



*Palliative Care Services*  
Key Performance  
Indicator  
Metadata 2024



## Palliative Care Inpatient Palliative Care Services

1	<b>KPI Title</b>	PAC1A Access to specialist inpatient bed within seven days during the reporting year
1a	<b>KPI Short Title</b>	%> 7 days
2	<b>KPI Description</b>	<p>This is a calculation of the number of patients who were admitted to a specialist inpatient palliative care bed within seven days of referral or request for transfer expressed as a proportion of all patients admitted to a specialist inpatient bed in the reporting month multiplied by 100. For the purpose of this metric return, the services submit the relevant numbers with the percentage calculated by the BIU.</p> <p>A referral is defined as a request for a service to be provided to a specific person. It is usually in writing but not necessarily so. An enquiry or request for information is not itself a referral. If an enquiry subsequently leads to a request for service, the latter is the referral. There are two types of referral - Type 1 Active; Type 2 Inactive (pending or deferred or prospective).</p> <p>1) Active: An active patient referral is in respect of a patient who is available to immediately take up the offer of service. The term active is used to distinguish referrals that request a service to start as soon as possible from the common situation in palliative care whereby referrals are made in a prospective manner i.e. Made in advance for a service that may be required at some stage in the future.</p> <p>2) Inactive: An inactive patient referral is in respect of a patient who is not available to take up the offer of service. These referrals should not be considered active until a service has been formally requested and the patient is available to take up the service.</p> <p>Following referral / request for transfer the patient is triaged / assessed by the specialist palliative care clinical lead before suitability for admission is agreed. Wait time (in number of days) to admission is calculated from the date of referral / request for transfer to the date of admission to the specialist palliative care inpatient unit. Each day (inclusive of weekends and bank holidays) <u>that the patient waits</u> to be admitted is counted, with wait times categorised as follows: 0-7 days; 8-14 days; 15-28 days; greater than 28 days. Note it is important not to include prospective (i.e. inactive, pending, or deferred) referrals as active referrals when wait times are being calculated as the time of initial prospective referral will artificially lengthen wait times.</p> <p>It is important to not count the time a patient becomes unavailable for service, e.g. a patient may have a change of mind and refuse service while waiting, a patient's condition may deteriorate while waiting and become unavailable for transfer. In these types of referrals the counted time must be stopped as the patient becomes unavailable. The wait time can re-commence when /if the patient becomes available again for transfer. The counted time waited before and after interruption are added together to get the total amount of time waited.</p> <p>All triaged accepted referrals are to be counted in the waiting time, i.e. new and re referrals. Its possible that the same patient can be referred twice to the service during the reporting month. Each episode of care is to be counted in the data return.</p>
3	<b>KPI Rationale</b>	<p>To determine the proportion (percentage) of patients accessing specialist inpatient beds within seven days.</p> <p>To determine how long each patient waited for service in calendar days. This is not a capture of how long it took the service provider to provide SPC to a patient but rather a capture of how long the patient waited to receive his/her service. It is noted that Inpatient units do not provide triage/admissions during the weekends. Long term analysis of this metric will outline if there is a need for this protocol to be examined in the future</p>
3a	<b>Indicator Classification</b>	Access & Integration
4	<b>National Target</b>	NSP 2024 Target - 98% - from January ,Target Cumulative
4a	<b>Target Trajectory</b>	98% or greater for all CHO's
4b	<b>Volume Metrics</b>	N/A
5	<b>KPI Calculation</b>	<p>Count the number of patients admitted to a specialist inpatient bed within seven days of assessment / request for transfer and express it as a proportion of the overall number of patients admitted to specialist inpatient beds in the reporting period and multiply by 100.</p> <p>Example, 200 patients were admitted to specialist inpatient beds in the reporting month i.e. Of these 154 patients waited 0-7 days, 35 patients waited 8-14 days, 5 patients waited 15-28 days &amp; 6 patients waited &gt;28 days for admission. Calculation for access within seven days is as follows: <math>154 / (154+35+5+6) \rightarrow 154/200 \rightarrow 0.770</math>, multiplied by 100 = 77%. For the purpose of this metric return, the services submit the relevant numbers with the percentage calculated by the BIU.</p>
6	<b>Data Source</b>	Data is sourced by the specialist palliative care units who forward to their Community Healthcare Organisation (CHO). The CHO submits the validated data to the Business Information Unit (BIU) Community Healthcare Team.
6a	<b>Data Sign Off</b>	Chief Officer, Community Healthcare Organisation
6b	<b>Data Quality Issues</b>	<p>Data quality issues are addressed as they arise along the data pathway.</p> <p>Data errors can be observed in the tally rows at the end of each submission template</p>
7	<b>Data Collection Frequency</b>	Monthly: Data to be submitted to the BIU on or before the 10th of the month or nearest Friday
8	<b>Tracer Conditions</b>	The number of people admitted to specialist palliative care inpatient units and wait times for admission in particular wait time 0-7 days. .
9	<b>Minimum Data Set MDS</b>	The number of people admitted to specialist palliative care inpatient units and wait times for admission in particular wait time 0-7 days.
10	<b>International Comparison</b>	<p><a href="http://www.ncpc.org.uk/mds">http://www.ncpc.org.uk/mds</a></p> <p><a href="https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/827430/Palliative_care_clinical_data_set_Guidance_and_Definitions_Final.pdf">https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/827430/Palliative_care_clinical_data_set_Guidance_and_Definitions_Final.pdf</a></p>
11	<b>KPI Monitoring</b>	Monthly
12	<b>KPI Reporting Frequency</b>	Monthly
13	<b>KPI Report Period</b>	Current (e.g. monthly data reported by the 10th of the following month)
14	<b>KPI Reporting Aggregation</b>	National / CHO / LHO/ Institution
15	<b>KPI is reported in which reports?</b>	Performance Report/Management Data Report
16	<b>Web link to data</b>	<a href="http://www.hse.ie/eng/services/publications/">http://www.hse.ie/eng/services/publications/</a>
17	<b>Additional Information</b>	
	<b>KPI owner/lead for implementation</b>	Stephen Toft Programme Officer for Palliative Care, Integrated Operations - Planning
	<b>NBIU Data Support</b>	Deirdre Devin, Lead Data Analyst, Palliative Care, 087 1891797, deirdre.devin@hse.ie
	<b>Governance/sign off</b>	Maurice Dillon, National Lead for Palliative Care, Integrated Operations - Planning

