



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

October 2011

Performance Report on NSP 2011



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Introduction

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 Performance Activity and Key Performance Indicators outlined in the NSP 2011.

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.

The Supplementary Report is also produced each month which provides more detailed data on the metrics covered in the Performance Report. This will be expanded quarterly and biannually to report on progress against the Deliverables outlined in NSP 2011.

Additional Items this month

- Debtors Days - Appendix 1

Overview of Key Metrics NSP 2011

Performance Arrows → Performance maintained within 1% ↑ Performance improved by >1% ↓ Performance deteriorated by >1%	% Variance Performance within 5% of target = Green Performance between 5-10% of target = Amber Performance greater than 10% from target = Red
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National	Performance Measures				Performance YTD			YTD 2011 V YTD 2010		Performance this Month				
		Report Frequency	Outturn 2010	Target (NSP 2011)	Target YTD	Activity YTD	% var YTD v Tar YTD	Same period last year	% var YTD v YTD 2010	Target this M/Q	Actual last M/Q	Actual this M/Q	Performance Trend v Last Month	% variance Actual this month V Target this M/Q
Primary Care	PCTs: No. holding Clinical Team Meetings	M	348	518	484	401	-17.1%	316	26.9%	484	393	401	↑	-17.1%
	Child Health Developmental Screening at 10 months	M	64.0%	90%	90%	81.5%	-9.5%	57.3%	42.2%	90%	83.9%	86.7%	↑	-3.7%
Acute Care	In-patient discharges	M	588,860	574,400	481,113	489,904	1.8%	489,825	0.0%	49,069	49,336	48,634	↓	-0.9%
	Day Case discharges	M	728,269	755,100	632,922	674,761	6.6%	614,114	9.9%	65,667	69,872	66,766	↓	1.7%
	% of patients admitted to hospital within 6 hours of ED registration	M	Not comparable	100%	100%	47.1%	-52.9%	n/a	n/a	100%	44.0%	45.3%	↑	-54.7%
	% of patients discharged from hospital within 6 hours of ED registration	M		100%	100%	76.7%	-23.3%	n/a	n/a	100%	75.0%	76.2%	↑	-23.8%
	Elective procedures adults < 6mths, Inpatients	M	74.5%	100%	100%	69.8%	-30.2%	75.3%	-7.3%	100%	67.5%	69.8%	↑	-30.2%
	Elective procedures adults < 6mths, Day Case	M	87.5%	100%	100%	80.4%	-19.6%	86.9%	-7.5%	100%	78.4%	80.4%	↑	-19.6%
	Elective procedures children < 3 mths, Inpatients	M	45.5%	100%	100%	40.4%	-59.6%	43.4%	-6.9%	100%	39.7%	40.4%	→	-59.6%
	Elective procedures children < 3 mths, Day Case	M	51.7%	100%	100%	47.3%	-52.7%	46.3%	2.2%	100%	43.7%	47.3%	↑	-52.7%
	Average Length of Stay (ALOS) in days	M	6.16	5.6	5.6	6.0	-6.7%	6.0	0.0%	5.6	5.9	6.1	↓	8.9%
	Elective Inpatients: % who had principle procedure conducted on day of admission	M	50%	75%	75%	49%	-34.7%	48%	2.1%	75%	49.0%	49.0%	→	-34.7%
	% day case surgeries as a % of day case + inpatient for specified basket of procedures (General Surgery, ENT, Ophthalmology)	M	70.0%	75%	75%	72%	-4.0%	69%	4.3%	75%	72.0%	72.0%	→	-4.0%
	Breast Cancer: % cases compliant HIQA standard of 2 weeks (urgent referral)	M	95.1%	95%	95%	99.3%	4.5%	94.0%	5.6%	95%	100.0%	99.4%	→	4.6%
	Children and Families	% children in care who have a written care plan (Child Care Regs 1995)	M	90.1%	100%	100%	89.0%	-11.0%	N/A	N/A	100%	91.1%	89.0%	↓
% children in care who have an allocated Social Worker at the end of the reporting period		M	93.2%	100%	100%	90.9%	-9.1%	n/a	n/a	100%	91.0%	90.9%	→	-9.1%
Mental Health	CAMHS: % new (including re-referred) child / adolescent cases offered first appointment (seen within 3 months)	M	69%	70%	70.0%	61.0%	-13.1%	60.0%	1.3%	70.0%	56.0%	63.0%	↑	-10.0%
	CAMHS: No. of new child / adolescents offered first appointment and seen	M	7,477	7,503	6,273	6,724	7.2%	6,252	7.5%	636	726	736	↑	15.7%
Older Persons	Total no. of Home Help Hours provided for all care groups	M	11,680,516	11,980,000	9,801,890	9,332,413	-4.80%	9,493,863	-1.70%	997,808	953,067	938,542	↓	-5.9%
	Total no. of people in receipt of Home Care Packages per month	M	9,941	10,230	10,230	10,763	5.20%	9,697	11.0%	10,230	10,769	10,763	↓	5.2%
Palliative Care	Palliative Care: Inpatient bed provided within 7 days	M	New 2011	92%	92%	94%	2.20%	93.0%	5.7%	92%	93.0%	94.0%	→	2.2%

FINANCE	Key Performance Measurement	Approved Allocation €000	Actual YTD €000	Budget YTD €000	Variance YTD €000	% Var Act v Tar
	Dublin Mid Leinster	2,715,396	2,309,386	2,252,924	56,462	2.5%
	Dublin North East	1,933,045	1,643,651	1,603,999	39,652	2.5%
	South	1,898,751	1,604,448	1,585,217	19,232	1.2%
	West	1,991,545	1,699,283	1,658,161	41,123	2.5%
	Care Group / Other Services	34,938	14,001	28,466	-14,464	-50.8%
	Population Health	146,939	109,706	120,592	-10,886	-9.0%
	ISD Regional Sub Total	8,720,615	7,380,476	7,249,359	131,118	1.8%
	Primary Care Reimbursement Service	2,402,898	2,109,754	2,004,454	105,300	5.3%
	Corporate Services and Pensions	410,463	288,622	297,795	-9,172	-3.1%
National Services	704,786	647,288	589,628	57,660	9.8%	
Held Funds	112,034		93,500	-93,500		
Total HSE	12,350,795	10,426,140	10,234,735	191,405	1.9%	
Deficit after adjusting for supplementary funding					68,000	
Key Performance Measurement Savings 2011	Target Savings 2011 €000	Actual YTD €000	Target YTD €000	Variance YTD €000	% Var Act v Target	
Community Schemes*	424	178.8	312.3	-133.5	-42.7%	
VFM Expenditure Reductions	202.8	126.2	163.8	-37.6	-23%	
Exit Scheme and Moratorium **	187.7	155.1	156.4	-1.3	-0.8%	

* €10m of this reduction was allocated to hospitals

**The Exit and Moratorium savings are estimated at National level.

Human Resources	ISD Region / Other	WTE Dec 2010	Ceiling Oct 2011	WTE Oct 2011	WTE Change since Sept 2011	WTE Change from Dec 2010 to Oct 2011	WTE Variance Oct 2011	% WTE Variance Oct 2011
	DML	31,721	31,036	30,783	-65	-938	-253	-0.81%
	DNE	21,903	21,012	20,864	-23	-1,039	-148	-0.70%
	South	23,058	22,392	22,133	-98	-925	-259	-1.16%
	West	24,794	24,183	23,967	-47	-827	-216	-0.89%
	National	955	1,085	1,021	-2	+66	-65	-5.97%
	Portion of Ceiling to be allocated		588				-588	-100.00%
	Other (Corp Services, QCC, PH etc.)	4,049	3,853	3,801	+16	-247	-52	-1.35%
	Total	107,972	105,622	104,065	-222	-3,907	-1,557	-1.47%

Management Overview Report on Performance

FINANCE KEY MESSAGES

October Financial Position

The financial results for October show total expenditure of €10.426 billion against a year to date budget of €10.234 billion. The reported variance is €68m, when adjusted for the supplementary estimate.

- The HSE expects to deliver a balanced vote to year end barring any unanticipated change in the final few weeks of the year. The HSE has delivered a significant reduction in the rate of expenditure in the second half of 2011. A supplementary estimate of €148m in December 2011 was provided which included the return of the €58m due to the HSE related to the exit scheme and an additional €90m of which €40m represents the transfer of a surplus from the Department of Health.
- Within community services to the end of October there is a deficit of €18.8m. The deficit is substantially represented by a deficit on childcare services of €58.3m with some other minor compensation. Childcare services are statutorily-based and are therefore essentially demand led.
- The Primary Care Reimbursement Service is showing a deficit of €105m to the end of period. The projected year end deficit is €125m, of which the supplementary estimate is funding €100m.

November Vote

Gross current vote expenditure is €179m over profile, while current appropriations-in-aid collected directly by the HSE are €63m under profile resulting in a **net current overspend of €242m** at the end of November, 2011 (€234m over profile in October). Other current appropriations-in-aid are €35m ahead of profile. Gross capital expenditure is €47m under profile, while capital appropriations-in-aid are €9m under profile.

Supplementary Estimate

A supplementary estimate was taken by the Select Committee for Health and Children on the 7th December and recommended to the Dail for an amount of €148m for the year 2011. €58m meets the shortfall in 2011 funding arising from a lower than anticipated uptake in the Early Retirement and Voluntary Redundancy Schemes implemented at the end of 2010. An additional €90m was required to meet deficits in services, this includes a transfer of €40m from a surplus in the vote of the DoH.

SERVICE DELIVERY KEY MESSAGES

Overall Activity

- Emergency admissions were up by an additional 3,764 (+ 1.2%) in the first 10 months of 2011 over this time last year and remain +2.8% over expected levels of activity (+8,496). Factors influencing this include patient acuity and older age profile.
- Figures for October show 28,971 (inpatient and day case combined) are waiting for treatment for a period of more than three months. This compares to 30,756 recorded for September, a reduction of 1,785.
- The HSE is targeting an additional 7,000 endoscopes by year end (approximately 3,500 colonoscopies). An additional 4,428 scopes have been undertaken through this initiative to date.
- The number of inpatient and day case treatments are up by an additional 60,726 (+5.5%) over this time last year and remain +4.5% (+50,630 treatments) over target.
- GP Out of Hours contacts are up by an additional 55,684 (+7.8%).
- The number of individuals covered by a medical card for the end of October is 1,694,658 and an additional 78,849 individuals issued with a medical card since December 2010.

Emergency Activity

- ED attendances for the first ten months of the year was 921,186 which is 13,723 (-1.5%) less than same period last year. The monthly average number of attendances is 92,186 compared to 93,559 in 2010 and the admission is higher than 2010 (up 1.2%).

Urgent colonoscopies

Census week ending 30th October reports 1 patient waiting > 28 days, from referral, for an urgent (priority 1) colonoscopy. The breach was in the Midland Regional Hospital, Portlaoise. The patient has since been seen on 14th November 2011.

Nursing Home Support Scheme

In October, there was an additional 424 new entrants to private nursing homes under the NHSS. The total number approved for funding under the Scheme at October 31st is 22,341. Since the beginning of October, approvals are being issued on a weekly basis with a view to ensuring the shortest wait time possible. During the month of October 480 new applicants are being funded while an additional 524 are processed to final stage and are now awaiting release of funding. The scheme is taking on new clients within the limits of the resources available, in accordance with the legislation.

Mental Health

- During November an additional Consultant commenced duty for the Child and Adolescent Inpatient Unit at Merlin Park Galway.

Delayed Discharges

There were 810 delayed discharges reported in the acute hospital system on Nov 28th. This is 235 more than the average for November in 2010. Of the 810 delayed discharges, 412 (51%) are within the Dublin Academic Teaching Hospitals.

HUMAN RESOURCES KEY MESSAGES

Health Service employment at the end of October stands at 104,065 WTEs which represents a month-on-month decrease of 222 WTEs over September.

The health sector is 1,557 WTEs below the current employment ceiling of 105,622 WTEs. In regional terms, all four HSE regions are operating within their approved employment ceiling, detailed as follows: DML -0.82%, DNE -0.8%, South -1.21% and HSE West -1.41%. Staffing in each region fell, DML -61 WTE, DNE -16 WTE, South -102 and HSE West -45.

In sectoral terms, the Voluntary Hospital Sector is over ceiling by 158 WTEs (0.73%), while the non-acute Voluntary Sector and the HSE is operating well below ceiling by 45 WTEs (-0.31%) and 793 WTEs (-1.15%). All three Sectors recorded decreases in October; Statutory Sector, recorded a decrease of 198 WTEs, the Voluntary Hospital Sector, decreased by 21 WTEs and the Primary & Community Voluntary Sector, decreased by 2 WTEs.

It is important to note that a substantive influence on staff movements under current circumstances are retirements and resignations.

In accordance with the 2011 Employment Control Framework, a ceiling reduction is implemented at the end of each quarter. The next scheduled reduction of 392 WTE will be implemented at the end-quarter 4 (31 December).

The Integrated Services Directorate in overall terms recorded a decrease of 230 WTEs, with decreases in Acute Hospital Services of 82 WTEs and Primary and Community Services of 148 WTEs.

- Medical/ Dental staffing recorded a largest monthly increase +139 WTE (+185 YTD), which includes +5 Consultants and +127 NCHDs.
- Nursing fell by 224 WTEs (-734 YTD), with student nurse WTEs accounting for -214 WTEs. Nursing WTEs, recorded in the five DATHs Nurse Banks, are currently not included in the main census and stood at 320 WTEs at the end of October up 10 WTEs from September.
- All staff categories are below their 2010 levels, other than Medical/Dental (+2.29%), with Management/Admin (-7.16%) and General Support Staff (-7.66%) recording the greatest reductions, against an overall reduction of -3.62%, reflecting the impact of the 2010 VER/VRS which targeted both of these staff categories.

NCHDs

As part of the centralised recruitment of NCHDs the HSE has received 3,492 applications of which 489 are from applicants who are currently registered with the Medical Council. The rules of the recruitment prioritise those already registered.

An additional 125 NCHDs, the majority recruited as part of the India / Pakistan recruitment process, are currently sitting the examinations for the Medical Supervised Division and it is anticipated that successful candidates will be registered and available to take up work in late December.

As of 7th December there were 55 NCHD posts which have not been filled. This represents a vacancy rate of 1.2% of all NCHD posts.

It is anticipated that the level of appointments to NCHD posts in January 2012 will allow a reduction in the number of locum / agency NCHDs currently employed.

Where the HSE is experiencing recruitment difficulties, for example in Emergency Medicine and Anaesthesia at Registrar level, Psychiatry and General Surgery at SHO level, consideration is being given to the introduction of agreed rostering arrangements. An option appraisal is being planned, in conjunction with the National Director CP&S and Clinical leads, to look at approaches to support and maintain Emergency Department staffing in the medium term, taking account of planned developments in both the Emergency Medicine and Acute Medicine programmes.

ITEMS FOR UPDATE

CAMHS Report

The Third Annual Report (2010-2011) on Child and Adolescent Mental Health Services was launched on 1st December. The Report provides a comprehensive update on the development of mental health services for young people and outlines progress on the development of CAMHS services as outlined in “A Vision for Change” policy. CAMHS provide specialist mental health assessment and treatment to young people adopting a multidisciplinary approach.

The CAMHS Annual Report provides important information on the number of new cases seen, waiting times for an appointment with a specialist, and the types of mental health problems presenting to services by young people. The Third Annual CAMHS Report also incorporates the third month long survey of the clinical activity of 55 community CAMHS teams carried out in November 2010. The Report includes information collected monthly through HSE HealthStat from each community CAMHS team and information on inpatient admissions provided by The Health Research Board and The Mental Health Commission. This report also includes a section on young people under the age of 18 years presenting to hospital emergency departments as a result of deliberate self harm.

The information in the Report guides service planning for the future to ensure that the HSE can respond appropriately to emerging trends and the mental health needs of young people. The full Report is available to download at www.hse.ie

Detailed Finance Report

Finance

The financial results for October show total expenditure of €10.426 billion against a year to date budget of €10.234 billion. The reported variance is €68m when adjusted for the supplementary estimate as illustrated in table 1.

