

This report details the UL Hospital Group perfromance against some national and international measures of patient safety in acute hospitals. The metrics cover activities and performance areas including infection rates, staff hand hygiene, waiting times and clinical incidents.

This report supports the hospital group to ensure a culture of quality and patient safety.

We publish this report each month to assure our patients and staff that we prioritise patient safety and open disclosure.

Notes

It is not intended that this report be used to compare performance of hospitals or hospital groups. Different hospitals specialise in treating patients with different and sometimes much more complex care needs, making comparisons between hospitals ineffective.

Metrics 1-3 measure infection control and staff hand hygiene practices in acute hospitals. These metrics are applied internationally as key indicators of infection control compliance. The targets for metrics 1 and 2 are international best practice targets. The target for metric 3 is an agreed target in the HSE's National Service Plan.

Metrics 4-8 measure access to and waiting times for services including emergency care, trauma care (for hip fractures), urgent endoscopy procedures and access to outpatient services. These metrics are based on national indicators and nationally agreed targets as set out in the HSE's National Service Plan

Metric 9 and 10 measure clinical incidents reported to the National Incident Management System. A clinical incident is an event or circumstance which could have, or did lead to unintended and/ or unnecessary harm. Incidents include adverse events which result in harm; near misses which could have resulted in harm, but did not cause harm, either by chance or timely intervention. These metrics are indicators of patient safety in hospitals that are applied internationally.

Metric 11 is an indicator of medication safety in acute hospitals. This refers to any preventable event that may cause or lead to inappropriate use or patient harm while the medication is in the control of the healthcare professional or patient (WHO, 2009). The number of errors reported to the National Incident Management System is based on an internationally accepted metric applied in other countries.

Metric 12 is an indicator on the timeliness of reporting our incidents onto the National incident management system