## Palliative Care Inpatient Palliative Care Services

1	<b>KPI Title</b>	PAC33 Number of patients accessing specialist inpatient bed within seven days (during the reporting year)
1a	<b>KPI Short Title</b>	Number > 7 days
2	<b>KPI Description</b>	<p>This is a count of the number of patients who were admitted to a specialist inpatient palliative care bed within seven days of referral or request for transfer.</p> <p>A referral is defined as a request for a service to be provided to a specific person. It is usually in writing but not necessarily so. An enquiry or request for information is not in itself a referral. If an enquiry subsequently leads to a request for service, the latter is the referral. There are two types of referral - Type 1 Active; Type 2 Inactive (pending or deferred or prospective). 1) <b>Active:</b> An active patient referral is in respect of a patient who is available to immediately take up the offer of service. The term active is used to distinguish referrals that request a service to start as soon as possible from the common situation in palliative care whereby referrals are made in a prospective manner i.e. Made in advance for a service that may be required at some stage in the future. 2) <b>Inactive:</b> An inactive patient referral is in respect of a patient who is not available to take up the offer of service. These referrals should not be considered active until a service has been formally requested and the patient is available to take up the service. Following referral / request for transfer the patient is triaged / assessed by the specialist palliative care clinical lead before suitability for admission is agreed. Wait time (in number of days) to admission is calculated from the date of referral / request for transfer to the date of admission to the specialist palliative care inpatient unit . Each day (inclusive of weekends and bank holidays) that the patient waits to be admitted is counted , with wait times categorised as follows: 0-7 days; 8-14 days; 15-28 days; greater than 28 days. Note it is important not to include prospective (i.e. Inactive, pending, or deferred) referrals as active referrals when wait times are being calculated as the time of initial prospective referral will artificially lengthen wait times.</p> <p>It is important to not count the time a patient becomes unavailable for service, e.g. a patient may have a change of mind and refuse service while waiting, a patient's condition may deteriorate while waiting and become unavailable for transfer. In these types of referrals the counted time must be stopped as the patient becomes unavailable. The wait time can re-commence when //if the patient becomes available again for transfer. The counted time waited before and after interruption are added together to get the total amount of time waited.</p> <p>All triaged and accepted referrals are to be counted in the waiting time, i.e. new and re referrals. Its possible that the same patient can be referred twice to the service during the reporting month. Each episode of care is the be counted in the data returns</p>
3	<b>KPI Rationale</b>	<p>To count the number of patients accessing specialist inpatient beds within seven days.</p> <p>To determine how long each patient waited for service in calendar days. This is not a capture of how long it took the service provider to provide SPC to a patient but rather a capture of how long the patient waited to receive his/her service. It is noted that Inpatient units do not provide triage/admissions during the weekends. Long term analysis of this metric will outline if there is a need for this protocol to be examined in the future</p>
3a	<b>Indicator Classification</b>	Access & Integration
4	<b>National Target</b>	NSP 2024 Target - 4,128 by December
4a	<b>Target Trajectory</b>	CHO 1 - 338, CHO 2 - 488, CHO 3 - 518, CHO 4 - 928, CHO 5 -308, CHO 6 - 432, CHO 7 - 588, CHO 8 - (no service), CHO 9 - 528
4b	<b>Volume Metrics</b>	N/A
5	<b>KPI Calculation</b>	Count the total number of patients accessing specialist palliative care inpatient beds within seven days of referral / request for transfer.
6	<b>Data Source</b>	Data is sourced by the specialist palliative care units who forward to their Community Healthcare Organisation (CHO). The CHO submits the validated data to the Business Information Unit (BIU) Community Healthcare Team.
6a	<b>Data Sign Off</b>	Chief Officer, Community Healthcare Organisation
6b	<b>Data Quality Issues</b>	<p>Data quality issues are addressed as they arise along the data pathway.</p> <p>Data errors can be observed in the tally rows at the end of each submission template</p>
7	<b>Data Collection Frequency</b>	Monthly: Data to be submitted to the BIU on or before the 10th of the month or nearest Friday
8	<b>Tracer Conditions</b>	The number of people admitted to specialist palliative care inpatient units within seven days of referral / request for transfer.
9	<b>Minimum Data Set MDS</b>	The number of people admitted to specialist palliative care inpatient units within seven days of referral / request for transfer.
10	<b>International Comparison</b>	<a href="http://www.ncpc.org.uk/mds">http://www.ncpc.org.uk/mds</a> <a href="https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/827430/Palliative_care_clinical_data_set_Guidance_and_Definitions_Final.pdf">https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/827430/Palliative_care_clinical_data_set_Guidance_and_Definitions_Final.pdf</a>
11	<b>KPI Monitoring</b>	Monthly
12	<b>KPI Reporting Frequency</b>	Monthly
13	<b>KPI Report Period</b>	Current (e.g. monthly data reported by the 10th of the following month)
14	<b>KPI Reporting Aggregation</b>	National / CHO / LHO / Institution
15	<b>KPI is reported in which reports?</b>	Management Data Report
16	<b>Web link to data</b>	<a href="http://www.hse.ie/eng/services/publications/">http://www.hse.ie/eng/services/publications/</a>
17	<b>Additional Information</b>	
	<b>KPI owner/lead for implementation</b>	Stephen Toft Programme Officer for Palliative Care, Integrated Operations - Planning
	<b>NBIU Data Support</b>	Deirdre Devin, Lead Data Analyst, Palliative Care, 087 1891797, deirdre.devin@hse.ie
	<b>Governance/sign off</b>	Maurice Dillon, National Lead for Palliative Care, Integrated Operations - Planning

