



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Hospital Name:		Galway University Hospital		Reporting Month		February	
Activity	Ref	Metric	Reporting Frequency	Target	This Month		
Health Care Associated Infections	1	The rate per 10,000 bed days used of new cases of Hospital acquired Staph. aureus bloodstream infection	Monthly CPA51	Less than 1 per 10,000 bed days	1.0		
	2	The rate per 10,000 bed days used of new cases of Hospital acquired C. difficile infection	Monthly CPA52	Less than 2 per 10,000 bed days	3.8		
	3	The percentage of hospital staff compliance with the World Health Organisation's five moments of hand hygiene	Bi-annual CPA6	90%	89%		
Surgery	4	The percentage of emergency hip fracture surgery carried out within 48 hours	Monthly A42	95%	N/A		
Emergency Care and Patient Experience Time	5	The percentage of patients who were waiting less than 24 hours in the Emergency Department	Monthly A29	100%	92.3%		
	6	The percentage of patients aged 75 years or over who were admitted or discharged from the Emergency Department within 9 hours of registration	Monthly A30	100%	76.6%		
Outpatient Waiting Times	7	The percentage of patients waiting less than 52 weeks for their first outpatient appointment	Monthly A23	85%	70.8%		
Colonoscopy/ Gastrointestinal Service	8	Number of people waiting greater than 4 weeks for an urgent colonoscopy	Monthly A80	0	0		
Incidents and Events	9	The rate per 1000 bed days used of clinical incidents reported in the month to the National Incident Management System.	Monthly	Not applicable	12.19		
	10	The rate per 1000 bed days used of clinical incidents classified as major or extreme reported in the month to the National Incident Management System.	Monthly	Not applicable	0.0		
	11	The rate per 1000 bed days used of medication incidents classified as major or extreme reported in the month to the National Incident Management System.	Monthly	Not applicable	0.0		

The Hospital Patient Safety Indicator Report for (Galway University Hospital) provides up to date information for management and clinicians who provide services in relation to a range of patient safety issues for the month of (February) and year (2019). The information in this Report is a core element of clinical governance and the management of hospital services within the above hospital and the (Saolta Health Care Group).

Hospital Manager/CEO CEANE

Signature:

Signature:

Group CEO: Deirdre C.A.

Date: 30.4.19

Date: 10/5/19

Hospital Name:		Letterkenny University Hospital		Reporting Month	February
Activity	Ref	Metric	Reporting Frequency	Target	This Month
Health Care Associated Infections	1	The rate per 10,000 bed days used of new cases of Hospital acquired Staph. aureus bloodstream infection	Monthly CPA51	Less than 1 per 10,000 bed days	3.2
	2	The rate per 10,000 bed days used of new cases of Hospital acquired C. difficile infection	Monthly CPA52	Less than 2 per 10,000 bed days	1.1
	3	The percentage of hospital staff compliance with the World Health Organisation's five moments of hand hygiene	Bi-annual CPA6	90%	99%
Surgery	4	The percentage of emergency hip fracture surgery carried out within 48 hours	Monthly AA2	95%	N/A
Emergency Care and Patient Experience Time	5	The percentage of patients who were waiting less than 24 hours in the Emergency Department	Monthly A29	100%	99.5%
Outpatient Waiting Times	6	The percentage of patients aged 75 years or over who were admitted or discharged from the Emergency Department within 9 hours of registration	Monthly A30	100%	64.7%
	7	The percentage of patients waiting less than 52 weeks for their first outpatient appointment	Monthly A23	85%	67.7%
Colonoscopy/Gastrointestinal Service	8	Number of people waiting greater than 4 weeks for an urgent colonoscopy	Monthly A80	0	1
Incidents and Events	9	The rate per 1000 bed days used of clinical incidents reported in the month to the National Incident Management System.	Monthly	Not applicable	13.03890
	10	The rate per 1000 bed days used of clinical incidents classified as major or extreme reported in the month to the National Incident Management System.	Monthly	Not applicable	0.105152
	11	The rate per 1000 bed days used of medication incidents classified as major or extreme reported in the month to the National Incident Management System.	Monthly	Not applicable	0

The Hospital Patient Safety Indicator Report for Letterkenny University Hospital provides up to date information for management and clinicians who provide services in relation to a range of patient safety issues for the month of February 2019. The information in this Report is a core element of clinical governance and the management of hospital services within the above hospital and the Saolta Hospital Group).