- The HSE expects to deliver a balanced vote to year end barring any unanticipated change in the final few weeks of the year. The HSE has delivered a significant reduction in the rate of expenditure in the second half of 2011. A supplementary estimate of €148m in December 2011 was provided which included the return of the €58m due to the HSE related to the exit scheme and an additional €90m of which €40m represents the transfer of a surplus from the Department of Health.

Year to date expenditure in Hospitals was €3.259 billion compared with a budget of €3.122 billion – leading to an adverse variance of €137.6 million. Table 2 illustrates the position by region.

Community Services within regions have year to date expenditure of €3.996 billion compared with a budget of €3.978 billion – leading to a variance of €18.8m.

- Within community services to the end of October there is a deficit of €18.8m. The deficit is substantially represented by a deficit on childcare services of €58.3m with some other minor compensation. Childcare services are statutorily-based and are therefore essentially demand led.

Fair Deal - The Finance Directorate has now received actual long stay bed numbers for the HSE provided long stay accommodation and reviewed the build up of the total Fair Deal budget. Some of the resource in the regions may be attributable to Fair deal. This is currently being reviewed and will be adjusted as required in the budget issuing process for 2012. There is no impact of this on the global HSE finance position but there could be an internal resource transfer.

Table 1.	Approved Allocation €000	Actual YTD €000	Budget YTD €000	Variance YTD €000	% Var Act v Tar
Acute Hospital Services	3,753,349	3,259,867	3,122,200	137,666	4.4%
Primary & Community	4,785,389	3,996,902	3,978,100	18,802	0.5%
Care Group / Other Services	34,938	14,001	28,466	-14,464	-50.8%
Population Health	146,939	109,706	120,592	-10,886	-9.0%
ISD Total	8,720,615	7,380,476	7,249,359	131,118	1.8%
Primary Care Reimbursement Service	2,402,898	2,109,754	2,004,454	105,300	5.3%
Corporate Services and Pensions	410,463	288,622	297,795	-9,172	-3.1%
National Services	704,786	647,288	589,628	57,660	9.8%
Held Funds	112,034		93,500	-93,500	
Total HSE	12,350,795	10,426,140	10,234,735	191,405	1.9%
Deficit after adjusting for supplementary funding				68,000	

Table 2. Hospital Services	YTD				
	Approved Allocation €000	Actual €000	Plan €000	Variance €000	%
Dublin/ Mid-Leinster	1,315,125	1,126,105	1,088,095	38,010	3.5%
Dublin/ North-East	862,765	751,847	717,639	34,207	4.8%
South	768,305	662,544	642,285	20,259	3.2%
West	807,154	719,371	674,180	45,190	6.7%
Total	3,753,349	3,259,867	3,122,200	137,666	4.4%

Table 3. Primary & Community Services	YTD				
	Approved Allocation	Actual	Plan	Variance	%
Dublin/ Mid-Leinster	1,400,271	1,183,280	1,164,829	18,452	1.6%
Dublin/ North-East	1,070,280	891,804	886,359	5,445	0.6%
South	1,130,447	941,905	942,932	-1,027	-0.1%
West	1,184,392	979,913	983,980	-4,067	-0.4%
Total	4,785,389	3,996,902	3,978,100	18,802	0.5%

Agency Costs (Table 4)	<p>Despite the reduction in the unit cost of agency hours, the overall cost of Agency is going up with the average monthly spend on doctors increasing by 35% and the average monthly spend on HCA increasing by 18%.</p> <p>There has been a decrease in nursing agency spend by 8%</p> <p>The increase in Agency hours contracted needs to be addressed to realise the benefit of the cost savings under the contract.</p>
Community Demand Led Schemes (Table 5)	<p>The Primary Care Reimbursement Service is showing a deficit of €105m to the end of period. The projected year end deficit is €125m, of which the supplementary estimate is funding €100m.</p>

Agency Costs Table 4.	Doctors	Nurses	Care assistants, porters etc	Total
	€m	€m	€m	€m
Average monthly cost 2010	3,871.3	6,395.6	3,859.1	14,125.9
Total cost 2010	46,455.0	76,747.0	46,309.0	169,511.0
Average monthly cost for Jan to Oct 2011	5,240.6	5,877.7	4,536.9	15,655.3
Total cost Oct 2011	52,406.4	58,777.3	45,368.9	156,552.7
Growth After Qtr 3	35%	-8%	18%	11%
2011 growth at current levels	16,432.7	- 6,214.2	8,133.7	18,352.2

Table 5. Schemes	Approved Allocation €000	YTD			
		Actual €000	Budget €000	Variance €000	%
Medical Card Schemes	1,651,138	1,492,510	1,381,901	110,609	8.0%
Community Schemes	751,761	617,244	622,553	(5,309)	-0.9%
PCRS Total	2,402,899	2,109,754	2,004,454	105,301	5.3%

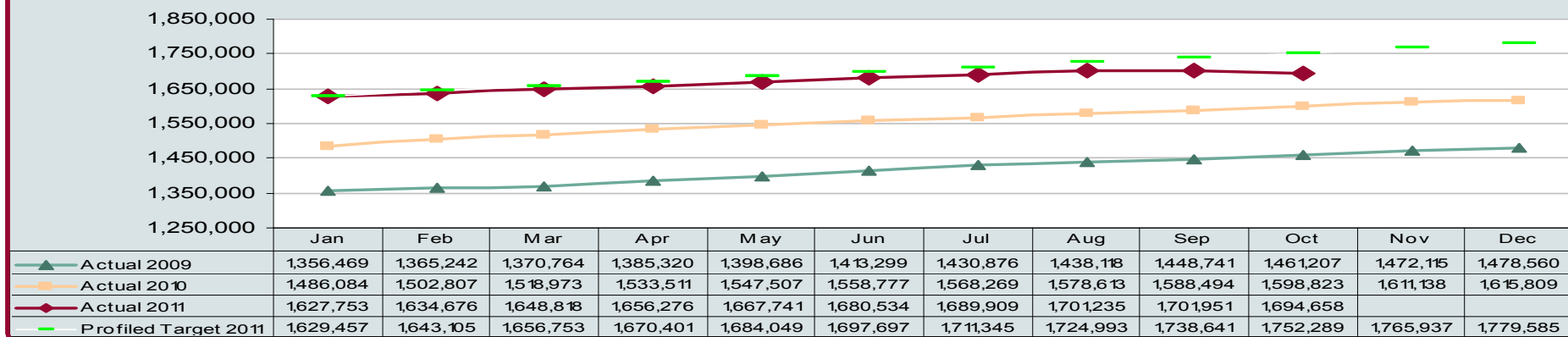
Community (Demand Led) Schemes

Medical / GP Visit Cards (M)

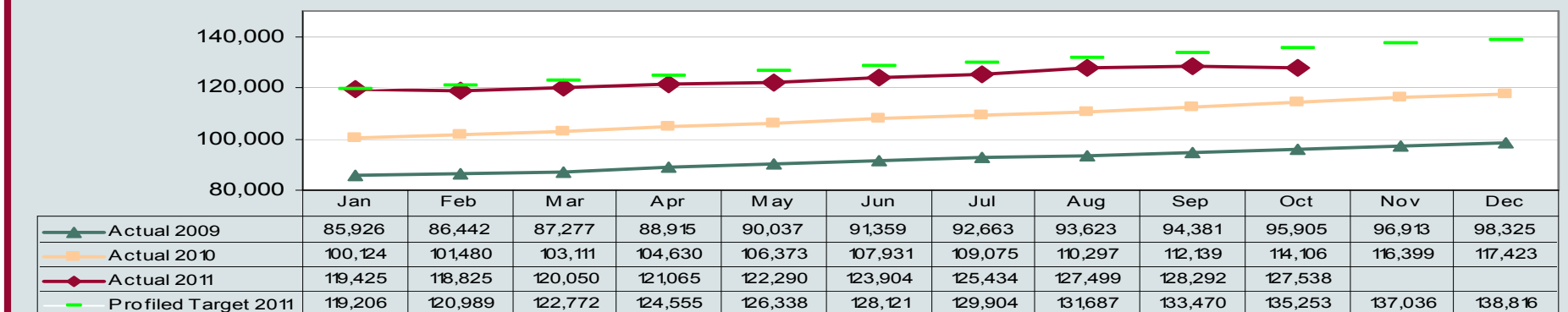
The number of individuals covered by medical cards is 1,694,658 reported at the end of October 2011 (an additional 78,849 since December 2010). This is 3.3% below the October 2011 projected figure of 1,752,289 and 6% above the same period last year (1,598,823). The total number of discretionary medical cards in the system at the end of October was 76,644. This compares with 80,618 issued in October 2010, This is a decrease of 3,974 cards. (-4.9%). Discretionary medical cards represent 4.6% of cards issued year to date.

The number of individuals covered by GP Visit Cards at the end of October was 127,538 which is 5.7% below projected figure for end October (135,253). An additional 10,115 cards have been issued since December 2010. The total number of discretionary GP visit cards in the system at the end of October was 16,905. This is a 3.4% decrease from the number of cards issued in October 2010 (17,506). Discretionary GP visit cards represent 13.3% of cards issued year to date.

Persons covered by Medical Card: 2009 - 2011



No. of GP Visit Cards Issued: 2009 - 2011



*Community (Demand Led) Schemes

Long Term Illness (M)	<ul style="list-style-type: none"> The number of LTI claims made during October was 74,205 and YTD was 720,794. Compared to same period last year (736,686). This represents a decrease of 2.2%. The total number of LTI items in October was 238,841 and YTD was 2,292,556. Compared to same period last year (2,375,109), this represents a decrease of 3.5%.
Drug Payment Scheme (M)	<ul style="list-style-type: none"> The number of DPS claims made during October was 268,509. The year to date position is 2,743,424. Compared with the same period last year (3,230,984). This represents a decrease of 487,560 or 15.1%. Total number of DPS items in October was 836,085 The year to date position is 8,450,257. This is 1,056,568 fewer items (11.1%) included in claims than in the same period in 2010 (9,506,825).
General Medical Services (GMS) (M)	<ul style="list-style-type: none"> The number of GMS prescriptions reimbursed during October was 1,597,036. This represents a total of 15,515,247YTD. Compared with the same period last year (14,540,064 prescriptions). There has been an increase of 975,183 (6.7%) prescriptions reimbursed YTD in 2011.
HiTech (M)	<ul style="list-style-type: none"> The number of HiTech claims made during October was 41,959 The year to date figure is 359,572. Compared to same period last year, (276,902claims). This represents an increase of 82,670 (29.9%).
Dental Treatment Services Scheme (DTSS) (M)	<ul style="list-style-type: none"> The numbers of routine dental treatments provided YTD is 801,251, 0.8% below planned levels. 34,797 more complex treatments have been provided YTD, 22.6% below planned levels at this stage of the year.
Community Ophthalmic Scheme (M)	<ul style="list-style-type: none"> The number of adult ophthalmic services provided YTD is 594,584, 0.3% below planned levels. The number of child ophthalmic services provided YTD, through this scheme, is 50,354, 4.5% below planned levels.

*Community (Demand Led) Schemes

The number of claims in a 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.

Chart 3

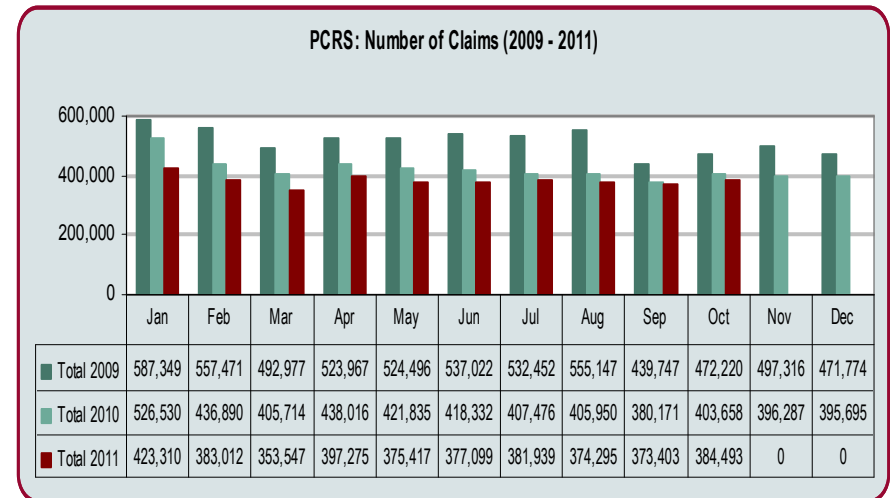
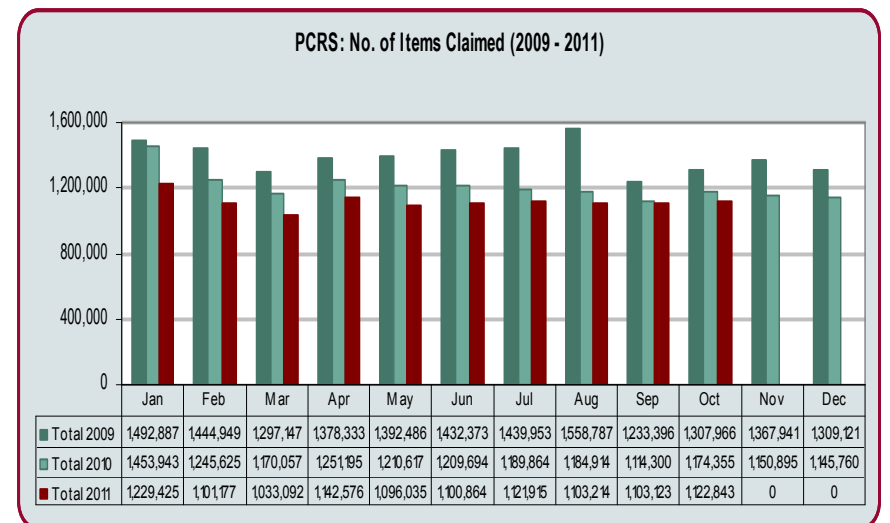


Chart 4



Value for Money (VFM)

Key Messages
(excluding PCRS
and Fair Deal non
pay as these are
reported
separately)

- **€126.16m** in savings was achieved by the end of October against a target of €163.79m i.e. 77% , a decreasing saving compared to last month of 81%.
- Savings in some areas previously exceeding the target set and with higher than expected savings are compensating to a reducing extent for underachievement in savings against targets in other areas, such as *Drugs & Medicines* and *Cleaning & Washing*.
- If the current rate of spend and pace of saving is maintained in November and December, then the total required reduction will be delivered with some categories of non-pay compensating for under delivery in both other non-pay categories and under performing Pay categories.

Pay analysis.

- **Total Pay** excluding Superannuation, PRSI and Arrears is down compared to year to date 2010 by €70.4m. or 1.4%, an increased rate of saving compared to last month.
- **Fixed Pay**, including Basic, Weekend/Public Holidays and Nights is down by €76m. or 1.8%, a reduced rate of saving compared to June but static since July.
- Variable Pay has increased by 1.1% due largely to increases in Locum/Agency, but is a significantly reducing rate of increase compared to previous months.
- The new **agency** contract shows a 25% reduction in the price of Agency Nursing, a 20% reduction in the price of HCA hours and 19% reduction in the price of NCHD hours (covers from March 14th to Sep30th) equivalent to a €13.75m saving. However, despite the reduction in the cost of agency hours, the overall cost of Agency is going up. Any possible increase in usage of Agency would need to be addressed to realise the benefit of the cost savings under the contract.
- **On Call** costs overall are showing a reduction in October however, the full year projected saving will not meet the required €5m. The HR Project Group overseeing the implementation of the revised rosters and rates for On-call Lab services, against which this saving was applied, are reporting reductions of in excess of this amount based on the returns from the currently reporting hospitals and are expecting full delivery as the number of reporting hospitals increases.

