Board Strategic Scorecard

May 2024 (March KPI data)

SLT 28 May
HSE Board 31 May

National Planning and Reporting

Contents

Document Purpose

The Board Strategic Scorecard aims to provide the Board with a monthly report on progress against key Programmes/Priorities for 2024. In doing so the Board Strategic Scorecard aims to:

- Track progress of key Programmes/Priorities at a high level

- Highlight issues relating to progress in a timely manner

- Support Board oversight and decision-making

- Minimise multiple requests and duplication of effort in collating reports for Board/ Department of Health (DoH).

Ratings for Programmes/Priorities range from 1-5 and signify current progress of that Programme/Priority against the year-end targets/outputs/deliverables and therefore the Ambition Statement.

Improvement plans are appended to the Board Strategic Scorecard for the scorecards that assigned a rating of 2 in the previous month.

Following consideration by the Board, the Board Strategic Scorecard will be submitted to the DoH on a monthly basis, as part of the reporting arrangements in the DoH - Executive Performance Engagement Model and Oversight Agreement, consistent with the Letter of Determination. The scorecard is also shared on a monthly basis with DCEDIY.

2024 In-Year Monthly Rating Scale (March– December scorecard submissions)

Zone	Rating	Guiding Criteria
Green	5	**Strong assurance** that the 2024 Ambition Statement will be **fully achieved**, on the basis that: • All KPIs are currently on track against target profile and are expected to achieve the end-of-year target position; and • All Deliverables are currently on track and are expected to be completed by target date; and • There are no material issues or risks that are expected to impact on the achievement of the Ambition Statement.
	4	**Strong assurance** that the 2024 Ambition Statement will be **substantially achieved,** on the basis that: • At least 80% of KPIs are currently within 10% of target profile and this position is expected to be maintained to year-end; and • At least 80% of Deliverables are currently on track and this position is expected to be maintained to year-end; and • To the extent that there are material issues or risks to the achievement of the Ambition Statement, effective mitigations are in place.
Amber	3	**Some concerns** that the 2024 Ambition Statement will not be **substantially achieved**, on the basis that: • Between 50% and 80% of KPIs are currently within 10% of target profile; and • Between 50% and 80% of Deliverables are currently on track. • To the extent that there are material issues or risks to the achievement of the Ambition Statement, some mitigations are in place.
	2	**Concerns** that the 2024 Ambition Statement will **only be partially achieved,** on the basis that: • At least 50% of KPIs are currently within 20% of target profile; and • At least 50% of Deliverables are currently on track to be completed within two months of the target date. • There are material issues or risks to the achievement of the Ambition Statement, with limited mitigations in place. .
Red	1	**Significant concerns** that the 2024 Ambition Statement will **not be achieved**, given consideration of: • Less than 50% of KPIs are currently within 20% of target profile; and • Less than 50% of Deliverables are currently on track to be completed within two months of the target date. • There are material issues or risks to the achievement of the Ambition Statement, with no effective mitigations in place.

Executive Summary

Board Strategic Scorecard Rating Summary

Key Programmes/Priorities	Change from Previous Period	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Public Health (COVID -19 Test & Trace and Programme for Vaccination / Immunisation)	➡	3	3	3									
2. Unscheduled Care (Emergency Department Performance)	⬇	4	4	3									
3. Reform of Primary Care, Community & ECC	➡	4	4	4									
4. Reform of Home Support & Residential Care for Older Persons	➡	3	4	4									
5. Reform of Scheduled Care	➡	4	4	4									
6. Reform of Mental Health	➡	3	4	4									
7. Reform of Disability Services	➡	4	4	4									
8. Prevention & Early Intervention	➡	4	4	4									
9. Enhancing Bed Capacity	➡	3	4	4									
10. Quality & Patient Safety	⬆	2	2	3									
11. Patient & Service User Partnership	➡	5	5	5									
12. Recruitment & Retention	➡	3	3	3									
13. Finance & Procurement	➡	3	3	3									
14. eHealth	➡	5	4	4									
15. Capital Infrastructure	➡	3	4	4									
16. Communications	➡	4	4	4									
17. Planning and Implementation of Health Regions	➡	4	4	4									
18. Climate Action	➡	3	4	4									
19. Women's Health	⬆	3	3	4									
Operational Services Report – Annex													
Risk Management - Appendix													

Ratings (for all 19 scorecards):
- 1 scorecard with a rating of 5
- 13 scorecards with a rating of 4
- 5 scorecards with a rating of 3
- 0 scorecards with a rating of 2
- 0 scorecards with a rating of 1

KPIs : Of the 81 KPIs for update in March 71 were reported on. Of these KPIs:
- 45 KPIs were on or ahead of target
- 13 KPIs were within 10% of target
- 4 KPIs were 10-20% behind target
- 8 KPIs were behind target by more than 20%

Deliverables: All deliverables (n=93) were reported on this month. Of these deliverables:
- 5 deliverables are complete
- 73 deliverables are on track
- 13 deliverables are delayed
- 2 not started

Key Observations

Ratings: Two scorecards reported an upgrade in their rating: #10 Quality and Patient Safety (2 to 3) and #19 Women's Health (3 to 4) due to the more recently availability of data. One scorecard reported a downgrade in their rating from 4 to 3, #2 Unscheduled Care. All other scorecards maintained their rating.

Pay and Numbers Strategy: The delay in Pay and Numbers Strategy approval continues to impact the reporting of data and progress in deliverables across 3 scorecards (#7 Disabilities, #12 Recruitment & Retention and #13 Finance & Procurement).

Public Health (#1): Reporting for the COVID-19 vaccination programme is currently on hold (as per plan- Autumn/Winter campaign finished in Feb 2024). Reporting will recommence in the June BSS report.

Unscheduled Care (#2): Reported a downgraded rating from 4 to 3, due in part to the worsening performance seen in number of beds subject to delayed transfers of care. The average monthly figure has worsened from 371 in Jan to 412 in March (target ≤350. The avg. daily number of patients on trolleys decreased by 12% for March, however there was a 10% increase in the number of beds subject to delayed transfers of care. Patients at ED ≤24 hours is on target and ≥75s at ED ≤24hours remains static at 92% (target 99%). UEC operational plan is progressing with final amendments being made following review at the April Ministerial UEC meeting. It is to be launched in May with the multiannual plan to follow after.

Primary care/Community Care/ECC (#3): Progress in the rollout of Healthlink across Community Healthcare Networks (CHNs) and Community Specialist Teams (CSTs) with 89 of 96 CHNs now active. Healthlink allows patient data to be securely transferred from hospitals to Medical Practitioners supporting integrated, multidisciplinary ways of working.

Mental Health (#6): Minor improvements in 2 waiting list KPIs (CAMHS and adult patients seen within 12 weeks of referrals). CAMHS Waiting List Initiative is now active with agreed targets and 68 Primary Notification numbers (PNs) A further 357 cases were seen in Q1 2024 (13.7% above target). Mental Health Engagement Framework 2024-2028 was launched in April 2024.

Disability Services (#7): KPIs in relation to the Children's Disability Network Teams reported for the first time in 2024 (reported quarterly). The no. of children on the active caseload or waiting for an initial contact are both within 1% of target. A further 51 residential places for people with a disability were added in March (KPI1#4) this figure now exceeds the annual target of 8431.

Capital Infrastructure (#15): A new primary care centre was delivered in Clondalkin, Dublin 22; building phase is complete and the equipping and commission stage is now underway. Will provide public health and community nursing, physiotherapy, occupational therapy, speech and language therapy, dietetics and counselling. HSE disability services will also be provided with a new centre for a network disability team.

Communications (#16): Launched a successful HSE Sepsis education campaign. Supported by patients/family advocates and was covered widely in national media. Engagement between HSE and public and staff continues to perform above target across news generation, HSE.ie and internal channels.

Health Regions (#17): Deliverables continue to progress with a further deliverable complete in this reporting period. The Health Regions EMT and Integrated Healthcare Area Management Team structure options have been agreed by the Steering Group.

Quality & Patient Safety (#10): This scorecard has reported an increased rating (from 2 to 3) following the increased availability of data and good performance across 3/5 KPIs. The deliverable continues to be impacted by the PNS approval delay.

Women's Health (#19): Reported an increased rating from 3 to 4 with 4/5 KPIs at or ahead of target. Good progress is also seen in their deliverables with notable progress in deliverable 1 (national consultation for the development of an action plan for the elimination of cervical cancer.)

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Balanced Scorecard*

	KPI	Annual Target	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sept	Oct	Nov	Dec
A. Our Service user/Patients: Quality and Safety	i. % of surgical re-admissions to same hospital within 30 days of discharge (#10 QPS).	≤2%.	1.7%	1.4%	Data 2 mths in arrears									
	ii. % of hip fracture surgery within 48 hours of initial assessment (#10 QPS).	85%	Data 1 quarter in arrears	-	75%									
	iii. % of complaints investigated within 30 working days of being acknowledged by a Complaints Officer (#11 Pt/Serv User).	75%	Reported quarterly	-	Data by end May									
	iv. National Incident Management System: % of reviews completed within 125 days of category one incidents from the date the service was notified of the incident (#10 QPS).	70%	44%	45%	⬆ (Improved)									
	v. Implementation of the Better Together Road Map/ through delivery of a 'train the trainer' approach within each Health Region (#11 Pt/Serv User)	6 x 1 regions	0 (REVISED)	0	⬌ (Maintained)									
B. Staff/Clinicians: Experience and Engagement	i. Staff Absence Rate (#12 R&R).	≤4%	6.5%	5.5%	⬆ (Improved)									
	ii. Total Net WTE Limits (#12 R&R).	TBC	146.4k WTE	146.9k	⬇ (Decreased)									
	iii. Annual Turnover Rate (#12 R&R).	≤8.9%	Reported quarterly	-	1.7%									
	iv. Improve engagement between HSE and our staff through internal comms channels (#16 Comms).	3.63m	0.44m	0.8m	⬆ (Improved)									
C. Access and Integration	i. % of patients waiting longer than 9 months for an inpatient or daycase procedure (#5 Scheduled Care).	10%	22.6%	23%	⬇ (Decreased)									
	ii. % of patients waiting longer than 15 months for an outpatient appointment (#5 Scheduled Care).	10%	13.2%	13%	⬆ (Improved)									
	iii. % all attendees >aged 75 years and over at ED who are discharged or admitted ≤24 hours of registration (#2 USC).	99%	91%	92%	⬌ (Maintained)									
	iv. Number of people in Traveller community who received information of participated in positive mental health initiatives (#8 Prevention/Early Intervention).	3,735	Reported quarterly	-	1595									
	v. % of patients with frailty score of 6-9 (moderate to severe frailty) seen by Older Persons Community Specialist teams (#3 Primary Care, ECC).	55%	39%	42%	⬇ (Decreased)									
	vi. % problem alcohol users (under 18years) for whom treatment has commenced within 1 week following assessment (#8 Prevention/Early Intervention).	100%	Reported quarterly	-	50%									
	vii. Board approval of Digital Health Implementation Roadmap (deliverable #14 eHealth)	Apr-24	On track	On track	Delayed									
	viii. Complete evaluation of the Autism Assessment and Pathway protocol demonstrator project and commence national roll out with Primary Care, Disability and Mental Health Services (deliverable #7 Disability)	Sep-24	On track	On track	On track									
	ix. No. of home support hours delivered in 2024 (#4 Older Persons).	22.0m	1.93m	3.83m	⬆ (Improved)									
	x. CAMHS- percentage of urgent referrals to CAMHS Community Teams responded to within three working days (#6 Mental Health).	≥90%	89.6%	98.1%	⬇ (Decreased)									
	xi. Commence phase 2 of Model of Care for Infertility (deliverable #19 Women's Health)	Q2-24	On track	On track	On track									
D. Finance, Governance and Compliance	i. €250m Agency "do without" savings. Annual target: €376m (across all savings categories).	€376m	TBC	TBC	TBC									
	ii. €80m Agency / Overtime "conversion" savings. Annual target: €376m (across all savings categories).	€376m	TBC	TBC	TBC									

Legend

KPIs: Between Feb and Nov activity trends will be represented as follows (compared to previous month):

- ⬆ Improved performance
- ⬇ Decreased performance
- ⬌ Maintained performance

Deliverables: Status of deliverables as follows:

- **On track**
- **Delayed**
- **Not Started**
- **Complete**
- **No longer required**

*Note: The Balanced Scorecard is a 1-page strategic supplemental view, based on a sub-set of selected KPIs and deliverables across the more detailed content within the 19 scorecards

Ambition Statement 2024: Public Health aligned with the new Health Regions, will work across the domains of health improvement, health service improvement, health intelligence and health protection to protect and promote the health and wellbeing of the population. Building upon the strategic reform of Public Health, it will continue to implement key immunisation priorities and will ensure the delivery and monitoring of a high-level of prevention and control of vaccine preventable diseases across population groups through immunisation programmes. This will include COVID-19, seasonal flu and the Primary Childhood Immunisation Schedule as informed by guidance/policy. In 2024, integrated plans for Covid-19 and Influenza vaccination programmes will be maintained and key activities for the improvement of immunisation uptake rates will be implemented across priority programmes.