Activity	Ref	UL Hospitals Group 2017 KPIs	Reporting Frequency	2017 National Target	Jan-17	Feb-17	Mar-17	Apr-17	Trend
lealth Care									
Associated		Rate of new cases of hospital acquired							
rfections	1	Staph. Aureus bloodstream infection.	Monthy						
intections	'	Croom Orthopaedic Hospital	Morre		0.00		0.00	0.00	
				Less than 1 per 10,000 bed days Less than 1 per 10,000 bed days	0.00	0.00	0.00	0.00	
		Ennis Hospital Nenagh Hospital		Less than 1 per 10,000 bed days	5.30 0.00	0.00	0.00 6.40	0.00	
		St. John's Hospital		Less than 1 per 10,000 bed days	0.00	0.00	0.00	0.00	
		University Hospital Limerick		Less than 1 per 10,000 bed days	1.50	1.70	3.90	0.80	
		University Maternity Hospital, Limerick		Less than 1 per 10,000 bed days	0.00	0.00	0.00	0.00	
		UL Hospitals Group		Less than1 per10,000 bed days	1.40	1.00	2.80	0.50	
			lin Resistant !						many antihintics. In
		Health Care Associated Infections Methicillin Resistant Staphylococcus Aureus (MRSA) A type of bacteria that is resistant to many antibiotics. In healthcare setting such as a hospital can cause severe problems such as pneumonia, surgical site infections and blood stream infections. MRSA usually spread by direct contact with an infected wound or from contaminated hands, usually those of health care providers.							
	2	Rate of new cases of hospital acquired C. Difficle infection	·Monthly						
		Croom Orthopaedic Hospital	10	Less than 2 per 10,000 bed days	0.00	0.00	0.00	0.00	
		Ennis Hospital		Less than 2 per 10,000 bed days	5.30	0.00	0.00	0.00	\
		Nenagh Hospital		Less than 2 per 10,000 bed days	0.00	0.00	0.00	0.00	
		St. John's Hospital		Less than 2 per 10,000 bed days	8.70	0.00	0.00	5.00	
		University Hospital Limerick		Less than 2 per 10,000 bed days	2.30	2.50	1.60	3.20	
		University Maternity Hospital, Limerick		Less than 2 per 10,000 bed days	0.00	0.00	0.00	0.00	
		UL Hospitals Group		Less than 2 per 10,000 bed days	2.70	1.50	0.90	2.40	
								_	
		Compliance of hospital staff with the (WHO) five moments of hand hygiene							
	3		Bi-annual						
	3	(WHO) five moments of hand hygiene using the national hand hygiene audit tool.	Bi-annual	90%		92%			
	3	(WHO) five moments of hand hygiene using the national hand hygiene audit tool. Medicine Directorate	Bi-annual	90% 90%		92% 89%			
	3	(WHO) five moments of hand hygiene using the national hand hygiene audit tool. Medicine Directorate Peri-op	Bi-annual	****					
	3	(WHO) five moments of hand hygiene using the national hand hygiene audit tool. Medicine Directorate Peri-op Maternal & Child Directorate	Bi-annual	90% 90%		89%			
	3	(WHO) five moments of hand hygiene using the national hand hygiene audit tool. Medicine Directorate Peri-op		90% 90% 90%		89% 88%			
	3	(WHO) five moments of hand hygiene using the national hand hygiene audit tool. Medicine Directorate Peri-op Maternal & Child Directorate UL Hospitals Group Hand hygiene is one of the most important meas		90% 90% 90%		89% 88%			
	3	(WHO) five moments of hand hygiene using the national hand hygiene audit tool. Medicine Directorate Peri-op Maternal & Child Directorate UL Hospitals Group Hand hygiene is one of the most important meas	sures to prever	90% 90% 90%		89% 88%			
ırgery	3	(WHO) five moments of hand hygiene using the national hand hygiene audit tool. Medicine Directorate Peri-op Maternal & Child Directorate UL Hospitals Group Hand hygiene is one of the most important measure and the control of the most important measure arried out within 48 hours		90% 90% 90% 90% at Healthcare associated infection		89% 88% 89%	F0.09	50.00/	
ırgery	3	(WHO) five moments of hand hygiene using the national hand hygiene audit tool. Medicine Directorate Peri-op Maternal & Child Directorate UL Hospitals Group Hand hygiene is one of the most important meas Percentage of emergency hip fracture carried out within 48 hours University Hospital Limerick	sures to prever	90% 90% 90% The Healthcare associated infection 95%	73.9%	89% 88% 89% 75.0%	52.9%	58.8%	
ırgery	3	(WHO) five moments of hand hygiene using the national hand hygiene audit tool. Medicine Directorate Peri-op Maternal & Child Directorate UL Hospitals Group Hand hygiene is one of the most important meas Percentage of emergency hip fracture carried out within 48 hours University Hospital Limerick UL Hospitals Group	Sures to prever	90% 90% 90% 1t Healthcare associated infection 95% 95%	73.9% 73.9%	89% 88% 89% 75.0%	52.9%	58.8%	
ırgery	3	(WHO) five moments of hand hygiene using the national hand hygiene audit tool. Medicine Directorate Peri-op Maternal & Child Directorate UL Hospitals Group Hand hygiene is one of the most important meas Percentage of emergency hip fracture carried out within 48 hours University Hospital Limerick	Monthly ersons, with sig	90% 90% 90% 90% 1t Healthcare associated infection 95% 95% 95% gnificant associated morbidity and to hip fracture care and secondary	73.9% 73.9% mortality.	89% 88% 89% 75.0% 75.0% Hip fracture	52.9% e patients a falls and fr	58.8% are usually cactures. The	he last months data ha