Non Pay analysis

- Although 50% of the non-pay categories are meeting their year to date target and are projected to meet their annual target, as well as an improved rate of saving in some categories compared to last month such as *X-Ray* and *Bedding & Clothing*, there is still under achievement of the required reduction year to date.
- Categories not meeting the YTD target include those with increased costs: *Labs, Bloods, Medical Gases, Vehicle Running Costs, Office and ICT* .
- In addition to those categories showing no reduction, the current 2011 spend projected to year end based on repeating October rate of spend, shows that although the rate of reduction is insufficient in a number of categories to deliver their full year reduction, such as *Lab or Bloods*, *other categories will compensate to deliver the full end of year required reduction*.
- A significant range of the pricing and supplier engagement related reductions were profiled to be active since April and these needed to achieve their targets month on month. At the same time volumes/usage needed to remain constant to achieve the level of saving required over the year.
- The “Discretionary Spend” headings have an increased rate of saving since July but Furniture and Vehicles Purchased are still not projected to meet their annual target, while Maintenance is projected at the current rate of saving to meet the targeted full year reduction.

	Total Reduction Required 2011	Nationally Led Reduction Required 2011	Expected Start Date	Locally Led Reduction Required 2011	Expected Start date	Reduction Required Oct YTD	Reduction achieved Oct YTD
	€m	€m		€m		€m	€m
	HR and/or CSS-led Reductions			ISD-led Reductions			
Pay							
On Call Services	5	5	Feb-11	0		4.09	3.41
Agency Services (Note 1)	10.1	7	Feb-11	3.06	Jan-11	8.28	0.00
Overtime	11.6	0		11.6	Jan-11	9.66	8.92
Basic & Weekend/Public Holidays/Nights (Note 2)	2.3	0		2.3	Jan-11	1.83	12.44
Nursing - Basic	3.1	0		3.11	Jan-11	2.59	
Management/Admin - Basic	0.7	0		0.71	Jan-11	0.59	
Other – Basic, Allowances	8.9	0		8.92	Jan-11	7.43	
Non Pay							
Medical & Nursing Training & Education. (Note 3)	2.7	2.6	Jan-11	0.14	Jan-11	2.25	2.25
Medical & Surgical Supplies, Contracts and Equipment	24.7	23.4	Apr-11	1.26	Jan-11	30.20	21.10
Drugs & Medicines	20.9	18	Mar-11	2.94	Jan-11	21.54	29.52
Laboratory Consumables	9.5	8.9	Mar-11	0.6	Jan-11	7.62	0.38
Blood and Blood Products	2	2	Mar-11	0.02	Jan-11	1.62	-0.20
X-Ray Consumables	1.6	1.6	Mar-11	0.01	Jan-11	1.29	2.74
Medical Gases	1.3	1.3	Mar-11			1.04	0.34
Cleaning & Washing Products and Contracts	3.2	3.1	Apr-11	0.05	Jan-11	2.43	2.35
Energy (Note 4)	1.5	1.5	Apr-11	0.03	Jan-11	1.25	0.00
Catering Products & Contracts	3.1	2.6	Feb-11	0.48	Jan-11	2.43	7.90
Patient Transport Costs	0.8	0.8	Apr-11	0.08	Jan-11	0.65	2.79
Bedding & Clothing	1	1	Mar-11	0.02	Jan-11	0.82	1.07
Vehicle Running Costs	0.2	0.2	Apr-11	0	Jan-11	0.15	-1.29
Office, Stationery, Printing, Equipment etc.(Note 5)	4.9	3.8	Apr-11	1.07	Jan-11	9.71	4.48
Telephony (Note 6)	2.5	2.5	Apr-11				
Insurance (Note 7)	1	1	Jan-11			0.83	0.83
ICT Equipment	2	2	Jun-11	0.02	Jan-11	1.44	-0.41
Legal (Note 8)	5	5	Apr-11			3.89	1.09

	Total Reduction Required 2011	Nationally Led Reduction Required 2011	Expected Start Date	Locally Led Reduction Required 2011	Expected Start date	Reduction Required Oct YTD	Reduction achieved Oct YTD
	€m	€m		€m		€m	€m
		HR and/or CSS-led Reductions		ISD-led Reductions			
Grants to Outside Agencies (Note 10)	3.4	0		3.44	Jan-11	2.87	2.87
Travel & Subsistence	0.1	0		0.12	Jan-11	0.10	0.54
Bad & Doubtful Debts	0.5	0		0.5	Jan-11	0.41	-0.52
GP Grants	0.1	0		0.14	Jan-11	0.11	0.22
Miscellaneous (Note 9)	1.8	0		1.81	Jan-11	1.51	1.51
Review of Rents / Lease Renewals etc.	5	5	Apr-11	Reduction and performance included in Office above			
Logistics and Inventory Management	20	20					
Stock Management (Pharmacy)	6	6	Apr-11	Reduction and performance included in Drugs above			
Stock Management (Non Pharmacy)	8.2	8.2	Apr-11				
Point of Use Demand Management	0.8	0.8	Apr-11				
Aids and Appliances Recycling	5	5	Apr-11	Reduction and performance included in Medical & Surgical above			
Reduce Discretionary Spend	42.2	42.2					
Furniture	11	11	Jan-11			9.17	2.56
Vehicles Purchased	0.7	0.7	Jan-11			0.57	0.10
Maintenance	30.5	30	Jan-11	0.5	Jan-11	25.42	19.20
TOTAL	202.8	160		42.82		163.79	126.19

Note 1: Agency national reduction relates to the agreement and implementation of a new national contract for all agency staff. It has been implemented since Mar14th and based on the hours purchased since that date, is showing price savings of 25% in Nursing, 20% for Health Care Assistants and 19% for NCHDs, equivalent to €13.75m. in savings. These savings are becoming increasingly evident in our financial data as the months progress. The ISD led reduction of €3m. relates to reduced usage of Agency since the beginning of the year. On the basis of the Sep YTD data, as reported in the Financial Summary of the PR, there is an increased cost for Agency compared to last year and therefore, performance in this table has been set to 0.

Note 2: There is a reduction in Basic and Weekend/Public Holiday Pay of nearly €77m. compared to 2010 OctYTD, however, only the required reductions are recorded in this table as some Basic Pay reductions may also relate to Moratorium and Exit Scheme reductions.

Note 3: Education and Training has reduced in expenditure compared to the equivalent period last year by €49m., however, since there was a budget movement to the Dept. of Education & Science of €56m., only the minimum required saving associated with these initiatives is recorded in this table.

Note 4: Energy costs have increased by €11.4m. compared to the equivalent period last year and although there has been a negotiated price reduction with Bord Gais of €0.852m, this saving is being negated by these overall increases. The rate of increase was reducing in the third quarter compared to the first quarter 2011, however, there is an increase again in September and October.

Note 5: Office Expenses, Rents & Rates costs has experienced increases related largely to new Leasing costs associated with the HSE Primary Care Centres and Cancer Control Programme and which overall are negating higher reductions being delivered by the four regions. The total required reduction is expected to be delivered if the October spend is repeated in the remaining months.

Note 6: Telephony costs are coded as part of Office and for information there has been a negotiated price reduction with Eircom over €4m. which is being negated by other increases in Office referred to above.

Note 7: Insurance costs overall reduced in Sept for the first month this year but have increased again in Oct compared to the equivalent period last year, however, the relevant Insurance expenditure for this negotiated reduction is coded in DNE which is showing a reduction of €2.6m. YTD.

Note 8: Legal costs, for the first time this year have decreased overall compared to the equivalent period last year by €1.1m. However, analysis of expenditure related to the new Legal contracting model shows savings of over €2.2m. for March to September and the required reduction is expected to be delivered if the current pattern of spend repeats for the remaining months.

Note 9: Miscellaneous has reduced in expenditure compared to the equivalent period last year by €18.1m., however, only the minimum required saving associated with these initiatives is recorded in this table.

Note 10: Grants to Outside Agencies has reduced in expenditure compared to the equivalent period last year by €23m., however, only the minimum required saving associated with these initiatives is recorded in this table.

Capital

The net capital cash profile for the period Jan-Oct 2011 was €287.529m. The capital cash issued for this period was € 256.522m. Sales of surplus assets amounted to €5.800m.

Capital Vote 2010	Approved Allocation €000	Actual Jan - Oct €000	Profile Jan - Oct €000	Variance Jan - Oct €000
C1/C2 Building Equipping and Furnishing of Health Facilities	337,250	232,008	273,830	41,822
C3 Information Systems and Related Services for Health Agencies	40,000	8,323	12,229	3,906
C4 Mental Health and other Health Facilities Funded from the Sale of Surplus Assets	15,000	16,191	13,820	-2,371
A in A (Sales of Surplus Assets)	-15,000	-5,800	-12,350	-6,550
Net Capital	377,250	250,722	287,529	36,807

Table 7. Appropriations-in-Aid	Estimate Provision	REV Profile to 31 Oct 2011	Receipts to 31 Oct 2011	Shortfall / (Surplus)
Maintenance Charges	376,000	312,107	260,071	52,036
Superannuation	199,986	164,653	160,080	4,573
Miscellaneous Receipts	151,800	128,000	123,564	4,436
Pension Levy	337,156	280,000	307,968	-27,968
Dormant Accounts	959	311	0	311
Total	1,065,901	885,071	851,683	33,388

Detailed Human Resources Report

Human Resources (HR)

Level of employment against target

Health Service employment at the end of October stands at 104,065 WTEs which represents a month-on-month decrease of 222 WTEs over September.

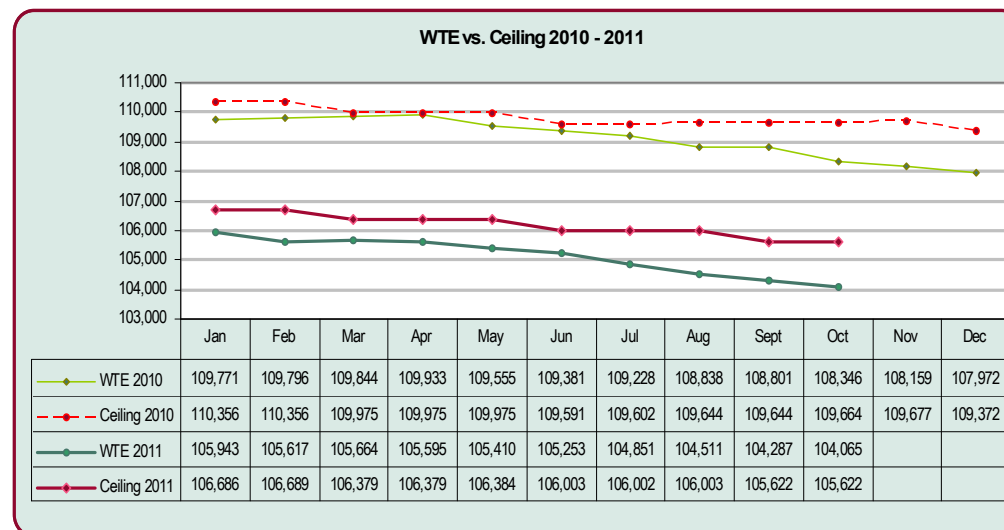
The health sector is 1,557 WTEs below the current employment ceiling of 105,622 WTEs. In regional terms, all four HSE regions are operating within their approved employment ceiling, detailed as follows: DML -0.82%, DNE -0.8%, South -1.21% and HSE West -1.41%. Staffing in each region fell, DML -61 WTE, DNE -16 WTE, South -102 and HSE West -45.

In sectoral terms, the Voluntary Hospital Sector is over ceiling by 158 WTEs (0.73%), while the non-acute Voluntary Sector and the HSE is operating well below ceiling by 45 WTEs (-0.31%) and 793 WTEs (-1.15%). All three Sectors recorded decreases in October; Statutory Sector, recorded a decrease of 198 WTEs, the Voluntary Hospital Sector, decreased by 21 WTEs and the Primary & Community Voluntary Sector, decreased by 2 WTEs.

It is important to note that a substantive influence on staff movements under current circumstances are retirements and resignations.

The Integrated Services Directorate in overall terms recorded a decrease of 230 WTEs, with decreases in Acute Hospital Services of 82 WTEs and Primary and Community Services of 148 WTEs.

Chart 1



Service Area	WTE Dec 2010	Ceiling Oct 2011	WTE Oct 2011	WTE Change since Sep 2011	WTE Change from Dec 2010 to Oct 2011	WTE Variance Oct 2011	% WTE Variance Oct 2011
Acute Hospital Services	49,318	48,039	48,369	-82	-949	+330	+0.69%
National Cancer Control Programme	764	765	739	-5	-25	-26	-3.35%
Primary and Community Services	52,348	50,616	49,659	-148	-2,689	-957	-1.89%
Portion of Ceiling to be allocated		877	0	+0	+0	-877	-100.00%
Ambulance Services	1,494	1,473	1,497	-3	+3	+24	+1.64%
Corporate	2,989	2,805	2,758	+8	-231	-47	-1.67%
Population Health	1,060	1,048	1,043	+8	-17	-5	-0.48%
Total	107,972	105,622	104,065	-222	-3,907	-1,557	-1.47%

WTEs by Staff Category (Table 3)

- The recruitment pause continues to impact on exempted grades where a reduction of 12 WTEs was seen in Social Worker grades. No additional Social Worker posts under Children and Families 2010 (Ryan Report) were filled in October. Employment levels remain virtually the same levels since the end of 2010 in this category, due to retirements and resignations. This category is 235 WTEs (or +10.99%) above the 2009 levels. The recruitment process to fill 64 outstanding social worker posts approved through development posts in the National Service Plan (NSP) 2010 is still ongoing, as is the 60 WTE development posts set out in NSP 2011.
 - Psychologists and Counsellors showed an increase of 16 WTEs, Occupational Therapy +5, Physiotherapy +4 and Speech & Language Therapists showing no change.
 - At the end of October, 38.5 of the 2011 new service development posts have been filled, up 9 WTEs from September.
 - Some 57.5 development posts from 2008/2009 still remain to be filled.
-
- Medical/ Dental staffing recorded a largest monthly increase +139 WTE (+185 YTD), which includes +5 Consultants and +127 NCHDs.
 - Nursing fell by 224 WTEs (-734 YTD), with student nurse WTEs accounting for -214 WTEs. Nursing WTEs, recorded in the five DATHs Nurse Banks, are currently not included in the main census and stood at 320 WTEs at the end of October up 10 WTEs from September.
 - Health & Social Care Professionals increased by +13 WTE (-177 YTD).
 - Management/admin WTEs increased in overall terms in October by +4 (-1,239 YTD).
 - General Support Services fell by 48 WTE or -875 WTE YTD.
 - Other Patient & Client Care decreased by -222 WTE or -1,068 WTE YTD.
 - All staff categories are below their 2010 levels, other than Medical/Dental (+2.29%), with Management/Admin (-7.16%) and General Support Staff (-7.66%) recording the greatest reductions, against an overall reduction of -3.62%, reflecting the impact of the 2010 VER/VRS which targeted both of these staff categories.

