



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive



Health Service Executive

National Screening Service

Key Performance  
Indicator Metadata 2020

# BowelScreen

|    |  |  |
|----|--|--|
| 1  | <b>KPI Title</b>                         | HWB46- % of client uptake rate in the BowelScreen programme  |
| 1a | <b>KPI Short Title</b>                   | BowelScreen Uptake   |
| 2  | <b>KPI Description</b>                   | A cohort measurement of the uptake of bowel cancer screening by eligible men and women whose date of first offered invitation in the current screening round was within the reporting period. These clients are followed over time to allow adequate time for taking up their reminder invitation in the round. Subject to change due to uptake on reminder invitation etc. Based on data from the first round of screening. |
| 3  | <b>KPI Rationale</b>                     | To maximise the uptake of bowel screening among the eligible population  |
| 3a | <b>Indicator Classification</b>          | National Scorecard Quadrant: Access & Integration  |
| 4  | <b>National Target</b>                   | 2020 NSP Target: >45%. This is a cumulative calculation  |
| 4a | <b>Target</b>                            | b) Trajectory set out to achieve an end of year target, ie. Q1: >42%; Q2: >43%; Q3: >44%; Q4: >45%   |
| 4b | <b>Volume Metrics</b>                    |  |
| 5  | <b>KPI Calculation</b>                   | Numerator= No. of those clients who completed a satisfactory FIT test. Subject to change due to uptake on reminder invitation etc.<br>Denominator=clients whose date of first offered invitation to take part in BowelScreen in the current screening round was within the reporting period.   |
| 6  | <b>Data Source</b>                       | BowelScreen Database (COR) to the NBIU Business Information Unit via a cif template  |
| 6a | <b>Data Sign Off</b>                     | Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service  |
| 6b | <b>Data Quality Issues</b>               | None   |
| 7  | <b>Data Collection Frequency</b>         | Daily  |
| 8  | <b>Tracer Conditions</b>                 | Men and women aged between 60 and 69 who have been invited to take part in the BowelScreen programme.  |
| 9  | <b>Minimum Data Set MDS</b>              | Client name, address, sex, DOB, date of screening.   |
| 10 | <b>International Comparison</b>          | Similar in other countries   |
| 11 | <b>KPI Monitoring</b>                    | Quarterly  |
| 12 | <b>KPI Reporting Frequency</b>           | Quarterly  |
| 13 | <b>KPI Report Period</b>                 | Q-1Q   |
| 14 | <b>KPI Reporting Aggregation</b>         | National   |
| 15 | <b>KPI is reported in which reports?</b> | Performance Profile / Management Data Report / Annual Report   |
| 16 | <b>Web link to data</b>                  | <a href="http://www.hse.ie/eng/services/publications/performance-reports/">http://www.hse.ie/eng/services/publications/performance-reports/</a>  |
| 17 | <b>Additional Information</b>            | N/A  |
|    | <b>KPI owner/lead for implementation</b> | Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service  |
|    | <b>PBI data support</b>                  | Siobhán O'Brien, Data Analyst, National Business Information Unit - siobhan.obrien2@hse.ie   |
|    | <b>Governance/sign off</b>               | Celine Fitzgerald, Interim CEO, National Screening Service   |