	4	(WHO) five moments of hand hygiene using the national hand hygiene audit tool. Medicine Directorate Peri-op Maternal & Child Directorate UL Hospitals Group Hand hygiene is one of the most important meast Percentage of emergency hip fracture carried out within 48 hours University Hospital Limerick UL Hospitals Group Hip fractures are common injuries in the older pe systems must develop integrated and systemative duced compliance as 2 patients were not for The percentage of all attendees at ED who are in ED < 24 hrs	Monthly ersons, with sig	90% 90% 90% 90% 1t Healthcare associated infection 95% 95% gnificant associated morbidity and to hip fracture care and secondary gery, due to existing medical con	73.9% 73.9% mortality. prevention ditions 1 p	89% 88% 89% 75.0% 75.0% Hip fractun of further vastient was	52.9% e patients a falls and fr palliative o	58.8% are usually of actures. The care and 1 p	he last months data ha
	4	(WHO) five moments of hand hygiene using the national hand hygiene audit tool. Medicine Directorate Peri-op Maternal & Child Directorate UL Hospitals Group Hand hygiene is one of the most important meas Percentage of emergency hip fracture carried out within 48 hours University Hospital Limerick UL Hospitals Group Hip fractures are common injuries in the older pesystems must develop integrated and systematireduced compliance as 2 patients were not for integrated and systematireduced compliance as 2 patients were not for integrated and systematireduced compliance as 2 patients were not for integrated and systematireduced compliance as 2 patients were not for integrated and systematireduced compliance as 2 patients were not for integrated and systematireduced compliance as 2 patients were not for integrated and systematic reduced compliance as 2 patients were not for integrated and systematic reduced compliance as 2 patients were not for integrated and systematic reduced compliance as 2 patients were not for integrated and systematic reduced compliance as 2 patients were not for integrated and systematic reduced compliance as 2 patients were not for integrated and systematic reduced compliance as 2 patients were not for integrated and systematic reduced compliance as 2 patients were not for integrated and systematic reduced compliance as 2 patients were not for integrated and systematic reduced compliance as 2 patients were not for integrated and systematic reduced compliance as 2 patients were not for integrated and systematic reduced compliance are set of the systematic reduced compliance as 2 patients were not for integrated and 3 patients are systematical reduced compliance as 2 patients were not for integrated and 3 patients are systematical reduced compliance as 2 patients were not for integrated and 3 patients are systematical reduced compliance as 2 patient	Monthly ersons, with sig c approaches timmediate sur	90% 90% 90% 90% st Healthcare associated infection 95% 95% gnificant associated morbidity and to hip fracture care and secondary gery, due to existing medical con	73.9% 73.9% mortality. prevention ditions 1 p	89% 88% 89% 75.0% 75.0% Hip fracturn of further patient was	52.9% e patients a falls and fr palliative o	58.8% are usually of actures. The are and 1 p	he last months data ha
	4	(WHO) five moments of hand hygiene using the national hand hygiene audit tool. Medicine Directorate Peri-op Maternal & Child Directorate UL Hospitals Group Hand hygiene is one of the most important meast Percentage of emergency hip fracture carried out within 48 hours University Hospital Limerick UL Hospitals Group Hip fractures are common injuries in the older pe systems must develop integrated and systemative duced compliance as 2 patients were not for The percentage of all attendees at ED who are in ED < 24 hrs	Monthly ersons, with sig c approaches timmediate sur	90% 90% 90% 90% 1t Healthcare associated infection 95% 95% gnificant associated morbidity and to hip fracture care and secondary gery, due to existing medical con	73.9% 73.9% mortality. prevention ditions 1 p	89% 88% 89% 75.0% 75.0% Hip fracturn of further patient was	52.9% e patients a falls and fr palliative o	58.8% are usually of actures. The care and 1 p	he last months data ha
	4	(WHO) five moments of hand hygiene using the national hand hygiene audit tool. Medicine Directorate Peri-op Maternal & Child Directorate UL Hospitals Group Hand hygiene is one of the most important meas Percentage of emergency hip fracture carried out within 48 hours University Hospital Limerick UL Hospitals Group Hip fractures are common injuries in the older pesystems must develop integrated and systematireduced compliance as 2 patients were not for integrated and systematireduced compliance as 2 patients were not for integrated and systematireduced compliance as 2 patients were not for integrated and systematireduced compliance as 2 patients were not for integrated and systematireduced compliance as 2 patients were not for integrated and systematireduced compliance as 2 patients were not for integrated