Rating and Overview (3): Some concerns that the 2024 Ambition Statement will not be substantially achieved, on the basis that the one KPI reported this month (KPI#6) is 100% and 3 out of 4 deliverables are on track and mitigations are in place.

3   Change →

KPI	T/A	2024 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. COVID-19 Vaccine uptake for Health and Care Workers (based on HSE Healthcare Workers recorded on HSE HR-SAP).* *March data unavailable as COVID-19 Autumn /Winter Campaign finished on 18th February 2024.	Target	50.0%	50.0%	50.0%	50.0%	50.0%	50.0%	50.0%	50%	50.0%	50.0%	50.0%	50.0%	50.0%
	Actual		19.0%	19.0%	Not Available									
2. COVID-19 Vaccine uptake for people 70 years and over (based on Census 2022 data)* *March data unavailable as COVID-19 Autumn/Winter Campaign finished on 18th February 2024. Spring Campaign (80 years and over) will commence on the 22nd April.	Target	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%	75.0%
	Actual		62.0%	63.0%	Not Available									
3. Influenza vaccine uptake in HSE Health Care Workers (Acute Hospitals) (KPI reported annually)	Target	75.0%												75.0%
	Actual													
4. Influenza vaccine uptake for people 65 years and over (KPI reported annually)	Target	75.0%												75.0%
	Actual													
5. Influenza vaccine uptake for children within approved age category (2-17) (KPI reported annually)	Target	50.0%												50.0%
	Actual													
6. Percentage of International Health Regulation (IHR) alerts received by Health Projection Surveillance Centre (HPSC) that are risk assessed and actioned as appropriate within 24 hours of the alert (Data reported quarterly in arrears)	Target	100.0%			100.0%			100.0%			100.0%			100.0%
	Actual				100.0%									

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Develop an integrated plan for COVID-19 vaccination in conjunction with the Influenza vaccination programme as appropriate.	Jun-24	On Track	Covid-19 Autumn Winter Campaign finished on 18th February 2024. Implementation of Covid-19 Spring Programme 2024. Spring Campaign is for 80 years and over commencing 22nd April 2024. Awaiting NIAC guidance for Winter 2024.
2. Develop operational plans for 2024 to support other (new/existing) vaccination programmes with Covid-19 Mobile Team resources where required.	Sep-24	On Track	Operational plans revised and adapted to support implementation of MMR catch-up.☐
3. Work with the DoH to agree and implement a plan to expand the flu vaccination programme within approved age category in line with the funding provided	Mar-24	Delayed	Continuing to engage with the department on funding for the expansion of the programme
4. Implement key actions identified by the HSE Integrated Taskforce for improvement of immunisation uptake rates.	Dec-24	On Track	Integrated Immunisation Taskforce in place to review uptake rates for Primary Childhood Immunisation.

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1 Awaiting NIAC Guidance for Covid-19 Winter 2024.	1. Planning for delivery in place.☐
2 Awaiting approval of workforce to expand the flu vaccine programme and integrate other vaccination programmes.	2. Engaging with Department of Health

Ambition statement 2024: To maintain 2023 improvements in patient care and to deliver further quantifiable improvements in 2024 metrics and KPIs. This will improve the experience of patients accessing the unscheduled care pathway and deliver better health outcomes by reducing known levels of harm associated with prolonged wait times in EDs and extended stays in hospital following the completion of acute care. To deliver this, the focus in 2024 will be on implementing year 1 priorities of the National UEC plan 2024-2026, incorporating key learnings from successes achieved in 2023. Services will work to optimise existing integrated service models for patients, and deliver service quality, efficiency and productivity measures that will improve care to patients, with a particular focus on older adults.

Rating and Overview (3): Some concerns that the 2024 Ambition Statement will not be substantially achieved. UEC performance is now under the governance of the REO's. Oversight and linkage will continue at a national level.

3 ⬇   Change ⬇

KPI	T/A	2024 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Average daily number of patients on trolleys at 0800hrs	Target	<320	<320	<320	<320	<320	<320	<320	<320	<320	<320	<320	<320	<320
	Actual		353	342	304									
2. Percentage of all attendees at ED who are in ED <24 hours	Target	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%
	Actual		96.0%	97.0%	96.0%									
3. Percentage of all attendees aged 75 years and over at ED who are discharged or admitted within 24 hrs of registration	Target	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%
	Actual		91.0%	92.0%	92.0%									
4. Number of beds subject to delayed transfers of care (reflects average monthly figure) <350	Target	<350	<350	<350	<350	<350	<350	<350	<350	<350	<350	<350	<350	<350
	Actual		371	375	412									

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Multiannual UEC plan 2024-2026 is launched, providing a medium term vision and roadmap for the incremental and sustained improvement of UEC Services	Apr-24	Delayed	Exp Del TBC. Plan is at penultimate draft stage. It was brought to the April meeting of the HSE P&P Committee for their information and observations. The launch of the multiannual plan will follow that of the UEC Operational Plan 2024
2. HSE UEC Operational Plan 2024 is launched, providing the full range of national, integrated and service led actions to deliver UEC improvements in year 1 of the 3 year UEC Plan	Mar-24	Delayed	Exp. Del May'24.The plan was brought to the April meeting of the HSE P&P committee for their information and observations. Final amendments are being made to the plan following its review at the UEC Ministerial meeting. Thereafter, the plan will be ready to be formally launched
3. An enablement function is established as part of the UEC Programme to provide support to Health Regions in the development of local service improvement trajectory plans	Jun-24	Not Started	Completion of this work is dependant on finalising the Governance structure for the UEC programme
4. Revised National and Health Region UEC clinical and operational governance structures and associated arrangements for UEC Programme and Older Adults pathway delivery, monitoring and reporting are in place strengthening delivery capability	May-24	Not Started	This is dependant on finalising the alignment of the centre to the regions as the part of the change process

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. Attendances in 2024 from Week 01 - Week 08 including >75yrs Attendances in 2024 are significantly higher than same period 2024	1. Key mitigating action to address these issues continues to be frequent operational oversight calls attended by senior leadership at national and local areas

Ambition statement 2024:The ECC will support Community Healthcare Networks (CHN) and Community Specialist Teams (CST) for Older People & Chronic Disease to reach maturity, integrating with the wider community services and enabled by continued delivery of community diagnostics, with an emphasis on productivity and output to maximise impact, in order to ensure a consistent end to end care pathway & improve patient outcomes across the wider health system.

Rating and Overview (4): Strong assurance that the 2024 ambition statement will be substanially achieved. The ECC Programme is progressing in line with the planned focus on consolidation of existing CHNs and CSTs, activity impact & outcomes in the context of productivity and by continuing planned investment in Digital & Capital infrastructure to enable teams to further embed the model.

4 — Change →

KPI	T/A	2024 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Therapies / Community Healthcare Network Services - Total number of patients seen	Target	1,597,487	133,128	266,256	399,384	532,512	665,640	798,768	931,896	1,065,024	1,198,152	1,331,280	1,464,408	1,597,487
	Actual		118,422	236,694	341,674									
2. Number of reviews carried out in General Practice in the Chronic Disease Management Treatment Programme, reducing requirement for hospital/ED attendance	Target	529,212	44,101	88,202	132,303	176,404	220,505	264,606	308,707	352,808	396,909	441,010	485,111	529,212
	Actual		47,489	99,097	150,793									
3. Number of patient contacts by Chronic Disease Community Specialist Teams (across Respiratory, Cardiology, Diabetes & Smoking Cessation)☐	Target	228,000	19,000	38,000	57,000	76,000	95,000	114,000	133,000	152,000	171,000	190,000	209,000	228,000
	Actual		20,602	48,911	74,898									
4. Number of patient contacts by Older Persons Community Specialist Teams	Target	141,000	11,750	23,500	35,250	47,000	58,750	70,500	82,250	94,000	105,750	117,500	129,250	141,000
	Actual		10,418	21,129	31,027									
5. Percentage of new patients seen by Older Persons Community Specialist Teams on the same day or next day of referral	Target	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%
	Actual		14.0%	9.0%	9.0%									
6. Percentage of patients with a frailty score of 6-9 (moderate to severe frailty) seen by Older Persons Community Specialist Teams	Target	55.0%	55.0%	55.0%	55.0%	55.0%	55.0%	55.0%	55.0%	55.0%	55.0%	55.0%	55.0%	55.0%
	Actual		39.0%	42.0%	41.0%									
7. Number of Community Diagnostics services (X-ray, CT, MRI, DEXA, Natriuretic Peptide Test, ECHO, Spirometry) delivered	Target	401,409	33,451	66,902	100,353	133,804	167,255	200,706	234,157	267,608	301,059	334,510	367,961	401,409
	Actual		47,215	94,381	145,893									

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Commence implementation and roll out of Interim ICT solution	Jun-24	On Track	Vendor identified, contract Approval process underway. Requirements, and Formal Design process has commenced in parallel
2. ECC Capital Infrastructure Programme Implementation aligned to Primary Care Centre Development	Dec-24	On Track	As of 31 March 2024, there are 72 ECC Capital proposals approved to progress. No change from the last update
3. Complete Healthlink rollout across CHNs and CSTs, supporting integrated, multidisciplinary ways of working	Jun-24	On Track	89 of the 96 CHNs are live on Healthlink. Engagement is ongoing with the remaining 7 CHNs to close out on rollout. For ICPOP 25/30 of the CSTs are live and for ICPCD 27/30 CSTS are live
4. Further embedding of full end-to-end pathway and integrated ways of working to maximise productivity and output	Dec-24	On Track	Monitoring, evaluation and learning process through ECC steering group and regional oversight groups to ensure affinity to the model and transfer of learning and best practice. Individual engagements with REOs and their teams have commenced following Induction meeting
5. Activity /Productivity analysis by CHO undertaken	Jun-24	On Track	Approach and scope of analysis considered through established governance process- ECC Steering Group, Feb meeting - work ongoing to refine approach, format etc

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1.Recruitment - backfilling of key leadership roles in order to maximise productivity and output of teams currently in place.	1. Backfilling has been paused in line with memo from CEO, local areas have been advised to seek derogation for all Key Leadership posts.
2. Capital Infrastructure - adequate space and accommodation for the delivery of services by multidisciplinary teams.	2. Continuing 2023 plan, monthly engagement with CHOs ensures timely reporting of proposals & flags risks in facilities for teams.
3. Implementation of the Interim ICT Solution.	3. Procurement Evaluation Group established. Vendor identified, contract Approval process underway.