# BowelScreen

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|----|--|---|
| 1  | <b>KPI Title</b>                         | HWB82- No. of clients who have completed a satisfactory BowelScreen FIT test  |
| 1a | <b>KPI Short Title</b>                   | Satisfactory BowelScreen FIT test   |
| 2  | <b>KPI Description</b>                   | No. of clients screened by the BowelScreen programme who have completed a satisfactory FIT test in the reporting period. (FIT= faecal immunochemical test, which is a self-administered test carried out at home, satisfactory means that the kit was suitable for analysis)          |
| 3a | <b>Indicator Classification</b>          | National Scorecard Quadrant: Access & Integration   |
| 4  | <b>National Target</b>                   | 2020 NSP Target: 125,000. This is a cumulative calculation  |
| 4a | <b>Target</b>                            | 125,000   |
| 4b | <b>Volume Metrics</b>                    |   |
| 5  | <b>KPI Calculation</b>                   | Count of no. of clients screened by the BowelScreen programme who have completed a satisfactory FIT test in the reporting period. (FIT= faecal immunochemical test, which is a self-administered test carried out at home, satisfactory means that the kit was suitable for analysis) |
| 6  | <b>Data Source</b>                       | BowelScreen Database (COR) to the BIU business information unit via a cif template  |
| 6a | <b>Data Sign Off</b>                     | Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service   |
| 6b | <b>Data Quality Issues</b>               | None  |
| 7  | <b>Data Collection Frequency</b>         | Daily   |
| 8  | <b>Tracer Conditions</b>                 | Men and women aged between 60 and 69 who have been invited to take part in the BowelScreen programme  |
| 9  | <b>Minimum Data Set MDS</b>              | Client Name, Address, Sex, DOB, date of screening   |
| 10 | <b>International Comparison</b>          | Similar in other countries  |
| 11 | <b>KPI Monitoring</b>                    | Monthly   |
| 12 | <b>KPI Reporting Frequency</b>           | Monthly   |
| 13 | <b>KPI Report Period</b>                 | Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)  |
| 14 | <b>KPI Reporting Aggregation</b>         | National  |
| 15 | <b>KPI is reported in which reports?</b> | Performance Profile / Management Data Report / Annual Report  |
| 16 | <b>Web link to data</b>                  | <a href="http://www.hse.ie/eng/services/publications/performance-reports/">http://www.hse.ie/eng/services/publications/performance-reports/</a>   |
| 17 | <b>Additional Information</b>            |   |
|    | <b>KPI owner/lead for implementation</b> | Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service   |
|    | <b>PBI data support</b>                  | Siobhán O'Brien, Data Analyst, National Business Information Unit - siobhan.obrien2@hse.ie  |
|    | <b>Governance/sign off</b>               | Celine Fitzgerald, Interim CEO, National Screening Service  |

## BreastCheck

|    |  |  |
|----|--|--|
| 1  | <b>KPI Title</b>                         | HWB77- No. of women in the eligible population who have had a complete mammogram   |
| 1a | <b>KPI Short Title</b>                   | Eligible women who have had a mammogram  |
| 2  | <b>KPI Description</b>                   | Activity measurement; count of number of women who have had a complete mammogram in the reporting period i.e two radiologists have read it and it has been given a result. This metric includes initial women (women who have had their first BreastCheck screening examination) and subsequent women (women who have had their second or higher BreastCheck screening examination). |
| 3  | <b>KPI Rationale</b>                     | Activity measurement: Better Health & Wellbeing  |
| 3a | <b>Indicator Classification</b>          | National Scorecard Quadrant: Access & Integration  |
| 4  | <b>National Target</b>                   | 2020 NSP Target: 185,000 women. This is a cumulative calculation   |
| 4a | <b>Target</b>                            |  |
| 4b | <b>Volume Metrics</b>                    |  |
| 5  | <b>KPI Calculation</b>                   | Count of number of initial women and subsequent women who have had a complete mammogram in the reporting period.   |
| 6  | <b>Data Source</b>                       | BreastCheck database (NBSP) to the BIU business information unit via a cif template  |
| 6a | <b>Data Sign Off</b>                     | Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service  |
| 6b | <b>Data Quality Issues</b>               | None   |
| 7  | <b>Data Collection Frequency</b>         | Daily  |
| 8  | <b>Tracer Conditions</b>                 | Women who are eligible for screening.  |
| 9  | <b>Minimum Data Set MDS</b>              | Client Name, Address, DOB  |
| 10 | <b>International Comparison</b>          | Similar in other countries   |
| 11 | <b>KPI Monitoring</b>                    | Monthly  |
| 12 | <b>KPI Reporting Frequency</b>           | Monthly  |
| 13 | <b>KPI Report Period</b>                 | Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)   |
| 14 | <b>KPI Reporting Aggregation</b>         | National   |
| 15 | <b>KPI is reported in which reports?</b> | Performance Profile / Management Data Report / Annual Report   |
| 16 | <b>Web link to data</b>                  | <a href="http://www.hse.ie/eng/services/publications/performance-reports/">http://www.hse.ie/eng/services/publications/performance-reports/</a>  |
| 17 | <b>Additional Information</b>            | As reported in the HSE Performance Profile and Management Data Report  |
|    | <b>KPI owner/lead for implementation</b> | Therese Mooney, Head of Programme Evaluation Unit, National Screening Service.   |
|    | <b>PBI data support</b>                  | Siobhán O'Brien, Data Analyst, National Business Information Unit : siobhan.obrien2@hse.ie   |
|    | <b>Governance/sign off</b>               | Celine Fitzgerald, Interim CEO, National Screening Service   |

