



*National Quality and Patient  
Safety Directorate*

**Incident Management NIMS**

**System-wide KPIs 2024**





An Stiúrthóireacht um Ardchaighdeán  
agus Sábháilteacht Othar  
Oifig an Phríomhoifigigh Cliniciúil

National Quality and  
Patient Safety Directorate  
Office of the Chief Clinical Officer

Visit NQPSD website to download the full Integrated Guide to NIMS KPI reporting.

<https://www2.healthservice.hse.ie/organisation/gps-incident-management/nims/>

This Guide includes the step by step process to extract data from NIMS and an automated excel template to calculate the KPIs based on the extracted data. The tool is using the exact calculations employed by NQPSD in producing the monthly KPI report.

Please note NIMS is a dynamic system and data may be updated at any time. Please check the Guide provided to see standardised dates for extracts.



No	Steps	Detail supporting KPI
1	<b>KPI title</b>	QAS09 % of reviews completed within 125 days of category 1 incidents from the date the service was notified of the incident
2	<b>KPI Description</b>	<p>The percentage of compliant Category 1 incidents in the selected period, where Service User was involved and a decision was not made that no further review is necessary. To be compliant the selected incidents need to have a review completed and accepted by the commissioner date in no more than 125 days from the date of notification, which is the first date the service became aware of the incident.</p> <p>As per the HSE Incident Management Framework 2020, a Category 1 Incident is defined as "Clinical and non-clinical incidents rated as Major or Extreme as per the HSE's Risk Impact Table".</p> <p>Although all Category 1 incidents require review, the KPI is focused only on Category 1 incidents where "Who was involved" is Service User.</p> <p>In the case of Category 1 incidents monitoring of commissioned reviews is a function of the SIMT. This is of particular importance to ensure that reviews are completed within the 125-day timeframe. Reviews at risk of breach of this timeframe should be the subject of active management by the SIMT.</p> <p>Where the SIMT have decided not to review a Category 1 incident, the decision supported by a reason or basis for the decision must be signed off by the SAO and reviewed at the relevant committee e.g. the Quality and Safety Committee.(IMF 2020).</p>
3	<b>KPI Rationale</b>	To assist with a responsive and timely approach to review and with building a culture of safety, reviews should be completed within the shortest possible timeframe.
3a	<b>Indicator Classification</b>	<p><b>National Scorecard Quadrant</b></p> <p>a) Quality and Safety;</p> <p>b) Access;</p> <p>c) Finance, Governance and Compliance.</p> <p>d) Workforce;</p>
4	<b>KPI Target</b>	70%
5	<b>KPI Calculation</b>	<p><b>Numerator:</b> No of Category 1 Incidents where 'Who was involved' is Service User, where a decision that further review is not necessary was not made, where notification date is between last day of reporting month-125days and 12 months prior and the 'Date Review Accepted By Commissioner' is on the same date or earlier than notification date (see below Date Notified Adjusted) + 125 Days.</p> <p>The notification date is the date when the service first became aware of the incident. Fields in NIMS system to be consider for determination are: Date Notified [Claim, IncidentReportDate], Date of Incident [Claim, LossDate], Incident Create Date [Claim, MiscDate#180] and Date notified to SAO [Claim, MiscDate#59]. This is referred further as 'Date Notified (Adjusted)'. Date Notified (Adjusted) calculation: If Date Notified=Date of Incident, Date Notified (Adjusted) =Date Notified If Date Notified&lt;&gt;Date of Incident, Date Notified (Adjusted)=first available date of (Date Notified, Incident Created Date, Date Notified to SAO]</p> <p><b>Denominator:</b> Total No Category 1 Incidents where 'Who was involved' is Service User, where a decision that further review is not necessary was not made and where Date Notified (Adjusted) is between last day of reporting month-125days and 12 months prior.</p> <p>The numerator is a subset of the denominator and is expressed as a percentage of it.</p>
6	<b>Data Sources</b>	<p>The source of data for this KPI is the NIMS system.</p> <p>Selected incidents are identified on fields: [Claim, SpecialAnalysis#20] value Category 1: Major/Extreme, [Claim, SpecialAnalysis#42] value Service User, [Claim, SpecialAnalysis#19] value different from Local review decision: No further review required and different from SIMT decision: No further review required.</p> <p>Date Notified (Adjusted) is between 1<sup>st</sup> day of month=(last month included-11) and last day of reporting month -125 day. The month of date=( last day of reporting month -125 day) is the last month included.</p> <p>Other criteria: Incident Create Date [Claim, MiscDate#180] is not unassigned, Division [Claim, SpecialAnalysis#17] is not unassigned, nor National Corporate Services, Location Desc B [Claim, MiscDescription#66 ] is not unassigned, Healthcare Private nor Covid Vaccine Programme, Location Desc C [Claim, MiscDescription#67 ] is not unassigned, nor National Forensic Mental Health Service, Covid Vaccine Clinic, The HSE National Drug Treatment Centre, National Screening Service</p>
6a	<b>Data sign off</b>	Incident Management Team, National Quality and Patient System Directorate
6b	<b>Data Quality Issues</b>	<p>The source data for this KPI is the NIMS system.</p> <p>The NIMS Governance Steering Committee will produce reports to reflect on data quality to complement this KPI, but these reports are outside scope for this indicator.</p> <p>To allow data owners an opportunity to identify and correct data errors, a preliminary dataset will be made available for their review a week in advance of completing the KPI calculation.</p>