4. Reform of Home Support and Residential Care for Older Persons

Ambition Statement 2024: We will continue to provide integrated models of home and community support, enabling increased access to care and supports in the community and egress from acute hospitals through the delivery of 22m hours of home support, to better support older people and their families to remain in their own homes and communities in line with their wishes. We will progress this through: i) progressing the implementation of the interRAI Care Needs Assessment ii) procuring an IT system to support the delivery of home support services, the Nursing Home Support Scheme and the impending Statutory Home Support Scheme and iii) establishment of the National Home Support Scheme office.

Rating and Overview (4): Strong assurance that the 2024 ambition statement will be substanially achieved.	**4**	Change →

KPI	T/A	2024 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Ensure by the end of the year that 60% of all new home support care needs assessment undertaken via InterRAI	Target	60.0%	0.0%	0.0%	0.0%	10.0%	20.0%	30.0%	40.0%	40.0%	45.0%	50.0%	55.0%	60.0%
	Actual		1.4%	3.3%	5.0%									
2. Number of Home Support Hours Delivered in 2024 - The profile of hours by month is being progressed and will be available shortly	Target	22.00m	1.84m	3.56m	5.41m	7.27m	9.11m	10.89m	12.91m	14.75m	16.53m	18.38m	20.16m	22.00m
	Actual		1.93m	3.83m	5.73m									
3. Number of people waiting for home support services following home support needs assessment undertaken by community staff*	Target	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
*No target has been set as Older People Services have received no funding to specifically address waiting lists for home support in 2024. The year end 2023 data as at 31 December was at 5,863 – 3,067 clients assessed & waiting on new service & 2,796 existing clients assessed and waiting on additional service.	Actual		5,530	5,557	5,671									
4. No. of people in receipt of Home Support (excluding provision from Intensive Home Care Packages(IHCPs))	Target	54,100	54,100	54,100	54,100	54,100	54,100	54,100	54,100	54,100	54,100	54,100	54,100	54,100
	Actual		56,339	56,784	57,163									
5. Cost of Home Support Hours delivered in 2024	Target	€692.61m	€58.66m	€113.54m	€172.20m	€228.97m	€287.63m	€344.40m	€403.66m	€461.72m	€518.49m	€577.15m	€633.92m	€692.61m
	Actual		€59.84m	€120.80m	€184.58m									

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Establish the National Home Support Scheme Office* *Orginal target date - Q1. Target amended due to significant construction delays	Q3-24	On Track	Construction work has commenced on Monday 11 March 2024 after significant delays and is due to complete in July 2024
2. Finalise specification and complete procurement for Home Support ICT System	Dec-24	On Track	Digital Government Oversight Unit approval received for Stage 1 procurement and documentation undergoing HSE legal review. Preparation for Stage 2 Procurement process progressed. Planning commenced for Data goverenance and migration. IR engagement on deployment of mobile devices for HCAs progresed

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1.Recruitment and retention of key grades across publicly funded home support services	1.Ongoing engagement with National Community Operations, HR and DoH to address recruitment and retention challenges across Home Support Services
2.Collaboration with union bodies and wider clinical teams across community settings	2.Ongoing support to National Community Operations in respect of engagements with union bodies
3.Buy in from service delivery system to implement interRAI across priority areas in the context of competing demands	3.Ongoing work of the Future Home Support Operating Model and interRAI implementation Workstreams and associated Working Groups, ensuring effective communication with service delivery areas.

5. Reform of Scheduled Care

Ambition Statement 2024: to progress a series of strategic reforms and tactical interventions to reduce the length of time patients are waiting for planned care, working towards the Sláintecare multi-year targets of 10 weeks (outpatients), 12 weeks (inpatient/daycases) and 10 days (diagnostics). Particular focus in 2024 will include the implementation of i) the prioritised modernised care pathways; ii) End to end solution for referral management iii) and integrated Specialty Review Groups; as well as progressing the implementation of Surgical Hubs.

Rating and Overview (4): Strong assurance that the 2024 ambition statement will be substanially achieved.

4   Change →

KPI	T/A	2024 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Percentage of patients waiting longer than 15 months for an outpatient appointment	Target	10.0%	13.2%	12.9%	12.1%	12.1%	11.9%	11.5%	11.3%	11.2%	11.1%	10.9%	10.4%	10.0%
	Actual		13.2%	13.0%	12.7%									
2. Percentage of patients waiting longer than 9 months for an inpatient or daycase procedure	Target	10.0%	22.6%	21.6%	20.5%	19.5%	18.4%	17.4%	16.4%	15.3%	14.3%	13.1%	11.4%	10.0%
	Actual		22.6%	23.0%	23.1%									
3. Percentage of patients waiting longer than 9 months for a GI Scope	Target	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%
	Actual		4.9%	4.7%	5.0%									
4. Deliver an increase in activity by 5% above the 2023 outturn for Outpatient, IPDC, GI scope activity by increasing core and additional activity* *Data dependant on production of Management Data Report	Target	5.0%	0.2%	0.5%	0.6%	0.9%	1.2%	1.7%	2.1%	2.7%	3.2%	3.8%	4.6%	5.0%
	Actual		0.7%	0.9%										
5. Number of service users removed from community waiting lists due to community initiatives	Target	4,836	407	814	1,231	1,658	2,025	2,442	2,889	3,336	3,753	4,150	4,527	4,836
	Actual		476	1,021	1,581									

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Centralised Referral (CR) & Patient Initiated Review (PIR): Progress the implementation of centralised referrals and PIR across all sites and all specialties where clinically appropriate.	Dec-24	On Track	Operational implementation toolkits updated and issued to all regions and hospital sites. Communication issued to REO regarding expected implementation for PIR & CR. Regional engagement and deployment underway. PIR implemented in 50% of sites. CR implemented in 51% of sites
2. Surgical Hubs: Fully operationalise the surgical hubs in South (DS) and North Dublin (DN) and progress remaining hubs on an expedited schedule for operationalisation on a phased basis throughout 2025	Dec-24	On Track	DS & DN construction on track; PNNs received & to be issued to Hospitals. Planning amendment submitted in Galway & detailed design work underway. Planning granted in Waterford. Cork & Limerick planning submitted, construction tender responses for Cork, Waterford & Limerick going for HSE approval
3. HSE Website Improvement: Build upon the foundations of the patient and service user resource that is being created on hse.ie, with a key focus on enhancing user experience. In 2024, focus areas will include publishing more granular data and average patient wait times.	Dec-24	On Track	Engagement has commenced with National Treatment Purchase Fund and Integrated Information Service on displaying public facing wait times for treatment in the HSE app. Roadmap and content strategy to publish performance data within the new HSE Regional and National site under development
4. Alignment on wait times: Engage with the National Treatment Purchase Fund (NTPF) to ensure whole of system focus on reducing waiting times as the key indicator for improving access to scheduled care	Dec-24	On Track	As a key stakeholder in the delivery of additional activity, the NTPF agreed activity of 163k commissioning (110k OPD, 35k IPDC & 18.5k GI) & 117.6k validation (103.3k OPD, 11.5k IPDC & 2.8k GI). Continued collaborative approach to achieve reduction in wait times and waiting list volumes
5. Modernised Care Pathways (MCPs): In 2024, Modernised Care Pathways are expected to deliver approximately 6,000 OPD wait list removals and total patient activity of 70,500 (21,000 new patient and 49,500 review patient activity). MCPs will support health system performance across a range of parameters, including: waiting list removals/avoidance; releasing/creating additional acute consultant capacity; and hospital /emergency department avoidance.	Dec-24	On Track	M3-2024: There are currently 30 operational pathways across 85 sites (+4 vs last month). These pathways have reported 4,047 new acute wait list removals and total patient activity of 29,997 (16,016 new patient activity, and 13,981 review patient activity)

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1.	1.

6. Reform of Mental Health

Ambition Statement 2024: Continue to implement the reform and improvement of Mental Health Services, through the implementation of the key strategies Sharing the Vision and Connecting for Life; with a significant focus on i) The publication and implementation of a Child and Youth Mental Health service action plan focussing on reducing waiting lists, improving access and meeting KPIs including urgent referrals; ii) Increasing availability of digital mental health supports; iii) Continued roll-out of Crisis Resolution Services and CAMHS Hubs; iv) Enhancement of MH Clinical Programme teams; v) Development of an enhanced model of Engagement in MH.

Rating and Overview (4): Strong assurance that the 2024 Ambition Statement will be substantially achieved.

4   Change →

KPI	T/A	2024 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. CAMHS - percentage of accepted referrals /re-referrals offered first appointment and seen within 12 weeks by CAMHS Community Teams* *Preliminary data was updated in April for Jan KPI data	Target	≥78.0%	≥78.0%	≥78.0%	≥78.0%	≥78.0%	≥78.0%	≥78.0%	≥78.0%	≥78.0%	≥78.0%	≥78.0%	≥78.0%	≥78.0%
	Actual		89.0%	88.8%	89.9%									
2. CAMHS - percentage of urgent referrals to CAMHS Community Teams responded to within three working days	Target	≥90.0%	≥90.0%	≥90.0%	≥90.0%	≥90.0%	≥90.0%	≥90.0%	≥90.0%	≥90.0%	≥90.0%	≥90.0%	≥90.0%	≥90.0%
	Actual		89.6%	98.1%	93.7%									
3. CAMHS - percentage of children admitted to CAMHS acute mental health units as a proportion of total admissions of children to acute mental health units)	Target	≥85.0%	≥85.0%	≥85.0%	≥85.0%	≥85.0%	≥85.0%	≥85.0%	≥85.0%	≥85.0%	≥85.0%	≥85.0%	≥85.0%	≥85.0%
	Actual		96.0%	100.0%	100.0%									
4. Adult services - percentage of accepted referrals /re-referrals offered first appointment and seen within 12 week by General Adult Community Mental Health Team	Target	≥75.0%	≥75.0%	≥75.0%	≥75.0%	≥75.0%	≥75.0%	≥75.0%	≥75.0%	≥75.0%	≥75.0%	≥75.0%	≥75.0%	≥75.0%
	Actual		67.6%	64.4%	67.7%									
5. Older Persons Services - percentage of accepted referrals /re-referrals offered first appointment and seen within 12 weeks by Psychiatry of Later Life Community Mental Health Team	Target	≥95.0%	≥95.0%	≥95.0%	≥95.0%	≥95.0%	≥95.0%	≥95.0%	≥95.0%	≥95.0%	≥95.0%	≥95.0%	≥95.0%	≥95.0%
	Actual		86.7%	89.9%	88.2%									

