539 (23%). Total number of DPS items in November was 896,287 (21% below the monthly target of 1,135,982).
General Medical Services (GMS) (M)	 The number of GMS prescriptions reimbursed during November was 1,460,795 (4.9% below the monthly target of 1,537,103). The total YTD figure is 16,000,859 (5% below the YTD target of 16,908,133). Compared with the same period last year (15,096,214 prescriptions) there has been an increase of 904,645 (6%).
HiTech (Chart 5 & 6) (M)	 The number of HiTech claims made during November was 28,564 (10.6% below the monthly target of 31,944). The total YTD figure is 305,466 (13% below the YTD target of 351,380). Compared to same period last year, (287,643 claims) this represents an increase of 6% (17,823).
Dental Treatment Services Scheme (DTSS) <mark>(M)</mark>	 The numbers of routine treatments are currently 28% in excess of target while more complex treatments are 6% above target.
Community Ophthalmic Scheme (M)	 Under this scheme, adult medical cardholders and their dependants are entitled, free of charge, to eye examinations and necessary spectacles and or appliances. Claims by Optometrists and Ophthalmologists are paid by the PCRS. Claims for spectacles provided under the Children's Scheme are also paid by the PCRS. The number of adult treatments is currently 1% below target while the number of children treatments is 4% below target.

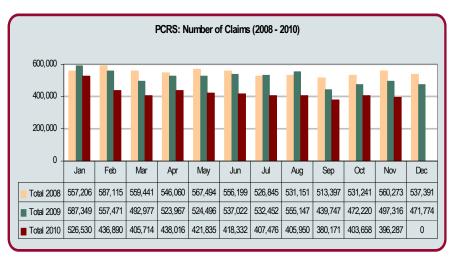
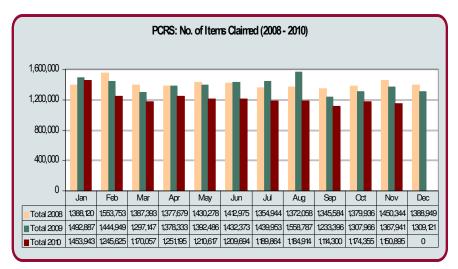


Chart 6



*The number of claims in any particular month reflects the activity, on the ground, across the country by persons who are eligible for these services. In summary there are three components which govern the activity and costs under the Demand Led Schemes:

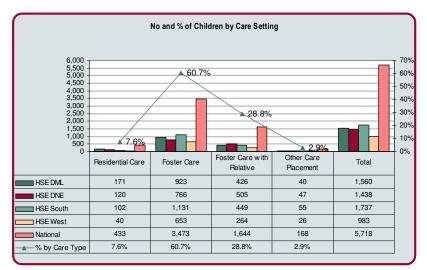
- The number of persons eligible for services under the various schemes
- The services, drugs medicines and appliances reimbursed under the schemes, and
- The volume of these services, drugs, medicines and appliances provided to clients.

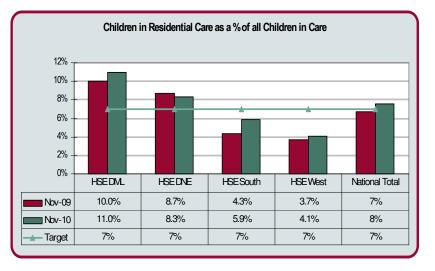
Since January 2009, the number of persons registered on the medical card database has increased in absolute terms by some 216,149.

Performance Report November 2010

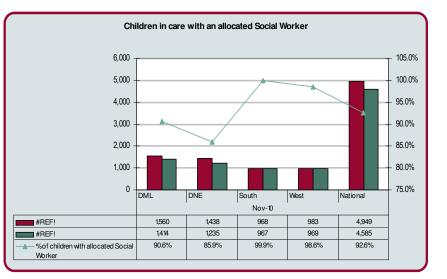
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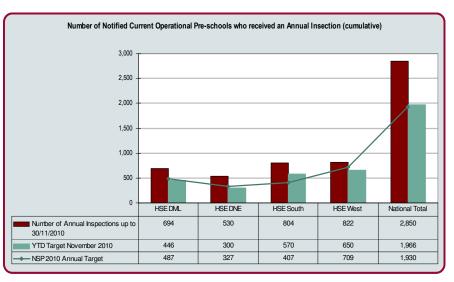
Children and Famili	es
Family Support Services (M)	 Family Welfare Conferences (Referrals) The total numbers of referrals to FWC nationally up to the end of November 2010 is 425. This is -2.6% off target to date (436). However it is a 2.4% increase over same period last year (415). Family Welfare Conferences (Convened) The total number of FWC convened up to the end of November 2010 is 250 this figure equates to the target YTD figure set and demonstrates a 3.7% increase over same period last year (241). (figures for the above metrics are based on returns from 31 out of 32 LHO's) Number of Springboard Family Referrals The total number of families who have been referred to Springboard projects up to the end of November 2010 is 1,017. This demonstrates a 1.1% increase over NSP 2010 target YTD of 909 however this also indicates a 1.1% decrease over same period last year (1,028). (figures for the above metric are based on returns from 30 out of 32 LHO's)
Children in Residential Care (Chart 7 & 8) (M)	 The total number of children in care nationally at the end of November 2010 was 5,718. Nationally there were 433 children in Residential Care on the last day of November 2010. These children account for 7.6% of all children in care and this number of children demonstrates a 11.3% increase over same period last year 389 (6.8%.) Although the numbers of children in care over all care types have been increasing; trends have continually indicated that the percentage of children in residential care as a proportion of all care types remained constant at 7% in line with NSP target 2010. For November this figure is coming in at 7.6% (rounded to 8%). DML and DNE continue to report the highest proportion of children in residential care at 11.0% and 8.3% respectively; this however is directly related to the numbers of residential centres located within these areas. (figures for the above metrics are based on returns from 31 out of 32 LHO's)
Fosters Carers with an Allocated Social Worker (M)	 Monthly activity returns for November demonstrate a national figure of 85.6% of approved foster carers have an allocated social worker set against a NSP2010 target of 100%. This is a 7.3% increase over the same period last year (79.7%). Regionally for November HSE South reported 96.3% of approved foster carers have an allocated social worker with 8 out of 9 LHO's reaching the target (100%). This figure also demonstrates an increase of 11.3% over October 2010 figure of 86.5%.