## BreastCheck

|    |  |   |
|----|--|---|
| 1  | <b>KPI Title</b>                         | HWB37- % women offered hospital admission for treatment within three weeks of diagnosis of breast cancer  |
| 1a | <b>KPI Short Title</b>                   | Hospital admission offer within 3 weeks diagnosis   |
| 2  | <b>KPI Description</b>                   | Measures whether women diagnosed with cancer are offered treatment in BreastCheck host hospital (St Vincents, Mater, Cork University Hospital, Galway University hospital) within 3 weeks of being informed of their diagnosis of breast cancer. Detailed analysis of client records may be necessary to report this metric.        |
| 3  | <b>KPI Rationale</b>                     | Measures quality of service to women with cancer detected at screening. Aims to improve outcomes and minimise anxiety by having surgery in a timely manner. This data relates to women who opt to have treatment at BreastCheck host hospitals. Clients who opt to have treatment at other hospitals are excluded from this metric. |
| 3a | <b>Indicator Classification</b>          | National Scorecard Quadrant: Access & Integration   |
| 4  | <b>National Target</b>                   | 2020 NSP Target: >95%. This is a cumulative calculation   |
| 4a | <b>Target</b>                            | a) Performance targets constant over the full year i.e. >95%  |
| 4b | <b>Volume Metrics</b>                    | N/A   |
| 5  | <b>KPI Calculation</b>                   | Numerator = No. women offered hospital admission for treatment within 21 days of diagnosis of breast cancer. Denominator = No. women diagnosed with Breast Cancer in the reporting period. Excludes cases where further tests/opinions sought or where woman goes outside BreastCheck for treatment                                 |
| 6  | <b>Data Source</b>                       | BreastCheck database (NBSP) to the BIU business information unit via a cif template   |
| 6a | <b>Data Sign Off</b>                     | Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service   |
| 6b | <b>Data Quality Issues</b>               | None  |
| 7  | <b>Data Collection Frequency</b>         | Weekly  |
| 8  | <b>Tracer Conditions</b>                 | Women diagnosed with breast cancer requiring surgery and offered an appointment for treatment at one of the BreastCheck host hospitals.   |
| 9  | <b>Minimum Data Set MDS</b>              | No. women first invited in the period, no. of those women screened (at reporting date) No. women diagnosed with breast cancer, No. women offered hospital admission for treatment within 21 days of diagnosis of breast cancer.   |
| 10 | <b>International Comparison</b>          | None  |
| 11 | <b>KPI Monitoring</b>                    | Bi-annual   |
| 12 | <b>KPI Reporting Frequency</b>           | Bi-annual   |
| 13 | <b>KPI Report Period</b>                 | BA-1Q (rolling 6 months one quarter in arrears, i.e. March 2020 report will report on data for period Jun-Dec 2019; Sep 2020 report will report on data for period Jan-Jun 2020)  |
| 14 | <b>KPI Reporting Aggregation</b>         | National  |
| 15 | <b>KPI is reported in which reports?</b> | Performance Profile / Management Data Report  |
| 16 | <b>Web link to data</b>                  | <a href="http://www.hse.ie/eng/services/publications/performance-reports/">http://www.hse.ie/eng/services/publications/performance-reports/</a>   |
| 17 | <b>Additional Information</b>            |   |
|    | <b>KPI owner/lead for implementation</b> | Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service   |
|    | <b>PBI data support</b>                  | Siobhán O'Brien, Data Analyst, National Business Information Unit - siobhan.obrien2@hse.ie  |
|    | <b>Governance/sign off</b>               | Celine Fitzgerald, Interim CEO, National Screening Service  |