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1.Publish Child and Youth Mental Health Action Plan	Jul-24	On Track	Draft Child and Youth Mental Health Plan in final development and is on track for publication in July
2. Implement CAMHS Waiting List initiative with a target reduction of 35% (1500), and enhance CAMHS Teams with additional staff	Dec-24	On Track	Agreed target for 2024 is 1,250 additional cases to be seen across 6 CHO's (1,2,4,6,8,9). For Q1 2024, 357 cases have been seen against a target of 314 (+13.7%). 68 PNs approved end of April to enhance CAMHS teams
3. Develop new i) Model of Engagement in Mental Health, and ii) Framework for Recovery in line with Sharing the Vision and the Patient Engagement Framework	Dec-24	On Track	The Mental Health Engagement Framework: 2024 – 2028 was completed and launched in April 2024. The Framework for Recovery in Mental Health is completed and is scheduled to be launched in June 2024
4. Implement agreed models of care for (i) Older Persons and Dual Diagnosis across pilot sites, (ii) enhance CAMHS Eating Disorder team in CHO6 with additional staff in line with Model of Care (iii) enhance SASSY (Substance Abuse Service Specific to Youth) team in CHO9 in line with Model of Care	Dec-24	Delayed	(i) Pilot sites progressing, Recruitment challenges due to current embargo across pilot sites (ii) Additional 2.4 WTE posts approved in Budget 2024 and awaiting PN numbers to begin recruitment (iii) Additional 7 WTE posts approved in Budget 2024 and awaiting PN numbers to begin recruitment
5. Deliver Crisis Resolution Services (1xCrisis Team, 4xSolace cafe's) and CAMHS Hubs (3xCAMHs Hubs) across learning sites and complete interim evaluation report for both initiatives	Dec-24	Delayed	Recruitment pause affecting a) commencement of CAMHS Hub CHO 3, 4, & 8. b) commencement of Crisis Resolution Team in CHO 3 and filling of gaps on CRTs in CHO 1, 5 & 6. Plans progressing for Crisis Cafes in CHO 6, 3, 1 & 5. Evaluation plans for both initiatives underway
6. Deliver suicide prevention gatekeeper training to 5,000 people (online and face to face) and train 40 new trainers to deliver the programmes	Dec-24	On Track	Official Training Figures for Q1, 2024. SafeTALK 1660 participants, ASIST 727 participants, Understanding Self Harm 370 participants, Bereavement Training 133, Online Start Training 516
7. Commence a comprehensive evaluation of Connecting for Life-CfL (report due to be completed Q2-25)	Feb-24	On Track	A Project Initiation Document (in lieu of an evaluation plan) has been sent to NOSP (and the relevant oversight structures) for review, along with the necessary paperwork required for submission to a Research Ethics Committee for a low-risk study
8. Increasing availability of digital mental health supports: (i) implement a digital mental health action plan (ii) provide 8000 online guided CBT courses	Dec-24	On Track	(i) HSE Digital Mental Health Strategy 2025-2030 content overview has commenced, with oversight provided by Digital Mental Health Specialist Group . (ii) From January 1st to April 14th Online CBT has received 6,035 referrals and 2,675 activations- with an activation rate of 54%

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. Embargo on recruitment impacting progress across all MH developments.	1. Risks report completed and escalated.
2. Industrial action has impacted the return of KPI data	2. Industrial action resolved and work underway with CHOs to update MH data systems.

Ambition Statement 2024: Continue to implement the reform of disability services, ensuring that people with disabilities have significantly improved access to high quality, person-centred services that meet their individual needs, promote independence and inclusion, and reduce reliance on institutional care through: i) urgent implementation of actions outlined in the Roadmap for Progressing Children's Disability Services; ii) the implementation of key national strategies; iii) expansion of the neuro-rehabilitation project; iv) implementation of the 2024 actions from the 'Action Plan for Disability Services 2023-2026'; v) Roll out of a new national Autism assessment and pathways protocol; vi) Review all high cost residential placements across Disability and Mental Health services to ensure delivery of high quality person centred services at the most economical cost available in the short term; and adequate development of residential requirements in the long term.

Rating and Overview: (4): Strong assurance that the 2024 Ambition Statement will be substantially achieved, this will be dependent on recruitment of the necessary skills mix.

4　　Change →

KPI	T/A	2024 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Number of children on the active caseload of Children's Disability Network Teams	Target	51,000			47,000			48,250			49,500			51,000
	Actual				47,290									
2. Number of children waiting for an initial contact with Children's Disability Network Teams	Target	14,870			16,109			15,696			15,283			14,807
	Actual				16,297									
3. Number of residential places for people with a disability (including new planned places)* *End of Dec'23 figure: 8,400.	Target	8,431	8,369	8,379	8,388	8,395	8,402	8,408	8,414	8,418	8,422	8,425	8,428	8,431
	Actual		8,414	8,421	8,472									
4. Number of respite overnights accessed by people with a disability (Data collected quarterly one month in arrears)	Target	160,000			37,000			76,000			118,000			160,000
	Actual													
5. Number of U65s residing in nursing homes supported to move to community or remain in nursing home with supports as per their will and preference.	Target	38				2	6	10	14	20	26	30	34	38
	Actual													

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Progressing Children's Disability Services: (i) Improve the services to children and families through the implementation of the action plan set out in the Roadmap (ii) progress the completion 91 fully functional CDNT teams	Dec-24	On Track	Service Improvement Programme Board & 4 of 5 WGs have held their 3rd meetings. Project Charters to deliver on 60 Roadmap actions will be finalised in May meetings
2. (i) Establish Community Neuro-Rehabilitation Teams (CNRT) in CHO6 & CHO7 to complete the Managed Clinical Rehabilitation Network (MCRN) in these CHOs (July 2024); (ii) establish full CNRTs in CHO2 & CHO4 (July 2024) (ii) develop and establish a new CNRT in CHO9 (Dec 2024); (iii) Develop business plans with colleagues in RHAs for the future development of Managed Clinical Rehabilitation Networks in CHO2, CHO4 and CHO9.	Dec-24	On Track	Continuing to await agreement of Pay & Numbers Strategy between DECIDY and HSE in order to progress with recruitment of CNRTs in CHO 2, 4, 6 & 7
3. Monitoring System for New Directions: Complete the monitoring system to measure compliance with the 'Interim Standards for New Directions' to assist stakeholders to deliver services and supports in accordance with the vision and stated objectives outlined in the New Directions and the Value for Money reports	Jul-24	On Track	Outline of proposed approach has been drafted and consultation with stakeholders will commence in July 2024
4. Complete evaluation of the Autism Assessment and Pathway protocol demonstrator project and commence national roll out with Primary care, Disability and Mental health Services	Sep-24	On Track	Preparatory work is currently underway with CHO 9 to commence data collecting in the coming weeks; independent evaluation progressing
5. Deliver better value from expenditure on high cost residential placements across Disability and Mental Health services, to ensure that the HSE receives high quality person centred services at the most economical cost available.	Dec-24	On Track	National Placement Oversight & Review Team (NPORT) have completed 51 assessment reviews, a working group is been established to look at the procurement framework
6. Implement a decongregation plan in line with the Disability Action Plan targets; develop relevant business cases to secure the associated revenue and capital funding to meet the 2024-2025 targets for transitions from congregated settings.	Dec-24	On Track	Delays in some areas due to delayed finalisation of building works
7. Extract learning from the Sustainability Impact Assessment process (review of model of service, workforce, finance, org structure, estates and ICT) sharing learning towards the stability and sustainability of the disability sector	Dec-24	On Track	Sustainability insights and learnings are emerging from engagement and analysis of section 38 and 39 organisations & review against a significant part of the disability sector. Findings have been shared with HSE management, presentations delivered to a range of key stakeholders
8. Family Forums (FF) and Family Representative Groups (FRG): Establish the remaining 22 new Family Forums (total of 91) and 4 Family Representative Groups (total 9) to ensure Service User and Family participation in CDNT service development at national, regional and local levels	Jul-24	On Track	85 Family Forums and 6 Family Representative Groups are in place

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. The sourcing and retention of suitably qualified staff to deliver on new service developments in NSP 2024	1. Targeted recruitment process underway

Ambition Statement 2024: Enable individuals to take greater control over their physical, mental and sexual health, through supporting behavioural change, by delivering services and targeted interventions which provide people with the tools and support to make healthier choices throughout their lives, (particularly individuals and communities at greatest risk).

Rating and Overview (4): Strong assurances that 2024 ambition statement for 2024 will be substantially achieved, on the basis that 5/6 KPIs are on track and 2/2 deliverables are on track. To the extent that there are material issues or risks to delivery, there are effetive mitigations in place.

4   Change →

KPI	T/A	2024 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Percentage of smokers on cessation programmes who have quit at four weeks	Target	52.0%			52.0%			52.0%			52.0%			52.0%
	Actual				57.7%									
2. Number of frontline staff who completed the eLearning Making Every Contact Count brief intervention training	Target	5,935			2,017			3,501			4,985			5,935
	Actual				714									
3. Percentage of problem alcohol users (under 18 years) for whom treatment has commenced within one week following assessment	Target	100.0%			100.0%			100.0%			100.0%			100.0%
	Actual				50%									
4. Number of people in the Traveller community who received information on or participated in positive mental health initiatives	Target	3,735			933			1,866			2,799			3,735
	Actual				1,595									
5. Number of free home testing Sexually Transmitted Infections (STIs) kits dispatched	Target	120,000	10,000	20,000	30,000	40,000	50,000	60,000	70,000	80,000	90,000	100,000	110,000	120,000
	Actual		12,046	22,610	33,042									
6. Percentage of new individual service users admitted to Supported Temporary Accommodations (STA), Private Emergency Accommodations (PEA), and/or Temporary Emergency Accommodations (TEA) during the quarter whose health needs have been assessed within two weeks of admission	Target	86.0%			86.0%			86.0%			86.0%			86.0%
	Actual				89.5%									

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Complete and commence implementation of a Physical Activity (PA) Pathway to support referrals to physical activity programmes outside the HSE in partnership with Sports Ireland	Dec-24	On Track	30 Health Care Professionals completed training on Physical Activity & Behaviour Change. 6 Local Sports Partnerships commenced delivery of programmes for chronic disease cohorts. Continued work on tender for digital platform
2. Increase access to free Stop Smoking Medication	Dec-24	On Track	Working with E-Health/Office of CIO colleagues to scope and agree requirements for a technical solution for Nicotine Replacement Therapy (NRT) orders for inclusion in tender document. Various options for consideration and appraisal

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. Release of staff to complete MECC training remains an issue, which is impacting uptake.	1. eLearning certification has been modified in an attempt address issue. Training now takes a total of 3 hours (reduced from 4) covering 6 core modules with option of completing 2 additional modules.
2. Competing priorities in HBS procurement and E-health impacting on digital pathway tender timelines	2.

9. Enhancing Bed Capacity

Ambition statement 2024: To deliver additional bed capacity across the year as follows: i) provide an additional 22*critical care beds under NSP2024 to reach a total of 352 beds; ii) to deliver a total of 147 additional acute beds ; and iii) 23*beds will need to be delivered to reach target of 352 required by LoD and NSP24. Discussion required as to where this bed will be identified and WTEs provided.

Rating and Overview (4): Strong assurance that the 2024 Ambition Statement will be substantially achieved. Monthly bed capacity reporting has resumed with extensive liaising and validation with Acute & Community Services to demonstrate open capacity and any additional capacity each month.

4

Change →

KPI	T/A	2024 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Critical Care Beds **	Target	22*	1	1	1	1	1	9	9	9	12	12	18	22
	Actual		1	1	1									
2. Acute Bed additions**	Target	147	0	22	37	49	49	75	93	111	111	121	121	147
	Actual		0	56	56									
3. Community Bed (including rehabilitation beds) additions**	Target	16	0	0	4	0	0	8	0	0	12	0	0	16
	Actual		0	0	7									
4. No. of short stay beds in public units**	Target	1,683	1,612	1,615	1,625	1,630	1,637	1,642	1,650	1,657	1,664	1,670	1,677	1,683
	Actual		1,612	1,627	1,627									
5. No. of Nursing Home Support Scheme (NHSS) beds in public long-stay units**	Target	4,501	4,501	4,501	4,501	4,501	4,501	4,501	4,501	4,501	4,501	4,501	4,501	4,501
	Actual		4,796	4,914	4,922									

**Bed' reflects the total additional acute bed capacity that became operational during the year either as a result of construction or reconfiguration.

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Delivery of beds and WTEs as per profile	Dec-24	On Track	1 additional critical care bed opened as profiled in St James' Hospital on 8th January 2024. 56 additional beds opened in February 2024 (Mater 32 and Mallow 24). No further update.