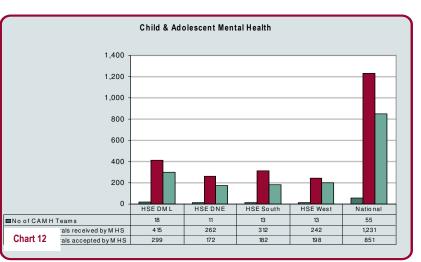


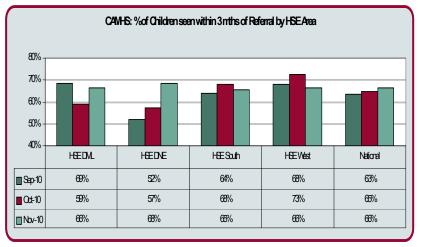
Children and Fam	ilies
Fosters Carers with an Allocated Social Worker (M)	 HSE West reports that 84.8% of approved foster carers have an allocated social worker with no LHO reaching the target (1 LHO not returned). HSE DNE reports that 83.0% of approved foster carers have an allocated social worker with 1 LHO reaching target. HSE DML reports that 72.1% of approved foster carers have an allocated social worker with 3 LHO's reaching target. (figure for the above metric is based on returns from 31 out of 32 LHO's)
Children in care with an Allocated Social Worker (Chart 9) (M)	 The NSP 2010 target for this metric state that 100% of children in care should have an allocated social worker. This metric has historically been collected on a quarterly basis, however since October this year this metric has begun to be collected monthly so a comparison to same period last year is not possible. Nationally for November 2010 the percentage of children in care with an allocated social worker is 92.6%. (This figure encompasses all care types). However it should be noted here that this figure is based upon returns from 27 out of 32 LHO's and therefore is subject to amendment when returns are factored in. Children in Care with Allocated Social Worker (all care types) by HSE Area is a follows: HSE DML: 90.6% HSE DNE: 85.9% HSE South: 99.9% (5 out of 9 LHO's) HSE West:: 98.6% (7 out of 8 LHO's) (figure for the above metric is based on returns from 27 out of 32 LHO's)
Pre-School Inspections / Visits (Chart 10) (M)	 The number of notified current operational pre-school centres that have received an annual inspection up to the end of November 2010 is 2,850. This figure demonstrates a 0.4% increase over same period last year (2,840). Nationally the figure represents a 47.7% increase over the NSP 2010 end of year target of 1,930 This figure compared to the overall number of notified current operational pre-schools Q4 2009 (5,090) represents and inspection rate of 56.0%





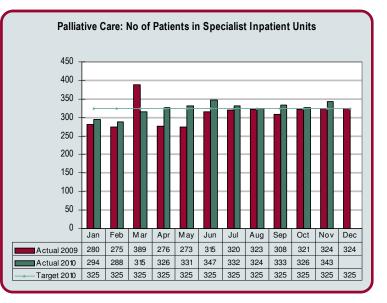
Mental Health Child and	The 55 CAMH Teams are made up of the following:
Adolescent Mental Health (Chart 11) (M)	 50 Community Child & Adolescent Mental Health Teams 2 Day Hospital Teams 3 Paediatric Teams
Referrals / Patients Seen (M)	 No. of new child / adolescent referrals received by Mental Health Services is 1231 No. of new child / adolescent Referrals accepted by Mental Health Services is 851(69%) No. of new child /adolescent seen by a member of a Community CAMH Team is 776.
Children & Adolescent Wait Time to First Appointment with CAMH (M) (Chart 12)	 The key PI set by the Specialist CAMHS Advisory Group is that 70% of New Cases are to be seen within three months. Of the new cases seen 66% are being seen within 3 months. New (including re-referred) Cases seen to first appointment YTD regionally: 0-1 Month = 347 (44%) 1-3 Months = 169 (22%) 3-6 Months = 89 (11.5%) 6-12 Months = 83 (11%) > 12 Months = 88 (11.5%) New (including re-referred) Cases seen by wait time to first appointment YTD Regionally DML = 71% DNE = 59%* South = 65% West =73% National = 68% <i>No return Meath January to June</i>
Disability	Disshility Act Compliance
Under 5 Assessments (M)	Disability Act Compliance At the end of November, there were 733 assessments overdue for completion compared to a figure of 848 at the end of September. This represents a fall of 115 or 14%. This improvement in the national picture is largely accounted for by improvements in the two HSE Regions which have historically shown the highest overdue figures. HSE DML has shown an improvement of 95 or 17% since September and HSE South has shown an improvement of 19 or 17%. In addition, there was an increase of 17% in the number of completed applications received in the same period of time.