## Palliative Care Community Palliative Care Services

1	<b>KPI Title</b>	PAC14 No. of patients who received specialist palliative care treatment in their normal place of residence in the month
1a	<b>KPI Short Title</b>	No. in normal place of residence
2	<b>KPI Description</b>	This is a count of the total number of patients who received specialist palliative care in the community during the reporting month. Specialist palliative care in the community is care provided to patients in their normal place of residence i.e. their home, carers home, nursing home, community nursing unit, community hospital, district hospital etc. All patients in receipt of specialist palliative care in the community home care on the first day of the month and all new patients who received a first face to face visit during the month are included, with each patient counted once only in the reporting month. Every patient that is referred and seen during the month is to be counted. If a patient is referred in one month and seen in the next month they are to be recorded as referred metrics completed for the patient in month of referral and treatment metrics in the following month.
3	<b>KPI Rationale</b>	To determine the absolute total number of patients who received specialist palliative care in the community (home care) during the reporting month.
3a	<b>Indicator Classification</b>	Access and Integration
4	<b>National Target</b>	NSP 2024 - 3,612 from January. Monthly Target PIT
4a	<b>Target Trajectory</b>	CHO 1 - 360, CHO 2 - 468, CHO 3 - 432, CHO 4 - 660, CHO 5 - 372, CHO 6 - 264, CHO 7 - 348, CHO 8 - 372, CHO 9 - 336
4b	<b>Volume Metrics</b>	N/A
5	<b>KPI Calculation</b>	Count the total number of patients who received specialist palliative care in the community (home care) during the reporting month.
6	<b>Data Source</b>	Data is sourced by the specialist palliative care community teams who collate locally and forward to their Community Healthcare Organisation (CHO). The CHO submits the validated data to the Business Information Unit (BIU) Community Healthcare Team.
6a	<b>Data Sign Off</b>	Chief Officer, Community Healthcare Organisation
6b	<b>Data Quality Issues</b>	Data quality issues are addressed as they arise along the data pathway.
7	<b>Data Collection Frequency</b>	Monthly
8	<b>Tracer Conditions</b>	The number of people who received specialist palliative care services (home care) in the community in the reporting month.
9	<b>Minimum Data Set MDS</b>	The number of people who received specialist palliative care services (home care) in the community in the reporting month.
10	<b>International Comparison</b>	<a href="http://www.ncpc.org.uk/mds">http://www.ncpc.org.uk/mds</a> <a href="https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/827430/Palliative_care_clinical_data_set_Guidance_and_Definitions_Final.pdf">https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/827430/Palliative_care_clinical_data_set_Guidance_and_Definitions_Final.pdf</a>
11	<b>KPI Monitoring</b>	Monthly
12	<b>KPI Reporting Frequency</b>	Monthly
13	<b>KPI Report Period</b>	Current (e.g. monthly data reported by the 10th of the following month)
14	<b>KPI Reporting Aggregation</b>	National / CHO / LHO
15	<b>KPI is reported in which reports?</b>	Performance Report/Management Data Report
16	<b>Web link to data</b>	<a href="http://www.hse.ie/eng/services/publications/">http://www.hse.ie/eng/services/publications/</a>
17	<b>Additional Information</b>	
	<b>KPI owner/lead for implementation</b>	Stephen Toft Programme Officer for Palliative Care, Integrated Operations - Planning
	<b>NBIU Data Support</b>	Deirdre Devin, Lead Data Analyst, Palliative Care, 087 1891797, deirdre.devin@hse.ie
	<b>Governance/sign off</b>	Maurice Dillon, National Lead for Palliative Care, Integrated Operations - Planning