7	<b>Data Collection Frequency</b>	<p>Daily; Weekly; <u>Monthly</u>; Quarterly; Bi-annual; Annual; <del>Other</del> – give details:</p> <p>For illustration: On the 1st of the December, the report is produced for reporting month=November. The last day of reporting month is 30<sup>th</sup> November. The last day included is 30<sup>th</sup> November-125days = 28<sup>th</sup> July. The last month included is July current year. To calculate 12 months rolling, the first month included is August previous year. The first date included in extract is 1<sup>st</sup> August previous year.</p> <p>With these dates and with selection fields mentioned above data is extracted. Locations are investigated for inconsistencies and data owners are notified of extract content.</p> <p>On 8th of December, extraction process is repeated, KPI calculation is finalised and data extract is sent to IIS. Monthly reports are published on <a href="https://www.hse.ie/eng/about/who/nqpsd/">https://www.hse.ie/eng/about/who/nqpsd/</a> in PDF format.</p>
8	<b>Tracer Conditions</b>	NA
9	<b>Minimum Data Set (MDS)</b>	<p>NIMS extract:</p> <p>Date Notified, [Claim, IncidentReportDate]  Date of Incident, [Claim, LossDate]  Incident Create Date, [Claim, MiscDate#180]  Date notified to SAO, [Claim, MiscDate#59]  Division, [Claim, SpecialAnalysis#17]  Service, [Claim, SpecialAnalysis#45]  Location Desc Level B, [Claim, MiscDescription#66]  Location Desc Level C, [Claim, MiscDescription#67]  Location Desc Level E, [Claim, MiscDescription#69]  Location Desc Level F, [Claim, MiscDescription#105]  Location Desc Level G, [Claim, MiscDescription#108]  Date Review Accepted by Commissioner, [Claim, MiscDate#77]  Level of Review Required, [Claim, SpecialAnalysis#19]  Approach to Review, [Claim, SpecialAnalysis#22]  Severity Rating, [Claim, SpecialAnalysis#9]  Category of incident, [Claim, SpecialAnalysis#20]  Who was involved, [Claim, SpecialAnalysis#42]  Inclusion and exclusion criteria and calculated values as per above.</p> <p>Locations included in calculation are Hospitals as per competence of Hospitals Groups (51 hospitals), National Rehabilitation Hospital, National Ambulance Service, 9 CHOs, National Social Services.</p>
10	<b>International Comparison</b>	NA
11	<b>KPI Monitoring</b>	Daily; Weekly; <u>Monthly</u> ; Quarterly; Bi-annual; Annual; Other – give details:
12	<b>KPI Reporting Frequency</b>	Daily; Weekly; <u>Monthly</u> ; Quarterly; Bi-annual; Annual; Other – give details:
13	<b>KPI report period</b>	<p><u>Monthly</u> M  Quarterly Q  Biannual BA  Annual A</p> <p>By exception</p> <p>Monthly in arrears M-1M  Monthly two months in arrears M-2M  Quarterly in arrears Q-1Q  Quarterly one month in arrears Q-1M  Quarterly two quarters in arrears Q-2Q  Quarterly three quarters in arrears Q-3Q  Quarterly six months in arrears Q-2Q  Biannual one quarter in arrears BA-1Q  Biannual six months in arrears BA-2Q  Annual reported in 1st quarter A  Annual 12 months in arrears A-1A  <u>Rolling 12 months Rolling</u> 12M</p>
14	<b>KPI Reporting Aggregation</b>	<p><u>National</u>; Region; <u>Hospital Group</u>; <u>Hospital</u>; <u>CHO</u>; (please give details TBC); Other, please specify</p> <p>Acute Operations; Community Operations; Community Operations (HSE Funded); Community Operations (HSE Provided); CHO (Care Groups; Disability Services, Older Persons, Health &amp; Wellbeing, Mental Health, Primary Care)</p>
15	<b>KPI is reported in which reports?</b>	<p><u>Annual Report</u>; Performance Report/Profile; MDR ; Other</p> <p><u>NIMS Steering Committee reports</u></p> <p><u>Board QPS Scorecard</u></p> <p>Operational Services Report</p>
16	<b>Web link to published data</b>	<a href="https://www.hse.ie/eng/about/who/nqpsd/">https://www.hse.ie/eng/about/who/nqpsd/</a>

