

ospital Group performance against some national and international measures of patient safety in acute hospitals. and performance areas including infection rates, staff hand hygiene, waiting times and clinical incidents. pital group to ensure a culture of quality and patient safety. month to assure our patients and staff that we prioritise patient safety and open disclosure.

port be used to compare performance of hospitals or hospital groups. Different hospitals specialise in treating patients with different and sometimes much more complex care needs, making comparisons between hospitals ineffective. on control and staff hand hygiene practices in acute hospitals. These metrics are applied internationally as key indicators of infection control compliance. The targets for metrics 1 and 2 are international best practice targets. The target for metric 3 is an agreed target in the HSE's

to and waiting times for services including emergency care, trauma care (for hip fractures), urgent endoscopy procedures and access to outpatient services. These metrics are based on national indicators and nationally agreed targets as set out in the HSE's National Service Plan ical incidents reported to the National Incident Management System. A clinical incident is an event or circumstance which could have, or did lead to unintended and/ or unnecessary harm. Incidents include adverse events which result in harm; near misses which could have resulted in n, either by chance or timely intervention. These metrics are indicators of patient safety in hospitals that are applied internationally. medication safety in acute hospitals. This refers to any preventable event that may cause or lead to inappropriate use or patient harm while the medication is in the control of the healthcare professional or patient (WHO, 2009). The number of errors reported to the National Incident d on an internationally accepted metric applied in other countries. the timeliness of reporting our incidents onto the National incident management system naternity data where appropriate.

UL Hospitals Group 2019 KPIs		Reporting Frequency	2019 National Target	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	Trend
Rate of new cases of hospital acquired Staph. Aureus bloodstream infection.										
	Monthly									
Croom Orthopaedic Hospital		Less than 1 per 10,000 bed days	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
Ennis Hospital		Less than 1 per 10,000 bed days	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
Nenagh Hospital		Less than 1 per 10,000 bed days	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
St. John's Hospital		Less than 1 per 10,000 bed days	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
University Hospital Limerick		Less than 1 per 10,000 bed days	2.3	1.5	1.4	1.6	1.4	1.5		
University Maternity Hospital, Limerick		Less than 1 per 10,000 bed days	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
UL Hospitals Group		Less than 1 per 10,000 bed days	1.3	0.9	0.9	1.0	1.0	0.9	0.9	
Health Care Associated Infections Methicillin Resistant Staphylococcus Aureus (MRSA) A type of bacteria that is resistant to many antibiotics. In a healthcare setting such as a hospital or nursing home MRSA can cause severe problems such as pneumonia, surgical site infections and blood stream infections. MRSA is usually spread by direct contact with an infected wound or from contaminated hands, usually those of health care providers. Also people who carry MRSA, but do not have signs of infection can spread the bacteria to others										
Rate of new cases of hospital acquired C. Difficile infection										
	Monthly									
Croom Orthopaedic Hospital		Less than 2 per 10,000 bed days	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
Ennis Hospital		Less than 2 per 10,000 bed days	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
Nenagh Hospital		Less than 2 per 10,000 bed days	7.1	0.0	0.0	0.0	6.9	0.0	0.0	
St. John's Hospital		Less than 2 per 10,000 bed days	0.0	0.0	3.8	4.2	0.0	0.0	0.0	
University Hospital Limerick		Less than 2 per 10,000 bed days	5.3	1.5	0.7	2.4	3.5	2.2		
University Maternity Hospital, Limerick		Less than 2 per 10,000 bed days	0.0	0.0	0.0	0.0	4.5	0.0		
UL Hospitals Group		Less than 2 per 10,000 bed days	3.6	0.9	0.9	1.9	3.1	1.3		
Clostridium difficile(C. difficile) is a bacterium that can be found in the large bowel. C. difficile infection affects the large bowel. Symptoms include diarrhoea, stomach cramps, fever, nausea and loss of appetite. Most people get a mild illness and recover fully but in certain circumstances patients can develop serious complications.										
Compliance of hospital staff with the (WHO) five moments of hand hygiene using the national hand hygiene audit tool.										
	Bi-annual									
Medicine Directorate		90%								
Peri-op		90%								
Maternal & Child Directorate		90%								
UL Hospitals Group		90%								
Hand hygiene is one of the most important measures to prevent Healthcare associated infection.										
Percentage of emergency hip fracture carried out within 48 hours										
	Monthly									
University Hospital Limerick		95%	85.7%	78.9%	New Quarterly KPI 2019					
UL Hospitals Group		95%	85.7%	78.9%						
Hip fractures are common injuries in the older persons, with significant associated morbidity and mortality. Hip fracture patients are usually older and frail, healthcare systems must develop integrated and systematic approaches to hip fracture care and secondary prevention of further falls and fractures.										
The percentage of all attendees at ED who are in ED < 24 hrs										
	Monthly									
University Hospital Limerick		99%	91.0%	92.0%	91.4%	91.2%	91.0%	90.4%		
UL Hospitals Group		99%	91.0%	92.0%	91.4%	91.2%	91.0%	90.4%		
Percentage of patients 75 years or over who were admitted or discharged from ED within 9 hours of registration										
	Monthly									
University Hospital Limerick		99%	37.4%	37.8%	36.5%	36.6%	37.4%	43.0%		
UL Hospitals Group		99%	37.4%	37.8%	36.5%	36.6%	37.4%	43.0%		
Overcrowding within ED negatively impacts on both dignity and privacy for patients and the ability of staff to deliver fully effective care / treatment. Related international studies have also demonstrated extended length of stay within overcrowded EDs leads to poorer clinical outcomes for concerned patients. International studies have demonstrated extended length of stay within overcrowded EDs leads to poorer clinical outcomes for patients.										
Percentage of people waiting < 52 weeks for first access to outpatient services.										
	Monthly									
Croom Orthopaedic Hospital		80%	52.2%	52.1%	51.3%	50.6%	50.7%	51.3%		