WTEs by Exempted Grades

Table 2 Selected Exempted Key Groups	WTE Dec 2009	Target Growth to 2012	WTE Oct 2011	Variance from Dec 2012 target	WTE Change from last month	Change since Dec 2009	% Change since Dec 2009
Consultants	2,317	<i>not specified</i>	2,480	<i>n/a</i>	+5	+163	+7.05%
Occupational Therapists	1,103	<i>n/a</i>	1,201	<i>n/a</i>	+5	+98	+8.86%
Physiotherapists	1,469	<i>n/a</i>	1,529	<i>n/a</i>	-4	+60	+4.07%
Speech & Language Therapists	776	<i>n/a</i>	847	<i>n/a</i>	-0	+70	+9.02%
Combined therapists	3,348	+380	3,576	-152.00	+1	+228	+6.80%
Psychologists & Counsellors	962	+230	1,000	-192.00	+16	+38	+3.92%
Social Workers	2,139	+300	2,374	-64.95	-12	+235	+10.99%

WTEs by Staff Category

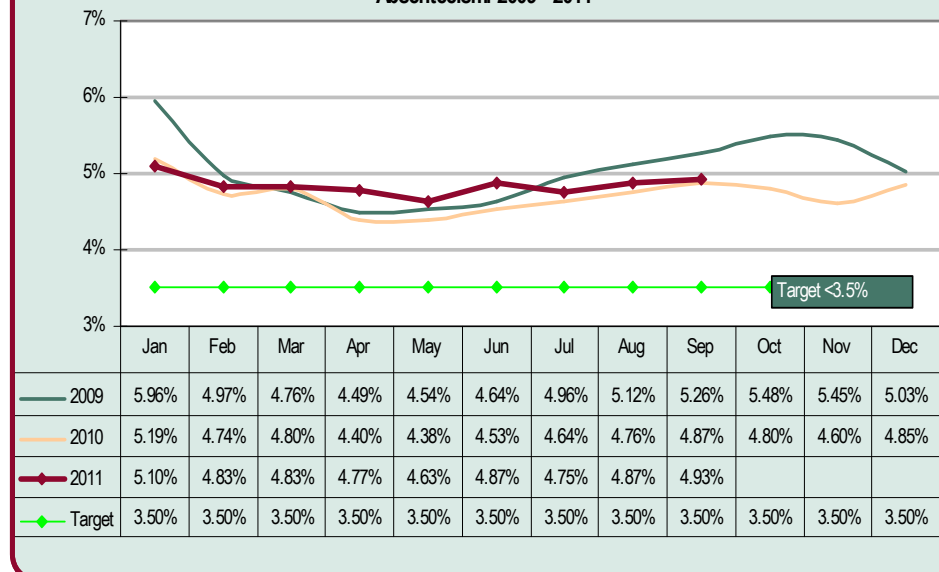
Table 3 Staff Category	WTE Dec 2009	WTE Sep 2011	WTE Oct 2011	WTE change since Sep 2011	% change since Sep 2011	WTE change since Dec 2009	% change since Dec 2009
Medical/ Dental	8,083	8,142	8,281	+139	+1.71%	+198	+2.45%
Nursing	37,466	35,993	35,769	-224	-0.62%	-1,697	-4.53%
Health & Social Care Professionals	15,973	16,165	16,178	+13	+0.08%	+206	+1.29%
Management/ Admin	17,611	16,058	16,062	+4	+0.02%	-1,548	-8.79%
General Support Staff	11,906	10,652	10,546	-106	-1.00%	-1,361	-11.43%
Other Patient & Client Care	18,714	17,276	17,228	-48	-0.28%	-1,486	-7.94%
Total Health Service Staffing	109,753	104,287	104,065	-222	-0.21%	-5,688	-5.18%

*Absenteeism

Latest available National Absenteeism data shows that absenteeism for September 2011 was 4.93% - up from 4.87% in August. Each staff category with the exception of Other Patient & Client Care exhibited an increase month-on-month.

- Previously published September figures show 5.47%, 5.26%, 4.87% & 4.93% for 2008, 2009, 2010 and 2011 respectively. With the exception of 2008, September absenteeism has increased over August in each year.
- YTD September stands at 4.85% which is up on the 2010 full year (4.70%) but remain below 2008 (5.76%) and 2009 (5.05%) figures.
- In September 2011, 88.1% of absenteeism was certified (this is the first Month that collated data is available nationally on certified /uncertified absenteeism).
- The following Hospitals, LHO, agencies show the highest rates of absenteeism: Orthopaedic Hospital, Kilcreene, Regional Orthopaedic, Croom, Ennis General Hospital, Dublin West [LHO], Tipperary, North/ Limerick, East [LHO], Limerick [LHO], Midland Regional Hospital, Tullamore, Midland Regional Hospital, Mullingar, Children's Sunshine Home, Midland Regional Hospital, Portlaoise, Kildare/ West Wicklow [LHO], Tipperary, South [LHO], Cork Dental Hospital, Limerick Regional Hospital, Waterford [LHO], Longford/ Westmeath [LHO], Sligo Regional Hospital, Nenagh General Hospital, Limerick Maternity Hospital, Wicklow [LHO], Tipperary, South General Hospital, St. John's Hospital, Limerick, Clare [LHO], Mayo [LHO], St. John of God, Kerry, Ambulance Services (all above 6%).

Absenteeism: 2009 - 2011



*Absenteeism is reported monthly in arrears.

Absenteeism by Staff Category	DML	DNE	South	West	National	Ambulance	Total
Medical /Dental	1.89%	0.89%	0.86%	1.39%	0.00%		1.31%
Nursing	5.18%	4.34%	5.83%	6.50%	2.62%	0.00%	5.47%
Health & Social Care Professionals	3.61%	3.42%	4.99%	4.50%	1.86%		4.01%
Management Admin	4.40%	4.60%	5.01%	5.54%	8.63%	3.52%	5.13%
General Support Staff	6.22%	5.46%	6.51%	5.76%	4.28%	1.13%	6.00%
Other Patient & Client Care	5.77%	5.32%	5.26%	6.34%	1.41%	6.27%	5.78%
Total	4.75%	4.22%	5.12%	5.61%	3.76%	6.11%	4.93%

Absenteeism by HSE Area	Health Service Executive	Voluntary Hospitals	Voluntary Agencies P&C Services	Total
Dublin Mid-Leinster	6.08%	3.87%	3.84%	4.75%
Dublin North-East	4.51%	3.85%	3.87%	4.22%
South	5.37%	3.75%	4.29%	5.12%
West	5.75%	6.37%	4.41%	5.61%
National	3.99%	3.16%		3.76%
Ambulance	6.11%			6.11%
Total	5.47%	3.87%	4.04%	4.93%

Detailed Service Delivery Report

Overall Activity

- Emergency admissions were up by an additional 3,764 (+ 1.2%) in the first 10 months of 2011 over this time last year and remain +2.8% over expected levels of activity (+8,496). Hospitals continue to report that patients presenting to ED are more acutely ill, with an increasing elderly cohort who require admission.
- Figures for October show 28,971 (inpatient and day case combined) are waiting for treatment for a period of more than three months. This compares to 30,756 recorded for September, a reduction of 1,785. This reverses the trend shown the previous month which showed an increase of 2,000.
- The HSE has put in place a specific waiting list initiative to target increased demand for endoscopy services (in particular colonoscopies). The HSE is targeting an additional 7,000 endoscopes by year end (approximately 3,500 colonoscopies). The NTPF is partnering with the HSE to monitor referrals and procedures undertaken at hospital level. An additional 4,428 scopes have been undertaken through this initiative to date.
- The number of inpatient and day case treatments are up by an additional 60,726 (+5.5%) over this time last year and remain +4.5% (+50,630 treatments) over target. Day cases now outnumber inpatient treatments by 184,857, a difference of 60,568 compared to 2010.
- GP Out of Hours contacts are also up by an additional 55,684 (+7.8%). The recommendations of the GP Out of Hours Review, 2010 continue to be implemented across the four Regions with a view to driving down costs and achieving greater efficiencies.
- The number of individuals covered by a medical card for the end of October is 1,694,658 and an additional 78,849 individuals issued with a medical card since December 2010.

Emergency Activity

- ED attendances for the first ten months of the year was 921,186 which is 13,723 (-1.5%) less than same period last year. The monthly average number of attendances is 92,186 compared to 93,559 in 2010. Notwithstanding this and as referred to previously, those attending ED are reportedly more acutely ill (as evidenced by higher triage scores) and required admission at a rate higher than 2010 (up 1.2%).
- During October, the Full Capacity Protocol was used on 5 occasions in 3 Hospitals (Drogheda on three occasions, Galway and Connolly). It has been used a further 7 times during November to date (four times in Galway, twice in Drogheda and once in Connolly).
- Regional capacity and demand plans are being finalised to cover the end of year period.

Urgent colonoscopies

Census week ending 30th October reports 1 patient waiting > 28 days, from referral, for an urgent (priority 1) colonoscopy. The breach was in the Midland Regional Hospital, Portlaoise. The patient has since been seen on 14th November 2011.

Nursing Home Support Scheme

In October, there was an additional 424 new entrants to private nursing homes under the NHSS. The total number approved for funding under the Scheme at October 31st is 22,341. Since the beginning of October, approvals are being issued on a weekly basis with a view to ensuring the shortest wait time possible. During the month of October 480 new applicants are being funded while an additional 524 are processed to final stage and are now awaiting release of funding. The scheme is taking on new clients within the limits of the resources available, in accordance with the legislation.

Mental Health

During November an additional Consultant commenced duty for the Child and Adolescent Inpatient Unit at Merlin Park Galway.

Delayed Discharges

There were 810 delayed discharges reported in the acute hospital system on Nov 28th. This is 235 more than the average for November in 2010. Of the 810 delayed discharges, 412 (51%) are within the Dublin Academic Teaching Hospitals.

Table 1 Primary and Community Services by Region	Human Resources				Budget		
	Ceiling Oct 2011	WTE Oct 2011	WTE Change from Dec 2010 to Oct 2011	% WTE Variance Oct 2011	Actual €000	Budget €000	% Var
DML	14,690	14,374	-528	-2.15%	1,183,280	1,164,829	1.6%
DNE	10,459	10,327	-903	-1.26%	891,804	886,359	0.6%
South	11,734	11,504	-681	-1.95%	941,905	942,932	-0.1%
West	13,432	13,172	-668	-1.93%	979,913	983,980	-0.4%
National	301	282	+91	-6.44%			
Total	50,616	49,659	-2,689	-1.89%	3,996,902	3,978,100	0.5%

Table 2 Hospital Services by Region	Human Resources				Budget		
	Ceiling Oct 2011	WTE Oct 2011	WTE Change from Dec 2010 to Oct 2011	% WTE Variance Oct 2011	Actual €000	Budget €000	% Var
DML	16,345	16,409	-410	+0.39%	1,126,105	1,088,095	3.5%
DNE	10,430	10,537	-136	+1.03%	751,847	717,639	4.8%
South	10,492	10,629	-244	+1.30%	662,544	642,285	3.2%
West	10,751	10,794	-159	+0.40%	719,371	674,180	6.7%
National	20			+0.00%			
Total	48,039	48,369	-949	+0.69%	3,259,867	3,122,200	4.4%

Primary Care

Primary Care analysis & action points

No. of PCTs holding Clinical Team Meetings (M) (Chart 1)

At the end of October 2011, 401 primary care teams were holding clinical team meeting which is 17% below the year to date target of 484.

This is an increase of 8 teams from the September position (393 teams) and also represents a 26.9% increase from same period last year (316 teams)

Child Health Developmental Screening at 10 months (M) (Chart 2)

Uptake of 7-9 Month Developmental Screening by 10 Months

The NSP 2011 lists a target of 90% of children reaching 10 months of age should have received their developmental health screening on time within 7 to 9 months of age.

Nationally 86.7% of the cohort due to for developmental screening during the month received their screening on time with HSE DNE achieving 91.6% of the cohort screened on time. HSE South reported 90.2%, HSE DML reported 88.8% and HSE West reported 74.3% received their screening on time.

YTD nationally 81.5% of the cohort due for developmental screening received their screening on time.

These figures although returned for reporting in October are reported monthly in arrears and apply to September 2011 figures.

GP Out of Hours (M)

During the month of October 2011, 67,229 contacts were made to the GP OOH service.

Year to date figure is 774,184 which is 3% below year to date target of 797,891 This is also 7.8% above same period last year (718,500).

Breakdown of the nature of contact with the OOH Service:

- 58.9% - GP Treatment Centre
- 28.8% - Triage
- 10% - Home Visit
- 2.3% - Other

Chart 1

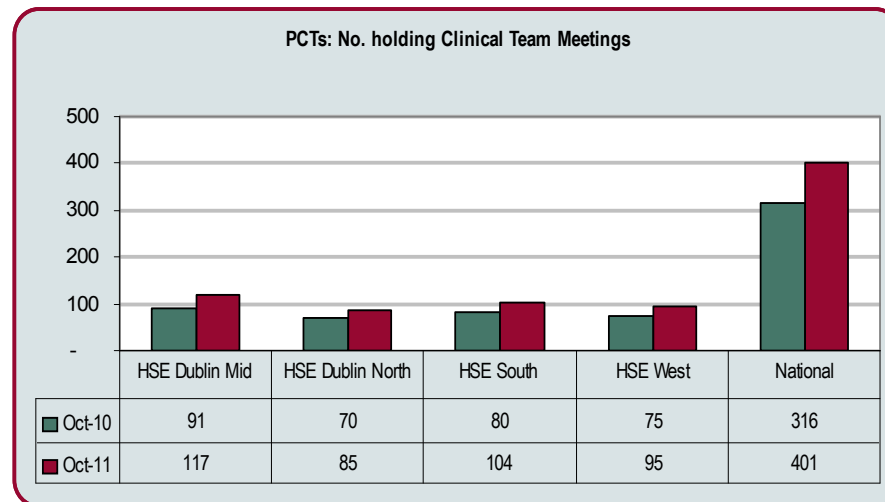
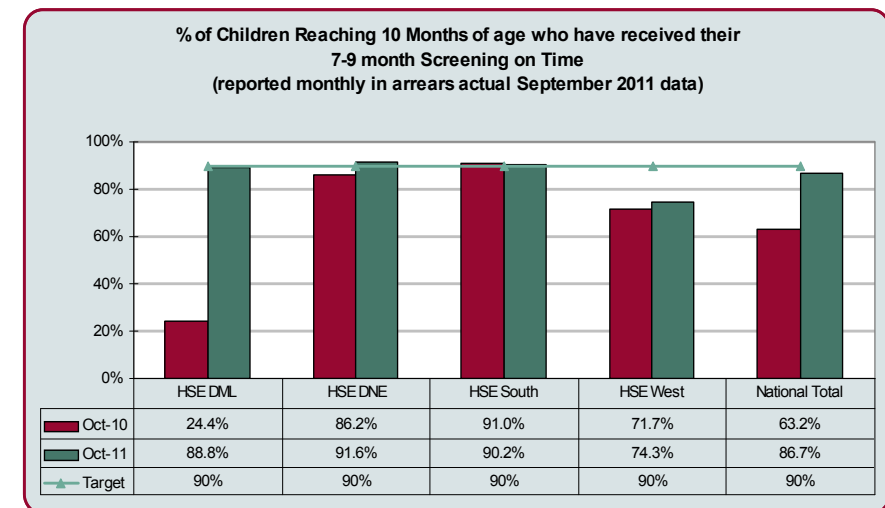


Chart 2



Acute Services

Acute Services analysis and action points

Inpatient Discharges (M) (Chart 1)

The number of Inpatient Discharges at the end of October 2011 is marginally higher compared to the same period in 2010 and is 1.8% above target for 2011.

Day Case Discharges (M) (Chart 1)

The number of Day Cases at the end of October 2011 is 9.9% higher compared to the same period in 2010 and is 6.6% above target for 2011. Day Case outturn for 2011 has been affected by a reclassification of day case activity in St. Luke's Hospital, Dublin in line with HIPE/Casemix reporting.

ALOS (M)

Average length of stay in October 2011 was 6.1. A further reduction of 8.9% from the October figure is required in order to achieve the 5.6 target nationally.

% day case surgeries as a % of day case + inpatient for specified basket of procedures (General Surgery, ENT, Ophthalmology) (M)

This figure is calculated using a 12 month rolling period of HIPE data. The most recent data available up to end of August 2011 shows that 72% of the basket of procedures are carried out on a day case basis. This compares to 69% for the previous year and shows an improvement in all 4 regions.