**It is policy to include data in Open Data publication. Please indicate if there is an exceptional reason for this to be delayed**

<b>Contact details</b>	<b>KPI owner/lead for implementation</b>
	Name: Lorraine Schanwberg, Assistant National Director Incident Management
	Email address: lorraine.schwanberg@hse.ie
	Telephone Number 0871429789

**Division : National Quality and Patient Safety Directorate**

No	Steps	Detail supporting KPI
1	<b>KPI title</b>	QAS10 % of reported incidents entered onto NIMS within 30 days of notification of the incident
2	<b>KPI Description</b>	The percentage of compliant incidents out of total incidents notified in the reporting period. To be compliant an incident needs to be logged on NIMS within 30 days or less from the date the service becomes aware of it.
3	<b>KPI Rationale</b>	All reported incidents must be uploaded onto NIMS within 30 days or less. To assist with a responsive and timely approach to review and with building a culture of safety, incidents should be completed within the shortest possible timeframe.
3a	<b>Indicator Classification</b>	<b>National Scorecard Quadrant</b> a) Quality and Safety; b) Access; c) Finance, Governance and Compliance. d) Workforce;
4	<b>KPI Target</b>	70%
5	<b>KPI Calculation</b>	<p><b>Numerator:</b> No of Incidents Reported onto NIMS (Incident Create Date) within 30 days of notification date during the Reporting Period. The reporting period is at 4 quarter intervals starting on 1<sup>st</sup> day of reporting month-12 months and ending on last day of reporting month-30days.</p> <p>The notification date is the date when the service first became aware of the incident. Fields in NIMS system to be considered for determination are: Date Notified [Claim, IncidentReportDate], Date of Incident [Claim, LossDate], Incident Create Date [Claim, MiscDate#180] and Date notified to SAO [Claim, MiscDate#59]. This is referred to further as 'Date Notified (Adjusted)'.</p> <p>Date Notified (Adjusted) calculation:                      If Date Notified=Date of Incident, Date Notified (Adjusted) =Date Notified                      If Date Notified&lt;&gt;Date of Incident, Date Notified (Adjusted)=first available date of (Date Notified, Incident Created Date, Date Notified to SAO)</p> <p><b>Denominator:</b> Total No of Incidents Reported onto NIMS by Date Notified (Adjusted) during the Reporting Period</p> <p>The numerator is a subset of the denominator and is expressed as a percentage of it.</p>
6	<b>Data Sources</b>	<p>The source of data for this KPI is the NIMS system.</p> <p>Selected incidents are identified on fields:                      Date Notified (Adjusted) is between 1<sup>st</sup> day of month=(reporting month-12) and last day of reporting month -30 day.</p> <p>Other criteria: Incident Create Date [Claim, MiscDate#180] is not unassigned, Division [Claim, SpecialAnalysis#17] is not unassigned, nor National Corporate Services, Location Desc B [Claim, MiscDescription#66 ] is not unassigned, Healthcare Private nor Covid Vaccine Programme, Location Desc C [Claim, MiscDescription#67 ] is not unassigned, nor National Forensic Mental Health Service, Covid Vaccine Clinic, The HSE National Drug Treatment Centre, National Screening Service, Incident / Hazard Category [Claim, SpecialAnalysis#48] is not Dangerous Occurrences</p>
6a	<b>Data sign off</b>	Incident Management Team, National Quality and Patient System Directorate
6b	<b>Data Quality Issues</b>	<p>The source data for this KPI is the NIMS system.</p> <p>The NIMS Governance Steering Group Committee will produce reports to review and reflect on data quality to compliment this KPI, but these reports are outside of scope for this indicator.</p> <p>To allow data owners an opportunity to identify and correct data errors, a preliminary dataset will be made available for their review a week in advance of completing the KPI calculation.</p>
7	<b>Data Collection Frequency</b>	Daily; Weekly; Monthly; Quarterly; Bi-annual; Annual; Other – give details:  For illustration: On the 1 <sup>st</sup> Feb data is extracted for Date Notified (Adjusted) from 1 <sup>st</sup> Jan previous year to 31 <sup>st</sup> Dec previous year
8	<b>Tracer Conditions</b>	NA
9	<b>Minimum Data Set (MDS)</b>	NIMS extract: Date Notified, [Claim, IncidentReportDate] Date of Incident, [Claim, LossDate] Incident Create Date, [Claim, MiscDate#180] Date notified to SAO, [Claim, MiscDate#59] Division, [Claim, SpecialAnalysis#17] Service, [Claim, SpecialAnalysis#45] Location Desc Level B, [Claim, MiscDescription#66] Location Desc Level C, [Claim, MiscDescription#67] Location Desc Level E, [Claim, MiscDescription#69] Location Desc Level F, [Claim, MiscDescription#105] Location Desc Level G, [Claim, MiscDescription#108] Incident / Hazard Category [Claim, SpecialAnalysis#48] Inclusion and exclusion criteria and calculated values as per above.

