



National Screening Service

Key Performance Indicator Metadata 2022



BreastCheck

1	KPI Title	HWB77- No. of women in the eligible population who have had a complete mammogram
1a	KPI Short Title	Eligible women who have had a mammogram
2	KPI Description	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	KPI Rationale	Activity measurement: Better Health & Wellbeing
3a	Indicator Classification	National Scorecard Quadrant: Access & Integration
4	National Target	2022 NSP Target: 150,000 women. This is a cumulative calculation
4a	Target	Jan: 10,000, Feb: 10,000, Mar: 12,000, Apr: 10,000, May: 15,000, Jun: 16,000, Jul: 10,000, Aug: 10,000, Sep: 16,000, Oct: 15,000, Nov: 16,000, Dec: 10,000
4b	Volume Metrics	
5	KPI Calculation	Count of number of initial women and subsequent women who have had a complete mammogram in the reporting period.
6	Data Source	BreastCheck database (NBSP) to the BIU business information unit via a cif template
6a	Data Sign Off	Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service
6b	Data Quality Issues	None
7	Data Collection Frequency	Daily
8	Tracer Conditions	Women who are eligible for screening.
9	Minimum Data Set MDS	Client Name, Address, DOB
10	International Comparison	Similar in other countries
11	KPI Monitoring	Monthly
12	KPI Reporting Frequency	Monthly
13	KPI Report Period	Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)
14	KPI Reporting Aggregation	National
15	KPI is reported in which reports?	Performance Profile / Management Data Report / Annual Report
16	Web link to data	http://www.hse.ie/eng/services/publications/performance-reports/
17	Additional Information	As reported in the HSE Performance Profile and Management Data Report
18	KPI owner/lead for implementation	Therese Mooney, Head of Programme Evaluation Unit, National Screening Service.
19	PBI data support	Siobhán O'Brien, Data Analyst, National Business Information Unit : siobhan.obrien2@hse.ie
20	Integrated Co-ordination Lead/Planning Lead/AND/CEO	Fiona Murphy, CEO, National Screening Service

BreastCheck

1	KPI Title	HWB37- % women offered hospital admission for treatment within three weeks of diagnosis of breast cancer
1a	KPI Short Title	Hospital admission offer within 3 weeks diagnosis
2	KPI Description	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	KPI Rationale	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	Indicator Classification	National Scorecard Quadrant: Access & Integration
4	National Target	2022 NSP Target: >90%. This is a cumulative calculation
4a	Target	a) Performance targets constant over the full year i.e. >90%
4b	Volume Metrics	N/A
5	KPI Calculation	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	Data Source	BreastCheck database (NBSP) to the BIU business information unit via a cif template
6a	Data Sign Off	Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service
6b	Data Quality Issues	None
7	Data Collection Frequency	Weekly
8	Tracer Conditions	Women diagnosed with breast cancer requiring surgery and offered an appointment for treatment at one of the BreastCheck host hospitals.
9	Minimum Data Set MDS	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	International Comparison	None
11	KPI Monitoring	Bi-annual
12	KPI Reporting Frequency	Bi-annual
13	KPI Report Period	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	KPI Reporting Aggregation	National
15	KPI is reported in which reports?	Performance Profile / Management Data Report
16	Web link to data	http://www.hse.ie/eng/services/publications/performance-reports/
17	Additional Information	
18	KPI owner/lead for implementation	Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service
19	PBI data support	Siobhán O'Brien, Data Analyst, National Business Information Unit - siobhan.obrien2@hse.ie
20	Integrated Co-Ordination Lead/Planning Lead/AND/CEO	Fiona Murphy, CEO, National Screening Service

BreastCheck

1	KPI Title	HWB35- % BreastCheck screening uptake rate
1a	KPI Short Title	BreastCheck uptake rate
2	KPI Description	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	KPI Rationale	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	Indicator Classification	National Scorecard Quadrant: Access & Integration
4	National Target	2022 NSP Target: >70% . This is a cumulative calculation
4a	Target	Performance targets constant over the full year i.e. >70%
4b	Volume Metrics	N/A
5	KPI Calculation	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	Data Source	BreastCheck database (NBSP) to the BIU business information unit via a cif template
6a	Data Sign Off	Dr. Therese Mooney, Head of Programme Evaluation Service, National Screening Service
6b	Data Quality Issues	None
7	Data Collection Frequency	Daily
8	Tracer Conditions	Women aged 50-69 whose date of first offered appointment in the round falls within the reporting period
9	Minimum Data Set MDS	No. women first offered invitation in the period, no. of those women screened (at reporting date), age
10	International Comparison	>70% Agreed International Standard
11	KPI Monitoring	Quarterly
12	KPI Reporting Frequency	Quarterly
13	KPI Report Period	Q-1Q
14	KPI Reporting Aggregation	National
15	KPI is reported in which reports?	Performance Profile / Management Data Report / Annual Report
16	Web link to data	http://www.hse.ie/eng/services/publications/performance-reports/
17	Additional Information	
18	KPI owner/lead for implementation	Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service
19	PBI data support	Siobhán O'Brien, Data Analyst, National Business Information Unit - siobhan.obrien2@hse.ie
20	Integrated Co-Ordination Lead/Planning Lead/AND/CEO	Fiona Murphy, CEO, National Screening Service