and systematic reduced compliance as 2 patients were not for integrated and systematic reduced compliance as 2 patients were not for integrated and systematic reduced compliance as 2 patients were not for integrated and systematic reduced compliance as 2 patients were not for integrated and systematic reduced compliance as 2 patients were not for integrated and systematic reduced compliance as 2 patients were not for integrated and systematic reduced compliance as 2 patients were not for integrated and systematic reduced compliance as 2 patients were not for integrated and systematic reduced compliance as 2 patients were not for integrated and systematic reduced compliance as 2 patients were not for integrated and systematic reduced compliance are set of the systematic reduced compliance as 2 patients were not for integrated and 3 patients are systematical reduced compliance as 2 patients were not for integrated and 3 patients are systematical reduced compliance as 2 patients were not for integrated and 3 patients are systematical reduced compliance as 2 patient	Monthly ersons, with sign capproaches to immediate sur	90% 90% 90% 90% st Healthcare associated infection 95% 95% gnificant associated morbidity and to hip fracture care and secondary gery, due to existing medical con	73.9% 73.9% mortality. prevention ditions 1 p	89% 88% 89% 75.0% 75.0% Hip fracturn of further patient was	52.9% e patients a falls and fr palliative o	58.8% are usually of actures. The are and 1 p	he last months data ha
	4	(WHO) five moments of hand hygiene using the national hand hygiene audit tool. Medicine Directorate Peri-op. Maternal & Child Directorate UL Hospitals Group Hand hygiene is one of the most important meas Percentage of emergency hip fracture carried out within 48 hours University Hospital Limerick UL Hospitals Group Hip fractures are common injuries in the older posystems must develop integrated and systemative duced compliance as 2 patients were not for in the percentage of all attendees at ED who are in ED < 24 hrs University Hospital Limerick UL Hospitals Group Percentage of patients 75 years or over who were admitted or discharged from ED within 9	Monthly ersons, with sig c approaches timmediate sur	90% 90% 90% 90% st Healthcare associated infection 95% 95% gnificant associated morbidity and to hip fracture care and secondary gery, due to existing medical con	73.9% 73.9% mortality. prevention ditions 1 p	89% 88% 89% 75.0% 75.0% Hip fracturn of further patient was	52.9% e patients a falls and fr palliative o	58.8% are usually of ractures. The rare and 1 p	he last months data ha
	4	(WHO) five moments of hand hygiene using the national hand hygiene audit tool. Medicine Directorate Peri-op Maternal & Child Directorate UL Hospitals Group Hand hygiene is one of the most important meast Percentage of emergency hip fracture carried out within 48 hours University Hospital Limerick UL Hospitals Group Hip fractures are common injuries in the older posystems must develop integrated and systemative duced compliance as 2 patients were not for in the percentage of all attendees at ED who are in ED < 24 hrs University Hospital Limerick UL Hospitals Group Percentage of patients 75 years or over who were admitted or discharged from ED within 9 University Hospital Limerick	Monthly ersons, with sign capproaches to immediate sur	90% 90% 90% 90% 1 Healthcare associated infection 95% 95% 95% gnificant associated morbidity and to hip fracture care and secondary gery, due to existing medical con 100% 100%	73.9% 73.9% mortality. prevention ditions 1 p 92.3% 92.3% 39.2%	89% 88% 89% 75.0% 75.0% Hip fracturn of further attent was 93.3% 40.5%	52.9% e patients a falls and fr palliative c	58.8% are usually of actures. The are and 1 p 93.1% 93.1%	he last months data ha
Surgery Emergency Care	4	(WHO) five moments of hand hygiene using the national hand hygiene audit tool. Medicine Directorate Peri-op. Maternal & Child Directorate UL Hospitals Group Hand hygiene is one of the most important meas Percentage of emergency hip fracture carried out within 48 hours University Hospital Limerick UL Hospitals Group Hip fractures are common injuries in the older posystems must develop integrated and systemative duced compliance as 2 patients were not for in the percentage of all attendees at ED who are in ED < 24 hrs University Hospital Limerick UL Hospitals Group Percentage of patients 75 years or over who were admitted or discharged from ED within 9	Monthly ersons, with sig c approaches timmediate sur	90% 90% 90% 90% 1 Healthcare associated infection 95% 95% 95% 9nificant associated morbidity and to hip fracture care and secondary gery, due to existing medical con 100% 100% 100%	73.9% 73.9% mortality. prevention ditions 1 p 92.3% 92.3% 39.2% 39.2%	89% 88% 89% 75.0% 75.0% Hip fracturn of further attient was 93.3% 93.3% 40.5%	52.9% e patients a falls and fr palliative c 93.9% 93.9% 43.4% 43.4%	58.8% are usually wactures. The are and 1 p 93.1% 93.1% 43.7% 43.7%	he last months data patient required