Chart 1

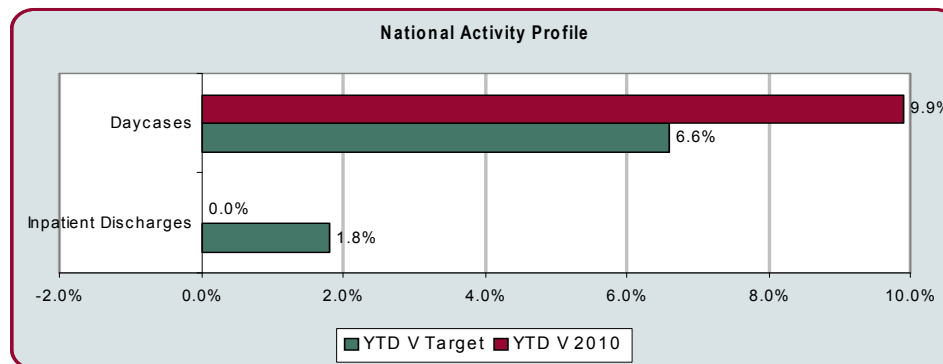


Chart 2

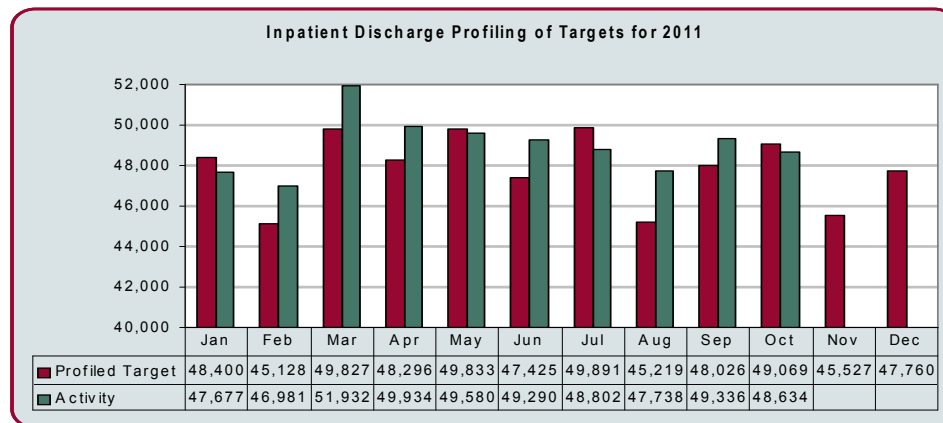
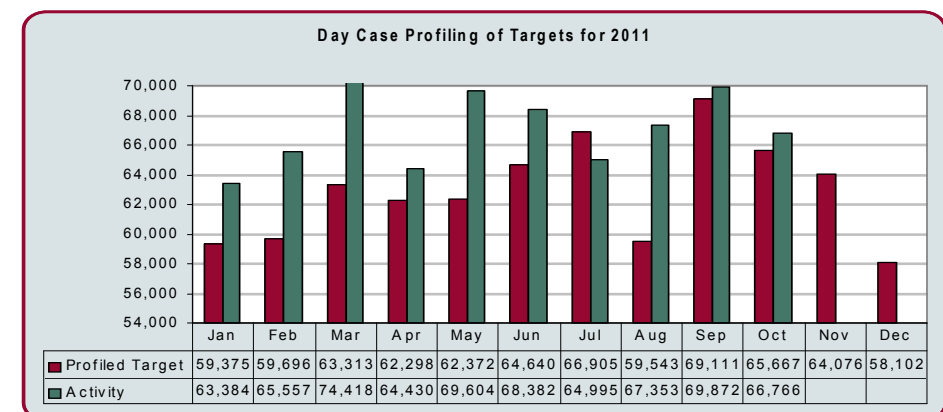


Chart 3



Acute Services analysis and action points

Elective Procedures adults <6 months, Inpatients (M) (Chart 4)

The percentage of adults waiting less than 6 months on the Inpatient waiting list at the end of October 2011 was 69.8% (this equates to 9,811 of a total list of 14,061 patients waiting less than 6 months for their procedure).

Elective Procedures adults <6 months, Day Case (M) (Chart 4)

The percentage of adults waiting less than 6 months on the Day Case waiting list at the end of October 2011 was 80.4% (this equates to 32,654 of a total list of 40,631 patients waiting less than 6 months for their procedure).

Elective Procedures children <3 months, Inpatients (M) (Chart 5)

The percentage of children waiting less than 3 months on the Inpatient waiting list at the end of October 2011 was 40.4% (this equates to 876 of a total list of 2,170 children waiting).

Elective Procedures children <3 months, Day Case (M) (Chart 5)

The percentage of children waiting less than 3 months on the Day Case waiting list at the end of October 2011 was 47.3% (this equates to 1,179 of a total list of 2,491 children waiting).

% elective inpatients who had principle procedure conducted on day of admission (M)

The percentage of patients who had principle procedure conducted on day of admission is calculated using a 12 month rolling period of HIPE data. The most recent data available up to end of August 2011 shows that 49% of patients had their principal procedure on the same day of admission. This compares to 48% for the previous year – no change from previous month.

Delayed Discharges (M) (Chart 6)

The final figure in October 2011 for the number of delayed discharges reported nationally was 837. This is an increase on the position at the end of September (821).

The average number of delayed discharges reported through the month of October 2011 was 816, this compares to an average of 570 for October 2010.

Chart 4

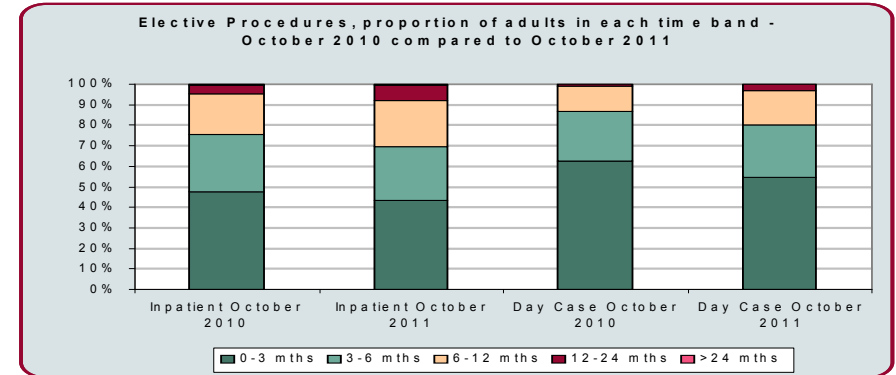


Chart 5

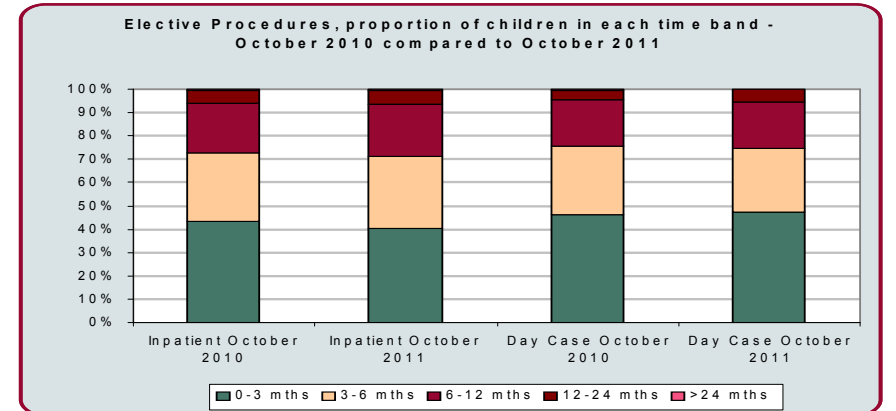
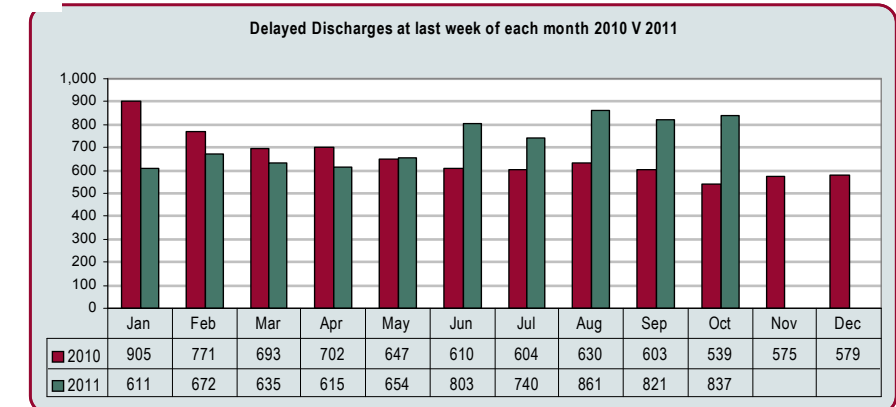


Chart 6



Acute Services analysis and action points

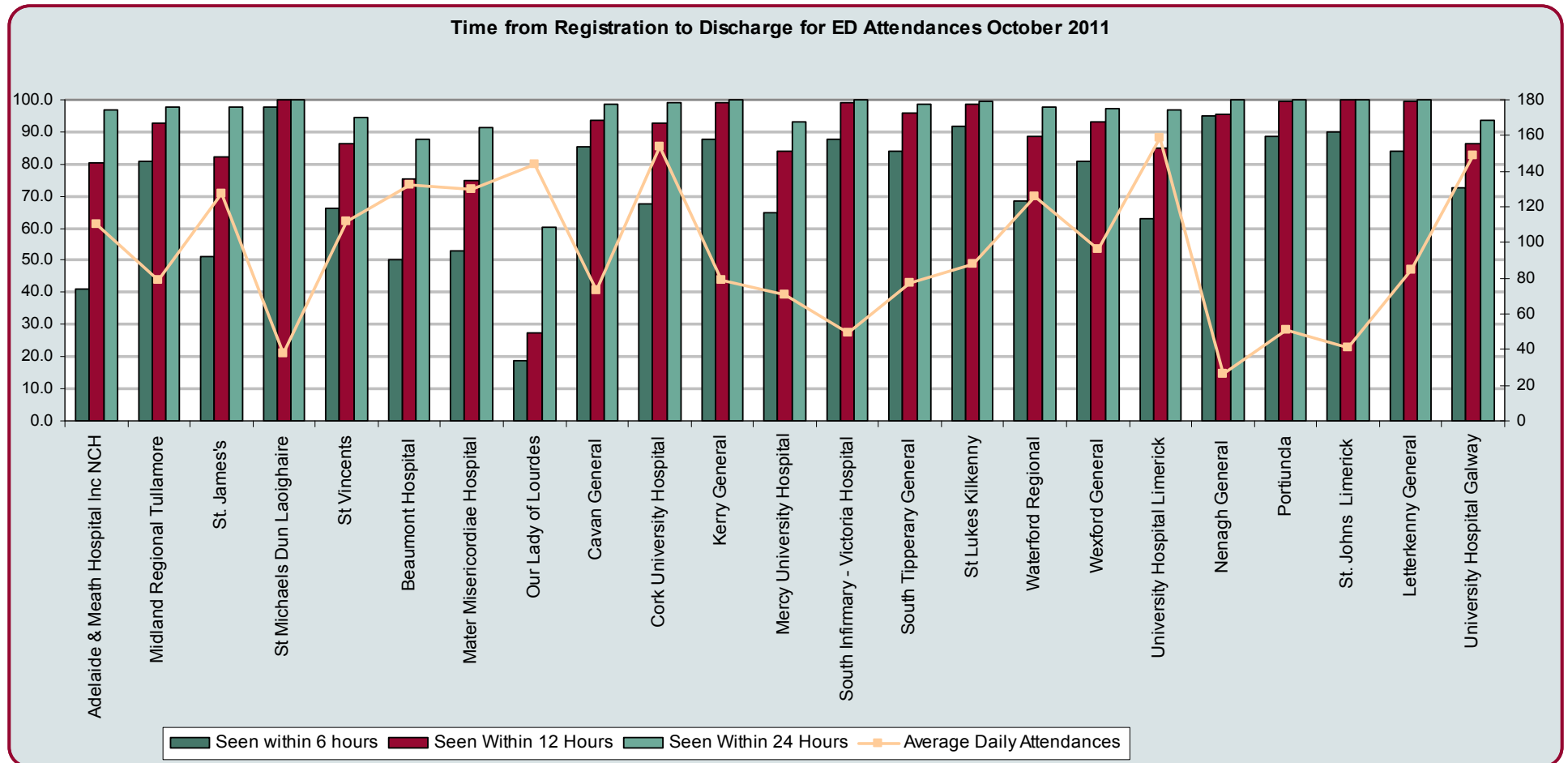
ED
Admitted or
discharged
<6hrs (M)

Data for October from the data available shows that patients waited on average 6.4 hours in ED from time of arrival to time leaving the department.

The average time for patients who required admission in October was 10.2 hours with 45.3% of patients admitted within 6 hours of their registration in ED.

Data for October also shows that combination of full PET and sampling PET data in the 23 Hospitals that data is available for, 67.8% of patients admitted to or discharged from Hospital spent less than 6 hours in ED from time of arrival to time they left the department.

By the end of October 2011, 17 Hospitals continue to routinely return all patient data with a small number continuing to report in sampling format.



National Ambulance Service

Pre-Hospital Emergency Care

Pre - Hospital Emergency Care

This month, 56.99% of ECHO calls were responded to within 8 minutes with over 66% having a patient carrying vehicle at the scene within 19 minutes. 28.53% of Delta calls were responded to within 8 minutes and almost 78% had a patient carrying vehicle within 19 minutes. The NAS has developed a Performance Improvement Action Plan which has enabled the achievement of an improved trajectory in response time performance in the first six months of 2011. The Plan will continue to be implemented over the coming years with a view to realizing the targets set out in the national standards.

Pre hospital emergency care is the emergency care provided to a patient before transfer to a hospital or appropriate healthcare facility. Activity data for this service is reported one month in arrears. Table 1 outlines the response to Echo and Delta calls in the reported month. Echo calls relate to calls where patients are in cardiac or respiratory arrest, this month Echo calls were 1.16% of overall 999 calls. Delta calls refer to patients with life-threatening conditions other than cardiac or respiratory arrest, this month 39.11% of all 999 calls were in this category. Since the beginning of the year 54,669 Category 1 calls (Echo and Delta) have been received.

A first responder is a person, trained as a minimum in basic life support and the use of a defibrillator, who attends a potentially life-threatening emergency. This response may be by the National Ambulance Service or by a community /co-responder based First Responder Scheme which is integrated with the National Ambulance Service.

In line with the national KPIs published by HIQA, the HSE National Ambulance Service is working towards achieving a first response to 75% of emergency ECHO and DELTA calls within 8 minutes or less. To date HIQA have not published a national KPI for the arrival of transporting vehicles at scene. However, the National Ambulance Service has commenced internal reporting on its performance within 19 minutes in line with international norms.

Table 1 National Ambulance Service Performance Activity*	Target 2011	% responded to within timeframe YTD	% Var YTD v. Target YTD	Total Number of Calls YTD	No. responded within timeframe YTD	% responded to within timeframe this month	% Var v. Target y/ls month	Number of calls this month	Number responded to within timeframe
(i) % of Clinical Status 1 ECHO calls responded to by a first responder in 7 minutes and 59 seconds or less.	75%	52.94%	-29.41%	1,917	1,015	56.99%	-24.01%	186	106
(ii) % of Clinical Status 1 Delta calls responded to by a first responder in 7 minutes and 59 seconds or less	75%	28.57%	-61.90%	52,752	15,073	28.53%	-61.96%	6,248	1,783
Clinical Status 1 – ECHO calls should have a patient-carrying vehicle at the scene of the incident within 18 minutes and 59 seconds	n/a	68.85%	n/a	1,917	1,320	66.66%	n/a	186	124
Clinical Status 1 – DELTA calls should have a patient-carrying vehicle at the scene of the incident within 18 minutes and 59 seconds	n/a	68.29%	n/a	52,752	36,024	77.93%	n/a	6,248	4,869

*Information in the table above is reported one month in arrears and refers to July 2011

Table 2 National Ambulance Service Budget	Actual YTD €000	Budget YTD €000	Variance YTD €000
North Leinster	45,004	45,431	-427
West	35,830	34,045	1,785
South	30,969	27,150	3,819
Ambulance College	3,508	3,573	-65
Office of the National Director	2,197	6,150	-3,953
Total	117,508	116,349	1,159

Table 3 National Ambulance Service HR	Ceiling Oct 2011	WTE Oct 2011	WTE Change from Dec 2010 to Oct 2011	% WTE Variance Oct 2011
North Leinster	614	625	-22	+1.84%
South	405	409	+10	+0.87%
West	453	463	+14	+2.06%
Total	1,473	1,497	+3	+1.64%

National Cancer Control Programme (NCCP)

National Cancer Control Programme (NCCP)

Breast Cancer: % of cases compliant HIQA standard of 2 weeks (urgent referral) (M)

- Total number of urgent referrals; and of those the % offered an appointment within 2 weeks – target 95%, Oct reported position is 99.4%.
- University Hospital Limerick – Ongoing issue with Radiology Capacity.
- Galway University Hospital – Non-achievement of Non-urgent referrals target as 2 NCCP funded radiographer positions remain unfilled.