CervicalCheck

1	KPI Title	NSS3 - % eligible women with at least one satisfactory cervical screening in a 5-year period
1a	KPI Short Title	One satisfactory CervicalCheck in 5yr period
2	KPI Description	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 25-65 who have had a satisfactory screening test in the previous 5 years, Denominator= no. of unique women aged 25-65 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	KPI Rationale	Measures the coverage of the CervicalCheck programme among the eligible population. Monitors if the programme is reaching the population it serves. Used as International comparator.
3a	Indicator Classification	National Scorecard Quadrant : Access & Integration
4	National Target	2022 NSP Target: >80% . This is a rolling cumulative calculation
4a	Target	a) Performance targets constant over the full year i.e. >80%
4b	Volume Metrics	N/A
5	KPI Calculation	Numerator=no. unique women aged 25-65 who have had a satisfactory screening test in the previous 5 years, Denominator= no. of unique women aged 25-65 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	Data Source	CervicalCheck database (CSR) to the BIU business information unit via a cif template
6a	Data Sign Off	Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service
6b	Data Quality Issues	None
7	Data Collection Frequency	Quarterly
8	Tracer Conditions	Women aged between 25 and 65 who are eligible for sceening 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	Minimum Data Set MDS	Client name, address, DOB, date of screening.
10	International Comparison	Similar in other countries
11	KPI Monitoring	Quarterly
12	KPI Reporting Frequency	Quarterly
13	KPI Report Period	Q-1Q
14	KPI Reporting Aggregation	National
15	KPI is reported in which reports?	Performance Profile / Management Data Report / Annual Report
16	Web link to data	http://www.hse.ie/eng/services/publications/performance-reports/
17	Additional Information	
	KPI owner/lead for implementation	Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service
	PBI data support	Siobhán O'Brien, Data Analyst, National Business Information Unit, siobhan.obrien2@hse.ie
	Integrated Co-Ordination Lead/Planning Lead/AND/CEO	Fiona Murphy, CEO, National Screening Service

CervicalCheck

1	KPI Title	NSS2 - No. of unique women who have had one or more satisfactory cervical screening tests in a primary care setting.
1a	KPI Short Title	Unique women one or more smear tests
2	KPI Description	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	KPI Rationale	Activity measurement Better Health & Wellbeing
3a	Indicator Classification	National Scorecard Quadrant: Access & Integration
4	National Target	2022 NSP Target: 295,000. This is a cumulative calculation
4a	Target	Jan: 29,500, Feb: 27,000, Mar: 25,100, Apr: 25,100, May: 25,100, Jun: 23,600, Jul: 23,600, Aug: 23,600, Sep: 27,000, Oct: 23,600, Nov: 23,600, Dec: 18,200
4b	Volume Metrics	
5	KPI Calculation	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	Data Source	CervicalCheck database (CSR) to the BIU business information unit via a cif template
6a	Data Sign Off	Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service
6b	Data Quality Issues	None
7	Data Collection Frequency	Daily
8	Tracer Conditions	Women aged between 25 and 65 who are eligible for screening and who have had a satisfactory screening test carried out in a primary care setting
9	Minimum Data Set MDS	Client Name, Address, DOB
10	International Comparison	Similar in other countries
11	KPI Monitoring	Monthly
12	KPI Reporting Frequency	Monthly
13	KPI Report Period	Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)
14	KPI Reporting Aggregation	National
15	KPI is reported in which reports?	Performance Profile, Management Data Report, Annual Report
16	Web link to data	http://www.hse.ie/eng/services/publications/performance-reports/
17	Additional Information	New KPI introduced in 2021 to account for HPV primary screening and associated extended age-range
	KPI owner/lead for implementation	Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service
	PBI data support	Siobhán O'Brien, Data Analyst, National Business Information Unit, siobhan.obrien2@hse.ie
	Integrated Co-Ordination Lead/Planning Lead/AND/CEO	Fiona Murphy, Head of Screening, National Screening Service