Home Help Hours & HCP's (M)	of -5%. It is anticipated	that as demand for Home Hel red. The number in receipt of	ed is -3.9% (10,384,545 actual YT p increases in the winter the targe Home Care Packages is 3.8% abo	et of 11.98m hours for 2010 w	ill be met, and the number o	f persons in receip
	*Targets for HCP new cl exceeded.	ients are based on an averag	e value of €525 per package/clien	nt. In reality, price of HCP may	vary greatly therefore clien	t targets may be
			% Variance From Target Nov	rember 2010		
	Area	Home Help Hours		in Receipt of Home Care Package	% of New HCP Clients (YTD)	
	National	-3.9%	-0.7%	3.8%	23.6%	
	DML	-4.7%	-1.6%	7.5%	21.6%	
	DNE	-2.3%	1.5%	-8.2%	20.7%	
	South	-1.7%	2.2%	17.2%	>100%	
	West	-6.8%	-5.0%	6.2%	-15.5%	
ubvention (M)	 Numbers in receipt This is reflected in t 	of subvention are reducing an he reduction in numbers. At th	commenced in October 2009. This id will continuously reduce over tir he end of December 2009 there w ainst same period last year 9,221,	me as clients transfer to the N vere 8,823 people in receipt of	HSS, or cease using the ser	
	 Numbers in receipt This is reflected in t shows a decrease of Since the commence The only funding me independently with Due to staff morator 	of subvention are reducing an ne reduction in numbers. At th f 71% on December, and aga ement of the NHSS, the HSE echanism for long stay care is he NTPF – so they are no lon ium and resource issues all b	ad will continuously reduce over tin ne end of December 2009 there w ainst same period last year 9,221, can no longer fund long stay resid the NHSS, where 24 hour nursing nger considered 'public units'. reds originally designated as new	me as clients transfer to the N rere 8,823 people in receipt of a reduction of 72%. dential care under Section 39 g care is provided. Each of the beds have been re-designate	HSS, or cease using the ser subvention. The November ese units now must negotiat d as replacement beds. All I	position of 2,543 e their prices New/additional bed
	 Numbers in receipt This is reflected in t shows a decrease of Since the commend The only funding me independently with Due to staff morator opening is continge 	of subvention are reducing an ne reduction in numbers. At th f 71% on December, and aga ement of the NHSS, the HSE echanism for long stay care is he NTPF – so they are no lon ium and resource issues all b nt on additional resources bei	ad will continuously reduce over tin ne end of December 2009 there w ainst same period last year 9,221, can no longer fund long stay resid the NHSS, where 24 hour nursing ager considered 'public units'.	me as clients transfer to the N rere 8,823 people in receipt of a reduction of 72%. dential care under Section 39 g care is provided. Each of the beds have been re-designate cement beds will be replaced	HSS, or cease using the ser subvention. The November ese units now must negotiat d as replacement beds. All I	position of 2,543 e their prices New/additional bed
ublic Beds (M)	 Numbers in receipt This is reflected in t shows a decrease of Since the commence The only funding me independently with t Due to staff morator opening is continge Public bed figures a The Nursing Homes 	of subvention are reducing an ne reduction in numbers. At th f 71% on December, and aga ement of the NHSS, the HSE echanism for long stay care is he NTPF – so they are no lon ium and resource issues all b nt on additional resources bei re reported monthly in arrears	d will continuously reduce over tin he end of December 2009 there w ainst same period last year 9,221, can no longer fund long stay resid the NHSS, where 24 hour nursing ager considered 'public units'. Heds originally designated as new ng made available however replaces. The figure for November is 8,77 " 'A Fair Deal' commenced on 27 0	me as clients transfer to the N rere 8,823 people in receipt of a reduction of 72%. dential care under Section 39 g care is provided. Each of the beds have been re-designate cement beds will be replaced 70.	HSS, or cease using the ser subvention. The November ese units now must negotiat d as replacement beds. All N mostly on a like for like basi	position of 2,543 e their prices New/additional bed s.
Subvention (M) Public Beds (M) A Fair Deal (M)	 Numbers in receipt This is reflected in t shows a decrease of Since the commend The only funding me independently with t Due to staff morator opening is continge Public bed figures a The Nursing Homes NHSS; State Support 	of subvention are reducing an he reduction in numbers. At th f 71% on December, and aga ement of the NHSS, the HSE echanism for long stay care is he NTPF – so they are no lon ium and resource issues all b ht on additional resources bei re reported monthly in arrears Support Scheme (NHSS) or rt and Ancillary Support (Nurs	d will continuously reduce over tin he end of December 2009 there w ainst same period last year 9,221, can no longer fund long stay resid the NHSS, where 24 hour nursing ager considered 'public units'. Heds originally designated as new ng made available however replaces. The figure for November is 8,77 " 'A Fair Deal' commenced on 27 0	me as clients transfer to the N rere 8,823 people in receipt of a reduction of 72%. dential care under Section 39 g care is provided. Each of the beds have been re-designate cement beds will be replaced 70. October 2009. Two types of fin	HSS, or cease using the ser subvention. The November ese units now must negotiat d as replacement beds. All N mostly on a like for like basi	position of 2,543 e their prices New/additional bed s.

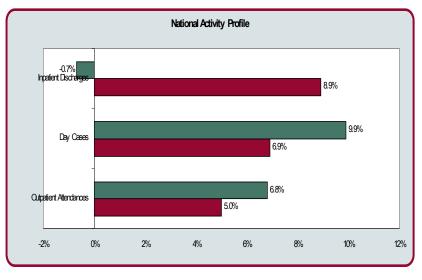
Palliative Care	
Specialist Palliative Care <mark>(M)</mark> (Chart 13)	 All of the 32 LHO's have returned for Home care services. The figure of 343 patients in Specialist inpatient units is collated from the four regions. i.e. DML – 110, DNE – 35, South – 62 & WEST – 136.
Home Care (M)	 In Palliative Home Care services approx 2882 availed of the service. Of these 606 were new clients. Of the 2882 clients 632 came from DML, 532 came from DNE, 860 came from the South and 858 from the West.



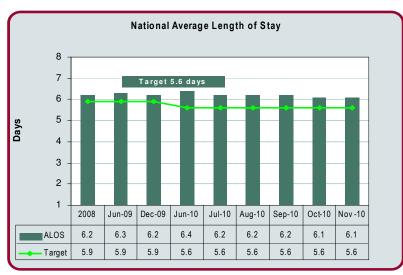
Methadone	
Treatment (M) (Chart 19)	Community Welfare Services <i>Support the implementation of the core functions of the Health Service Report</i> Each HSE Area has established a Regional Transition Team to assist the National Project Team and to transfer the Community Welfare Service to the Department of Social Protection. Plans are in place to transfer the Community Welfare services to the DoSP on January 1 st 2011. There will be a transition period of 9 months from January to September 2011. Staff and services will remain under the remit of the HSE and its intended that full control will commence in the DoSP in September 2011.