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. Recruitment of Additional Staff	1. REO's are currently reviewing and prioritising key roles for recruitment
2. Capital Programme to meet anticipated/completion dates	2. Capital Programme continues to be monitored

10. Quality and Patient Safety

To note: the below indicators and deliverables do not represent a complete overview of patient safety across the system

EMT Lead: Chief Clinical Officer /Chief Operating Officer

Ambition Statement 2024: to continue to improve quality and patient safety, specifically to: i) reduce healthcare associated infections, ii) reduce surgical re-admissions; and iii) improve the timelines for carrying out hip fractures surgery. In addition, we will , iv) continue implementation of the Patient Safety Strategy; v) design a National Quality and Patient Safety Surveillance in maternity services; vi) design and deliver a National QPS Competency Framework.

Rating and Overview (3): Some concerns that the 2024 Ambition Statement will not be substantially achieved. Increased rating to a 3 from last month is based on the availability of data and the indications in the Rating Criteria.

3 Change ⬆

KPI	T/A	2024 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Rate of new cases of hospital acquired staphylococcus aureus bloodstream infection (SA BSI) per 10,000 bed days used	Target	<0.8	<0.8	<0.8	<0.8	<0.8	<0.8	<0.8	<0.8	<0.8	<0.8	<0.8	<0.8	<0.8
	Actual		0.9	0.9	0.9									
2. National Incident Management System: Percentage of reviews completed within 125 days of category one incidents from the date the service was notified of the incident	Target	70.0%	70.0%	70.0%	70.0%	70.0%	70.0%	70.0%	70.0%	70.0%	70.0%	70.0%	70.0%	70.0%
	Actual		44.0%	45.0%	46.0%									
3. Percentage of surgical re-admissions to the same hospital within 30 days of discharge (Data reported two months in arrears)	Target	≤2.0%	≤2.0%	≤2.0%	≤2.0%	≤2.0%	≤2.0%	≤2.0%	≤2.0%	≤2.0%	≤2.0%	≤2.0%	≤2.0%	≤2.0%
	Actual		1.7	1.4										
4. Percentage of hip fracture surgery carried out within 48 hours of initial assessment (Data reported one quarter in arrears)	Target	85.0%			85.0%			85.0%			85.0%			85.0%
	Actual				75.0%									
5. Rate of medication incidents as reported to National Incident Management System per 1,000 beds (aim to increase reporting) (Data reported three months in arrears)	Target	>3.0	>3.0	>3.0	>3.0	>3.0	>3.0	>3.0	>3.0	>3.0	>3.0	>3.0	>3.0	>3.0
	Actual		3.0											

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Commence Quality & Safety Surveillance System in Maternity services as proof of concept i.e. research on best practice and statistical methods, design a ICT system and establish clinical and data governance and a programme office* *See also Scorecard #19 Women's Health	Dec-24	Delayed	Exp Del TBC. The work on this project has progressed and now paused until confirmation of these resources is in place. This deliverable will be reviewed in the context of this scorecard for July.

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. Signals Programme MDT(x5) recruitment is on hold as a result of HSE pause on recruitment, meaning that the project as designed will not be delivered within the 2 year timeframe.	1. Agreement from QS Signals Project Leadership team and Pobal to proceed with rescoped deliverables and extension
2. Signals Programme ICT Consultancy Procurement process has been collapsed due to recruitment delays	2. Procurement documentation has been updated and is ready to reissue. Recruitment and Consultancy timelines aligned with an extended timeline.
3. Research programme requires adaptation given revised timelines and scope	3. Ethics application approved and adapted research programme progressing

Ambition statement 2024: to continue strengthening the culture of patient and service user partnership through direct involvement and leadership in planning and programme activities through: i) progressing the implementation of the Health Services Patient Engagement Roadmap through the development of training programmes; ii) strengthening implementation of QIPs arising from Your Service Your Say policy, the National Care Experience Surveys and direct engagement; and iii) building the capacity of staff to comply with the provisions of the Assisted Decision-Making (Capacity) Act, 2015.

Rating and Overview: (5) Strong assurance that the 2024 Ambition Statement will be achieved. This is progressing to target.

5   Change →

KPI	T/A	2024 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Implementation of the Better Together Road Map through the development and implementation of a comprehensive National Training Module that is co designed and co delivered across the HSE utilising a 'train the trainer' approach within each Health Region* *Following a data validation exercise Jan-Feb data has been updated	Target	6	0	0	0	0	0	0	0	0	1	4	6	6
	Actual		0	0	0									
2.Number of hospitals and CHO areas with ADM leads in place as committed to in Service Plan 2023 (max 38)	Target	38					13			26				38
	Actual													
3. Total number of staff that have completed Module 1: Guiding Principles on the e-learning programme on assisted decision-making	Target	26,000	15,000	16,000	17,000	18,000	19,000	20,000	21,000	22,000	23,000	24,000	25,000	26,000
	Actual		14,497	15,577	16,732									
4. Percentage of complaints to HSE investigated within 30 working days of being acknowledged by a Complaints Officer* *Data expected by end of May.	Target	75.0%			75.0%			75.0%			75.0%			75.0%
	Actual													
5. Percentage of complaints to HSE where an Action Plan identified as necessary is progressing	Target	75.0%					75.0%			75.0%			75.0%	
	Actual													

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Develop a working group to collate, assess, review and agree the learning pathway plan for partnership education and training	Apr-24	Complete	Completed Mar-24. Working group established and meetings have commenced
2. Develop a partnership education and training package for service users. Careers, public representatives, staff and managers	Jun-24	On Track	4 workshops have taken place this year to commence building the education and communication module. Work is progressing well
3. Develop feedback mechanisms and KPIs to aid with monitoring and evaluating the education and training sessions	Nov-24	On Track	As a key component of the development of the education plan we will be looking to develop the feedback mechanisms and KPIs
4. Support operational services capability to monitor and report on compliance with mandatory recording of Action Plans on the Complaints Management System (KPINo.5) through provision of training and generation of quarterly compliance reports as outlined in the Your Service Your Say policy	Dec-24	On Track	No data entry for KPIno. 2, no.4 or KPIno.5 for this months return as data is returned quarterly and will not be available until 23rd May for KPIno.4 and 5th July for KPIno.5

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. E-learning on ADM is not mandatory in the HSE	1. Work is continuing to establish grounds to make ADM and consent training mandatory in the HSE. E-learning promoted at all information sessions and on HSE website.
2. KPIno 1 requires an identified PSUE (Patient Service User Experience) lead in each Region to utilise a train the trainer approach. Not certain if this will be established to meet this timeframe.	2. The AND for PSUEs working with Change Management Team to design the regional structure for PSUE

12. Recruitment and Retention

Ambition Statement 2024: Ambition Statement 2024: To source, deliver and retain the required workforce size and mix (skills and grades) across the required geographic regions, within the affordable WTE limits as set out in the Pay and Numbers Strategy 2024.

Rating and Overview (3): Some concerns that the 2024 Ambition Statement will not be substantially achieved. This months rating remains at 3 on the basis of 50% of KPIs on target alongside 66% of deliverables on track. A key dependency in regard to the WTE limit KPI and two deliverables currently not on track is the finalisation of the Pay and Numbers Strategy currently dependent on government decision.	**3**	Change →

KPI	T/A	2024 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Average Time to Hire - From receipt of job order to date HR Shared Services issue contract	Target	19 wks	19 wks	19 wks	19 wks	19 wks	19 wks	19 wks	19 wks	19 wks	19 wks	19 wks	19 wks	19 wks
	Actual		16 wks	15 wks	14 wks									
2. Total Net WTE Limit * *Opening WTE Limit is provisional and in line with draft Pay and Numbers Strategy	Target	TBC	143,845	143,845	143,845	TBC	TBC	TBC	TBC	TBC	TBC	TBC	TBC	TBC
	Actual		146,429	146,945	148,293									
3. Annual Turnover Rate	Target	≤8.9%		≤2.2%			≤2.2%			≤2.4%			≤2.0%		
	Actual			1.7%											
4. Staff Absence Rate	Target	≤4.0%	≤4.0%	≤4.0%	≤4.0%	≤4.0%	≤4.0%	≤4.0%	≤4.0%	≤4.0%	≤4.0%	≤4.0%	≤4.0%	≤4.0%
	Actual		6.5%	5.5%	5.5%									

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Establish a Talent Attraction & Engagement Unit, delivering an attraction strategy specific to each grade category	Sep-24	On Track	TAE Unit with reduced resources commenced Q4 2023. Initial focus on Children's Disability Network Team Resourcing. Engagement with Universities with Secondary Schools ongoing
2. Establish affordable WTE Limits	Jan-24	Delayed	Exp Del dep on PNS. This deliverable is subject to the agreement on the Pay and Numbers Strategy currently under negotiation with the DoH
3. Commence employment monitoring and reporting against the affordable WTE limits	Feb-24	Delayed	Exp Del dep on PNS. The WTE limits database is built, but is subject to the finalisation of the Pay and Numbers Strategy currently under negotiation with the DoH
4. Commence the tendering process for a single talent acquisition solution (Applicant Tracking)	Sep-24	On Track	Deliverable on track progressing to plan with membership revised to reflect the 6 health regions and new organisational structure.
5. To revise the Governance and deliverables for the HSE Resourcing Strategy to support the development of the six HSE Health Regions with a targeted focus on Disability Services	Apr-24	Delayed	Exp. Del dep on recruit. Proposed new Governance Structures with enhanced focus on Disability Services are drafted and under consultation internally. New appointment to Disabilities for lead on workforce due to commence in May to lead with DCEDIY.
6. Establish Career Pathways material, per profession, in collaboration with the relevant National Discipline Leads, for hosting on the HSE Career Hub.	Dec-24	On Track	Technical infrastructure developed, Q2 engagement with disciplines specific content development in progress- Phase one go live in Q3- Nursing and Midwifery
7. Develop and build relationships with Domestic and UK universities through informative webinars, as part of a TAE Strategy	Dec-24	On Track	Ongoing engagement with Domestic and UK universities through webinars, with a focus on HSCPs. Good participation and engagement, with insightful feedback from students
8. Develop a framework for engagement with Secondary Schools, promoting careers in healthcare.	Sep-24	On Track	Content developed on opportunities in Healthcare, education and employment for secondary schools students and delivered initially through the provincial school summits.
9. Develop an appropriate Recruitment model that supports the implementation of the six HSE Health Regions	Sep-24	On Track	Commencement of Health Regions senior management required, to support and agree development of recruitment model

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. The transition to the new Health Regions may impact the deliverables of the Strategy and the development of an appropriate Recruitment Model to support same	1. Continual engagement with the REOs and CPOs once appointed to build relationships and ensuring that the focus of the Strategy continues to flex according to the changing landscape
2. Finalisation of the Pay and Numbers Strategy with Department of Health	2. Continued engagement with the DoH on the PNS finalisation and government decisions to inform same at CEO level.

13. Finance and Procurement

Ambition Statement 2024: To work with colleagues internally and externally to limit the level of supplementary financial support to the lowest level possible, particularly within the pay area. To provide improved reporting and decision support, including around maximising delivery on the productivity and savings agenda. To make progress on key strategic areas including IFMS, Cash Management, Procurement, Reporting, Control Environment and Activity Based Funding

Rating and Overview (3): Some concerns that the 2024 Ambition Statement will not be substantially achieved. These concerns relate primarily to the pay and numbers strategy related KPIs given the inability to finalise and implement same pending receipt of external approval via DOH". In general terms, consistent with previous years, it is too early to be more definitive about the year end position, noting for example the significant work to be done by Acute Hospitals across the 6 regions to achieve the targets set out in the non pay strategy.

