Hospital Name:		Mater Misericordiae University Hospital (MMUH)		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	0.53
	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 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 ___Gordon Dunne___ Signature: _____ Date: 8/4/19

Group CEO: ___Mary Day___ Signature: _____ Date: 09/04/2019

Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Hospital Name:		St. Vincent's University Hospital (SVUH)		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	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	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	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 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).
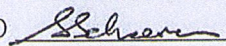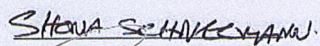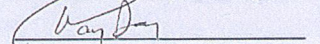
Hospital Manager / CEO _____ Signature: _____   Date: 8/4/2019

Group CEO: _____ Mary Day _____ / Signature: _____   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

The Hospital Patient Safety Indicator Report for RHM 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 _Sehoen_   Signature: _SHONA SCHNECKLAN._   Date: _12/4/19._

Group CEO: _Mary Day_   Signature: _(Mary Day)_   Date: _12/04/2019_

Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

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 and the Ireland East Hospital Group (IEHG).

Hospital Manager / CEO _Eleanor Moore_ Signature: _Eleanor Moore for Anne Slattery_ Date: _11.4.2019_

Group CEO: _Mary Day_ Signature: _[signature]_ Date: _12/04/2019_

Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Hospital Name:		Wexford General Hospital (WGH)	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	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
	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 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 _____ Signature: _____ Date: 4/4/19

Group CEO: _____ Mary Day _____ Signature: _____ Date: 08/04/2019

Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Hospital Name:		Our Lady's Hospital Navan (OLHN)		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	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 _Ken Phgibba_   Signature: _Ken Phgill_   Date: 01/04/2019

Group CEO: _Mary Day_   Signature: _Mary Day_   Date: 01/04/2019

Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Hospital Name:		St. Columcille's Hospital Loughlinstown (SCHL)	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	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
	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 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 L O'LEARY   Signature: Linda O'Leary   Date: 6/3/2019

Group CEO: Mary Day   Signature: Mary Day   Date: 08/04/2019

**Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive**

Hospital Name:		St Michael's Hospital (SMH) – Dún Laoghaire		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	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	The percentage of patients waiting less than 52 weeks for their first outpatient appointment	Monthly A23	85%	94%
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	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 G. MURTAGH   Signature: _____   Date: 05/04/19

Group CEO: ____ Mary Day ____   Signature: _____   Date: 08/04/2019

Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Hospital Name:		Cappagh National Orthopedic Hospital (CNOH)		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		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	8	Number of people waiting greater than 4 weeks for an urgent colonoscopy	Monthly A80	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 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 _Angela Lee_   Signature: _Angela Lee_   Date: _8/4/19_

Group CEO: _Mary Day_   Signature: _Mary Day_   Date: _08/04/2019_

Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Hospital Name:		Royal Victoria Eye and Ear Hospital (RVEEH)	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	0.0
	3	The percentage of hospital staff compliance with the World Health Organisation's five moments of hand hygiene	Bi-annual CPA6	90%	91.4%
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%	53.3%
Colonoscopy/ Gastrointestinal Service	8	Number of people waiting greater than 4 weeks for an urgent colonoscopy	Monthly A80	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	421.05
	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 RVEEH 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	Mary Day	Signature:		Group CEO	Date:	12/04/2019
Group CEO:		Signature:	PAUL MORIARTY	Hospital CEO	Date:	12/4/19