## BreastCheck

|    |  |  |
|----|--|--|
| 1  | <b>KPI Title</b>                         | HWB35- % BreastCheck screening uptake rate   |
| 1a | <b>KPI Short Title</b>                   | BreastCheck uptake rate  |
| 2  | <b>KPI Description</b>                   | A cohort measurement of the uptake of screening by women whose date of first offered invitation in the current screening round was within the reporting period. These women are followed over time to allow adequate time for taking up their appoint (or second appointment in the round). Includes all women in the eligible population ie including age extension. Includes all women in the eligible population aged 50-69 |
| 3  | <b>KPI Rationale</b>                     | To maximise the uptake of breast screening among the eligible population. Based on evidence from Randomised Controlled Trials and International best evidence. This level of uptake is required to have an effective reduction in mortality from breast cancer.  |
| 3a | <b>Indicator Classification</b>          | National Scorecard Quadrant: Access & Integration  |
| 4  | <b>National Target</b>                   | 2020 NSP Target: >70% . This is a cumulative calculation   |
| 4a | <b>Target</b>                            | Performance targets constant over the full year i.e. >70%  |
| 4b | <b>Volume Metrics</b>                    | N/A  |
| 5  | <b>KPI Calculation</b>                   | Numerator= No. of those women who attended screening. Subject to change due to uptake on second invitation, rescheduling etc. Denominator=women whose date of first offered invitation in the current screening round was within the reporting period.   |
| 6  | <b>Data Source</b>                       | BreastCheck database (NBSP) to the BIU business information unit via a cif template  |
| 6a | <b>Data Sign Off</b>                     | Dr. Therese Mooney, Head of Programme Evaluation Service, National Screening Service   |
| 6b | <b>Data Quality Issues</b>               | None   |
| 7  | <b>Data Collection Frequency</b>         | Daily  |
| 8  | <b>Tracer Conditions</b>                 | Women aged 50-69 whose date of first offered appointment in the round falls within the reporting period  |
| 9  | <b>Minimum Data Set MDS</b>              | No. women first offered invitation in the period, no. of those women screened (at reporting date), age   |
| 10 | <b>International Comparison</b>          | >70% Agreed International Standard   |
| 11 | <b>KPI Monitoring</b>                    | Quarterly  |
| 12 | <b>KPI Reporting Frequency</b>           | Quarterly  |
| 13 | <b>KPI Report Period</b>                 | Q-1Q   |
| 14 | <b>KPI Reporting Aggregation</b>         | National   |
| 15 | <b>KPI is reported in which reports?</b> | Performance Profile / Management Data Report / Annual Report   |
| 16 | <b>Web link to data</b>                  | <a href="http://www.hse.ie/eng/services/publications/performance-reports/">http://www.hse.ie/eng/services/publications/performance-reports/</a>  |
| 17 | <b>Additional Information</b>            |  |
|    | <b>KPI owner/lead for implementation</b> | Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service  |
|    | <b>PBI data support</b>                  | Siobhán O'Brien, Data Analyst, National Business Information Unit - siobhan.obrien2@hse.ie   |
|    | <b>Governance/sign off</b>               | Celine Fitzgerald, Interim CEO, National Screening Service   |

## CervicalCheck

|    |  |   |
|----|--|---|
| 1  | <b>KPI Title</b>                         | HWB40- % eligible women with at least one satisfactory CervicalCheck screening in a 5-year period   |
| 1a | <b>KPI Short Title</b>                   | one satisfactory CervicalCheck in 5yr period  |
| 2  | <b>KPI Description</b>                   | Measures the proportion of the known eligible population who have had at least one satisfactory screening test in the five year period defined. Period is based on a five-year screening round. This is a rolling metric updated to the end of the previous quarter. Numerator=no. unique women aged 25-60 who have had a satisfactory screening test in the previous 5 years, Denominator= no. of unique women aged 25-60 in the population (based on most recent census estimates) adjusted for women who have had a hysterectomy (therefore not eligible for the CervicalCheck programme). |
| 3  | <b>KPI Rationale</b>                     | Measures the coverage of the CervicalCheck programme among the eligible population. Monitors if the programme is reaching the population it serves.   |
| 3a | <b>Indicator Classification</b>          | National Scorecard Quadrant : Access & Integration  |
| 4  | <b>National Target</b>                   | 2020 NSP Target: >80% . This is a cumulative calculation  |
| 4a | <b>Target</b>                            | a) Performance targets constant over the full year i.e. >80%  |
| 4b | <b>Volume Metrics</b>                    | N/A   |
| 5  | <b>KPI Calculation</b>                   | Numerator=no. unique women aged 25-60 who have had a satisfactory screening test in the previous 5 years, Denominator= no. of unique women aged 25-60 in the population (based on most recent census estimates) adjusted for women who have had a hysterectomy (therefore not eligible for the CervicalCheck programme)   |
| 6  | <b>Data Source</b>                       | CervicalCheck database (CSR) to the BIU business information unit via a cif template  |
| 6a | <b>Data Sign Off</b>                     | Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service   |
| 6b | <b>Data Quality Issues</b>               | None  |
| 7  | <b>Data Collection Frequency</b>         | Quarterly   |
| 8  | <b>Tracer Conditions</b>                 | Women aged between 25 and 60 who are eligible for screening and who have had a satisfactory screening test carried out in the previous five years. Excludes women who have had a hysterectomy and are therefore ineligible for cervical screening.  |
| 9  | <b>Minimum Data Set MDS</b>              | Client name, address, DOB, date of screening.   |
| 10 | <b>International Comparison</b>          | Similar in other countries  |
| 11 | <b>KPI Monitoring</b>                    | Quarterly   |
| 12 | <b>KPI Reporting Frequency</b>           | Quarterly   |
| 13 | <b>KPI Report Period</b>                 | Q-1Q  |
| 14 | <b>KPI Reporting Aggregation</b>         | National  |
| 15 | <b>KPI is reported in which reports?</b> | Performance Profile / Management Data Report / Annual Report  |
| 16 | <b>Web link to data</b>                  | <a href="http://www.hse.ie/eng/services/publications/performance-reports/">http://www.hse.ie/eng/services/publications/performance-reports/</a>   |
| 17 | <b>Additional Information</b>            |   |
|    | <b>KPI owner/lead for implementation</b> | Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service   |
|    | <b>PBI data support</b>                  | Siobhán O'Brien, Data Analyst, National Business Information Unit, siobhan.obrien2@hse.ie   |
|    | <b>Governance/sign off</b>               | Celine Fitzgerald, Interim Head of Screening, National Screening Service  |