3 Change →

KPI	T/A	2024 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Achievement of Savings Targets as per NSP2024 including:* a. €250m Agency "do without" savings b. €80m Agency /Overtime "conversion" savings c. €34m Consultancy savings €34m d. €12m Drugs and Medicines savings e. €13m Procurement Savings f. €Xm Other savings to be agreed as part of the work of the Taskforce on Savings and Productivity - Lead in time till end March assumed for savings 1, 2 and 4. *Jan-Mar data not available due to delays in the resumption of financial reporting following IA	Target	€376.00m	€3.90m	€7.80m	€11.70m	€44.10m	€76.50m	€108.90m	€141.30m	€173.70m	€206.10m	€238.50m	€270.90m	€303.30m
	Actual		TBC	TBC	TBC									
2. Pay Spend - operating within pay spend level agreed as part of the Pay and Numbers Strategy (PNS) 2024* *Targets and Jan-Mar data not available as PNS remains under discussion	Target	TBC	TBC	TBC	TBC	TBC	TBC	TBC	TBC	TBC	TBC	TBC	TBC	TBC
	Actual		TBC	TBC	TBC									
3. Procurement Spend Under Management: SUM - relates to non-pay spend- target for 2024 will be 85% of c. €4.9bn addressable spend (as per 3 year Corporate Plan, following delivery of 76% against target 75%).* *NB SUM will fall as existing contracts expire and will rise as HSE Procurement/OGP replace those contracts & establish contracts for additional areas of spend.	Target	85.0%			69.0%			84.0%			83.0%			85.0%
	Actual				65.0%									
4. Reduce potential 2025 first charge by minimum 25% below the 2024 first charge level.* *2025 first charge for 2025 will be est in Dec once final level 2024 supplementary financial support is known for 2024	Target	>/= 25.0%												>/= 25.0%
	Actual													

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. IFMS Rollout: a. Development and approval of revised Project Plan to accelerate roll out b. Delivery against key 2024 milestones in that plan	a. Q1-24 b. Q4-24	On Track	a. Accelerated implementation plan approved by Proj governance Feb 24 & HSE Board March 24 b. Resource gaps identified as most significant risk to delivery of key 2024 milestones in the accelerated imp plan & need to be addressed urgently to reverse slippage against plan to date & deliver on schedule.
2. IFMS Benefits realisation /Reporting: a. Deliver 5 day close and report across IG1 sites by May /June reporting cycle b. Commence Cash Reporting for IG1 Main Entities /Care Groups reporting to support DOH Vote view c. Utilise IFMS BPC Forecasting in IG1 Sites	a. Jun-24 b. Apr-24 c. Jun-24	Delayed	a. Re 5 day close, phased approach in operation IG1 close WD5 on track to date b. Delayed. Vote Reporting 1st draft spec produced for user review. Once reviewed will inform plan & agree with IFMS c. BPC Forecast Model will not be rolled out until September 2024, most likely on a Single RHA area on IFMS
3. Key Stakeholder Relationship Management (DOH Finance Unit/DPER Vote Team) a. Finalise agreement on revisions to Cash Management Approach b. Update Reporting Schedule to include reports and timelines for HSE data to be shared via DOH with DPER building on 2023 improvements (HSE to DOH schedule)	Mar-24	On Track	a. Cash Mgt Approach: documented & principles agreed with DoH b. Reporting Schedule agreed, awaiting final DoH/DPER timelines in order to finalise schedule
4. Procurement Compliance: a. Improve 2024 compliance assessment result by 5% beyond 2023 level b. Set out high level plan to leverage IFMS, initially in OG1 sites, to expand and streamline compliance process so that includes spend below €25k and reliance on self assessment is reduced.	a. 2.5% Q2 bal Q4 b. Jun-24	On Track	a. Contract plan in progress b. Development of plan scheduled for May
5. Rollout of the final work stream Internal Controls Programme WS4 Self Assessment, revamped plan by end Q1-24, one site to be in progress by Q4-24	Dec-24	On Track	WS4 revised plan drafted will require support to operationalise
6. ABF Benchmarking- Complete Annual Benchmarking Process for System review by 31 Oct 24 Actions: a. Hospitals to have 100% of 2023 admitted activity coded by 31 Mar 24 b. HPO to hold quarterly meetings with Hosp Grp CFO /RHA Fin rep c. Hosp Specialty Costing Returns to be submitted for review & audit by 31 May 24 d. HPO to host an annual ABF Conference on ABF issues by end Jun 24 e. ABF Final Benchmarking Model to be completed by 31 Oct 24	a. Mar-24 b. Q4-24 c. May-24 d. Oct-24 e. Oct-24	On Track	The coding coverage for the 2023 HIPE data at the end of March 2024 was 99.2%. This relates to ABF Hospitals and means there were 15k uncoded cases out of 1.78m discharges. The ABF Conference will take place in Limerick on 22 May, 2024 and to date 143 have registered to attend.
7. Invoice Processing - finalise achievement of steady state in terms of: a. Clear current Jul - Nov backlog b. Resource & operational plan for steady state in place c. Invoice volumes at steady state levels d. Resource levels to maintain steady state	a. Q1-24 b. Q1-24 c. Q2-24 d. Q4-24	On Track	(a) Clearing the Jul - Nov backlog not achieved by Q1 date (achieved 81% of target) (b) Resource & Operational plan in place - complete (c) Invoice volumes stabilised and on target for steady state (d) 1st target for external resource reduction on track - overall resource plan on track

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. The FORSA dispute impacted heavily on financial reporting and we now face challenges in the catch up as a result.	1. There is a significant focus on the Finance team to bring reporting up to date.

14. eHealth

Ambition Statement 2024: Enable transformation of patient care by i) approval of Digital Health Strategic Implementation Roadmap, ii) completing CMMI re-assessment of Cyber Security, iii) releasing the Health App to the general population iv) National Shared Care Record vendor selected, v) developing Target Operating Model for eHealth Centre & Regions, vi) delivery of two 25-bed Virtual Wards.

Rating and Overview (4): Strong assurance that the 2024 Ambition Statement will be substantially achieved. Strong progress on plan: delivery of 93% of capital programmes on target; Digital Health Strategic Implementation Roadmap completed and approved internally but awaiting DoH Framework publication, Cyber security CMMI maturity re-assessment procurement completed; Mobile Health App on track for Beta 1 release in May; National Shared Care Record procurement progressing on track; Target Operating Model procurement on hold; procurement for delivery of 2 Virtual Wards on track.

4 Change →

KPI	T/A	2024 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. eHealth ICT Capital expenditure vs 2023 profile-YTD	Target	€155.0m	€7.0m	€16.0m	€20.0m	€25.0m	€30.0m	€37.0m	€48.0m	€60.0m	€78.0m	€98.0m	€120.0m	€155.0m
	Actual		€8.0m	€11.5m	€17.3m									
2. Delivery of 90% of capital programmes on track by EOY (RAG status Green or Amber)	Target	90.0%	75.0%	75.0%	75.0%	80.0%	80.0%	80.0%	85.0%	85.0%	85.0%	90.0%	90.0%	90.0%
	Actual		91.7%	95.2%	92.8%									
3. Number of NCSC red audit issues for Cyber that are greater than a month past the due date	Target	0	0	0	0	0	0	0	0	0	0	0	0	0
	Actual		0	0	0									
4. Percent of total addressable HSE users onboarded to secure cloud identity (HealthIRL)-YTD	Target	100.0%	79.7%	81.5%	83.4%	85.2%	87.1%	88.9%	90.8%	92.6%	94.5%	96.3%	98.1%	100.0%
	Actual		79.9%	84.2%	87.6%									
5. Percent of total addressable staff onboarded to Office 365 and Microsoft Exchange Online-YTD	Target	100.0%	73.1%	74.7%	77.2%	79.7%	82.3%	84.8%	87.3%	89.9%	92.4%	94.9%	97.5%	100.0%
	Actual		73.2%	78.3%	83.3%									

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Board approval of Digital Health Strategic Implementation Roadmap	Apr-24	Delayed	Exp. Del Jun'24 DoH framework and HSE Roadmap documents full aligned Both documents are at final approval steps - ie Ministerial and HSE Board DoH framework not yet released
2. CMMI maturity re-assessment completed for Cyber Security	Jul-24	On Track	Procurement of the CMMI maturity reassessment has completed. Competition winner selected & reassessment to commence mid-May
3. Mobile Health App released to the general public	Dec-24	On Track	Beta 1 go-live delayed to May. Beta 2 and 3 removed from project plan - replaced by 2 weekly sprints. Q4 Public Release target scope agreed and aligned with available data
4. National Shared Care Record preferred vendor selected	Dec-24	On Track	Invitation to Submit Final NCSR Tender (ISFT) Invitation to Participate in dialogue (ITPD) Tenderer Dialogues commenced Resource constraints are concerning, as the same resources are being utilised by the App team
5. New Target Operating Model developed and approved for eHealth Centre and Regions	Jul-24	Delayed	Exp. Del TBC eHealth SMT considered proposals and decided project should be done by competitive framework Decision to proceed with procurement on hold
6. Delivery of two 25-bed Virtual Wards	Dec-24	On Track	ITT published, vendor closing in May National PMO formed 3 subgroups for Technology, Workforce, Clinical Pathways National PAS design & local test config under way Technical inventory for Telehealth hubs in development

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. Programme deliverables are coming under considerable pressure due to unavailability of clinical resources (a result of delays in release of 2024 workforce plan and numbers)	1. Delayed programmes are being re-planned and re-baselined to extend extend their timelines

Ambition Statement 2024: To fully deliver the 2024 Capital Plan, including, i) acute bed capacity, inclusive of critical care beds; ii) community bed capacity; iii) Government priority projects, inclusive of surgical hubs; iv) investment to support patient safety and mitigate clinical and infrastructural risk.

Rating and Overview: (4) Strong assurance that the 2024 Ambition Statement will be substantially achieved. Overall capital expenditure is within profiled tolerance levels, having improved significantly on the end of February position. However, verification of capital expenditure for the period remains challenged as a result of ongoing issues with reporting from the IFMS. Engagement and dialogue with Finance colleagues is ongoing in this regard. KPI targets on community beds are significantly behind expectations. This is due largely to phasing of work and regulatory requirements at one site (56 beds in total). Assessment however, is that while delayed, these will be delivered in 2024. All deliverables remain in progress. Resourcing capacity within Capital and Estates and the wider construction sector remains a significant limitation to supporting the delivery of the Capital Plan and the achievement of the 2024 Ambition Statement.

4   Change →

KPI	T/A	2024 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Capital spend (Jan-Mar are provisional KPI figures. Not yet validated due to ongoing exercise with IFMS colleagues)	Target	€1,159.30m	€22.68m	€62.82m	€116.75m	€197.19m	€273.40m	€334.07m	€426.72m	€510.44m	€589.08m	€698.43m	€907.27m	€1,159.30m
	Actual		€10.83m	€45.59m	€106.10m									
2. Primary care centres completed	Target	5			1			4			4			5
	Actual				1									
3. Acute bed capacity, including critical care beds completed*	Target	143			0			65			65			143
	Actual				0									
4. Community bed capacity completed*	Target	413			118			118			333			413
	Actual				62									

*'Bed' reflects the total number of new and replacement beds constructed during the year. It does not align with the number of additional beds that become operational during the year

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Deliver the National Equipment Replacement Programme in accordance with the revised and approved Equipment Replacement Report 2024-2028	Dec-24	On Track	Expenditure on the National Equipment Replacement Programme remains reasonably on track against profiled expenditure to end of Q1 2024 - €4.79m
2. Undertake procurement and put in place appropriate governance and resources to progress the National Maternity Hospital project.	Dec-24	On Track	Enabling works contracts in progress. Main works tender package issued to market (pre-qualified tier 1 main works). Tenders to issue end May to pre-qualified specialists (Mechanical and Electrical) Stakeholder engagement around the governance of the project continues
3. Continue construction on two surgical hubs in Dublin. Commence construction on surgical hub in Galway. Continue design for all other hubs.	Dec-24	On Track	Tenders for Surgical Hubs in Limerick, Cork and Waterford design and build contracts, now returned and under review. Planning process continuing with local authorities. Hubs in North Dublin and Galway are approved and await contract award. Work on the Surgical Hub in South Dublin continues
4. Deliver the 2024 Minor Capital Programme	Dec-24	On Track	Programme continues

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. Due to the number of projects on the Capital Plan, resourcing to manage delivery is challenging, this is as a result of lack of skilled staff to oversee project scoping, design and delivery.	1. Progress advances on recruitment of the 60 posts approved in NSP 2024. Panels formed for some posts and approval awaited on appointment from these. Interview processes in progress for other posts.
2. Construction market buoyancy nationally is impacting capacity of construction and design sector to support projects. In particular healthcare projects remain unattractive due to complexity.	2. Progress continues on the establishment of new design team framework, following direct engagement with professional bodies. Construction sector engagement continues.
3. Issues with the continuing deployment of the IFMS is challenging the ability to validate Capital Plan spend.	3. Engagement continuing with HSE Finance to validate financial reporting, enable accurate tracking of capital spend, and provide assurance relating to management and delivery of the Capital Plan.
4. Recognised global challenges including construction inflation, restricted availability and/or delays with material, and labour shortages continue to be factors inhibiting project progress.	4. Engagement continues with the construction sector in order to support project delivery.