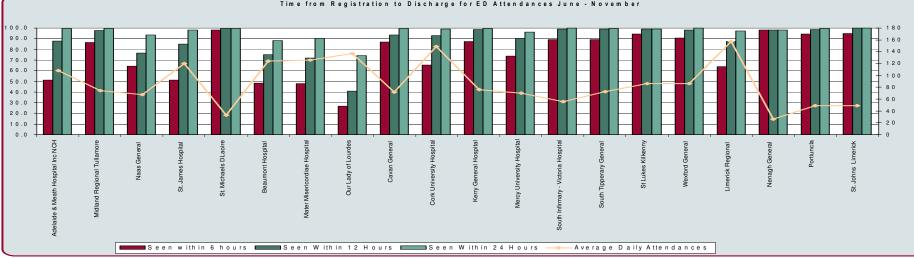
Hospital Services an	alysis and action points
Elective Non	The number of Inpatient Discharges has decreased by 0.7% compared to the
Elective and Public	same period in 2009 and is now 8.9% above target for 2010.
/ Private	
Discharges (M)	The percentage of Elective Inpatient admissions has decreased marginally
Discharges (m)	compared to the same period last year 32.7% for the period January - November
	compared to 33.3% for the same period in 2009.
	The percentage of public inpatients discharged in the same period has increased
	from 75.4% in 2009 to 77.2% this year, this is unchanged for the third consecutive
	month.
Average Length of	Average length of stay for the month of November is 6.0. The cumulative position
Stay (ALOS) (M)	shows that the average length of stay has decreased marginally in 2010, down
	from 6.25 in 2009 to 6.15 for the period January – November 2010.
(Chart 2)	······································
Delayed	In the last week of November 2010 the number of delayed discharges
Discharges (M)	reported nationally was 576. This is an increase on the position at the end
	of October (539) but a significant decrease on the numbers reported at the end of
	November 2009 which was 817.
	The average number of delayed discharges reported through November
	2010 was 578. As above this showed a slight increase on average for October
	2010 (570) and a decrease on November 2009(799).
	Delayed discharge information is still being back filled following the
	industrial action earlier this year so a year to date average for 2010 is not
	available at this time.
	In 2010 the categories of Delayed Discharges have changed compared to
	previous years with the introduction of Fair Deal, so while comparisons
	can be made to total figures for previous years it is not possible to
	compare reasons for delays.
Bed Days Used (M)	The number of bed days used has decreased by 2.4% in 2010 compared to 2009.
	Deventers any netionally has increased marrinally compared to last year
Occupancy Rates	Percentage occupancy nationally has increased marginally compared to last year
(M)	(90.2% compared to 90.1% in 2009).
	Day appear positions to grow and are now supping 0.00% higher constraints that
Day Cases (M)	Day cases continue to grow and are now running 9.9% higher compared to the
	same period last year. The Service Plan had targeted an increase on last year's
	outturn with a shift from inpatient to day case work and day cases are now running
	6.9% ahead of target at the end of November.



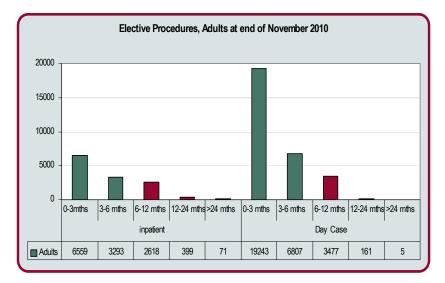




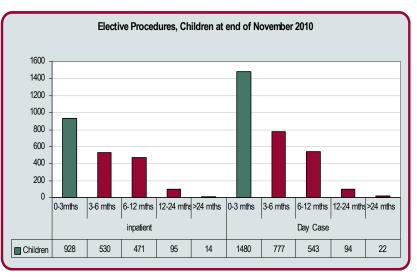
Day of Procedure	ysis and action points Day of Surgery admission rates have increased in all regions compared to the same period last year. Over the 12 month rolling period to the end of July the
M)	national figure for day of surgery admission rates was 49% compared to 45% for the previous rolling 12 months.
Emergency Department (M)	Emergency presentations are up on last year (0.4%) and are down on expected levels for 2010(-0.3%).
	Emergency admissions are 0.6% up on last year and 11.7% above expected levels for 2010. The majority of Hospitals are reporting increases against expected levels for this year.
Emergency	There are currently 2 methods being used to collect information relating to patient experience time in ED. The first is a sample of attendances over two periods
Department Turnaround Times	of two hours each, (11am-1pm and 4pm-6pm) each day (post industrial action, the number of Hospitals reporting is 11 which relates to 25% coverage of national ED attendances) Each person who registers in the ED during these hours is traced back throughout the day to capture the total time they spent in the
(M)	ED. This method enables a view of how many people were treated within specific times.
	The second method is gathered by recording the time for all attendances over a 24 hour period. However, this data is not as detailed as the method above and is aggregated for all patients.
	In the interim, it has been possible to partially combine the data from both methods above to show the percentage of patients admitted to Hospital or discharged from ED within 6;12 and 24 hours of ED registration. This new view is available for 20 Hospitals this number will increase over the coming months. A similar expanded view of Hospitals is not yet possible for categories of patients admitted or those discharged without admission at this point in time.
	The figure for percentage of patients admitted to Hospital or discharged from ED within 6 hours was 60.6% in October, the corresponding figure for November i 62.6%.
	Chart 3 shows the combined view of 20 hospitals of patients admitted to Hospital or discharged from ED within 6;12 and 24 hours of ED registration.
Chart 3	
	Time from Registration to Discharge for ED Attendances June - November
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30.0	
50.0	