## CervicalCheck

|    |  |   |
|----|--|---|
| 1  | <b>KPI Title</b>                         | HWB21- No. of unique women who have had one or more smear tests in a primary care setting.  |
| 1a | <b>KPI Short Title</b>                   | Unique women one or more smear tests  |
| 2  | <b>KPI Description</b>                   | Activity measurement; count of number of women who have had a satisfactory screening test in the reporting period i.e one that could be analysed and reported on. |
| 3  | <b>KPI Rationale</b>                     | Activity measurement Better Health & Wellbeing  |
| 3a | <b>Indicator Classification</b>          | National Scorecard Quadrant: Access & Integration   |
| 4  | <b>National Target</b>                   | 2020 NSP Target: 255,000. This is a cumulative calculation  |
| 4a | <b>Target</b>                            | 255,000 women   |
| 4b | <b>Volume Metrics</b>                    |   |
| 5  | <b>KPI Calculation</b>                   | Count of number of women who have had a satisfactory screening test in the reporting period i.e. one that could be analysed and reported on.                      |
| 6  | <b>Data Source</b>                       | CervicalCheck database (CSR) to the BIU business information unit via a cif template  |
| 6a | <b>Data Sign Off</b>                     | Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service   |
| 6b | <b>Data Quality Issues</b>               | None  |
| 7  | <b>Data Collection Frequency</b>         | Daily   |
| 8  | <b>Tracer Conditions</b>                 | Women aged between 25 and 60 who are eligible for screening and who have had a satisfactory screening test carried out in a primary care setting                  |
| 9  | <b>Minimum Data Set MDS</b>              | Client Name, Address, DOB   |
| 10 | <b>International Comparison</b>          | Similar in other countries  |
| 11 | <b>KPI Monitoring</b>                    | Monthly   |
| 12 | <b>KPI Reporting Frequency</b>           | Monthly   |
| 13 | <b>KPI Report Period</b>                 | Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)  |
| 14 | <b>KPI Reporting Aggregation</b>         | National  |
| 15 | <b>KPI is reported in which reports?</b> | Performance Profile, Management Data Report, Annual Report  |
| 16 | <b>Web link to data</b>                  | <a href="http://www.hse.ie/eng/services/publications/performance-reports/">http://www.hse.ie/eng/services/publications/performance-reports/</a>                   |
| 17 | <b>Additional Information</b>            |   |
|    | <b>KPI owner/lead for implementation</b> | Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service   |
|    | <b>PBI data support</b>                  | Siobhán O'Brien, Data Analyst, National Business Information Unit, siobhan.obrien2@hse.ie   |
|    | <b>Governance/sign off</b>               | Celine Fitzgerald, Interim Head of Screening, National Screening Service  |