## Palliative Care Community Palliative Care Services

1	<b>KPI Title</b>	PAC36 Percentage of patients triaged within one working day of referral (Community)
1a	<b>KPI Short Title</b>	% triaged <1 day
2	<b>KPI Description</b>	This is a calculation of the number of patients triaged within one working day of referral or request for patient transfer to service expressed as a proportion of all patients referred / requesting transfer in the reporting month multiplied by 100. A referral is defined as a request for a service to be provided to a specific person. It is usually in writing but not necessarily so. An enquiry or request for information is not in itself a referral. If an enquiry subsequently leads to a request for service, the latter is the referral. Triage is defined as the examination of the patient referral form, patient notes, scans and reports to ascertain the appropriate timeframe for delivery of specialist palliative care in the community. All patients are triaged. The triage categories are as follows: Category 1: This is an urgent referral where the patient is in severe physical, psychosocial or spiritual distress and not responding to current management or standard protocols of care or rapidly deteriorating or imminently dying Category 2: This is an early referral where the patient has poorly controlled symptoms or a prognosis of only short weeks or acute psychosocial stressors Category 3: This is a routine referral where the patient's current symptoms and available supports or care are such that the situation is reasonably stable. The patient triaged to Category 3 should be visited within 2 weeks from receipt of referral. Time to triage is calculated by counting the number of days (working days i.e. Monday to Friday excluding week ends and bank holidays i.e. based on 5 / 7 days of service provision) from receipt of referral, or request for patient transfer into service, to date of triage. Re referrals: If a patient has been discharged and is re referred again for service then the patient is to be counted again in triaged numbers. e.g. a patient may be referred, triaged, received service and discharged in on month. They are recorded as triaged once, if they are re referred again in the same month then they are recorded as triaged again for that month or subsequent months
3	<b>KPI Rationale</b>	To determine the proportion (percentage) of referred patients triaged within the specific and appropriate timeframe of one working day.
3a	<b>Indicator Classification</b>	Quality & Safety
4	<b>National Target</b>	NSP 2024 - 96% - from January, Target Cumulative
4a	<b>Target Trajectory</b>	96% for all CHO's
4b	<b>Volume Metrics</b>	N/A
5	<b>KPI Calculation</b>	Count the number of patients triaged within one working day of referral / request for transfer and express it as a proportion of all patients referred / requesting transfer in the reporting month. Example: Total number of referrals / requests for transfer received = 90, Total number of these referrals triaged within 1 working day= 78 Calculation: $(78 / 90) \times 100 = 86.7\%$ For the purpose of this metric return, the services submit the relevant numbers with the percentage calculated by the BIU.
6	<b>Data Source</b>	Data is sourced by the specialist palliative care community teams who collate locally and forward to their Community Healthcare Organisation (CHO). The CHO submits the validated data to the Business Information Unit (BIU) Community Healthcare Team.
6a	<b>Data Sign Off</b>	Chief Officer, Community Healthcare Organisation
6b	<b>Data Quality Issues</b>	Data quality issues are addressed as they arise along the data pathway.
7	<b>Data Collection Frequency</b>	Monthly
8	<b>Tracer Conditions</b>	The number of people triaged within one working day of referral / request for transfer and the total number of patients referred / requesting transfer in the reporting month.
9	<b>Minimum Data Set MDS</b>	The number of people triaged within one working day of referral / request for transfer and the total number of patients referred / requesting transfer in the reporting month.
10	<b>International Comparison</b>	<a href="http://www.ncpc.org.uk/mds">http://www.ncpc.org.uk/mds</a> <a href="https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/827430/Palliative_care_clinical_data_set_Guidance_and_Definitions_Final.pdf">https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/827430/Palliative_care_clinical_data_set_Guidance_and_Definitions_Final.pdf</a>
11	<b>KPI Monitoring</b>	Monthly
12	<b>KPI Reporting Frequency</b>	Monthly
13	<b>KPI Report Period</b>	Current (e.g. monthly data reported by the 10th of the following month)
14	<b>KPI Reporting Aggregation</b>	National / CHO / LHO
15	<b>KPI is reported in which reports?</b>	Management Data Report
16	<b>Web link to data</b>	<a href="http://www.hse.ie/eng/services/publications/">http://www.hse.ie/eng/services/publications/</a>
17	<b>Additional Information</b>	
	<b>KPI owner/lead for implementation</b>	Stephen Toft Programme Officer for Palliative Care, Integrated Operations - Planning
	<b>NBIU Data Support</b>	Deirdre Devin, Lead Data Analyst, Palliative Care, 087 1891797, deirdre.devin@hse.ie
	<b>Governance/sign off</b>	Maurice Dillon, National Lead for Palliative Care, Integrated Operations - Planning