Acute Services analy	rsis and action points
Outpatients (OPD) (M)	Outpatient activity continues to grow with an increase of 6.8% compared to last year and attendances are currently 5.0% above target.
	New and return Dna rates are at 14.1% and 14.0% respectively for the period January – November 2010, this compares to 14.8% for new dna's and 14.6% for return dna's for the same period in 2009.
	The number of New attendances at Outpatient departments is in excess of 93,000 (11.1%) more than last year, this is reflected in an improvement in the overall New : Return ratio in 2010.
Births (M)	The number of births is marginally lower than the same period last year (0.3%) and is showing a 0.9% decrease against expected levels for 2010.
Elective Procedures (Position at the end of November 2010) (Chart 4 & 5)(M)	• At the end of November there are 47,587 listed for elective procedures as reported on the National Treatment Register. Of these, 80.5% (38,310 referrals) are within the targeted time for treatment: i.e. Children 3 months and adults 6 months.
	 2,546 children (51.4%) are waiting over the targeted 3 months and 6,731 (15.8%) adults are waiting over the targeted 6 months. This is a total of 9,277 (19.5% of all referrals), down from 9,629 in October, waiting more than the targeted time. Demand for elective procedures has increased by 16.7% (6,799) in November 2010 compared to November 2009.
Colonoscopy Services (M)	99.2% of people waiting for an urgent Colonoscopy at the end of November were waiting less than 28 days.





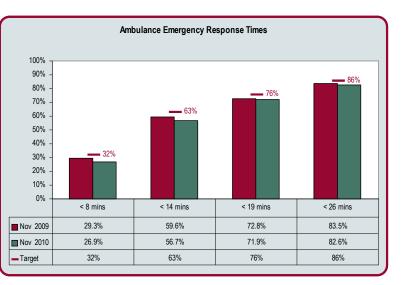


Ambulance	
Human Resources / Budget	 National Ambulance Service (NAS) current ceiling position under review in consideration of posts put in place for reconfiguration and Labour Relations Commission adjudication in relation to Relief Factor. The National Ambulance Service (NAS) is currently .01% under budget. Current financial performance will result in a substantive breakeven position in 2010.
Total no. of ambulance transfers (Table 3) (M)	Emergency Ambulance Calls The number of emergency calls decreased on the previous month and remained one of the lowest monthly figures for the year. The decrease is largely attributable to reduced social activity demonstrated by fewer night time calls at weekends. Urgent Ambulance Calls / Non-Urgent Calls Call volume in these two categories remained constant. Community Transport There was an increase in call volume of approximately 5% on the previous month. This was sue to increased renal services activity in certain areas and where departmental reorganisation in renal units increased activity.
Response Times (M) (Chart 1)	Cumulatively response times remained constant with previous months as indicated by only minor changes in variances.

Table 3	Outturn 09	Target 10	Target YTD	Actual this Month	Actual YTD	% var YTD Actual v Target	Same period last year	% var YTD v YTD last year
Total no. of Ambulance Transfer	s							
Emergency Calls	205,444	205,000	187,589	16,486	188,760	0.6%	185,769	1.6%
Urgent Calls	61,435	62,000	56,734	5,088	54,803	-3.4%	55,811	-1.8%
Non Urgent Calls	265,186	188,000	172,033	22,612	249,636	45.1%	244,249	-2.1%
Community Transport	338,132	280,000	256,219	30,773	332,132	29.6%	308,616	7.6%

Table 1		Human Resources							
Ambulance Services	Ceiling Nov 2010	WTE Nov 2010	WTE Change from Dec 2009 to Nov 2010	% WTE Variance Nov 2010					
DML	473	484	+34	+2.30%					
DNE	154	169	-1	+9.53%					
South	405	396	-1	-2.04%					
West	431	445	-3	+3.35%					
Total	1,463	1,495	+29	+2.17%					

Table 2	Budget					
Ambulance Services	Actual €000	Budget €000	Var YTD €000			
DML	36,782	34,415	2,367			
DNE	13,752	10,230	3,522			
South	33,290	29,623	3,667			
West	38,267	32,883	5,383			
Ambulance College	5,072	3,420	1,652			
Office of the National						
Director	709	17,410	-16,701			
Total	127,871	127,981	-110			