Hospital Manager / CEO Sam Murphy Signature: [Signature]

Group CEO: Deirdre O'Connell Signature: [Signature]

Date: 30/2/19

Date: 10/5/19



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Health Service Executive

Hospital Name:		Mayo University Hospital		Reporting Month		February
Activity	Ref	Metric	Reporting Frequency	Target	This Month	
Health Care Associated Infections	1	The rate per 10,000 bed days used of new cases of Hospital acquired Staph. aureus bloodstream infection	Monthly CPA51	Less than 1 per 10,000 bed days	1.4	
	2	The rate per 10,000 bed days used of new cases of Hospital acquired C. difficile infection	Monthly CPA52	Less than 2 per 10,000 bed days	2.8	
	3	The percentage of hospital staff compliance with the World Health Organisation's five moments of hand hygiene	Bi-annual CPA6	90%	89%	
Surgery	4	The percentage of emergency hip fracture surgery carried out within 48 hours	Monthly A42	95%	N/A	
Emergency Care and Patient Experience Time	5	The percentage of patients who were waiting less than 24 hours in the Emergency Department	Monthly A29	100%	99.6%	
	6	The percentage of patients aged 75 years or over who were admitted or discharged from the Emergency Department within 9 hours of registration	Monthly A30	100%	75.4%	
Outpatient Waiting Times	7	The percentage of patients waiting less than 52 weeks for their first outpatient appointment	Monthly A23	85%	60.6%	
Colonoscopy/ Gastrointestinal Service Incidents and Events	8	Number of people waiting greater than 4 weeks for an urgent colonoscopy	Monthly A80	0	0	
	9	The rate per 1000 bed days used of clinical incidents reported in the month to the National Incident Management System.	Monthly	Not applicable	21.2	
	10	The rate per 1000 bed days used of clinical incidents classified as major or extreme reported in the month to the National Incident Management System.	Monthly	Not applicable	0	
	11	The rate per 1000 bed days used of medication incidents classified as major or extreme reported in the month to the National Incident Management System.	Monthly	Not applicable	0	

The Hospital Patient Safety Indicator Report for Mayo University Hospital provides up to date information for management and clinicians who provide services in relation to a range of patient safety issues for the month of September and year 2017. The information in this Report is a core element of clinical governance and the management of hospital services within the above hospital and the Saolta University Health Care Group.

Hospital Manager / CEO
Group CEO:

CHITAGI, NE. DAVENPORT.

Signature:

[Signature]

Date:

21/5/19

Date:

10/5/19

only for CEO

Hospital Name:	Portlincula University Hospital		Reporting Month	February	
Activity	Ref	Metric	Reporting Frequency	Target	This Month
Health Care Associated Infections	1	The rate per 10,000 bed days used of new cases of Hospital acquired Staph. aureus bloodstream infection	Monthly CPA51	Less than 1 per 10,000 bed days	0
	2	The rate per 10,000 bed days used of new cases of Hospital acquired C. difficile infection	Monthly CPA52	Less than 2 per 10,000 bed days	0
	3	The percentage of hospital staff compliance with the World Health Organisation's five moments of hand hygiene	Bi-annual CPA6	90%	88.6%
Surgery	4	The percentage of emergency hip fracture surgery carried out within 48 hours	Monthly A42	95%	NA
Emergency Care and Patient Experience Time	5	The percentage of patients who were waiting less than 24 hours in the Emergency Department	Monthly A29	100%	99.8%
Outpatient Waiting Times.	6	The percentage of patients aged 75 years or over who were admitted or discharged from the Emergency Department within 9 hours of registration	Monthly A30	100%	78.7%
	7	The percentage of patients waiting less than 52 weeks for their first outpatient appointment	Monthly A23	85%	87.1%
Colonoscopy/ Gastrointestinal Service	8	Number of people waiting greater than 4 weeks for an urgent colonoscopy	Monthly A80	0	0
Incidents and Events	9	The rate per 1000 bed days used of clinical incidents reported in the month to the National Incident Management System.	Monthly	Not applicable	19.02
	10	The rate per 1000 bed days used of clinical incidents classified as major or extreme reported in the month to the National Incident Management System.	Monthly	Not applicable	0.81
	11	The rate per 1000 bed days used of medication incidents classified as major or extreme reported in the month to the National Incident Management System.	Monthly	Not applicable	0

The Hospital Patient Safety Indicator Report for Portlincula University Hospital provides up to date information for management and clinicians who provide services in relation to a range of patient safety issues for the month of February and year 2019. The information in this Report is a core element of clinical governance and the management of hospital services within the above hospital and the Saolta Group.