		Locations included in calculation are Hospitals as per compentence of Hospitals Groups (51 hospitals), National Rehabilitation Hospital, National Ambulance Service, 9 CHOs, National Social Services.
10	International Comparison	NA
11	KPI Monitoring	Daily; Weekly; Monthly; Quarterly; Bi-annual; Annual; Other – give details:
12	KPI Reporting Frequency	Daily; Weekly; Monthly; Quarterly; Bi-annual; Annual; Other – give details:
13	KPI report period	<p>Monthly M  Quarterly Q  Biannual BA  Annual A</p> <p>By exception  Monthly in arrears M-1M  Monthly two months in arrears M-2M  Quarterly in arrears Q-1Q  Quarterly one month in arrears Q-1M  Quarterly two quarters in arrears Q-2Q  Quarterly three quarters in arrears Q-3Q  Quarterly six months in arrears Q-2Q  Biannual one quarter in arrears BA-1Q  Biannual six months in arrears BA-2Q  Annual reported in 1st quarter A  Annual 12 months in arrears A-1A  Rolling 12 months Rolling 12M</p>
14	KPI Reporting Aggregation	<p>National; Region; Hospital Group; Hospital; CHO; (please give details TBC); Other, please specify</p> <p>Acute Operations; Community Operations; Community Operations (HSE Funded); Community Operations (HSE Provided); CHO (Care Groups; Disability Services, Older Persons, Health &amp; Wellbeing, Mental Health, Primary Care)</p>
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		Name: Lorraine Schanwberg, Assistant National Director Incident Management
		Email address: lorraine.schwanberg@hse.ie
		Telephone Number 0871429789