Hospital Services: summary of key performance activity

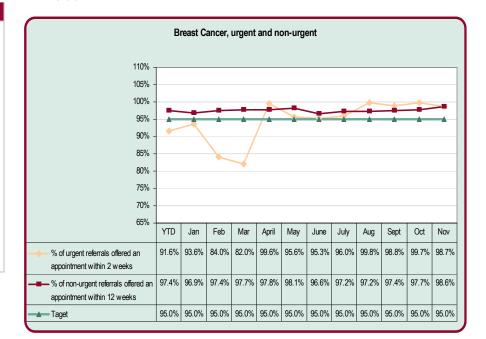
			Per	ormance this Month			Performance YTD		Activity	YTD v 2009
Hospital Services Activity	Outturn 2009	Target 2010	Target this month	Actual this month	% variance v target this month	Target YTD	Actual YTD	% variance Actual v Target YTD	Actual 2009	% Variance YTD v YTD 2009
Public Patients as a % of all elective discharges										
DML	71.2	80	80	76.5	-4.4	80	76.0	-5.0	71.5	6.3
DNE	73.2	80	80	77.1	-3.6	80	75.7	-5.4	73.5	3.1
South	69.0	80	80	70.2	-12.3	80	71.0	-11.3	68.7	3.2
West	67.9	80	80	71.6	-10.5	80	71.1	-11.1	67.9	4.8
National	70.2	80	80	73.8	-7.8	80	73.5	-8.1	70.2	4.7
No. of Inpatient Discharged (Inpatient)										
DML	176,985	160,527	12,995	15,275	17.5	146,935	165,973	13.0	161,948	2.5
DNE	114,020	103,690	7,922	9,115	15.1	95,023	101,332	6.6	102,646	-1.3
South	149,441	135,824	10,854	12,308	13.4	124,760	135,063	8.3	137,260	-1.6
West	154,576	140,952	11,142	12,458	11.8	129,273	137,768	6.6	142,334	-3.2
National	595,022	540,993	42,913	49,156	14.5	495,990	540,136	8.9	544,188	-0.7
No. of Inpatient Discharged (Day Case)										
DML	241,682	246,936	21,467	24,525	14.2	227,666	248,420	9.1	222,452	11.7
DNE	133,820	134,785	11,342	12,724	12.2	125,071	129,169	3.3	119,139	8.4
South	141,387	144,847	12,499	14,269	14.2	133,370	145,948	9.4	130,184	12.1
West	158,722	162,742	13,481	15,501	15.0	150,066	156,384	4.2	146,817	6.5
National	675,611	689,310	58,789	67,019	14.0	636,173	679,921	6.9	618,592	9.9
Elective Waiting List (Inpatient) % <u>Adults</u> awaiting ≤6 months										
DML	72.9	100	100	81.2	-18.8	100	81.2	-18.8	73.2	10.9
DNE	79.1	100	100	74.2	-25.8	100	74.2	-25.8	81.2	-8.6
South	85.2	100	100	77.9	-22.1	100	77.9	-22.1	84.5	-7.8
West	74.9	100	100	72.4	-27.6	100	72.4	-27.6	75.1	-3.6
National	77.3	100	100	76.1	-23.9	100	76.1	-23.9	78.0	-2.4
Elective Waiting List (Inpatient) % <u>Children</u> awaiting ≤3 months										
DML	42.1	100	100	44.6	-55.4	100	44.6	-55.4	42.9	4.0
DNE	39.4	100	100	71.4	-28.6	100	71.4	-28.6	52.6	35.7
South	58.8	100	100	52.3	-47.7	100	52.3	-47.7	52.1	0.4
West	44.3	100	100	34.9	-65.1	100	34.9	-65.1	42.3	-17.5
National	43.8	100	100	45.5	-54.5	100	45.5	-54.5	44.1	3.2

			Per	formance this Month	ı		Performance YTD		Activity	YTD v 2009
Hospital Services Activity	Outturn 2009	Target 2010	Target this month	Actual this month	% variance v target this month	Target YTD	Actual YTD	% variance Actual v Target YTD	Actual 2009	% Variance YTD v YTD 2009
Elective Waiting List (Daycase)										
% Adults awaiting ≤6 months										
DML	90.0	100	100	94.0	-6.0	100	94.0	-6.0	90.3	4.1
DNE	86.0	100	100	88.6	-11.4	100	88.6	-11.4	86.2	2.8
South	85.4	100	100	87.5	-12.5	100	87.5	-12.5	87.4	0.1
West	79.8	100	100	81.1	-18.9	100	81.1	-18.9	81.6	-0.6
National	85.0	100	100	87.7	-12.3	100	87.7	-12.3	86.0	2.0
Elective Waiting List (Day Case)										
% <u>Children</u> awaiting <i>≤</i> 3 months										
DML	36.2	100	100	46.6	-53.4	100	46.6	-53.4	35.8	30.2
DNE	41.2	100	100	68.9	-31.1	100	68.9	-31.1	48.5	42.1
South	53.4	100	100	54.4	-45.6	100	54.4	-45.6	55.2	-1.4
West	54.7	100	100	59.4	-40.6	100	59.4	-40.6	57.0	4.2
National	40.8	100	100	50.8	-49.2	100	50.8	-49.2	40.0	27.0
% of elective inpatient procedures conducted on day of admission										
DML		75	75	63	-16.0	75	63	-16.0	59	6.8
DNE		75	75	42	-44.0	75	42	-44.0	34	23.5
South		75	75	44	-41.3	75	44	-41.3	44	0.0
West		75	75	46	-38.7	75	46	-38.7	43	7.0
National		75	75	50	-33.3	75	50	-33.3	46	8.7
No. of Emergency Admissions										
DML	93,946	84,348	7.032	8.165	16.1	77,096	88,362	14.6	86.907	1.7
DNE	73,886	66,366	5,048	5,895	16.8	60,722	66,734	9.9	65,914	1.2
South	87,930	80,710	6,571	7,506	14.2	73,731	81,864	11.0	80,327	1.9
West	111,198	98,874	7,979	8.888	11.4	90,443	100,381	11.0	102,090	-1.7
National	366,960	330,298	26,630	30,454	14.4	301,991	337,341	11.7	335,238	0.6
% Day case Surgeries as a % day case + inpatients for specialised basket procedures										
DML		75	75	74	-1.3	75	74	-1.3	68	8.8
DNE		75	75	75	0.0	75	75	0.0	71	5.6
South		75	75	61	-18.7	75	61	-18.7	56	8.9
West		75	75	69	-8.0	75	69	-8.0	62	11.3
National		75	75	69	-8.0	75	69	-8.0	64	7.8
Outpatient Attendances										
DML	1,314,753	1,292,922	109,210	123,640	13.2	1,197,440	1,271,916	6.2	1,198,264	6.1
DNE	764,975	758,418	64,529	72,924	13.0	704,182	743,054	5.5	710,953	4.5
South	672,605	686,696	59,810	65,491	9.5	636,226	667,564	4.9	613,420	8.8
West	642,344	656,846	56,028	62,751	12.0	636,475	649,905	2.1	597,328	8.8
National	3,394,677	3,394,882	289,577	324,806	12.2	3,174,323	3,332,439	5.0	3,119,965	6.8

National Cancer Control Programme (NCCP)

National Cancer Control Programme (NCCP)

- Symptomatic Breast Cancer Services (Chart 1) (M)
- PI 1: Total number of urgent referrals; and of those No. and % offered an appointment within 2 weeks – target 95%, November reported position is 98.7%.
- PI 2: Total number of non urgent referrals; and of those No. and % offered an appointment with 12 weeks – target 95%, November reported position is 98.6%.
- PI 3: Total no. of patients newly diagnosed in the cancer centre; and of those no. and % discussed at MDM – target 100%, November reported position is 100%.
- PI 4: No. and % of patients with a primary diagnosis of breast cancer who have procedures carried out in one of the 8 designated cancer centres out of the total patients with a primary diagnosis of breast cancer who have procedures carried out. Target 100%, November reported position is 100%.



