

Hospital Name:		Mater Misericordiae University Hospital (MMUH)  Metric		Month	January 2019
Activity	Ref			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	0.53
	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	4.2
	3	The percentage of hospital staff compliance with the World Health Organisation's five moments of hand hygiene	Bi-annual CPA6	90%	88.1%
Surgery	4	The percentage of emergency hip fracture surgery carried out within 48 hours	Monthly A42	95%	100%
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%	91.9%
	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%	53.5%
Outpatient Waiting Times	7	The percentage of patients waiting less than 52 weeks for their first outpatient appointment	Monthly A23	85%	62.3%
Colonoscopy/ Gastrointestinal Service	8	Number of people waiting greater than 4 weeks for an urgent colonoscopy	Monthly A80	0	3
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	7.35
	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	
	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 MMUH provides up to date information for management and clinicians who	o provide s	services in relation to a
range of patient safety issues for the month of January and year 2019. The information in this Report is a core element of c	linical gove	ernance and the
management of hospital services within the above hospital and the Ireland East Hospital Group (IEHG).		0/1/10
Hospital Manager / CEO Gordon Dunne Signature:	Date:	8/4/19

Group CEO:

Mary Day

Signature:

Date:

09/04/2019



Hospital Name:		St. Vincent's University Hospital (SVUH)	Reporting	January 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	1.1
	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%	92.9%
Surgery	4	The percentage of emergency hip fracture surgery carried out within 48 hours	Monthly A42	95%	100% Dec
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%	91.5%
	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%	48.4%
Outpatient Waiting Times	7	The percentage of patients waiting less than 52 weeks for their first outpatient appointment	Monthly A23	85%	82.5%
Colonoscopy/ Gastrointestinal Service	8	Number of people waiting greater than 4 weeks for an urgent colonoscopy	Monthly A80	0)	O
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	10.21
	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 SVUH provides up to date information for management and clinicians who provide serv	ices in rela	ation to a
range of patient safety issues for the month of January and year 2019. The information in this Report is a core element of clinical govern	nance and	the
management of hospital services within the above hospital and the Ireland East Hospital Group (IEHG).		^

Hospital Manager / CEO Mary Day Signature: Signature:

Date: 8/4/2019

Date: 09/04/2019



Hospital Name:		Regional Hospital Mullingar (RHM)	Reporting	Month	January 2018
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	0.0
	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	0.0
	3.	The percentage of hospital staff compliance with the World Health Organisation's five moments of hand hygiene	Bi-annual CPA6	90%	94.8%
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%	98.6%
	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%	70.9%
Outpatient Waiting Times	7	The percentage of patients waiting less than 52 weeks for their first outpatient appointment	Monthly A23	85%	71.7%
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	11.83
	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	0.17
	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

range of patient safety issu	ues for the month of	January and y	s up to date information for management and ear 2019. The information in this Report is a co nd the Ireland East Hospital Group (IEHG).		
Hospital Manager / CEO_	Show	Signature:	SHOWA SCHALLENAND!	Date:	12/4/19.
Group CEO:	Mary Day	Signature:	(bay Day	Date:	12/04/2019



Hospital Name:		St Luke's General Hospital Kilkenny (SLK)	Reporting	Month	January 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	0.0
	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	1.3
	3	The percentage of hospital staff compliance with the World Health Organisation's five moments of hand hygiene	Bi-annual CPA6	90%	90,5%
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%	99.9%
	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%	94.7%
Outpatient Waiting Times	7	The percentage of patients waiting less than 52 weeks for their first outpatient appointment	Monthly A23	85%	88.8%
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	7.21
	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	0.39
	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 SLK provides up to date information for management and clinicians who provide services in relation to a						
range of patient safety issues for the month of January 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 Manager / CEO Elean 2 Pow	ve hospital ar Signature:	Elenge Tone for And States	Date:	11.4.2019		
Group CEO: Mary Day	Signature:	(Van Dan	Date:	12/04/2019		



Hospital Name:		Wexford General Hospital (WGH)  Metric	Reporting	Month	January 2019
Activity	Ref		Reporting Target Frequency		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	0.0
	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	8.9
	3	The percentage of hospital staff compliance with the World Health Organisation's five moments of hand hygiene	Bi-annual CPA6	90%	87.6%
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%	99.9%
	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%	100%
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	20.01
	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
e de la companya de l	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 WGH provides up to date information for management and clinic	cians who provide se	rvices in relation to a
range of patient safety issues for the month of January and year 2019. The information in this Report is a core ele	ement of clinical gove	ernance and the
management of hospital services, within the above hospital and the Ireland East Hospital Group (IEHG).		. /
Hospital Manager / CEO ABCITCAS Signature: NBCITCAS	Date:	4/4/18
Group CEO: Mary Day Signature: Van Day	Date:	08/04/2019



Hospital Name:		Our Lady's Hospital Navan (OLHN)	Reporting	January 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	0.0
	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	3.5
	3	The percentage of hospital staff compliance with the World Health Organisation's five moments of hand hygiene	Bi-annual CPA6	90%	82.9%
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%	71%
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	14.13
	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 OLHN provides up to date information for management and clinicians who provide services in relation to a range of patient safety issues for the month of January 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 Ireland East Hospital Group (IEHG).