BowelScreen

1	KPI Title	HWB46 - % of client uptake rate in the BowelScreen programme
1a	KPI Short Title	BowelScreen Uptake
2	KPI Description	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	KPI Rationale	To maximise the uptake of bowel screening among the eligible population
3a	Indicator Classification	National Scorecard Quadrant: Access & Integration
4	National Target	2022 NSP Target: >45%. This is a cumulative calculation
4a	Target	Q1 - 42%, Q2 - 43%, Q3 - 44%, Q4 - 45%
4b	Volume Metrics	
5	KPI Calculation	Numerator= No. of those clients who completed a satisfactory FIT test. Subject to change due to uptake on reminder invitation etc. Denominator=clients whose date of first offered invitation to take part in BowelScreen in the current screening round was within the reporting period.
6	Data Source	BowelScreen Database (COR) to the NBIU Business Information Unit via a cif template
6a	Data Sign Off	Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service
6b	Data Quality Issues	None
7	Data Collection Frequency	Daily
8	Tracer Conditions	Men and women aged between 60 and 69 who have been invited to take part in the BowelScreen programme.
9	Minimum Data Set MDS	Client name, address, sex, DOB, date of screening.
10	International Comparison	Similar in other countries
11	KPI Monitoring	Quarterly
12	KPI Reporting Frequency	Quarterly
13	KPI Report Period	Q-1Q
14	KPI Reporting Aggregation	National
15	KPI is reported in which reports?	Performance Profile / Management Data Report / Annual Report
16	Web link to data	http://www.hse.ie/eng/services/publications/performance-reports/
17	Additional Information	N/A
	KPI owner/lead for implementation	Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service
	PBI data support	Siobhán O'Brien, Data Analyst, National Business Information Unit - siobhan.obrien2@hse.ie
	Integrated Co-Ordination Lead/Planning Lead/AND/CEO	Fiona Murphy, CEO, National Screening Service

BowelScreen

1	KPI Title	HWB82- No. of clients who have completed a satisfactory BowelScreen FIT test
1a	KPI Short Title	Satisfactory BowelScreen FIT test
2	KPI Description	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	Indicator Classification	National Scorecard Quadrant: Access & Integration
4	National Target	2022 NSP Target: 140,000. This is a cumulative calculation
4a	Target	Jan: 12,500, Feb: 12,000, Mar: 12,000, Apr: 13,000, May: 13,000, Jun: 11,500, Jul: 10,500, Aug: 10,500, Sep: 12,000, Oct: 12,000, Nov: 11,000, Dec: 10,000
4b	Volume Metrics	
5	KPI Calculation	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	Data Source	BowelScreen Database (COR) to the BIU business information unit via a cif template
6a	Data Sign Off	Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service
6b	Data Quality Issues	None
7	Data Collection Frequency	Daily
8	Tracer Conditions	Men and women aged between 60 and 69 who have been invited to take part in the BowelScreen programme
9	Minimum Data Set MDS	Client Name, Address, Sex, DOB, date of screening
10	International Comparison	Similar in other countries
11	KPI Monitoring	Monthly
12	KPI Reporting Frequency	Monthly
13	KPI Report Period	Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)
14	KPI Reporting Aggregation	National
15	KPI is reported in which reports?	Performance Profile / Management Data Report / Annual Report
16	Web link to data	http://www.hse.ie/eng/services/publications/performance-reports/
17	Additional Information	
	KPI owner/lead for implementation	Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service
	PBI data support	Siobhán O'Brien, Data Analyst, National Business Information Unit - siobhan.obrien2@hse.ie
	Integrated Co-Ordination Lead/Planning Lead/AND/CEO	Fiona Murphy, CEO, National Screening Service