**Division : National Quality and Patient Safety Directorate**

No	Steps	Detail supporting KPI
1	<b>KPI title</b>	QAS11 Extreme and major incidents as a % of all incidents reported as occurring
2	<b>KPI Description</b>	The percentage of Category 1 incidents out of total number of incidents reported for included locations.
3	<b>KPI Rationale</b>	All reported incidents must be uploaded onto NIMS. To provide assurance on comprehensive use of NIMS system, Category 1 incidents are expected to account for a percentage of total incidents reported.
3a	<b>Indicator Classification</b>	<b>National Scorecard Quadrant</b> a) Quality and Safety; b) Access; c) Finance, Governance and Compliance. d) Workforce;
4	<b>KPI Target</b>	<1%
5	<b>KPI Calculation</b>	<b>Numerator:</b> No of Category 1 Incidents present in NIMS that occurred during the Reporting Period for selected locations.  The reporting period is at 4 quarter intervals starting on 1 <sup>st</sup> day of reporting month-11 months and ending on last day of reporting month. The incidents are selected based on Date of Incident, [Claim, LossDate].  <b>Denominator:</b> Total No of Incidents present in NIMS during the Reporting Period for selected locations.  The numerator is a subset of the denominator and is expressed as a percentage of it.
6	<b>Data Sources</b>	The source of data for this KPI is the NIMS system. Selected incidents are identified on fields: Date of Incident is between 1 <sup>st</sup> day of month=(reporting month-11) and last day of reporting month.  Other criteria: Incident Create Date [Claim, MiscDate#180] is not unassigned, Division [Claim, SpecialAnalysis#17] is not unassigned, nor National Corporate Services, Location Desc B [Claim, MiscDescription#66 ] is not unassigned, Healthcare Private nor Covid Vaccine Programme, Location Desc C [Claim, MiscDescription#67] ] is not: unassigned, nor National Forensic Mental Health Service, Covid Vaccine Clinic, The HSE National Health Treatment Centre, National Screening Service, Incident / Hazard Category [Claim, SpecialAnalysis#48] is not Dangerous Occurrences
6a	<b>Data sign off</b>	Incident Management Team, National Quality and Patient System Directorate
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8	<b>Tracer Conditions</b>	NA
9	<b>Minimum Data Set (MDS)</b>	NIMS extract: Date of Incident, [Claim, LossDate] Division, [Claim, SpecialAnalysis#17] Service, [Claim, SpecialAnalysis#45] Location Desc Level B, [Claim, MiscDescription#66] Location Desc Level C, [Claim, MiscDescription#67] Location Desc Level E, [Claim, MiscDescription#69] Location Desc Level F, [Claim, MiscDescription#105] Location Desc Level G, [Claim, MiscDescription#108] Incident / Hazard Category [Claim, SpecialAnalysis#48] Inclusion and exclusion criteria and calculated values as per above. Locations included in calculation are Hospitals as per compentence of Hospitals Groups (51 hospitals), National Rehabilitation Hospital, National Ambulance Service, 9 CHOs, National Social Services.
10	<b>International Comparison</b>	NA
11	<b>KPI Monitoring</b>	Daily; Weekly; Monthly; <u>Quarterly</u> ; Bi-annual; Annual; Other – give details:



12	<b>KPI Reporting Frequency</b>	Daily; Weekly; Monthly; Quarterly; Bi-annual; Annual; Other – give details:
13	<b>KPI report period</b>	<p>Monthly M  Quarterly Q  Biannual BA  Annual A</p> <p>By exception</p> <p>Monthly in arrears M-1M  Monthly two months in arrears M-2M  Quarterly in arrears Q-1Q  Quarterly one month in arrears Q-1M  Quarterly two quarters in arrears Q-2Q  Quarterly three quarters in arrears Q-3Q  Quarterly six months in arrears Q-2Q  Biannual one quarter in arrears BA-1Q  Biannual six months in arrears BA-2Q  Annual reported in 1st quarter A  Annual 12 months in arrears A-1A  Rolling 12 months Rolling 12M</p>
14	<b>KPI Reporting Aggregation</b>	<p>National; Region; Hospital Group; Hospital; CHO; (please give details TBC); Other, please specify</p> <p>Acute Operations; Community Operations; Community Operations (HSE Funded); Community Operations (HSE Provided); CHO (Care Groups; Disability Services, Older Persons, Health &amp; Wellbeing, Mental Health, Primary Care)</p>
15	<b>KPI is reported in which reports?</b>	<p>Annual Report; Performance Report/Profile; MDR ; Other</p> <p>NIMS Steering Committee reports  Board QPS Scorecard</p> <p>Operational Services Report</p>
16	<b>Web link to published data</b>	<a href="https://www.hse.ie/eng/about/who/nqpsd/">https://www.hse.ie/eng/about/who/nqpsd/</a>
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		Email address: lorraine.schwanberg@hse.ie
		Telephone Number 0871429789