Hospital Manager / CEO Ker pha loss Signature:

Group CEO:

Signature:

Date:

01/04/2019

Date:

01/04/2019



Hospital Name:		St. Columcille's Hospital Loughlinstown (SCHL)	Reporting	Month	January 2019
Activity	Ref	Metric	Reporting Frequency	Target	Tris 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	0.0
	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	0.0
	3	The percentage of hospital staff compliance with the World Health Organisation's five moments of hand hygiene	Bi-annual CPA6	90%	96.7%
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%	61.7%
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	2.47
	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
4	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 SCHL provides up to date information for management and clinicians who provide	services in relation	n to a
range of patient safety issues for the month of January and year 2019. The information in this Report is a core element of clinical go	overnance and the	е
management of hospital seryices within the above hospital and the Ireland East Hospital Group (IEHG).	1-12/0	010
Hospital Manager / CEO D'LEAKY Signature: Mude Chary Date	6/3/24	717

Group CEO: Mary Day Signature:

Date: 08/04/2019



Hospital Name:		St Michael's Hospital (SMH) - Dún Laoghaire		Month	January 2019		
Activity 11-3 36 page	Ref	Metric process as a particular recognition in the contract of the process of the contract of t	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	0.0		
	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	0.0		
	3	The percentage of hospital staff compliance with the World Health Organisation's five moments of hand hygiene	Bi-annual CPA6	90%	92.9%		
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						
Colonoscopy/ Gastrointestinal Service	noscopy/ 8 Number of people waiting greater than 4 weeks for an urgent colonoscopy Monthly 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	0.0		
	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 SMH provides up to date information for management and clinicians who provide services in relation to a range of patient safety issues for the month of January 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 Ireland East Hospital Group (IEHG).

Hospital Manager / CEO S. MURTAGH Signature: Mary Day Group CEO:

Signature:

Date:

08/04/2019



Hospital Name:		Cappagh National Orthopedic Hospital (CNOH)	Reporting	Month	January 2019	
Actillyhity		iRefi Metific		Terrojeti	This Mornith	
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	0.0	
	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	0.0	
	3	The percentage of hospital staff compliance with the World Health Organisation's five moments of hand hygiene	Bi-annual CPA6	90%	82.1%	
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%	99.1%	
Colonoscopy/ Gastrointestinal Service	1 3 grants and the did to the colonogcopy			0	N/A	
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	24.98	
	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 CNOH provides up to date information for management and clinician	s who provide se	ervices in relation to a
range of patient safety issues for the month of January and year 2019. The information in this Report is a core elemen	of clinical gove	rnance and the
management of hospital services within the above hospital and the Ireland East Hospital Group (IEHG).	3	
Hospital Manager / CEO bylla Lee Signature: Dylle Lee	Date:	8/4/19
Group CEO: Mary Day Signature:	Date:	08/04/2019



Hospital Name:		Royal Victoria Eye and Ear Hospital (RVEEH)		Month!	January 2019	
A September 1		Menric Control of the	Reporting Frequency	Fargel,	This Month	
Health Care Associated Infections	1:7	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	0.0	
	24	The rate part 0,000 bed days used of new cases of Pospital acquired to difficile	Monthly (PAS)	ues than 2 per 10,000		
Market Services	3	The percentage of hospital staff compliance with the World Health Organisation's five moments of hand hygiene  The percentage of emergency hip fracture surgery carried out within the bours.	Bi-annual CPA6 Monthly	90%	91.4%	
Surface Control of the State of		New Control of the Co	A42	(g. Barrell) (g. garrell) (g. Barrell)	the second of th	
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	
	60	The percentage of patients aged 75 years of sych who were admitted or discharged of the Emergency Department within 9 hours of registration.	Monthly +	100%	H NATH	
Outpatient Waiting Times	7	The percentage of patients waiting less than 52 weeks for their first outpatient appointment	Monthly A23	85%	53.3%	
Colonescopy/ Gastrointestinal Service	8	Number of people wating greater than 4 weeks for an argene colleno stopy	Monthly 3	0:1:3 4 1	N/A nasasa	
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	421.05	
The second secon	10:	The rare per 1000 bed days used of clinical inductor of assimed assimed assimed assimed assime or extreme reported in the month to the National Industrial Management System.	Monthly	Not applicable		
	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.	Mônthly	Not applicable	0.0	

	ent Safety Indicator Report fo	· ·		•	•	
range of patient s	afety issues for the month of	January and ye	ar 2019. The information ir	n this Report is a core ele	ement of clinical gove	ernance and the
management of h	nospital services within the ab	ove hospital and	d the Ireland East Hospital	Group (IEHG).		
Hospital Manager	/ CEO Mary Day	_ Signature:	(bay Day	Group CEO	Date:	12/04/2019
Group CEO:	Tarl A M.M.	Signature:	PAUL MORITARY	Hospital CEO	Date:	12.14/19