% Urgent Referrals (offered an appointment within 2 weeks)
% Non Urgent (offered an appointment within 12 weeks)

	Target	Aug 2011 (Urgent)	Aug (Non-Urgent)	Sep 2011 (Urgent)	Sep (Non-Urgent)	Oct 2011 (Urgent)	Oct (Non-Urgent)
Beaumont	95%	98.7%	100.0%	100.0%	97.1%	100.0%	99.1%
Mater	95%	100.0%	100.0%	100.0%	99.6%	99.4%	99.6%
St. Vincent's	95%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
St. James's	95%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Waterford	95%	100.0%	98.7%	100.0%	99.4%	100.0%	100.0%
CUH	95%	100.0%	100.0%	100.0%	100.0%	100.0%	99.7%
UHL	95%	100.0%	63.3%	100.0%	81.7%	95.8%	69.0%
GUH & L'kenney	95%	100.0%	98.1%	100.0%	71.5%	100.0%	86.6%
GUH	95%	100.0%	97.5%	100.0%	63.9%	100.0%	84.1%

Lung Cancer (Q)

% of patients attending the rapid access clinic who attended or were offered an appointment within 10 working days of receipt of referral in the cancer centre

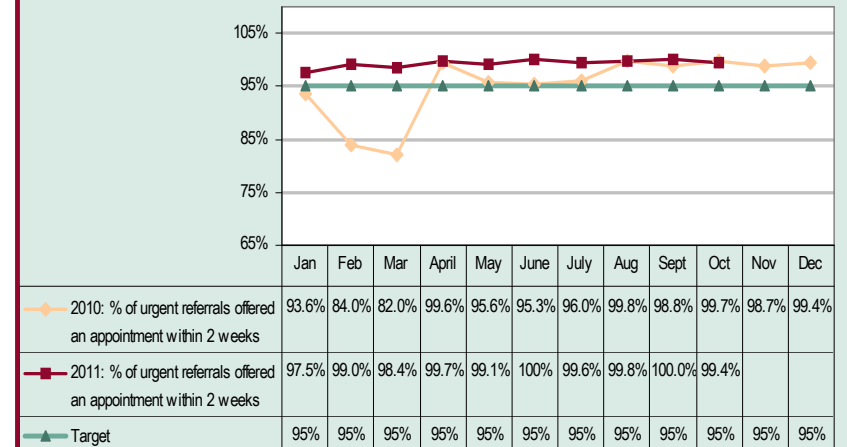
Total number of attendances at RAC; and of those the % offered an appointment within 10 working days – target 95%, Q3 reported position is 89.3%

*Limerick service commenced in Jan & are still in establishment mode but showing improvement

**GUH service commenced in March 2011 therefore Q1 data unavailable

Chart 1

Breast Cancer: % of Urgent Referrals offered appointment within 2 weeks (2011 v 2010)



% of patients attending RAC who attended or received an appointment to attend within 10 working days

	Target	Q1 2011	Q2 2011	Q3 2011
Beaumont	95%	99.1%	96.7%	98.0%
Mater	95%	100.0%	100.0%	97.8%
St. Vincent's	95%	100.0%	100.0%	100.0%
St. James's	95%	100.0%	100.0%	100.0%
Waterford	95%	100.0%	100.0%	100.0%
CUH	95%	69.7%	68.6%	64.1%
Limerick*	95%	73.2%	86.7%	97.1%
GUH**	95%	Not Available	73.4%	67.5%

Children and Families

Children and Families

% of children in care who have a written care plan (defined by Child Care Regs 1995) (M) (Chart 1)

Children in Care with a Written Care Plan

The NSP 2011 target for this metric is 100% of children in care should have a written care plan.

The number of children in care nationally at the end of October is 5,178 and of those children 4,610 (89%) had a written care plan in place. It should be noted that these figures are based upon returns from 27 out of 32 LHO's and that these figures are subject to change when the data is available. The last month where full data was available for children in care (August) shows that 6,215 children were in care for all care types.

Of all the care types children in residential care settings exhibited the highest percentage with a written care plan in place at 97%.

The breakdown by care type nationally of children in care who had a written care plan in place is as follows:

- Residential Care: 93.9%
- Foster Care: 89.3%
- Foster Care with Relatives: 87.8%
- Other Care Types: 81.2%

% of children in care who have an allocated Social Worker at the end of the reporting period (M) (Chart 2)

The NSP 2011 target for this metric is 100% of children in care should have an allocated social worker.

Nationally at the end of October 2011 90.9% (4,707) of all children in care (all care types) had an allocated social worker. It should be noted that these figures are based upon returns from 27 out of 32 LHO's and that these figures are subject to change when the data is available.

The breakdown by care type nationally of children in care who had an allocated social worker is as follows:

- Residential Care: 98.5%
- Foster Care: 91.1%
- Foster Care with Relatives: 88.3%
- Other Care Types: 93.2%

Chart 1

No. & % of Children in Care with a Written Care Plan

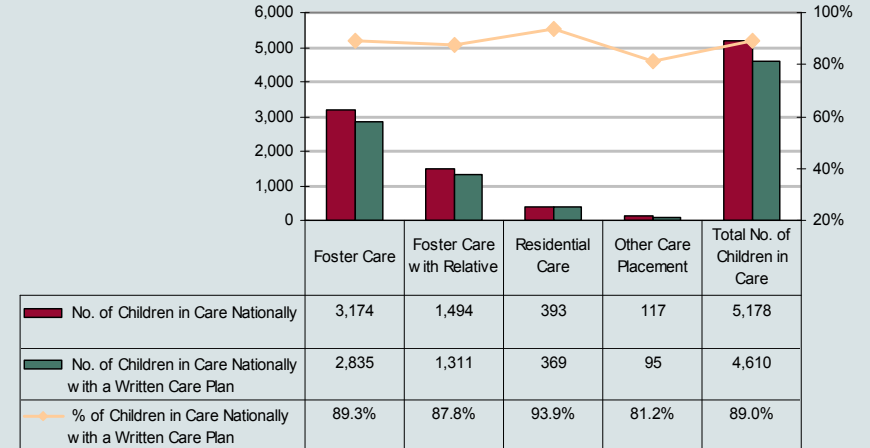
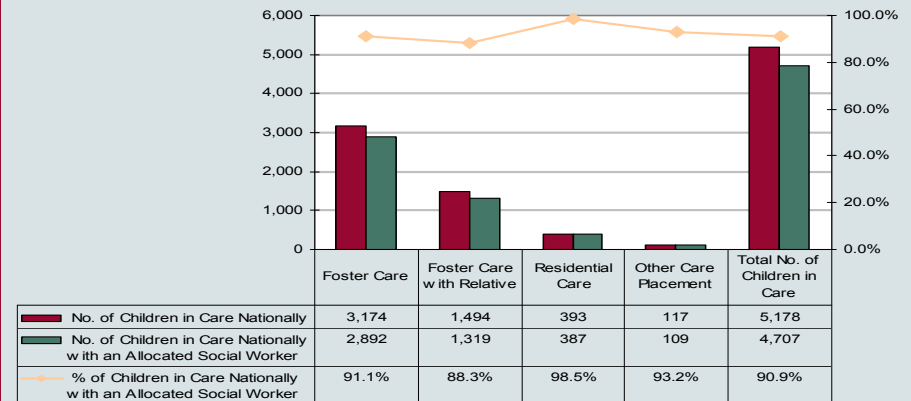


Chart 2

No. & % of Children in Care with an Allocated Social Worker



Mental Health

Mental Health

No. of new child / adolescent offered first appointment and seen (M) (Chart 1)

- Total number of Child & Adolescents offered first appointment and seen in October was 736 with 6,724 seen to date (7.2% above target & 7.5% above the same period last year)
- The regional view is as follows:
 - DML – 246
 - DNE – 132
 - South – 150
 - West – 208
 - Nationally - 736
- It would be expected that there will be peaks and troughs in activity relating to this metric. However the expectation would be that over the twelve months the target would be met.

% of new mental health (including re-referred) child / adolescent cases offered first appointment (seen within 3 months) (M) (Chart 2)

- The key PI set by the Specialist CAMHS Advisory Group is that 70% of New (including re-referred) Cases seen, are to be seen within three months of referral.
- Currently 63% (year to date 61%) of new cases are being seen within 3 months with 71% of new (including re-referred) cases offered an appointment within 3 months and overall DNA rates running at 12% nationally.
- The regional view for those seen within 3 months is as follows:

Region	Cases Offered Appointment within 3 Months	Cases Offered Appointment and Seen within 3 Months	YTD
DML	75%	67%	58%
DNE	63%	54%	52%
South	73%	67%	63%
West	72%	62%	70%
Nationally	71%	63%	61%

Chart 1

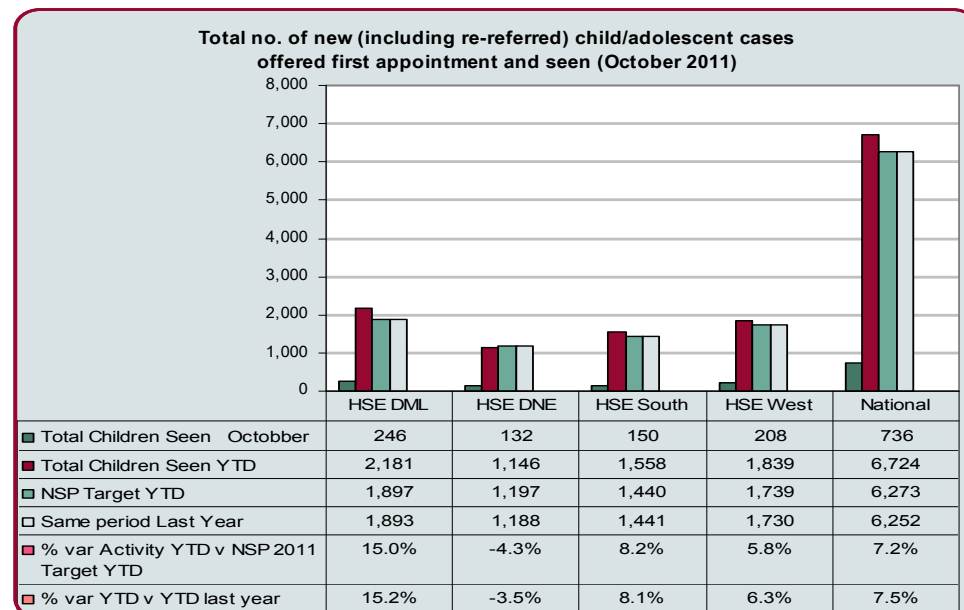
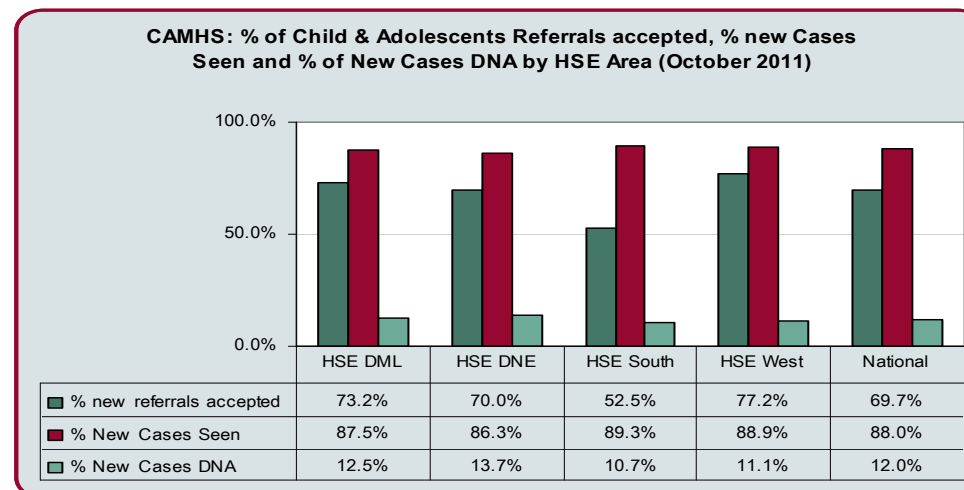


Chart 2



Older Persons

Older Persons

Total no. of Home Help Hours provided for all care groups (M)

There is a -4.8% variance on activity against target relating to Home Help Hours in the period January to October, a very marginal improvement from September. Wide variation noted in the number of Home Help Clients which reflects implementation of agreed definitions within HCP Guidelines. HH hours activity is a better indicator of performance and is close to target.

- HSE Dublin Mid Leinster has improved since April from -8.1% to -6.9% in October.
- HSE DNE has improved since April from -18.2% to -3.1% in October.
- HSE South has improved since April from -3.8% to -2.5% in October.
- HSE West has improved since April from -12.0% to -7.1% in October.

Total no. of people in receipt of Home Care Packages per month (M)

Again for HCP metrics, implementation of a standard definition of HCPs as per Guidelines is impacting nationally. Activity in relation to HCP Client numbers is 5.2% above target. This measure of performance needs to be considered along side financial data for the scheme to ensure that the planned level of expenditure is providing the appropriate level of home care packages.

Home Help Service Provision 2011								
Area	Home Help Hours		Home Help Clients		No in Receipt of Home Care Package		New HCP Clients (YTD)	
National	9,332,413	-4.8%	51,068	-5.4%	10,763	5.2%	4,713	28.5%
DML	1,672,525	-6.9%	12,228	1.9%	2,564	8.9%	1,205	44.6%
DNE	1,929,270	-3.1%	9,388	-27.2%	3,541	4.6%	1,457	52.0%
South	3,021,396	-2.5%	16,014	8.9%	2,381	1.5%	1,044	25.3%
West	2,709,223	-7.1%	13,438	-6.7%	2,277	6.2%	1,007	-3.3%

Long Term Residential Care (incl. Nursing Home Support Scheme) (M)

At the end of October 2011, 22,341 long term public and private residential places are supported under scheme. This includes 204 “saver” places in Section 39 funded voluntary organizations, where the patient was in care at the commencement of the scheme.

In the first ten months of 2011, 7,704 applications have been received and 5,977 new clients have been supported under the NHSS in private nursing homes. This was a net increase of 2,210 during the period.

In October there was an additional 424 new entrants to private nursing homes under the NHSS. The scheme is taking on new clients within the limits of the resources available, in accordance with the legislation.

Number of patients in Long Term Residential Care funded beds					
HSE Region	NHSS Public Beds*	No. of patients in NHSS Private	No. of patients on Subvention	No. of patients in Contract Beds	Total
End Q1	6,100*	11,458	1,940	2,211	21,709
End Q2	6,100*	11,974	1,679	2,049	21,802
DML	1,518	3,323	296	1,026	6,163
DNE	996	2,490	276	470	4,232
South	1,580	3,891	365	256	6,092
West	1,396	3,597	501	156	5,650
Total – October 2011	5,490	13,301	1,438	1,908	22,137

Information for the four Regions is the latest available and refers to October 2011. *Information regarding NHSS Public beds relates to an estimate of 95% bed occupancy.

Nursing Home Support Scheme (NHSS) - Number of new applicants and patient movement				
Month 2011	No. of new applicants	No. of new patients*	No. of patients Leaving NHSS	Net Increase
January	861	791	493	+298
February	759	822	462	+360
March	1,374	899	328	+571
April	713	669	475	+194
May	858	573	364	+209
June	754	464	351	+113
July	513	355	288	+67
August	868	329	364	-35
September	534	651	280	+371
October	470	424	362	+62
Total	7,704	5,977	3,767	2,210
Monthly average YTD	770	598	377	+221

Information on patient movement refers to approved private nursing homes only. *Refers to patients who have been accepted and placed in long term residential care in the reported month

Palliative Care

Palliative Care

Palliative Care inpatient bed provided within 7 days (M)

The number of patients admitted to a specialist Palliative care inpatient bed in October 2011 was 246, of these 228 were admitted within 7 days of active referral. This equates to 93% of all the admitted patients who were seen within one month.