## Palliative Care Community Palliative Care Services

1	<b>KPI Title</b>	PAC58 Percentage of all Category 1 triaged patients who received specialist palliative care within 2 days in the community
1a	<b>KPI Short Title</b>	Cat1 <2days
2	<b>KPI Description</b>	This is the number of calendar days from triaged category 1 patients to first face to face appointment with the community specialist palliative care team.
3	<b>KPI Rationale</b>	Patients referred to specialist palliative care (SPC) services are triaged within 1 day and prioritised according to clinical guidelines as Category 1,2 or 3. Category 1 patients are deemed to need immediate intervention by the specialist palliative care team and should be seen within 2 days.
3a	<b>Indicator Classification</b>	<input checked="" type="checkbox"/> Person Centred Care, <input checked="" type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input checked="" type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	<b>National Target</b>	National 90%, CHO 90%, LHO 90%
5	<b>KPI Calculation</b>	Category 1 < 2 days, The data will be supplied in numerical format from the service provider. The calculation for the KPI will be completed by the pre-programmed Qlik server and will be as follows. (number <2 days)/( all categorised cat 1 metrics)*100 and presented as a percentage (Number of Category 1 patients seen within 2 days )/ (total number of category 2 patients)/100 e.g. Cat 1: <2 days = 5, Cat 1: from 3-7 days = 6, Cat 1: 8-14 days = 7, Cat 1: 15+ days = 8 Calculation: (5)/(5+6+7+8)*100, = 19.2%
6	<b>Data Source</b>	
6a	<b>Data Completeness</b>	Information is sourced by specialist palliative care services who forward to BIU office Business Intelligence Unit and copy to CHO Business Unit. Data Completeness is expected at 100%. Data quality issues are addressed as they arise.
6b	<b>Data Quality Issues</b>	
7	<b>Data Collection Frequency</b>	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: The data is captured daily, weekly monthly etc.. locally recorded and then reported monthly to the BIU.
8	<b>Tracer Conditions</b>	All patient conditions referred to community specialist palliative care services including cancer and non-cancer patients
9	<b>Minimum Data Set MDS</b>	The Palliative Care Minimum Data Set
10	<b>International Comparison</b>	Yes. E.g. <a href="http://www.ncpc.org.uk/mds">http://www.ncpc.org.uk/mds</a>
11	<b>KPI Monitoring</b>	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 10th of the month for collation and submission to the National BIU by the 15th (or nearest Friday) of the month for publication in the national Performance Report (PR).
12	<b>KPI Reporting Frequency</b>	Monthly
13	<b>KPI Report Period</b>	Current (e.g. monthly data reported by the 10th of the following month)
14	<b>KPI Reporting Aggregation</b>	National / CHO / LHO
15	<b>KPI is reported in which reports?</b>	Performance Report/Management Data Report
16	<b>Web link to data</b>	<a href="http://www.hse.ie/eng/services/publications/">http://www.hse.ie/eng/services/publications/</a>
17	<b>Additional Information</b>	Is this information in CIF: YES
18	<b>KPI owner/lead for implementation</b>	Stephen Toft Information Analyst, Office of National Lead for Palliative Care. Tel 087 0574188. Email: Stephen.Toft1@hse.ie
19	<b>NBIU Data Support</b>	Deirdre Devin, Lead Data Analyst, Palliative Care, 087 1891797, deirdre.devin@hse.ie
20	<b>Governance/sign off</b>	Mr Maurice Dillon, HSE National Lead for Palliative Care, Tel: 0874510735