## CervicalCheck

|    |  |  |
|----|--|--|
| 1  | <b>KPI Title</b>                         | NSS1 Average result turnaround time (weeks)  |
| 1a | <b>KPI Short Title</b>                   | CervicalCheck Lab turnaround times (TATs)  |
| 2  | <b>KPI Description</b>                   | Measures average time in weeks from receipt of sample at the laboratory to receipt of result to the Programme  |
| 3  | <b>KPI Rationale</b>                     | To monitor compliance to CervicalCheck QA Guidelines and contract requirements on laboratory turnaround time.  |
| 3a | <b>Indicator Classification</b>          | National Scorecard Quadrant: Quality & Safety  |
| 4  | <b>National Target</b>                   | 2020 NSP Target: 6 weeks. This is a Point in Time calculation  |
| 4a | <b>Target</b>                            | 6 weeks  |
| 4b | <b>Volume Metrics</b>                    |  |
| 5  | <b>KPI Calculation</b>                   | Calculation involves a count of the number of results received by the Programme within the reporting month and a count of the number of days that elapsed from receipt of each of these samples by the Laboratory to the results being received by the Programme. Business Objects Reporting calculates the average time in weeks based on this information. |
| 6  | <b>Data Source</b>                       | From CSR Business Objects reports via template to BIU  |
| 6a | <b>Data Sign Off</b>                     | Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service  |
| 6b | <b>Data Quality Issues</b>               | N/A  |
| 7  | <b>Data Collection Frequency</b>         | Daily  |
| 8  | <b>Tracer Conditions</b>                 |  |
| 9  | <b>Minimum Data Set MDS</b>              | Date result received by CervicalCheck; Notification date of sample received at laboratory  |
| 10 | <b>International Comparison</b>          |  |
| 11 | <b>KPI Monitoring</b>                    | Weekly   |
| 12 | <b>KPI Reporting Frequency</b>           | Monthly  |
| 13 | <b>KPI Report Period</b>                 | Monthly  |
| 14 | <b>KPI Reporting Aggregation</b>         | National   |
| 15 | <b>KPI is reported in which reports?</b> | National Service Plan / Management Data Report / Preliminary Report  |
| 16 | <b>Web link to data</b>                  | <a href="http://www.hse.ie/eng/services/publications/performance-reports/">http://www.hse.ie/eng/services/publications/performance-reports/</a>  |
| 17 | <b>Additional Information</b>            |  |
|    | <b>KPI owner/lead for implementation</b> | Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service  |
|    | <b>PBI data support</b>                  | Siobhán O'Brien, National Data Analyst, National Business Information Unit, siobhan.obrien2@hse.ie   |
|    | <b>Governance/sign off</b>               | Damien McCallion, National Director, National Screening Service  |

## Diabetic Retina Screen

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|----|--|--|
| 1  | <b>KPI Title</b>                         | HWB23- No. of Diabetic RetinaScreen clients screened with final grading result   |
| 1a | <b>KPI Short Title</b>                   | Diabetic RetinaScreen clients screened   |
| 2  | <b>KPI Description</b>                   | An activity measurement of the number of eligible men, women and children over 12 years who were screened for diabetic retinopathy within the reporting period. Clients are considered to be screened when a final grading result is received by the programme. This number includes clients who had a slit-lamp test (if required). |
| 3  | <b>KPI Rationale</b>                     | Activity measurement: Better Health & Wellbeing  |
| 3a | <b>Indicator Classification</b>          | National Scorecard Quadrant: Access & Integration  |
| 4  | <b>National Target</b>                   | 2020 NSP Target: 110,000. This is a cumulative calculation   |
| 4a | <b>Target</b>                            |  |
| 4b | <b>Volume Metrics</b>                    |  |
| 5  | <b>KPI Calculation</b>                   | Count of the number of eligible men, women and children aged over 12 years who were screened for diabetic retinopathy within the reporting period. Clients are considered to be screened when a final grading result is received by the programme. This number includes clients who had a slit-lamp test (if required).              |
| 6  | <b>Data Source</b>                       | DiabeticRetinaScreen Database (DRS) to the BIU business information unit via a cif template  |
| 6a | <b>Data Sign Off</b>                     | Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service  |
| 6b | <b>Data Quality Issues</b>               | None   |
| 7  | <b>Data Collection Frequency</b>         | Daily  |
| 8  | <b>Tracer Conditions</b>                 | Men and women and children aged over 12 years who have been diagnosed with diabetes and who have been screened as part of the DiabeticRetinaScreen programme.  |
| 9  | <b>Minimum Data Set MDS</b>              | Client name, address, sex, DOB, date of screening.   |
| 10 | <b>International Comparison</b>          | Similar in other countries   |
| 11 | <b>KPI Monitoring</b>                    | Monthly  |
| 12 | <b>KPI Reporting Frequency</b>           | Monthly  |
| 13 | <b>KPI Report Period</b>                 | Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)   |
| 14 | <b>KPI Reporting Aggregation</b>         | National   |
| 15 | <b>KPI is reported in which reports?</b> | Performance Profile / Management Data Report / Annual Report   |
| 16 | <b>Web link to data</b>                  | <a href="http://www.hse.ie/eng/services/publications/performance-reports/">http://www.hse.ie/eng/services/publications/performance-reports/</a>  |
| 17 | <b>Additional Information</b>            |  |
|    | <b>KPI owner/lead for implementation</b> | Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service  |
|    | <b>PBI data support</b>                  | Siobhán O'Brien, Data Analyst, National Business Information Unit - siobhan.obrien2@hse.ie   |
|    | <b>Governance/sign off</b>               | Celine Fitzgerald, Interim CEO, National Screening Service   |