Ennis Hospital		80%	80.2%	81.6%	78.9%	76.7%	75.5%	74.4%	
Nenagh Hospital		80%	80.1%	78.9%	77.7%	77.0%	79.0%	78.1%	
St. John's Hospital		80%	91.1%	91.1%	89.3%	87.6%	85.6%	82.2%	
University Hospital Limerick		80%	68.1%	67.5%	66.2%	65.2%	64.6%	64.2%	
UL Hospitals Group		80%	66.9%	66.5%	65.1%	64.1%	63.6%	63.3%	

Significant delay in accessing hospital services delays diagnosis and any necessary treatment commencement with potential for less than optimal outcome.

Number of people waiting greater than 4 weeks for access to an urgent colonoscopy.										
	Monthly									
Ennis Hospital		0	0	0	0	0	0	0	0	
Nenagh Hospital		0	0	0	0	0	0	0	0	
St. John's Hospital		0	0	0	0	7	0	0	0	
University Hospital Limerick		0	0	0	0	2	0	0	0	
UL Hospitals Group		0	0	0	0	9	0	0	0	

UL Hospitals Group 2019 KPIs		Reporting Frequency	2019 National Target	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	Trend
Rate of Clinical incidents reported per period per 1000 bed days										
	Monthly									
Croom Orthopaedic Hospital		n/a		10.8	11.7	13.26	28.3	23	27.2	
Ennis Hospital		n/a		11	6.9	14.12	12.6	9.7	10.3	
Nenagh Hospital		n/a		12.1	14.1	8.15	10.4	28.4	11.9	
St. John's Hospital		n/a		13.5	13.8	12.03	15.7	10.4	17.6	
University Hospital Limerick		n/a		25.6	20.7	13.7	21.9	22.9	21.3	
University Maternity Hospital, Limerick		n/a		19.4	17.8	20.8	16.3	18.4	21	
UL Hospitals Group		n/a		15.4	14.2	13.7	17.5	18.8	18.3	
Rate of Clinical incidents categorised as high-risk per 1,000 bed days										
	Monthly									
Croom Orthopaedic Hospital		n/a		0	0	0	0	0	2.6	
Ennis Hospital		n/a		0	0	0	0	0	0	
Nenagh Hospital		n/a		0	0	0	0	0	0	
St. John's Hospital		n/a		0	0	0.4	..2	0	0	
University Hospital Limerick		n/a		0.15	0.22	0	0.7	0.1	0	
University Maternity Hospital, Limerick		n/a		0.7	0.04	0.3	0	1.8	1.2	
UL Hospitals Group		n/a		0.1	0.04	0.1	0.1	0.32	0.6	
Rate of medication incidents as high-risk per 1000 bed nights										
	Monthly									
Croom Orthopaedic Hospital		n/a		0.0	0.0	0.0	0.0	0.0	0.0	
Ennis Hospital		n/a		0.0	0.0	0.0	0.0	0.0	0.0	
Nenagh Hospital		n/a		0.0	0.0	0.0	0.0	0.0	0.0	
St. John's Hospital		n/a		0.0	0.0	0.0	0.0	0.0	0.0	
University Hospital Limerick		n/a		0.8	0.0	0.0	0.0	0.0	0.0	
University Maternity Hospital, Limerick		n/a		0.0	0.0	0.0	0.0	0.0	0.0	
UL Hospitals Group		n/a		0.10	0.00	0.00	0.00	0.00	0.00	
Percentage of Incidents reported that have been recorded on the National Incident Management System										
	Monthly									
Croom Orthopaedic Hospital		100%		100%	100%	100%	100%	100%	100%	
Ennis Hospital		100%		100%	100%	100%	100%	100%	100%	
Nenagh Hospital		100%		100%	100%	100%	100%	100%	100%	
St. John's Hospital		100%		100%	100%	100%	100%	100%	100%	
University Hospital Limerick		100%		100%	100%	100%	100%	100%	100%	
University Maternity Hospital, Limerick		100%		100%	100%	100%	100%	100%	100%	
UL Hospitals Group		100%		100%	100%	100%	100%	100%	100%	

The UL Hospitals Group encourages all staff to create an environment that is safe and to support good quality care for patients. Incident reporting is the cornerstone for improving patient safety. Unfortunately adverse events occur, however we endeavour to learn from these adverse events. Incident reporting rates are lower than a number of studies, at this time there is evidence that current reporting practices are less than optimal with resultant under-reporting.

Indicator Report for provides up to date information for management and clinicians who provide services in relation to a range of patient safety issues for the months of November 2018 to April 2019
 re element of clinical governance and the management of hospital services within the above hospital group.

Paul Burke Signature: Chief Clinical Director Date: 2nd July 2019
 Colette Cowan Signature: Chief Executive Officer Date: 3rd July 2019