Palliative Care Community Palliative Care Services		
1	<b>KPI Title</b>	PAC59 Percentage of all Category 2 triaged patients who received specialist palliative care within 7 days in the community
1a	<b>KPI Short Title</b>	cat2<7 days
2	<b>KPI Description</b>	This is the number of calendar days from triaged of category 2 patients to first face to face appointment with the community specialist palliative care team.
3	<b>KPI Rationale</b>	Patients referred to Specialist palliative care (SPC) services are triaged within 1 day and prioritised according to clinical guidelines as Category 1,2 or 3. Category 2 patients are deemed to need timely intervention by the specialist palliative care team and should be seen within 7 days.
3a	<b>Indicator Classification</b>	<input checked="" type="checkbox"/> Person Centred Care, <input checked="" type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input checked="" type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	<b>National Target</b>	National 90%, CHO 90%, LHO 90%
5	<b>KPI Calculation</b>	Category 2 < 7 days, The data will be supplied in numerical format from the service provider. The calculation for the KPI will be completed by the pre-programmed Qlik server and will be as follows. (Number of Category 2 patients seen within 2 days and 3-7 days)/ (total number of category 2 patients)/100 e.g. Cat 2 <2 days = 5, Cat 2 from 3-7 days = 6, Cat 2 8-14 days = 7, Cat 2 15+ days = 8 Calculation: (5+6)/(5+6+7+8)*100, = 42.3%
6	<b>Data Source</b>	
6a	<b>Data Completeness</b>	Information is sourced by specialist palliative care services who forward to BIU office Business Intelligence Unit and copy to CHO Business Unit. Data Completeness is expected at 100%. Data quality issues are addressed as they arise.
6b	<b>Data Quality Issues</b>	
7	<b>Data Collection Frequency</b>	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: The data is captured daily, weekly monthly etc.. locally recorded and then reported monthly to the BIU.
8	<b>Tracer Conditions</b>	
		All patient conditions referred to community specialist palliative care services including cancer and non-cancer patients
9	<b>Minimum Data Set MDS</b>	The Palliative Care Minimum Data Set
10	<b>International Comparison</b>	Yes. E.g. <a href="http://www.ncpc.org.uk/mds">http://www.ncpc.org.uk/mds</a>
11	<b>KPI Monitoring</b>	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 10th of the month for collation and submission to the National BIU by the 15th (or nearest Friday) of the month for publication in the national Performance Report (PR).
12	<b>KPI Reporting Frequency</b>	Monthly
13	<b>KPI Report Period</b>	Current (e.g. monthly data reported by the 10th of the following month)
14	<b>KPI Reporting Aggregation</b>	National / CHO / LHO
15	<b>KPI is reported in which reports?</b>	Performance Report/Management Data Report
16	<b>Web link to data</b>	<a href="http://www.hse.ie/eng/services/publications/">http://www.hse.ie/eng/services/publications/</a>
17	<b>Additional Information</b>	Is this information in CIF: YES
18	<b>KPI owner/lead for implementation</b>	Stephen Toft Information Analyst, Office of National Lead for Palliative Care. Tel 087 0574188. Email: Stephen.Toft1@hse.ie
19	<b>NBIU Data Support</b>	Deirdre Devin, Lead Data Analyst, Palliative Care, 087 1891797, deirdre.devin@hse.ie
20	<b>Governance/sign off</b>	Mr Maurice Dillon, HSE National Lead for Palliative Care, Tel: 0874510/35