## Diabetic Retina Screen

|    |  |   |
|----|--|---|
| 1  | <b>KPI Title</b>                         | HWB47- % Diabetic Retina Screen uptake rate   |
| 1a | <b>KPI Short Title</b>                   | Diabetic RetinaScreen uptake  |
| 2  | <b>KPI Description</b>                   | A cohort measurement of the uptake of diabetic retinopathy screening by eligible men and women whose date of first offered invitation in the current screening round was within the reporting period. Clients are considered to be screened when a final grading result is received by the programme. Clients are followed over time to allow adequate time for having a slit-lamp test (if required) or taking up their reminder invitation in the round. Subject to change due to delays with slit-lamp testing and uptake of screening on reminder invitation etc. |
| 3  | <b>KPI Rationale</b>                     | To maximise the uptake of diabetic retinopathy screening among the eligible population.   |
| 3a | <b>Indicator Classification</b>          | National Scorecard Quadrant : Access & Integration  |
| 4  | <b>National Target</b>                   | 2020 NSP Target: >68%. This is a cumulative calculation   |
| 4a | <b>Target</b>                            | a) Performance targets constant over the full year i.e., >68%   |
| 4b | <b>Volume Metrics</b>                    |   |
| 5  | <b>KPI Calculation</b>                   | Numerator= No. of those clients who completed a screening test and had a final grading result. Subject to change due to requirement for slit-lamp screening in some cases which causes delays and also due to uptake on reminder invitation etc. Denominator = eligible clients whose date of first offered invitation in the current screening round was within the reporting period.  |
| 6  | <b>Data Source</b>                       | DiabeticRetinaScreen Database (DRS) to the BIU business information unit via a cif template   |
| 6a | <b>Data Sign Off</b>                     | Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service   |
| 6b | <b>Data Quality Issues</b>               | None  |
| 7  | <b>Data Collection Frequency</b>         | Daily   |
| 8  | <b>Tracer Conditions</b>                 | Men and women and children aged over 12 years who have been diagnosed with diabetes and who have been screened as part of the DiabeticRetinaScreen programme.   |
| 9  | <b>Minimum Data Set MDS</b>              | Client name, address, sex, DOB, date of screening.  |
| 10 | <b>International Comparison</b>          | Similar in other countries  |
| 11 | <b>KPI Monitoring</b>                    | Quarterly   |
| 12 | <b>KPI Reporting Frequency</b>           | Quarterly   |
| 13 | <b>KPI Report Period</b>                 | Q-1Q  |
| 14 | <b>KPI Reporting Aggregation</b>         | National  |
| 15 | <b>KPI is reported in which reports?</b> | Performance Profile / Management Data Report / Annual Report  |
| 16 | <b>Web link to data</b>                  | <a href="http://www.hse.ie/eng/services/publications/performance-reports/">http://www.hse.ie/eng/services/publications/performance-reports/</a>   |
| 17 | <b>Additional Information</b>            |   |
|    | <b>KPI owner/lead for implementation</b> | Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service   |
|    | <b>PBI data support</b>                  | Siobhán O'Brien, Data Analyst, National Business Information Unit - siobhan.obrien2@hse.ie  |
|    | <b>Governance/sign off</b>               | Celine Fitzgerald, Interim CEO, National Screening Service  |