

Hospital Name:		Galway University Hospital	Reporting	Мау	
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	0.9
	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	4.1
	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%	95.5%
	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%	87.4%
Outpatient Waiting Times	7	The percentage of patients waiting less than 52 weeks for their first outpatient appointment	Monthly A23	85%	70.1%
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	10.52
	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	0.046
	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

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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 nations cafety issues for the month of (May) and user (2010). The information is the	erit ariu cii	ilicians wilc	provide				
services in relation to a range of patient safety issues for the month of (May) and year (2019). The information in this Repo	rt 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 / CEQ CICANS Signature:	D-+-	11 2	1-				
550	Date:	16.7.					
Group CEO: Signature:	Date:	261	7				



Hospital Name:		Letterkenny University Hospital	Reporting	May		
Activity	Ref	Metric	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	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	6.6	
	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 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%	99.8%	
	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%	81.1%	
Outpatient Waiting Times	7	The percentage of patients waiting less than 52 weeks for their first outpatient appointment	Monthly A23	85%	66.3%	
Colonoscopy/ Gastrointestinal Service	8	Number of people waiting greater than 4 weeks for an urgent colonoscopy	Monthly A80	0	7	
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	21.86031	
	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 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 May 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 Stim MURPHY

Group CEO:

Signature:

Signature:

Date:

5- July - 2019

Date:



Hospital Name:		Mayo University Hospital	Reporting	Month	May
Activity	Ref	Metric	Reporting Frequency	Target	This Month
Health Care Associated	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
, meedons	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%	93%
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%	99.7%
Patient Experience Time	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%	79.9%
Outpatient Waiting Times	7	The percentage of patients waiting less than 52 weeks for their first outpatient appointment	Monthly A23	85%	58.7%
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	21.7
	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 a	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 correlation to a range of patient safety issues for the month of September and year 2017. The information in this Report is a correlation to a range of patient safety issues for the month of September and year 2017.	e element of cliffical governance
and the management of hospital services within the above hospital and the Saolta University Health Care Group. Hospital Manager / CEO CHITEGIA DIVORDE Signature:	Date: 12/07/19.
Hospital Manager / CEO CAMERINE DONORDO Signature:	
Group CEO: Signature:	Date: 26-9-19



Hospital Name:		Portiuncula University Hospital		Reporting 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	2.7
	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%
	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%	74.9
Outpatient Waiting Times	7	The percentage of patients waiting less than 52 weeks for their first outpatient appointment	Monthly A23	85%	89.1%
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	18.37
	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	0.27

The Hospital Patient Safety Indicator Report for Portiuncula 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 May 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 James Feare Signature:

Group CEO:

Signature:



Hospital Name:		RUH		Reporting Month	
Activity	Ref	Metric	Reporting Frequency	Target	This Megan
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	0.1569
	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%	70%
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
	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 (Nay) 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 / CED MARY GARJES Signature:

Group CEO:

Signature:



Hospital Name:		Sligo University Hospital	Reporting	Month	May 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	Lless than 1 per 10,000 bed days	No data for May 19
	2	The rate per 10,000 bed days used of new cases of Hospital acquired C. difficile infection	Monthly CPA52	Lless than 2 per 10,000 bed days	No data for May 19
	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%	99.7%
	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%	82.3%
Outpatient Waiting Times	7	The percentage of patients waiting less than 52 weeks for their first outpatient appointment	Monthly A23	85%	74.7%
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	32.2
	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	0.2
	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 Hospit	al Name) provides up to date information for management and	l clinician	s who provide services
in relation to a range of patient safety issues for	the month of	f (Insert Month) and year (Insert Year). The information in this R	eport is a	core element of clinical
governance and the management of hospital se	rvices within t	the above hospital and the (Insert Hospital Group)	•	1
Hospital Manager / CEO GM & CANN	Signature:	90	Date:	11/7/19
Group CEO:	Signature: _		Date:	