Ambition Statement 2024: Ensure effective communications from health service teams across the HSE and Health Regions that builds understanding of our services and earns public confidence in the HSE. This will be led by HSE Communications through media relations, public affairs, staff communications, partner engagement, public campaigns and a particular focus on high-quality digital and contact care services.

Rating and Overview (4): Strong assurance that the 2024 Ambition Statement will be substantially achieved. A range of important communications programmes went live in March 2024, including a series of positive news stories from the HSE. These covered topics like new-born hearing screening, enhanced community care services for people with renal disease, health gain from 20 years of the smoking ban and more. The HSE's new Sepsis education campaign went live, with support from patient and family advocates, and was covered widely in national media; this campaign is live on radio, social and digital channels.	4	Change →

KPI	T/A	2024 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Support public understanding of HSE work via proactive news generation: national projects receiving coverage per month	Target	88	5	11	17	23	33	41	49	54	60	70	79	88
	Actual		13	19	31									
2. Increase public, partner and patient access to quality health information through visits to HSE.ie sites, social media engagements, direct messaging and contacts to HSElive	Target	71.67m	7.52m	11.84m	18.37m	23.39m	29.02m	35.14m	40.26m	45.78m	51.3m	58.93m	66.05m	71.67m
	Actual		9.32m	17.76m	25.30m									
3. Improve engagement between HSE and our staff through internal comms channels: interactions with internal comms channels	Target	3.63m	0.24m	0.46m	0.76m	1.05m	1.33m	1.63m	1.90m	2.21m	2.54m	2.94m	3.32m	3.63m
	Actual		0.44m	0.80m	1.13m									
4. Improve health behaviour and knowledge and uptake of services through HSE campaigns: impacts of QUIT, vaccine, screening and other campaigns	Target	3.55m	0.24m	0.48m	0.71m	0.98m	1.35m	1.47m	1.51m	1.56m	1.65m	2.8m	3.34m	3.55m
	Actual		0.19m	0.31m	0.44m									

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Support the development of a new Health App to give people easier access to their health info and services	Dec-24	On Track	Work on the health app continues among teams across communications, ehealth and services. The next significant milestone will involve testing of the app with patients, in the first place, this will be done with maternity patients based in Cork University Maternity Hospital
2. Work with regional leaders to design high quality and effective Health Region Communications teams and services, including recruitment and transition of staff	Dec-24	On Track	Communications issued widely in March 2024 to welcome the appointment of the new Regional Executive Officers in HSE health regions. Staff updates on health regions were stepped up in March, moving to bi-weekly updates for all staff, and a special feature in Health Matters
3. Co-create, publish and implement a patient focused visual identity policy for the HSE and Health Regions	Sep-24	On Track	Our visual identity project is progressing well, and in March supported the REOs as they took up their roles. The timeline for rollout of the full HSE Visual Identity is aligned with operational changes, and will be due to be widely initiated in September. Planning is ongoing to support this
4. Develop HSE and Health Regions communications operating model, with central infrastructure, agreed standards, training, and regional communications programmes, content and activity	Sep-24	On Track	Work ongoing, as is the case in all teams, to review functions and services in national and regional teams, and a model for the regional communications and public affairs team was in the final stages of design in March

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. Communications continues to engage with eHealth and wider HSE on funding for HSE.ie, HSElive and HSE app communications services.	1.

Ambition Statement 2024: HSE Health Regions (x6) will be established on a phased basis from 1st March 2024 and will be accountable for both the delivery and planning of services for their geographical region supported by a strong lean reconfigured HSE Centre

Rating and Overview: (4) Strong assurance that the 2024 Ambition Statement will be substantially achieved.

| | **4** | Change → |

KPI	T/A	2024 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
	Target													
	Actual													

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Six Health Regions will be stood up - each led by a Regional Executive Officer (REO), who will be accountable for the planning and delivery of services and associated resources in their Region, initially supported by Hospital Groups and CHOs and their respective leadership teams.	Mar-24	Complete	Completed-Mar'24. Six Health Regions were stood up on 1st March with REOs appointed. Five of the six REOs have taken up post with the final REO to commence in post from mid-April. There will be a transition period from 1st March to 30th September. Induction of REOs took place wk of 4th March
2. The Health Region Executive Management Team (EMT) and Integrated Healthcare Area (IHA) Management Team Structures will be agreed.	Feb-24	Complete	Completed - Apr'24. The Health Region Executive Management Team (EMT) and Integrated Healthcare Area (IHA) Management Team Structures options have been presented to the Health Regions Steering Group and have been agreed
3. HSE Centre Senior Leadership Team (SLT) roles will be appointed within the reconfigured HSE Centre that will be focused on supporting Health Regions in planning, enabling, performance and assurance.	Mar-24	Delayed	Exp. Del. Q2'24. Two posts remain to be filled by competition (1) ND for Access and Integration (2) ND for Major Capital Infrastructure. Both posts advertised
4. Approach to Patient and Service User Partnership within Health Regions agreed.	Feb-24	Complete	Completed-Jan'24. Proposal setting out the approach to Patient/Service User Partnership has been approved by governance fora and will form the basis for the future engagement of patients/service users. Next steps will include detailed design via National Patient Experience Team
5. Regional population health needs profile completed for each Health Region to support Population Based Resource Allocation (PBRA).	Mar-24	Complete	Completed-Feb'24. Population Profiles have been completed for each Region. This is key to support Health Regions, HSE Centre and the DoH in their respective roles in planning, delivering, improving and overseeing services. PBRA stood up in March and continues to meet monthly
6. Detailed design of the Integrated Healthcare Area (IHA) Management Team structure and functions completed.	Aug-24	On Track	Detailed design of the IHA Management Team structures and functions, and the ISD model for Health Regions has commenced and will continue over the coming months with key stakeholders to agree the sub-structure of the IHAs
7. Health Region Change Management supports agreed and in place.	Jun-24	On Track	On-going engagement with key stakeholders including HR, DoH, REOs and staff representative organisations in progressing change management supports including job specs and recruitment pathway
8. Health Region Executive Management Team (EMT) appointments will be in place.	Sep-24	On Track	Consultation with REOs on job specs for EMT roles being progressed. Current prioritisation of Health Region IHA Manager posts followed by Health Regions EMT Regional Directors of (1) People (2) Finance (3) Planning & Performance
9. Rollout of a new Integrated Service Delivery (ISD) model commenced with the appointment of Integrated Health Area (IHA) Leads within each Region.	Sep-24	On Track	There will be 20 IHAs as geographic subcomponents of the Health Regions. IHA Manager posts to be advertised in late May
10. Responsibility and accountability transferred from the CHO and Hospital Group Senior Management Teams to the new Health Region Executive Management Team.	Dec-24	On Track	Transition planning on-going with transition activities being progressed and monitored to include due diligence process

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. Effective management of HR processes including IR and ER issues throughout the transition period (March to September 2024).	1.A programme of work is underway with Nat HR to progress workforce considerations in the transition. Partnership working with Nat HR, DoH and staff representative bodies continuing .
2. Need to continue to engage and inform all stakeholder groups particularly throughout the transition period.	2. Stakeholder engagement plan in place aligned to programme deliverables. Development of webinar series ongoing, communications with Voluntary, patients and service users and professional bodies.
3. Scale of change within the Health Regions programme and deliverables to ensure safe transition to Health Regions.	3. Change management support crucial. Establishment of Change & Innovation Hubs ongoing. Engagement with HR and Forsa re regularisation of PMO & additional change management posts .
4. Need to ensure alignment with other key policies and developments.	4. On-going engagement across services to ensure alignment with key policy areas.

18. Climate Action

Ambition Statement 2024: To take forward the implementation of the HSE Climate Strategy 2023 to 2050 to include i) developing frameworks for the implementation across six priority areas and ten interconnected strategic objectives ii) developing and providing a Climate Action Roadmap iii) continue the implementation of the Infrastructure Decarbonisation Roadmap.

Rating and Overview: (4) Strong assurance that the 2024 Ambition Statement will be substantially achieved. All KPI's are on, or exceeding target for Q1. Capital and Estates deliverables are all in progress. Some concern on the ability to deliver on the Climate Action Strategy objectives due to resource constraints. EOI process underway to recruit x2 project managers and x1 admin support.

4 — Change →

KPI	T/A	2024 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Programme spend for supported energy shallow retrofit capital works	Target	€30.00m			€0.90m			€3.60m			€5.40m			€30.00m
	Actual				€1.90m									
2. Programme spend for large-scale, deep energy retrofit pathfinder projects in Capital Plan 2024 (design phase)	Target	€10.00m			€0.30m			€1.20m			€1.80m			€10.00m
	Actual				€0.35m									
3. Number of utility meters installed at identified locations, to enhance metering of HSE data	Target	450			46			122			350			450
	Actual				46									
4. Number of Energy Teams established nationally	Target	160			145			150			155			160
	Actual				148									

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Undertake implementation of the HSE Climate Action Strategy through ten work programmes delivering on a). Development of frameworks and associated implementation and measurement plans. b) Ongoing development and delivery of internal staff communication campaign and training programme. c) A funding proposal for resources required over the medium term.	Q2-24	On Track	First draft of frameworks in development. Communication activities ongoing. 'Sustainability 101' for 1,000 participants advertised and open for registration in March. Kick off webinar in May. Short to medium term resource plan and funding proposal in development in liaison with DoH Climate office
2. Undertake implementation of ISO 50001 (Energy Management System), to enable continued improvement in energy efficiency and reductions in environmental impact	Dec-24	On Track	Independent audit of requirements undertaken and report completed. Action plan drawn up to address findings. A Certification Audit is planned for Q3, 2024 with work commencing on this currently
3. Gather, compile and verify data on water consumption for significant users as part of a water conservation training programme.	Dec-24	On Track	The data verification process is continuing. The percentage of 'significant user' water consumption which has been verified has increased to 50% (previous report - 30%)
4. Implement 2024 Actions on the HSE Infrastructure Decarbonisation Roadmap	Dec-24	On Track	The process of reviewing and completing the Infrastructure Decarbonisation Roadmap is significantly advanced. Incorporated updates will be presented to the SLT for approval

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1. Recognised challenges associated with demand for energy and sustainability initiatives nationally, and the HSE recruitment pause is impacting ability to recruit specialist technical expertise.	1. Engagement with market sources is continuing. Advancement to panel formation continues, in preparation for lifting of recruitment embargo.
2. Need for dedicated resources to deliver on Climate Action Strategy both in central PMO and Regionally	2. Two staff have been recruited through EOI and a third is being sought. A bid for central team and regional sustainability leads will be in for 2025 service plan
3. Integrated working with External parties crucial	3. Regular meetings held with external stakeholders. 22 organisations signed up to Climate and Health Alliance Charter

19. Women's Health

Ambition Statement 2024: to focus during the year on, i) the expansion of ambulatory gynaecology and endometriosis services; and ii) the introduction of publicly funded Assisted Human Reproduction Services. In addition, there will on ongoing focus on iii) the implementation of the National Maternity Strategy; iv) access to rapid access breast clinics and sexual assault treatment units; and v) implementation on Choose Screening; National Screening Strategic Plan 2023-2027

Rating and Overview (4): Strong assurance that the 2024 Ambition Statement will be substantially achieved. Increased rating to a 4 from last month is based on the availability of data and the indications in the Rating Criteria.