Area	Percentage & No. within 7 days	Percentage & No. over 7 days
DML	88 (57)	12% (8)
DNE	93% (28)	7% (2)
South	100% (50)	0% (0)
West	95% (88)	5% (5)
National	94% (223)	6% (15)

Social Inclusion

Social Inclusion

Total number in methadone treatment (M)

The total number of clients in methadone treatment for the month of September (reported monthly in arrears) was 9,239, of these 553 were in a prison setting. 8,686 were treated in HSE areas (see breakdown below). This compares to 8,696 for the same period last year.

Clients treated in HSE Area outside prisons	
DML	4,980
DNE	3,030
South	383
West	293
Prisons	553
National	9,239

Acute Services: summary of key performance activity

Acute Services Activity	Outturn 2010	Target 2011	Performance this Month			Performance YTD			Activity YTD v 2010	
			Target this month	Actual this month	% variance v target this month	Target YTD	Actual YTD	% Variance Actual v Target	Same period last year	% Variance YTD V YTD 2010
Public Patients as a % of all elective discharges										
DML	75.9%	80.0%	80.0%	78.8%	-1.5%	80.0%	78.1%	-2.4%	75.9%	2.9%
DNE	75.7%	80.0%	80.0%	76.2%	-4.8%	80.0%	76.7%	-4.1%	75.5%	1.6%
South	71.0%	80.0%	80.0%	71.1%	-11.1%	80.0%	71.7%	-10.4%	71.1%	0.8%
West	71.1%	80.0%	80.0%	71.4%	-10.8%	80.0%	71.1%	-11.1%	71.1%	0.0%
National	73.4%	80.0%	80.0%	74.6%	-6.8%	80.0%	74.6%	-6.8%	73.4%	1.6%
No. of Inpatient Discharged (Inpatient)										
DML	181,047	176,400	15,069	15,141	0.5%	147,751	151,476	2.5%	149,655	1.2%
DNE	110,263	107,700	9,200	9,035	-1.8%	90,209	89,678	-0.6%	92,088	-2.6%
South	147,500	144,000	12,301	12,530	1.9%	120,613	124,743	3.4%	122,768	1.6%
West	150,050	146,300	12,498	11,928	-4.6%	122,540	124,007	1.2%	125,314	-1.0%
National	588,860	574,400	49,068	48,634	-0.9%	481,113	489,904	1.8%	489,825	0.0%
No. of Inpatient Discharged (Day Case)										
DML	265,395	276,700	24,063	26,608	10.6%	231,929	273,237	17.8%	224,662	21.6%
DNE	137,831	143,100	12,445	12,248	-1.6%	119,946	119,191	-0.6%	116,162	2.6%
South	157,119	163,000	14,175	13,114	-7.5%	136,626	134,880	-1.3%	131,679	2.4%
West	167,924	172,300	14,984	14,796	-1.3%	144,421	147,453	2.1%	141,611	4.1%
National	728,269	755,100	65,667	66,766	1.7%	632,922	674,761	6.6%	614,114	9.9%
Elective Waiting List (Inpatient) % Adults awaiting ≤ 6 months										
DML	81.2%	100.0%	100.0%	74.5%	-25.5%	100.0%	74.5%	-25.5%	76.9%	-3.1%
DNE	73.4%	100.0%	100.0%	73.9%	-26.1%	100.0%	73.9%	-26.1%	75.7%	-2.4%
South	75.3%	100.0%	100.0%	78.6%	-21.4%	100.0%	78.6%	-21.4%	78.7%	-0.1%
West	69.8%	100.0%	100.0%	58.2%	-41.8%	100.0%	58.2%	-41.8%	71.0%	-18.0%
National	74.5%	100.0%	100.0%	69.8%	-30.2%	100.0%	69.8%	-30.2%	75.3%	-7.3%
Elective Waiting List (Inpatient) % Children awaiting ≤ 3 months										
DML	47.1%	100.0%	100.0%	38.1%	-61.9%	100.0%	38.1%	-61.9%	43.8%	-13.0%
DNE	69.6%	100.0%	100.0%	64.7%	-35.3%	100.0%	64.7%	-35.3%	67.0%	-3.4%
South	48.1%	100.0%	100.0%	47.8%	-52.2%	100.0%	47.8%	-52.2%	45.0%	6.2%
West	33.2%	100.0%	100.0%	34.3%	-65.7%	100.0%	34.3%	-65.7%	34.8%	-1.4%
National	45.5%	100.0%	100.0%	40.4%	-59.6%	100.0%	40.4%	-59.6%	43.4%	-6.9%

Acute Services Activity	Outturn 2010	Target 2011	Performance this Month			Performance YTD			Activity YTD v 2010	
			Target this month	Actual this month	% variance v target this month	Target YTD	Actual YTD	% Variance Actual v Target	Same period last year	% Variance YTD V YTD 2010
Elective Waiting List (Daycase) % Adults awaiting ≤6 months										
DML	95.4%	100.0%	100.0%	91.5%	-8.5%	100.0%	91.5%	-8.5%	94.1%	-2.8%
DNE	88.8%	100.0%	100.0%	80.9%	-19.1%	100.0%	80.9%	-19.1%	87.7%	-7.8%
South	86.1%	100.0%	100.0%	76.9%	-23.1%	100.0%	76.9%	-23.1%	83.7%	-8.1%
West	79.8%	100.0%	100.0%	73.3%	-26.7%	100.0%	73.3%	-26.7%	81.3%	-9.8%
National	87.5%	100.0%	100.0%	80.4%	-19.6%	100.0%	80.4%	-19.6%	86.9%	-7.5%
Elective Waiting List (Day Case) % Children awaiting ≤3 months										
DML	48.8%	100.0%	100.0%	46.6%	-53.4%	100.0%	46.6%	-53.4%	42.2%	10.4%
DNE	62.7%	100.0%	100.0%	42.7%	-57.3%	100.0%	42.7%	-57.3%	76.1%	-43.9%
South	51.9%	100.0%	100.0%	47.3%	-52.7%	100.0%	47.3%	-52.7%	50.2%	-5.8%
West	58.0%	100.0%	100.0%	50.7%	-49.3%	100.0%	50.7%	-49.3%	51.9%	-2.3%
National	51.7%	100.0%	100.0%	47.3%	-52.7%	100.0%	47.3%	-52.7%	46.3%	2.2%
% of elective inpatient procedures conducted on day of admission										
DML	63.0%	75.0%	75.0%	54.0%	-28.0%	75.0%	54.0%	-28.0%	58%	-6.9%
DNE	43.0%	75.0%	75.0%	47.0%	-37.3%	75.0%	47.0%	-37.3%	41%	14.6%
South	45.0%	75.0%	75.0%	42.0%	-44.0%	75.0%	42.0%	-44.0%	44%	-4.5%
West	47.0%	75.0%	75.0%	52.0%	-30.7%	75.0%	52.0%	-30.7%	46%	13.0%
National	50.0%	75.0%	75.0%	49%	-34.7%	75.0%	49%	-34.7%	48%	2.1%
No. of Emergency Admissions										
DML	96,717	94,500	7,661	8,190	6.9%	78,812	82,433	4.6%	80,197	2.8%
DNE	72,863	71,800	5,821	5,572	-4.3%	59,880	57,281	-4.3%	60,838	-5.8%
South	89,840	87,900	7,126	7,839	10.0%	73,307	79,009	7.8%	74,358	6.3%
West	109,611	107,200	8,690	8,651	-0.4%	89,403	91,175	2.0%	90,741	0.5%
National	369,031	361,400	29,298	30,252	3.3%	301,402	309,898	2.8%	306,134	1.2%
% Day case Surgeries as a % day case + inpatients for specialised basket procedures										
DML	74.0%	75.0%	75.0%	75.0%	0.0%	75.0%	75.0%	0.0%	73.0%	2.7%
DNE	75.0%	75.0%	75.0%	76.0%	1.3%	75.0%	76.0%	1.3%	75.0%	1.3%
South	62.0%	75.0%	75.0%	65.0%	-13.3%	75.0%	65.0%	-13.3%	61.0%	6.6%
West	69.0%	75.0%	75.0%	73.0%	-2.7%	75.0%	73.0%	-2.7%	68.0%	7.4%
National	70.0%	75.0%	75.0%	72.0%	-4.0%	75.0%	72%	-4.0%	69%	4.3%
Outpatient Attendances										
DML	<p>Outpatient (OPD): The OPD Data Quality Programme in 2011 will deliver improved data in respect of both demand and access to OPD services to enable better management of OPD. The reforms imply considerable additional work for Outpatient departments and adaptations to hospital computer systems. Due to IT and other constraints, full reporting has not yet taken place. Nonetheless, only data which complies with the OPD reformed data set will be reported in future by the HSE.</p>									
DNE										
South										
West										
National										

Quality and Patient Safety

Blood Policy (M)	<p>Blood Policy</p> <p>The parameters for Platelet usage are within acceptance limits for the year to date with expected use for the month.</p> <p>The Red Cell parameters are within the expected limits with the exception of Group O Rhesus Negative usage which is above the targets for the month and the year to-date.</p> <p>There was a greatly increased use of O Rh Negative blood at one hospital due to one individual patient requiring a very large transfusion</p> <p>This equates to an overall issue of 13.2% O Rh Negative Red Cells for year to date and 14.44% for the current month.</p>
Complaint reviews	<p>% of reviews conducted and concluded within 20 working days of the request being received (Health Act 2004 (Complaints) Regulations)</p> <p>There were 16 reviews received in September, 5 reviews were closed within the 20 working day timeframe.</p> <p>It is an ongoing challenge to meet the 20 day working day timeframe for the completion of HSE Reviews due to the complex nature of cases and the availability of review officers. Work is ongoing to develop this function.</p>

Quality and Safety								
Performance Activity / KPI	Outturn 2010	Target (NSP 2011)	Target YTD / Profiled	Activity YTD	% var Activity YTD v Target YTD	Target this month	Actual this month	% var v target this month
Blood Policy								
No. of units of platelets ordered in the reporting period	22,750	22,000	18330	18500	-0.93%	1833	1842	-0.49
% of units of platelets outdated in the reporting period	New PI 2011	<10% 2,200	1833	805	+56.08%	183	58	+68.3
% usage of O Rhesus negative red blood cells per hospital	New PI 2011	<11%	11,094	13323	-20.09%	1082	1426	-31.7
% of red blood cell units rerouted to hub hospital	New PI 2011	<5%	5043	4455	+11.66	492	432	+12.1
% of red blood cell units returned out of total red blood cell units ordered	1.76% 2,194	<2%	2017	1102	+45.36	197	88	+55.3

Performance Activity	Outturn 2010	Target 2011	Total Current Month	Target current month	Activity Current month	% var v Target
Complaint Reviews**						
% of reviews conducted and concluded within 20 working days of the request being received	New	75%	12	9	5	-44.4%

*Refers to the numbers finalised in the reporting period but this cannot be directly related to the number of complaints received due to rolling timeframe.

**Complaint reviews are reported one month in arrears

Communications

FOI (M) **No. of FOI requests received**
 The number of FOI requests received YTD to end of October is 5,048. This represents 102% of the anticipated target for the YTD period.

Public Information (M) **HSE National Information Line**
 The HSE National Information Line provides members of the public with a single lo-call number **1850 24 1850** which allows them to access health and related social service information. The Information Line operates from 8am to 8pm Monday to Saturday. The number of calls received for October is 11,168 and activity YTD shows the number of calls at 107,808.

HSE Website usage

Visits to HSE.ie have increased by 50% compared to October 2010, with the average pages views steady at between 3-4 pages per visit.

Top Content Viewed

Home page, Medical & GP Visit Cards, Job search, Staff Home Page, Your guide to Medical Cards, Sligo Hospital, Find A Service, Jobs, LHO.

In Focus – October 2011

Get the Vaccine – Not the Flu

HSE Launches Annual Seasonal Flu Vaccination Campaign

Monday 17th October, the HSE urged people in at-risk groups to get vaccinated against influenza. Flu can be a very serious illness, especially for people who are older or who have a long-term illness.

The graph shows the visits to this information on the website. The figure is down in comparison to last year as last years information also highlighted information on Swineflu.

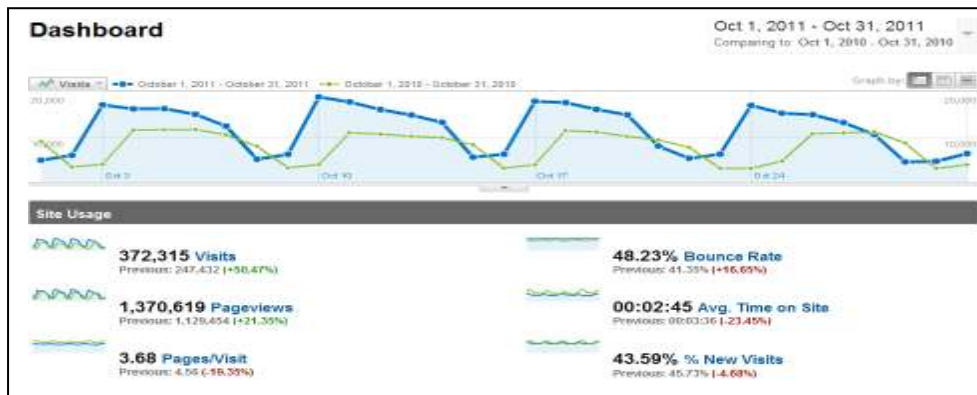
Publication of Reports by the National Review Panel for Serious Incidents & Child Deaths

Review Panel established under HIQA Guidance publishes 6 reports into child deaths and its first annual report

Tuesday 18th October, the HSE published a series of reports carried out by the National Review Panel for Serious Incidents and Child Deaths established under the HIQA Guidance. Also published today was the first Annual Report of the National Review Panel, providing an overview of the work carried out by the group since its establishment in 2010.

The graph shows a large number of visits to this information on the website. You will see there were 569 views on the first day published.

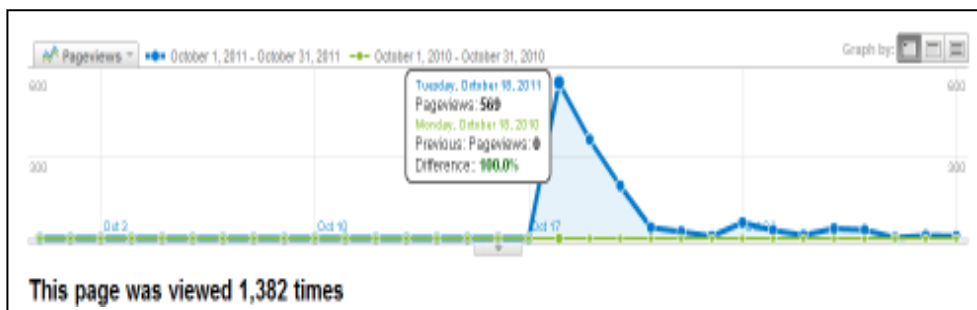
HSE Website Usage



In Focus Website Usage – Flu Vaccination



In Focus Website Usage - Serious Incidents & Child Deaths



Appendix 1: Gross Debtors Days for Private Charges Debt < 12 months old

Gross Debtor Days for Acute Private Charges Debt less than 12 months old

The report shows the Acute Hospital Gross Debtors Days for Private Charges Debt that is less than 1 year old at 31st December 2010, at the 30th June 2011 as well as the latest update for 30th September, 2011. The report also shows the Private Charges income for the 12 months ended 30th September 2011 and the corresponding Gross Debtors less than one year as at 30th September 2011. The Debtors numbers are shown before any Bad Debt Provisions. The formula for the Debtor Days metric is (Gross Debtors < 12 months divided by Patient Income for previous 12 months) multiplied by 365 days.

Progress in 2011

Of the 42 hospitals listed, 26 have shown improvement in the three months to the end of September 2011, with 5 of these improving by 20 days or more. However, 16 hospitals have increased their Debtor Days which highlights the need for the concentrated effort that is taking place to the end of December 2011.

To this end, there is a specific initiative relating to Debtors and Income taking place with significant involvement from Regional Directors, General Managers, Clinical Directors and Accounts Staff. The main focus of the group is on income collection to year end in order to achieve agreed targets by hospital. Work is also continuing on a solution to restructure the Private Insurance Income Collection Process.