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tient Experience aiting Times	7	Percentage of people waiting < 52 weeks for first access to outpatient services.	Monthly						
Ť		Croom Orthopaedic Hospital		85%	62.9%	61.2%	60.9%	59.8%	1
		Ennis Hospital		85%	80.1%	78.6%	80.0%	78.3%	
		Nenagh Hospital		85%	73.9%	80.4%	80.2%	79.0%	
		St. John's Hospital		85%	99.1%	98.9%	81.6%	92.7%	
		University Hospital Limerick		85%	78.1%	76.2%	75.7%	75.2%	/
		UL Hospitals Group		85%	76.5%		73.9%	73.7%	
		Significant delay in accessing hospital services of	delays diagnosis a	and any necessary treatme					ptimal outcome .
onoscopy		Number of people waiting greater than 4							
strointestinal		weeks for access to an urgent colonoscopy.							
Service	8		Monthly						
		Ennis Hospital		0	0	0	0	0	
		Nenagh Hospital		0	0	0	0	0	
		St. John's Hospital		0	0	0	0	0	
		University Hospital Limerick		0	0	0	0	0	
		UL Hospitals Group		0	0	0	0	0	
ncident and Events	9	Rate of Clinical incidents reported per period per 1000 bed days	Monthly						
		Croom Orthopaedic Hospital		n/a	4.3	13	6.6	2.8	
		Ennis Hospital		n/a	3.7	4.1	12.6	5.7	
		Nenagh Hospital		n/a	7.1	7.2	10.2	4.6	
		St. John's Hospital		n/a				2.5	
		University Hospital Limerick		n/a	7.3	9.3	9.8	4	1
		University Maternity Hospital, Limerick		n/a	12.9	14.9	12.5	12	
		UL Hospitals Group		n/a	7.6	9.7	10.3	5.4	
	10	Rate of Clinical incidents categorised as high-ri	Monthly		- 110	• • • • • • • • • • • • • • • • • • • •			
		Croom Orthopaedic Hospital	moneny	n/a	0	0	0	0	
		Ennis Hospital		n/a	0	0	0	0	
		Nenagh Hospital		n/a	0	0	0	0	
		St. John's Hospital		n/a				0	
		University Hospital Limerick		n/a	0.6	0.1	0	0	/
		University Maternity Hospital, Limerick		n/a	1.2	0.9	0.24	0.8	
		UL Hospitals Group		n/a	0.6	0.5	0.24	0.8	
		Rate of medication incidents as high-risk per		II/a	0.6	0.5	0.24	0.0	
	11	1000 bed nights	Monthly						
		Croom Orthopaedic Hospital	moneny	n/a	0.00	0.00	0.0	0.0	
		Ennis Hospital		n/a	0.00	0.00	0.0	0.0	
		Nenagh Hospital		n/a	0.00	0.00	0.0	0.0	
		St. John's Hospital		n/a	0.00	0.00	0.0	0.0	
		University Hospital Limerick		n/a	0.00	0.00	0.1	0.1	
		University Maternity Hospital, Limerick		n/a	0.00	0.00	0.0	0.0	
		UL Hospitals Group	+	n/a	0.00	0.00	0.08	0.10	
		Percentage of Incidents reported that have		11/4	0.00	0.00	0.00	0.10	
		been recorded on the National Incident							
	12	Management System	Monthly						
	12	Croom Orthopaedic Hospital	anoniuny	100%	100%	100%	100%	100%	
		Ennis Hospital		100%	100%	100%	100%	100%	
		Nenagh Hospital		100%	100%	100%	100%	100%	
		St. John's Hospital		100%				100%	
		University Hospital Limerick		100%	100%	100%	100%	100%	
		University Maternity Hospital, Limerick		100%	100%	100%	100%	100%	
				4000/	4000/	100%	100%	100%	
		UL Hospitals Group	l l	100%	100%	10070	100/0	100%	

The UL Hospital Group Patient Safety Indicator Report for provides up to date information for management and clinicians who provide services in relation to a range of patient safety issues for the month of January to April 2017.

The information in this report is a core element of clinical governance and the management of hospital services within the above hospital group.

Chief Clinical Director Prof Paul Burke Signature: Poul Burke. Date: 30-6-2017
Group CEO: Colette Cowan Signature: Colette Cowan Date: 30-6-2017

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