Hospital Manager / CEO Maire Kelly

Signature: [Signature]

Date: 30/4/2019

Date: 10/5/19

Group CEO: [Signature]

Signature: [Signature]

Date: 30/4/2019

Date: 10/5/19

Hospital Name:	Ref	Metric	Reporting Month	Target	This Month
Health Care Associated Infections	1	The rate per 10,000 bed days used of new cases of Hospital acquired Staph. aureus bloodstream infection	Monthly CPA51	Less than 1 per 10,000 bed days	0
	2	The rate per 10,000 bed days used of new cases of Hospital acquired C. difficile infection	Monthly CPA52	Less than 2 per 10,000 bed days	15.6 (note only two cases unrelated by phenotype)
	3	The percentage of hospital staff compliance with the World Health Organisation's five moments of hand hygiene	Bi-annual CPA6	90%	95%
Surgery	4	The percentage of emergency hip fracture surgery carried out within 48 hours	Monthly A42	95%	n/a
Emergency Care and Patient Experience Time	5	The percentage of patients who were waiting less than 24 hours in the Emergency Department	Monthly A29	100%	n/a
	6	The percentage of patients aged 75 years or over who were admitted or discharged from the Emergency Department within 9 hours of registration	Monthly A30	100%	n/a
Outpatient Waiting Times	7	The percentage of patients waiting less than 52 weeks for their first outpatient appointment	Monthly A23	85%	66%
Colonoscopy/ Gastrointestinal Service	8	Number of people waiting greater than 4 weeks for an urgent colonoscopy	Monthly A80	0	0
Incidents and Events	9	The rate per 1000 bed days used of clinical incidents reported in the month to the National Incident Management System.	Monthly	Not applicable	22 (to be put up)
	10	The rate per 1000 bed days used of clinical incidents classified as major or extreme reported in the month to the National Incident Management System.	Monthly	Not applicable	0
	11	The rate per 1000 bed days used of medication incidents classified as major or extreme reported in the month to the National Incident Management System.	Monthly	Not applicable	0

The Hospital Patient Safety Indicator Report for RUH provides up to date information for management and clinicians who provide services in relation to a range of patient safety issues for the month of February and year 2019. The information in this Report is a core element of clinical governance and the management of hospital services within the above hospital and the Saolta Hospital Group.

Hospital Manager / CEO Mary Garry Signature: Mary Garry
Group CEO: Deeey cfo Signature: Deeey cfo

Date: 30/01/2019
Date: 10/01/19

Hospital Name:	Sligo University Hospital		Reporting Month	Feb 2019	
Activity	Ref	Metric	Reporting Frequency	Target	This Month
Health Care Associated Infections	1	The rate per 10,000 bed days used of new cases of Hospital acquired Staph. aureus bloodstream infection	Monthly CPA51	Less than 1 per 10,000 bed days	0
	2	The rate per 10,000 bed days used of new cases of Hospital acquired C. difficile infection	Monthly CPA52	Less than 2 per 10,000 bed days	1.1
	3	The percentage of hospital staff compliance with the World Health Organisation's five moments of hand hygiene	Bi-annual CPA6	90%	No longer available on Compstat
Surgery	4	The percentage of emergency hip fracture surgery carried out within 48 hours	Monthly A42	95%	Data not available on Compstat
Emergency Care and Patient Experience Time	5	The percentage of patients who were waiting less than 24 hours in the Emergency Department	Monthly A29	100%	99.6%
	6	The percentage of patients aged 75 years or over who were admitted or discharged from the Emergency Department within 9 hours of registration	Monthly A30	100%	71.3%
Outpatient Waiting Times	7	The percentage of patients waiting less than 52 weeks for their first outpatient appointment	Monthly A23	85%	77.1%
Colonoscopy/ Gastrointestinal Service	8	Number of people waiting greater than 4 weeks for an urgent colonoscopy	Monthly A80	0	0
Incidents and Events	9	The rate per 1000 bed days used of clinical incidents reported in the month to the National Incident Management System.	Monthly	Not applicable	29.5
	10	The rate per 1000 bed days used of clinical incidents classified as major or extreme reported in the month to the National Incident Management System.	Monthly	Not applicable	0
	11	The rate per 1000 bed days used of medication incidents classified as major or extreme reported in the month to the National Incident Management System.	Monthly	Not applicable	0

The Hospital Patient Safety Indicator Report for (Insert Hospital Name) provides up to date information for management and clinicians who provide services in relation to a range of patient safety issues for the month of (Insert Month) and year (Insert Year). The information in this Report is a core element of clinical governance and the management of hospital services within the above hospital and the (Insert Hospital Group).

Hospital Manager/CEO
Group CEO:

GMC

Signature:

[Signature]

Date:

30/4/19

Signature:

10/5/19