Note: This quarterly report excludes data for three smaller hospitals previously reported, due to the low volume of income involved.

Gross Debtor Days for Private Charges Debt <12 mths		Income for 12 months ended Sept'11	Gross Debtors < 12 months at Sept'11	Outturn Days at Dec'10	Previous Quarter Days at Jun'11	Current Quarter Days at Sept'11	Variance by Days per Hospital on previous Quarter
Type	Hospital						
Statutory	St Columcilles General	192,324	29,670	64	72	56	16
	Roscommon General	2,974,114	555,827	98	84	68	15
	Mallow General	2,260,299	580,702	58	87	94	-7
	Wexford General	7,565,374	2,487,947	125	124	120	4
	Our Lady's Navan	1,485,093	489,111	68	116	120	-4
	Nenagh General	2,061,720	730,196	78	119	129	-10
	Cork University	36,723,192	13,084,558	136	132	130	2
	Kilcreene Orthopaedic	1,379,266	528,604	107	139	140	-1
	Sligo General	12,197,280	4,739,163	114	147	142	6
	Kerry General	6,778,614	2,644,800	187	182	142	40
	Ennis General	606,907	249,884	103	150	150	-1
	Portiuncla Acute	8,494,215	3,505,085	136	169	151	19
	Galway University/Merlin Park	25,744,844	10,801,147	147	160	153	7
	Limerick Regional Complex	31,535,422	13,874,796	151	166	161	5
	Letterkenny General	7,046,223	3,128,095	128	166	162	4
	Cavan General	4,557,061	2,035,532	88	151	163	-12
	Tullamore General	5,376,795	2,433,524	158	145	165	-21
	Mayo General	6,650,948	3,014,084	178	210	165	45
	Portlaoise General	3,010,294	1,412,257	88	158	171	-13
	Waterford Regional	19,149,102	9,934,343	188	200	189	11
	South Tipp General, Clonmel	5,881,204	3,105,136	149	187	193	-6
	Our Lady of Lourdes, Drogheda	13,886,417	7,496,214	151	165	197	-32
	Mullingar General	4,016,360	2,256,678	154	209	205	4
	St. Luke's Kilkenny	5,880,542	3,479,125	181	242	216	26
Connolly Memorial	4,509,893	2,918,301	155	207	236	-30	
Statutory Total		219,963,503	95,514,779	144	162	158	3
Voluntary	Rotunda Hospital	12,513,398	2,162,015	47	53	63	-10
	St. James's Hospital	31,664,080	5,801,628	58	67	67	0
	St. Vincent's Elm Park	10,824,962	2,100,683	83	87	71	16
	National Maternity Holles St.	14,001,615	3,095,539	80	101	81	21
	Cappagh National Orthopaedic	2,561,545	694,492	102	93	99	-6
	Coombe Womens Hospital	11,395,660	3,121,244	106	109	100	9
	Royal Victoria Eye & Ear Hospital	2,814,575	915,143	95	124	119	5
	St. Luke's Hospital Rathgar	5,260,273	1,891,550	135	147	131	16
	St. John's Limerick	5,018,027	1,837,396	149	153	134	20
	South Infirmary -Victoria Hospital, Cork	13,229,000	5,057,506	125	144	140	4
	Our Lady's Hosp for Sick Children Crumlin	11,298,236	4,412,876	136	162	143	19
	Mercy Hospital, Cork	17,516,448	6,988,000	102	116	146	-30
	Adelaide & Meath Tallaght	34,268,675	14,056,038	157	156	150	7
	St. Michael's Dun Laoghaire	3,835,360	1,575,485	129	131	150	-19
	Mater Misericordiae University	13,245,402	6,831,005	186	199	188	11
	Children's University, Temple Street	6,612,127	3,697,928	189	217	204	13
	Beaumont Hospital	28,614,309	16,116,199	154	176	206	-29
	Voluntary Total		224,673,692	80,354,727	118	130	131
Grand Total		444,637,195	175,869,506	131	146	144	2

Appendix 2: Vote Data

Vote 40 - HSE – Vote Expenditure Return at 30th November 2011

(As at 7th December 2011)

1. Vote Position at 30th November 2011

Vote Return - November 2011	REV 2011	November Monthly Profile €'000	November Actual Outturn €'000	Over (Under) €'000	November YTD Profile €'000	November YTD Actual €'000	Over (Under) €'000
Gross Current Expenditure	13,416,696	1,067,905	1,045,989	(21,916)	12,286,576	12,465,658	179,082
Gross Capital Expenditure	377,791	36,007	32,527	(3,480)	336,371	289,085	(47,286)
Total Gross Vote Expenditure	13,794,487	1,103,912	1,078,516	(25,396)	12,622,947	12,754,743	131,796
Appropriations-in-Aid							
- Receipts collected by HSE	1,065,901	88,863	59,744	(29,119)	973,934	¹ 911,427	(62,507)
- Other Receipts	400,605	114,000	14,000	(100,000)	254,000	289,000	35,000
- Capital Receipts	15,541	1,650	49	(1,601)	14,485	5,849	(8,636)
- Total	1,482,047	204,513	73,793	(130,720)	1,242,419	1,206,276	(36,143)
Net Expenditure	12,312,440	899,399	1,004,723	105,324	11,380,528	11,548,467	167,939

2. Comparison to Issues Return

The November return is broadly consistent with the issues return submitted on 24th November 2011.

3. General Commentary

The November vote expenditure return is prepared on the basis of cash issued to HSE areas and includes estimates of appropriations-in-aid collected directly by the HSE. Other receipts are actual receipts from the Revenue Commissioners and receipts from the UK Department of Health in relation to the Recovery of EU Health Costs.

Gross current vote expenditure is €179m over profile, while current appropriations-in-aid collected directly by the HSE are €63m under profile resulting in a **net current overspend of €242m** at the end of November, 2011 (€234m over profile in October).

Other current appropriations-in-aid are €35m ahead of profile.

Gross capital expenditure is €47m under profile, while capital appropriations-in-aid are €9m under profile.

¹ Prescription Charges are credited to Subhead B.6 (Medical Card Services and Community Schemes) rather than Subhead D.9 (Miscellaneous Receipts)

4. Emerging Issues by Vote Subhead based on REV Allocation

- The statutory sector including Fair Deal is €12m over profile (€14m over profile in October).
- The voluntary sector is €39m over profile (€35m over profile in October).
- The medical card services and community schemes, on a gross basis, is €151m over profile (€173m over profile in October) and on a net basis is €139m over profile (€133m over profile in October).
- Payments to the Long Stay Repayments Scheme are €3m under profile (€4m under profile in October).
- Service Development expenditure is on profile and will reflect expenditure in line with the PR on a quarterly basis (on profile in October).
- Payments to the State Claims Agency are €20m under profile (€17m under profile in October).
- Revenue Receipts collected directly by the HSE are €63m under profile.

5. Year End Revenue Projection

The projected year end balanced vote position is based on the following assumptions:-

1. A supplementary estimate of €148m will be voted by Dáil Eireann.
2. Savings on capital and surplus appropriations-in-aid from the UK Department of Health can be applied to fund revenue overspend and other appropriations-in-aid shortfalls.

6. Capital Position 30th November 2011

Subhead	REV2011 Profile €000	November 2011 Profile €'000	November YTD Actual €'000	Over (Under) €'000
B.9 - Dormant Accounts	541	541	36	(505)
C1 – Capital - Construction	334,711	303,590	262,575	(41,015)
C2 – Capital – Lottery	2,539	1,539	0	(1,539)
C3 – Capital -Information Systems	25,000	16,281	10,283	(5,998)
C4 – Mental Health etc	15,000	14,420	16,191	1,771
Total	377,791	336,371	289,085	(47,286)
Gross Capital Expenditure				
D.7 Dormant Accounts	541	485	36	(449)
D.10 Receipts-Disposal of Mental Health Facilities etc	15,000	14,000	5,813	(8,187)
Net Capital Expenditure	362,250	321,886	283,236	(38,650)

7. Commentary

Subhead - C1/C2 Construction

Expenditure under this subhead is running below profile by €42.554m for the period Jan-Nov 2011. Current projections on capital cash drawdown over the remaining weeks of the year indicate that C1/C2 Construction will significantly increase.

A number of issues have impacted on capital expenditure to date in 2011. These include;

- A number of constructions companies have encountered financial difficulties which, in turn, have impacted on the completion of construction (Letterkenny ED & Ward Block project) and the settlement and payment of final accounts (CUH Cardiac Renal).
- Progress on a number of major projects has been sluggish to date in 2011 and have fallen behind profile. These include the MWRH Limerick Critical Care project and Waterford Regional Hospital ED project.
- The National Paediatric Hospital project had been put on hold pending a review which is now completed.
- Some projects are encountering delays between the appointment of a contractor and the commencement of construction. These delays may be due to the provision of the Bond or prolonged main contractor/sub-contractor negotiations.

Subhead - C3 ICT

Expenditure under this subhead is running below profile by €5.998m for the period Jan-Nov 2011. Current projections on capital cash drawdown over the remaining weeks of the year indicate that C3 ICT will significantly increase in the remaining weeks of the year.

Subhead C4 - Mental Health

Expenditure under this subhead is running ahead of profile by €1.771m for the period Jan-Nov 2011.

Subhead B9 – Dormant Accounts

Expenditure under this subhead is running below profile by €0.505m.

Capital Appropriations in Aid

The value of sale proceeds in the period Jan-Nov 2011 was €5.8m. The profile in regard to sale of surplus assets was €14m.

Vote 40 - HSE – Vote Expenditure Return at 31st October 2011

(As at 3rd November 2011)

1. Vote Position at 31st October 2011

Vote Return - October 2011	REV 2011		October Monthly Profile €'000	October Actual Outturn €'000	Over (Under) €'000		October YTD Profile €'000	October YTD Actual €'000	Over (Under) €'000
Gross Current Expenditure	13,416,696		1,069,192	1,104,317	35,125		11,218,671	11,419,669	200,998
Gross Capital Expenditure	377,791		27,489	24,980	(2,509)		300,364	256,558	(43,806)
Total Gross Vote Expenditure	13,794,487		1,096,681	1,129,297	32,616		11,519,035	11,676,227	157,192
<i>Appropriations-in-Aid</i>									
- Receipts collected by HSE	1,065,901		88,863	95,395	6,532		885,071	851,683	(33,388)
- Other Receipts	400,605		14,000	14,000	0		140,000	275,000	135,000
- Capital Receipts	15,541		1,000	55	(945)		12,835	5,800	(7,035)
- Total	1,482,047		103,863	109,450	5,587		1,037,906	1,132,483	94,577
Net Expenditure	12,312,440		992,818	1,019,847	27,029		10,481,129	10,543,744	62,615

2. Comparison to Issues Return

The October return is broadly consistent with the Issues return submitted on 24th October 2011. Gross current expenditure is €4m lower than reported in the Issues return as cash issued in the last week of October was less than anticipated.

3. General Commentary

The October vote expenditure return is prepared on the basis of cash issued to HSE areas and includes estimates of appropriations-in-aid collected directly by the HSE. Other receipts are actual receipts from the Revenue Commissioners and receipts from the UK Department of Health in relation to the Recovery of EU Health Costs.

Gross current vote expenditure is €201m over profile, while current appropriations-in-aid collected directly by the HSE are €33m under profile resulting in a **net current overspend of €234m** at the end of October, 2011 (€206m over profile in September).

Other current appropriations-in-aid are €135m ahead of profile as €135m was received from the UK Department of Health in July 2011. This receipt was not profiled for collection until December 2011.

Gross capital expenditure is €44m under profile, while capital appropriations-in-aid are €7m behind profile.

4. Emerging Issues by Vote Subhead based on REV Allocation

- The statutory sector including Fair Deal is €14m over profile (€3m under profile in September).
- The voluntary sector is €35m over profile (€30m over profile in September).
- The medical card services and community schemes, on a gross basis, is €173m over profile (€153m over profile in September). The net overspend is €133m (i.e. after account is taken of surplus appropriations-in-aid).
- Payments to the Long Stay Repayments Scheme are €4m under profile (€4m under profile in September).
- Service Development expenditure is on profile and will reflect expenditure in line with the PR on a quarterly basis (on profile in September).
- Payments to the State Claims Agency are €17m under profile (€10m under profile in September).
- Revenue Receipts collected directly by the HSE are €33m under profile (€40m under profile in September).
- Receipts of €135m in respect of Recovery of UK Health Costs were received in July 2011 ahead of profile.

5. Year End Revenue Projection

Based on the existing cashing rates the projected year end net revenue deficit is in the region of €300m.

The majority of the procurement and VFM savings which would assist this projection are due to materialise in the latter part of the year. However, the year end forecast will not change until these savings crystallise into a lower cashing rate.

The return which accompanies this report has been prepared on the basis of a balanced vote at year end. This is based on the assumption that cash deferral plans and/or a supplementary estimate will deliver a balanced vote.

The HSE funding available for community drugs schemes was reduced by €58m relating to adjustments made to the vote after the Service Plan was signed off by the Minister. HSE also faces an additional €25m expenditure pressure relating to delays in the signing of the FEMPI orders into effect and a €10m overestimation of the full year impact of FEMPI savings in 2010. As stated previously, HSE has no measures in place and no capacity to address cost growth in “demand led” schemes. PCRS is already substantially delivering upon a very aggressive savings target of €424m as set out in the Service Plan 2011.

Childcare remains a significant financial issue. While this matter is being addressed by the Director of Childcare Services, it is unrealistic to expect that he can recover this level of cost without significant service impact. Supplementary funding will be required to address the shortfall in childcare services, many of which are statutorily based.

The current income charging and collection regime with private insurers is not sustainable. HSE is dependant upon improvement in its income collection figures by €100m before year end. Achieving this target will require the active support of the Minister and Department. HSE has made proposals on this matter earlier in the year.

6. Capital Position 31st October 2011

Subhead	REV 2011 Profile €000	October 2011 Profile €'000	October YTD Actual €'000	Over (Under) €'000
B.9- Dormant Accounts	541	485	36	(449)
C1 – Capital - Construction	334,711	273,830	232,008	(41,822)
C2 – Capital – Lottery	2,539	0	0	0
C3 – Capital -Information Systems	25,000	12,229	8,323	(3,906)
C4 – Mental Health etc	15,000	13,820	16,191	2,371
Total	377,791	300,364	256,558	(43,806)
Gross Capital Expenditure				
D.7 Dormant Accounts	541	485	0	(485)
D.10 Receipts-Disposal of Mental Health Facilities etc	15,000	12,350	5,800	(6,550)
Net Capital Expenditure	362,250	287,529	250,758	(36,771)

7. Capital Commentary

Subhead C1/C2 - Construction

Expenditure under this subhead is running below profile by €41.822m for the period Jan-Oct 2011. It is anticipated that in line with trends in previous years capital expenditure will increase in the remaining months of the year.

A number of issues have impacted on capital expenditure to date in 2011. These include:

- A number of constructions companies have encountered financial difficulties which, in turn, have impacted on the completion of construction (Letterkenny ED & Ward Block project) and the settlement and payment of final accounts (CUH Cardiac Renal).
- Progress on a number of major projects has been sluggish to date in 2011 and have fallen behind profile. These include the MWRH Limerick Critical Care project and Waterford Regional Hospital ED project.
- The National Paediatric Hospital project had been put on hold pending a review which is now completed.
- Some projects are encountering delays between the appointment of a contractor and the commencement of construction. These delays may be due to the provision of the Bond or prolonged main contractor/sub-contractor negotiations.

Subhead C3 - ICT

Expenditure under this subhead is running below profile by €3.906m for the period Jan-Oct 2011.

Subhead C4 - Mental Health

Expenditure under this subhead is running ahead of profile by €2.371m for the period Jan-Oct 2011.

Subhead B9 – Dormant Accounts

Expenditure under this subhead is running below profile by €0.449m.

Capital Appropriations-in-Aid

The value of sale proceeds in the period Jan-Oct 2011 was €5.8m. The profile in regard to sale of surplus assets was €12.350m.