4   Change ⬆

KPI	T/A	2024 Annual Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1. Number of new patients seen at ambulatory gynaecology clinics* *Feb KPI data amended in May due to outstanding data returns from clincs. March KPI data is subject to change pending data validation.	Target	18,000	1,500	3,000	4,500	6,000	7,500	9,000	10,500	12,000	13,500	15,000	16,500	18,000
	Actual		1,523	3,011	4,303									
2. Number of new patients seen per month at regional infertility hubs * *KPI is cumulative. Feb KPI data amended from 183 to 299 in May to reflect cumulative figure.	Target	3,000	250	500	750	1,000	1,250	1,500	1,750	2,000	2,250	2,500	2,750	3,000
	Actual		116	299	792									
3. Number of supra-regional gynae-oncology MDTs to be established and operational	Target	4			2			2			3			4
	Actual				2									
4. Percentage of patients (>14 years) seen by a forensic clinical examiner within 3 hours of a request to a Sexual Assault Treatment Unit for a forensic clinical examination	Target	90.0%			90.0%			90.0%			90.0%			90.0%
	Actual				95.0%									
5. Percentage Breast Check screening uptake rate* *Data under going validation and due to be provided in July	Target	70.0%			70.0%			70.0%			70.0%			70.0%
	Actual													

Deliverables supporting delivery of ambition	Target Completion Date	Status	Monthly Progress Update
1. Elimination of cervical cancer - A national consultation to develop an action plan will launch in Q1 2024 with plans to publish the action plan.	Nov-24	On Track	Work continues on the cervical cancer elimination action plan. Over 3,700 responses have been received from the consultation survey (88% from the public & 12% from professionals) A first draft of the action plan is expected at the end of Q2
2. Breast Check increase of availability- the Breastcheck programme aims to increase the availability of screening closer to home by opening two new satellite screening units.	Dec-24	On Track	National Screening Service (NSS) are sourcing additional locations that would be suitable for satellite units
3. Complete implementation of Models of Care for ambulatory gynaecology and endometriosis* *Orginial Target date - Feb'24. Target amended as incorrect completion date submitted at blueprint development stage.	Q2-24	On Track	Site visits continuing 12 of 16 completed with the remaining 4 scheduled. NWIHP Ambulatory Gynaecology report 2018-2023 completed & provided to HSE CCO & DoH. National Endometriosis Framework finalised - anticipated to publish in Q2 2024 along with quick reference guide for GPs
4. Commence phase two of Model of Care for Infertility to include: (i) engaging with the DoH to operationalise the provision of publicly funded, privately provided in vitro fertilisation (IVF), and (ii) complete operational readiness programme to enable commencement of publicly funded, publicly provided IVF* *See also Scorecard #10QPS	Q2-24	On Track	Publicly Funded, Publicly Provided IVF- competitive tender process ongoing for facility design and fit out components of the facility in Cork
5. Design and implement three women's health hubs as proofs of concept ie. formal evaluation incorporating the patient experience, staff experience and quantitative data on referral pathways	Q4-24	On Track	Ongoing engagement with Cork & Galway with plans to visit potential third locations in the South East

Key issues impacting delivery of ambition	Mitigating actions to address key issues
1.	1.

Overview: There are 10 'Open' risks on the Corporate Risk Register [CRR]. The residual risk ratings of the risks, per the Q1 2024 CRR report, are 3 **Red** and 7 **Amber.**

Corporate Risk RAG Summary 'Open'

RAG	January 2024	Q1 2024
High	3	3
Medium	7	7
Low	0	0

Corporate Risk Register [CRR] Update

1	**HSE Principal Risks March 2024**	The CRR is produced and reviewed on a quarterly basis as aligned to our organisational reporting cycles. The Q1 CRR was tabled for EMT review and approval on the **7th May 2024.**
2	**Risk Programme Priorities**	**Risk Information System [RIS]** System developments required to align with the ERM Policy and Procedures 2023 were completed in March, including the new format CRR 'risk on a page' report. Roll out to EMT business areas [supported by Risk Management Leads] will commence with a view to completion by end of Q2, 2024. The insights gained from EMT business areas rollout will inform the development of wider roll out plan and training materials.
3	**Board Committee Workshop**	A risk management meeting with the Board Committee Chairs took place on the 8th April 2024. Feedback from the meeting and engagements with senior managers and relevant Subject Matter Experts was considered as part of the Q1 CRR review.

Appendix 1. Risk Management - Open Risks

Risk ID	Open Risk Description	Residual		Movement
		Jan 2024	Q1 2024	
R001	**Delivery of Care:** A sudden and exceptional level of demand for emergency care services.	12	12	↔
R002	**Standards of Safety and Care:** A gross failure in standards of care, safety to patients, service users or staff	10	10	↔
R003	**Disruptive Events:** A major disruption to critical healthcare and/or social care services. [excluding emerging disease with epidemic potential and cyber-attack]	9	9	↔
R004	**Health Care Acquired Infections and Anti-microbial Resistance:** A significant and sustained increase in the rate of Health Care Acquired Infections [HCAIs] and Anti-Microbial Resistance [AMR] across HSE healthcare and social care settings.	15	20	↑
R005	**Financial Management:** The HSE's financial allocation will be insufficient to deliver the activity levels set out in the National Service Plan	8	8	↔
R006	**Major Infrastructure:** A failure to deliver critical infrastructure projects	16	16	↔
R007	**Cyber Security:** A major service impacting cyber-attack	16	16	↔
R008	**Health Regions:** Implementation of the HSE's health regions and Centre reforms will be delayed and benefits not realised.	9	9	↔
R009	**Compliance:** A major failure to meet a significant statutory or regulatory obligation	12	12	↔
R010	**Data Protection:** The major loss, theft, illegal or unauthorised use of service user, employee and partner personal data [paper-based and digital]	12	12	↔

Watched Risks

Risk ID and Title	Watched Risk Description
W001 **Delivery of Care**	Significant and sustained increases in the length of time patients and service users are waiting to receive health and social care services
W002 **COVID 19**	The severity and transmissibility of respiratory illness will significantly increase
W003 **New pandemic**	The emergence of a new pandemic or large-scale outbreak of high consequence infectious disease from a new or existing pathogen
W004 **Healthcare workforce**	Critical permanent long-term workforce shortages
W005 **Health & wellbeing of the workforce**	The health and wellbeing of our workforce will progressively deteriorate
W006 **Climate change**	Acceleration in the rate of climate change
W007 **Population screening**	Population-based screening programmes will become unviable

Appendix B. BSS Alignment with 2024 DOH Letter of Determination (LoD)

The following provides an overview of the BSS scorecard alignment with the 2024 DOH Letter of Determination. The BSS reference describes the scorecard number that aligns to the LoD specification.

LoD Section	Sub-section	LoD description	BSS #	Referenced in BSS 2024
I. Waiting Lists		i. Waiting List Action Plan ii. National Treatment Purchase Fund iii. Community waiting lists iv. Integrated pathways for patients v. 6 new surgical hubs vi. Mental Health	2 3 5 6 7 9 11 15 19	Unscheduled Care Reform of Primary Care, Community & ECC Reform of Scheduled Care Reform of Mental Health Reform of Disability Services Enhancing Bed Capacity Patient and Service User Partnership Capital Infrastructure Women's Health
II. Urgent & Emergency Care		i. UEC Operational Plan 2024	2 9	Unscheduled Care Enhancing Bed Capacity
III. Productivity		i. Higher productivity through investment and reforms	All	All
IV. Infrastructure		i. Increasing numbers of acute, community and ICU beds ii. 6 new surgical hubs	9 15	Enhancing Bed Capacity Capital Infrastructure
V. Reform	Medicines Sustainability			
	Financial controls and savings	i. Identifying and delivering savings ii. Strengthening financial control environment	7 13 15	Reform of Disability Services Finance & Procurement Capital Infrastructure
	Enhanced Community Care	i. Increasing activity and maximising productivity ii. Interim ICT solution iii. Programme impacts in terms of service delivery, client/patient outcomes and on the wider health service	1 2 3 4 6 9 10 15	Public Health Unscheduled Care (Emergency Department Performance) Reform of Primary Care, Community & ECC Reform of Home Support and Residential Care for Older Persons Reform of Mental Health Enhanced Bed Capacity Quality and Patient Safety Capital Infrastructure

Appendix B: BSS Alignment with 2024 DOH Letter of Determination (LoD)

The following provides an overview of the BSS scorecard alignment with the 2024 DOH Letter of Determination. The BSS reference describes the scorecard number that aligns to the LoD specification.

LoD Section	Sub-section	LoD description	BSS #	Referenced in BSS 2024
	Older Persons Services	i. Increased provision of home support service ii. Increased provision of transitional care beds iii. Enhance provision of community-based care iv. Ensure long-term residential care accessibility and affordability through Nursing Home Support Scheme	4 6 7 9	Reform of Home Support and Residential Care for Older Persons Reform of Mental Health Reform of Disability Services Enhancing Bed Capacity
	Health and Wellbeing	i. Support of local authorities under Healthy Ireland	8	Prevention and Early Intervention
	Health Regions	i. Implementation of Health Regions	16 17	Communications Planning & Implementation of Health Regions
VI. Workforce		i. Continued increase in the number of Consultant Hospital Doctors ii. Increased numbers of NCHD postgraduate training places iii. Expansion of student nurse and medical education and GP places iv. Expansion of the numbers of Health and Social Care Professionals v. Complete implementation of the Safe Nurse Staffing Framework (phase 1 & 2) vi. Recruitment of 160 ANMPs vii. Additional resources for increased infrastructure and digital deliverability capacity viii. Strong controls over total pay bill including agency and overtime costs	12	Recruitment & Retention

Appendix C: BSS Alignment with 2024 DCEDIY Letter of Determination (LoD)

The following provides an overview of the BSS scorecard alignment with the 2024 DCEDIY Letter of Determination. The BSS reference describes the scorecard number that aligns to the LoD specification

LoD Section	Sub-section	LoD description	BSS #	Referenced in BSS 2024
I. Better Services	a. Progressing Disability Services for Children	i. Integrated Services between Disabilities, Primary Care, CAMHS and Tusla ii. CDNT Service Access and Improvement including AON iii. Workforces (Recruitment and Retention) iv. Communication and Engagement with Children and Families, and with Staff	7	Reform of Disability Services
	b. Action Plan	i. Action Plan for Disability Services 2024-2026	7	Reform of Disability Services
II. Services for Thalidomide Survivors				
III. Key modernisation programme areas	a. Workforce	i. Expanding student and clinical education placement supports ii. Expanding numbers of Health and Social Care Professionals iii. Recruitment initiatives for therapy professionals	7 12	Reform of Disability Services Recruitment & Retention
	b. Data	i. Development and implementation of platform to support aggregation, analysis and reporting of data ii. Increasing percentage of completed Service Agreements and Grant Agreements iii. Improving oversight, monitoring, reviewing and reporting of service delivery targets	7	Reform of Disability Services
	c. Stability and Sustainability Process	Ensure sustainability and quality of service for people with disabilities	7	Reform of Disability Services
	d. Health Regions Structural Reform	i. Implementation of Health Regions	17	Planning & Implementation of Health Regions
	e. UN Convention on the Rights of Persons with Disabilities			