Quality & Clinical Care (QCC)

Quality and Safety	
Blood Policy	Maintaining trend for Year to Date
(Table 3 & 4) (M/Q)	However, reduced activity at hospitals due to short notice of operation cancellations / ward closures / reduced services (budget constraints) may effect outdating of blood / platelet stock at hospital level over the coming months.
Complaints (M)	Total number of complaints received YTD to November 2010 is 7325 of these 5883 were finalised within 30 working days, in line with the same period last year.
FOI (M)	There have been 4,881 FOI requests received YTD to November 2010.
HSE National Information Line (M)	A report from the National Information Line shows the number of calls received YTD to November 2010 is 12,195.
Service User Involvement (M)	 % of hospitals or hospital networks that have established service user panels Two approaches were taken in 2010: 1. Key hospital personnel were identified and participated in 3 sets of workshops in each of the 4 areas focussing on appropriate methodologies (including service user panels, surveys, focus groups). 2. The Advocacy Unit has developed and made available a guide to the different methods of engagement and when to use them, "Service User Involvement Methods A Guidance Document" % of hospitals or hospital networks that have completed patient satisfaction surveys Service User experience survey commenced in October 2010 in 27 participating hospitals. Survey being conducted by ISQSH in association with the HSE. % of PCTs with engagement with the local community As the concept of service user involvement had not been standardised or evaluated in Ireland as approach was agreed as follows: Nineteen community projects in partnership with the HSE using different methods showed how community participation can be of benefit to the ongoing development of Primary Care Teams. An evaluation of the methods of involvement used by the 19 projects was completed in 2010.

Table 3 Red Blood Cells	2010 YTD
No. of units ordered	105,121
No. units outdated/returned	1718
Target rate of outdates/returns (%)	3%
Actual rate of outdates/returns (%)	1.63%

Performance Activity	Outturn 09	Target 10	Actual YTD	% var YTD Actual v Target	Same period last year	% var YTD v YTD last year
Complaints						
No. of complaints	7,984		7,325		7,494	98%
No. of complaints finalised within 30 working days*	6,326		5,883		5,906	100%
Complaint Reviews						
No. of Reviews (HSE)						
No. of Reviews (Non-HSE)				_		
FOI Requests						
No. of FOI requests received	4,879		4,881		4,565	
HSE National Information Line						
Number of calls received	167,645		12,195	_	19,961	61%

*Figures incomplete, yet to be finalised.

New Service Developments – November 2010

Service Area	Key Result Area	Deliverable 2010	Funding	Spend YTD	WTE	WTEs in place YTD	Timescale	Progress in the reporting period.
Quality and Clinical Care	H1N1 Pandemic	Costs associated with H1N1 pandemic.	€55m	€36m	0	-	Q1–Q4	The savings related to H1N1 provision in 2010 is estimated at €15m based upon expenditures year to date.
Children and Families	Ryan Report	Implementation of recommendations progressed (<i>dependent upon allocation</i> <i>arriving in the REV</i>)	€14.27m	€3.8m*	265 (all moratorium exempt)	190	Q1–Q4	An additional 13 social work posts issued under the Ryan Report were filled in November. This brings the total number of Ryan Report posts in place YTD to 190. Out of the 265 posts, 220 are being prioritized due to existing funding allocations, 200 of these relate to Social Work posts. The remaining 20 posts have also been identified and primary notifications have issued. The recruitment process is well underway. * Note the figure attributed to the year-to-date spend refers to three regional areas only on the cost of social workers recruited since June 2010 (estimated at €3.8m - YTD Nov.) as part of the Ryan Service Development allocation. It also includes significant additional costs incurred within the Children and Families services as part of the ongoing implementation of the Ryan Report.
Older People	A Fair Deal	To support the growth in the number of people qualifying for the scheme in line with demographic need.	*€97m	€232m	0	-	Q1–Q4	*The funding of €214m includes €55m received in 2009 and €97m received in 2010 plus €62m additional funding which materialised from reductions in contract bed and subvention spend. The expenditure of €232m to date in regard to the funding received in 2010 under the Nursing Homes Support Scheme have been expended on payments of State Support and Ancillary State Support for clients residing in Private Nursing Homes approved under the scheme. At present, and based on payments to date under the scheme, it is envisaged that there is sufficient funding available to meet the scheme's requirement in the current year, this is also based on estimated subvention and contract bed savings being realised and allocated for expenditure on Fair Deal. A total of 17,325 applications have been received to date under the scheme with approximately 75% of applications now processed.