Diabetic Retina Screen

1	KPI Title	HWB23- No. of Diabetic RetinaScreen clients screened with final grading result
1a	KPI Short Title	Diabetic RetinaScreen clients screened
2	KPI Description	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	KPI Rationale	Activity measurement: Better Health & Wellbeing
3a	Indicator Classification	National Scorecard Quadrant: Access & Integration
4	National Target	2022 NSP Target: 111,000. This is a cumulative calculation
4a	Target	Jan: 8,900, Feb: 9,500, Mar: 9,000, Apr: 8,900, May: 9,500, Jun: 9,500, Jul: 9,500, Aug: 9,200, Sep: 9,000, Oct: 9,500, Nov: 9,500, Dec: 9,000
4b	Volume Metrics	
5	KPI Calculation	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	Data Source	DiabeticRetinaScreen Database (DRS) to the BIU business information unit via a cif template
6a	Data Sign Off	Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service
6b	Data Quality Issues	None
7	Data Collection Frequency	Daily
8	Tracer Conditions	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	Minimum Data Set MDS	Client name, address, sex, DOB, date of screening.
10	International Comparison	Similar in other countries
11	KPI Monitoring	Monthly
12	KPI Reporting Frequency	Monthly
13	KPI Report Period	Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)
14	KPI Reporting Aggregation	National
15	KPI is reported in which reports?	Performance Profile / Management Data Report / Annual Report
16	Web link to data	http://www.hse.ie/eng/services/publications/performance-reports/
17	Additional Information	
	KPI owner/lead for implementation	Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service
	PBI data support	Siobhán O'Brien, Data Analyst, National Business Information Unit - siobhan.obrien2@hse.ie
	Integrated Co-Ordination Lead/Planning Lead/AND/CEO	Fiona Murphy, CEO, National Screening Service

Diabetic Retina Screen

1	KPI Title	HWB47- % Diabetic Retina Screen uptake rate
1a	KPI Short Title	Diabetic RetinaScreen uptake
2	KPI Description	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	KPI Rationale	To maximise the uptake of diabetic retinopathy screening among the eligible population.
3a	Indicator Classification	National Scorecard Quadrant : Access & Integration
4	National Target	2022 NSP Target: >69%. This is a cumulative calculation
4a	Target	a) Performance targets constant over the full year i.e., >69%
4b	Volume Metrics	
5	KPI Calculation	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	Data Source	DiabeticRetinaScreen Database (DRS) to the BIU business information unit via a cif template
6a	Data Sign Off	Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service
6b	Data Quality Issues	None
7	Data Collection Frequency	Daily
8	Tracer Conditions	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	Minimum Data Set MDS	Client name, address, sex, DOB, date of screening.
10	International Comparison	Similar in other countries
11	KPI Monitoring	Quarterly
12	KPI Reporting Frequency	Quarterly
13	KPI Report Period	Q-1Q
14	KPI Reporting Aggregation	National
15	KPI is reported in which reports?	Performance Profile / Management Data Report / Annual Report
16	Web link to data	http://www.hse.ie/eng/services/publications/performance-reports/
17	Additional Information	
	KPI owner/lead for implementation	Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service
	PBI data support	Siobhán O'Brien, Data Analyst, National Business Information Unit - siobhan.obrien2@hse.ie
	Integrated Co-Ordination Lead/Planning Lead/AND/CEO	Fiona Murphy, CEO, National Screening Service

Diabetic Retina Screen

1	KPI Title	HWB48- % of clients who are issued a Diabetic RetinaScreen result within 3 weeks
1a	KPI Short Title	Diabetic RetinaScreen result in 3 weeks
2	KPI Description	A measurement of the proportion of eligible men, women and children over 12 years who were screened for diabetic retinopathy within the reporting period and who were issued their results within 3 weeks of the date of attending a complete screening examination . 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	KPI Rationale	A quality measurement to reduce anxiety regarding waiting for results among clients screened for diabetic retinopathy
3a	Indicator Classification	Access and Integration
4	National Target	2022 Operational Plan Target: >90%. This is a cumulative calculation
4a	Target	Performance targets constant over the full year i.e., >90%
4b	Volume Metrics	
5	KPI Calculation	Numerator = the number of eligible men, women and children aged over 12 years who were screened for diabetic retinopathy within the reporting period who were issued their results within 3 weeks of the date of complete screening. 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). Denominator = 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	Data Source	DiabeticRetinaScreen Database (DRS) to the BIU business information unit via a cif template
6a	Data Sign Off	Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service
6b	Data Quality Issues	None
7	Data Collection Frequency	Daily
8	Tracer Conditions	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	Minimum Data Set MDS	Client name, address, sex, DOB, date of screening.
10	International Comparison	Similar in other countries
11	KPI Monitoring	Quarterly
12	KPI Reporting Frequency	Quarterly
13	KPI Report Period	Quarterly
14	KPI Reporting Aggregation	National
15	KPI is reported in which reports?	Preliminary Report
16	Web link to data	n/a
17	Additional Information	
	KPI owner/lead for implementation	Dr. Therese Mooney, Head of Programme Evaluation Unit, National Screening Service
	PBI data support	Siobhán O'Brien, Data Analyst, National Business Information Unit - siobhan.obrien2@hse.ie
	Integrated Co-Ordination Lead/Planning Lead/AND/CEO	Fiona Murphy, CEO,National Screening Service