Service Area	Key Result Area	Deliverable 2010	Funding	Spend YTD	WTE	WTEs in place	Timescale	Progress in the reporting period.
						YTD		
	Home Care Support	To support the increase in demand for Home Care Packages.	€10m	€9.0m	0	-	Q1–Q4	4,890 new clients provided with HCP service YTD – approx €9.0m spend to Nov 2010.
Demand Led Schemes	DLS	To support the growth in the number of people qualifying for medical cards, GP Visit cards and other demand led schemes.	€230m	€200m	0	-	Q1–Q4	The total funding for demand led services has increased by €230m. This funding has aided the provision of medical cards as well as GP visit cards.
National Cancer Control Programme	Cancer Services	Support the further development of cancer services nationally, including services for the National Programme for Radiation Oncology.	€20m	€13m	79	0	Q4/2011	Prioritisation of 79 NCCP WTEs has been agreed and are in process of recruitment. All funding has been allocated; €8m funding has been allocated mainly to cancer centres to support medical oncology and cancer theatre pressures. €4m transferred to population health for the distribution of the cervical cancer vaccine. €4m transferred to St. Lukes Radiation Network for operational costs for the new radiotherapy units in St. James's and Beaumont. €4m has been allocated to private radiotherapy services in the Southern Region and in Limerick.
Innovation		Delivery of suitable projects that demonstr	ate innovation in s	ervice delivery:				
2010	Innovation Funding	 Disability and Mental Health Services 	€3m	€3m		-	Q4	€3m had been provided in the 2010 HSE Vote in respect of disability and mental health. This funding was allocated to The Person Centre (now the Genio Trust) for allocation to projects, which support people with disabilities and mental health difficulties to live full lives in the community. The funding of €3m has been allocated through the HSE and a Service Level Agreement (SLA) exists, detailing the governance and accountability arrangements relating to this funding. 51 projects have been successful in the application process managed by Genio (formerly The Person Centre).
		Child Welfare Information System	€1m	€0		-		A proposal to develop a standardised record management and record keeping system for children files in social work departments is not now being progressed.
	- (Community Intervention Teams 	€3m	€1.45m		-	Q4	The development of new CITs is continuing with the expansion of existing CITs underway. Some existing CITs have expanded the geographical area covered and are offering enhanced services e.g. IV antibiotic service in Dublin North and Limerick. A number of defined hospital avoidance programmes are being developed and formalised. A framework document to assist in the roll out of these and future CIT has been developed and is currently being finalised.
		 Quality and Clinical Care Programmes 	€10m	€0	80	-	Q4	Business cases completed for the OPD Programmes in Dermatology, Neurology and Rheumatology. Number and configuration of additional consultant posts required to support implementation of these OPD Programmes in 2011 agreed. 22 Additional OPD Programme consultant posts progressed through Consultant Approval Advisory Committee in October.
Total			€443.27	€498.25	424	190		
Note: HSE	has estimated that th	e time related savings for service developme	ents in 2010 are €3	30m				



Vote 40 - HSE – Vote Expenditure Return at <u>31st December 2010</u> (As at 10th January 2011)

1. Vote Position at 31st December 2010 – Post Supplementary Estimate Revenue and Capital Position

	YTD Profile post 2010 Supplementary Estimate €'000	YTD Outturn €'000	Over (Under) €'000
Gross Current Expenditure	14,359,639	14,165,470	(194,169)
Gross Capital Expenditure	431,792	354,934	(76,858)
Total Gross Vote Expenditure	14,791,431	14,520,404	(271,027)
Appropriations-in-Aid			
- Receipts collected by the HSE	1,089,206	1,023,561	(65,645)
- Other Receipts	2,512,844	2,520,579	7,735
- Capital Receipts	65,800	7,360	(58,440)
-Total	3,667,850	3,551,500	(116,350)
Net Vote Expenditure	11,123,581	10,968,904	(154,677)
Net Exchequer Surrender excluding Exit Schemes.			(4,677)
Net Exchequer Surrender in respect of Exit Schemes.			(150,000)

A supplementary estimate of €595m was passed by the Dáil on 2nd December 2010 to provide funding for the estimated cost of the exit schemes (€250m) and the shortfall in health levy receipts (€422m). Savings of €42m and additional receipts of €35m from the UK Department of Health were offset against the additional allocations.

2. Comparison to Issues Return

The December issues return submitted on 30th December 2010 is consistent with the December Vote Return.

3. General Commentary

C.1 - Capital

C.2 – Capital - Lottery

Other Health Facilities Gross Capital Expenditure

D.7 – Dormant Account

Net Capital Expenditure

C.3 - Info Systems for Health Agencies

C.4 - Building & Equipping of Mental Health &

D.10 – Disposal of Mental Health Facilities

Based on the post supplementary profile, the gross current vote expenditure is €194m under profile (€95m under profile in November); appropriations-in-aid are €116m under profile (€404m under profile in November). Gross capital vote expenditure is €76m under profile (€71m under profile in November).

Net overall expenditure is under profile by €154m of which €150m relates to a saving on the exit schemes leaving a net surplus of €4m.

316,663

2.539

6.847

25.103

354,934

347,574

3,782

3,578

The above position is based on the actual cash issued to year end and may change as bank balances and suspense account balances are reconciled for the preparation of the Appropriation Account. The final outturn for 2010 will not be available until the 2010 Appropriation Account is prepared.

(3.218)

(27,590)

(21, 153)

(24.897)

(76,858)

(55, 222)

(18,418)

(3,218)

0

Subhead	YTD Profile €'000	YTD Outturn €'000	Over / (Under) €'000
B.9- Dormant Accounts	7.000	3.782	(3.218)

Summary Capital Position by Subhead at 31st December 2010 4.

5. Issues by Vote Subhead - Post Supplementary Estimate Revenue Position

- The gross statutory sector including the long term residential care scheme is €95m under profile. Excluding the saving on the exit schemes the underlying overspend is €8m.
- The voluntary sector is €46m under profile. Excluding the saving on the exit schemes the underlying overspend is €1m. ٠

344,253

2.539

28,000

50.000

431,792

7,000

58,800

365,992

- Medical Card Schemes are €75m under profile.
- Payments to the Long Stay Repayments Scheme and the State Claims Agency are €3m and €19m over profile respectively. Department of Finance Sanction has been received ٠ conveying approval for virement from other subheads to cover this expenditure.
- Revenue Expenditure on the Flu Pandemic amounted to €36m to 31st December 2010 .
- Health Contribution receipts from the Social Insurance Fund and the Revenue Commissioners are €8m over profile at 31st December 2010. ٠