Palliative Care Community Palliative Care Services		
1	<b>KPI Title</b>	PAC60 Percentage of all Category 3 triaged patients who received specialist palliative care within 14 days in the community
1a	<b>KPI Short Title</b>	cat3<14 days
2	<b>KPI Description</b>	This is the number of calendar days from triaged of category 3 patients to first face to face appointment with the community specialist palliative care team.
3	<b>KPI Rationale</b>	Patients referred to Specialist palliative care (SPC) services are triaged within 1 day and prioritised according to clinical guidelines as Category 1,2 or 3. Category 3 patients are deemed to be non-urgent and should be seen by the specialist palliative care team within 14 days.
3a	<b>Indicator Classification</b>	<input checked="" type="checkbox"/> Person Centred Care, <input checked="" type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input checked="" type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	<b>National Target</b>	National 80%, CHO 80%, LHO 80%
5	<b>KPI Calculation</b>	Category 3 < 14 days, The data will be supplied in numerical format from the service provider. The calculation for the KPI will be completed by the pre-programmed Qlik server and will be as follows. (Number of Category 3 patients seen within 2 days and 3-7 days, and 8-14 days)/ (total number of category 3 patients)/100 e.g. Cat 2 <2 days = 5, Cat 2 from 3-7 days = 6, Cat 2 8-14 days = 7, Cat 2 15+ days = 8 Calculation: (5+6+7)/(5+6+7+8)*100, = 69.2%
6	<b>Data Source</b>	
6a	<b>Data Completeness</b>	Information is sourced by specialist palliative care services who forward to BIU office Business Intelligence Unit and copy to CHO Business Unit. Data Completeness is expected at 100%. Data quality issues are addressed as they arise.
6b	<b>Data Quality Issues</b>	
7	<b>Data Collection Frequency</b>	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: The data is captured daily, weekly monthly etc., locally recorded and then reported monthly to the BIU.
8	<b>Tracer Conditions</b>	
9	<b>Minimum Data Set MDS</b>	All patient conditions referred to community specialist palliative care services including cancer and non-cancer patients The Palliative Care Minimum Data Set
10	<b>International Comparison</b>	Yes. E.g. <a href="http://www.ncpc.org.uk/mds">http://www.ncpc.org.uk/mds</a>
11	<b>KPI Monitoring</b>	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 10th of the month for collation and submission to the National BIU by the 15th (or nearest Friday) of the month for publication in the national Performance Report (PR)
12	<b>KPI Reporting Frequency</b>	Monthly
13	<b>KPI Report Period</b>	Current (e.g. monthly data reported by the 10th of the following month)
14	<b>KPI Reporting Aggregation</b>	National / CHO / LHO
15	<b>KPI is reported in which reports?</b>	Performance Report/Management Data Report
16	<b>Web link to data</b>	<a href="http://www.hse.ie/eng/services/publications/">http://www.hse.ie/eng/services/publications/</a>
17	<b>Additional Information</b>	Is this information in CIF: YES
18	<b>KPI owner/lead for implementation</b>	Stephen Toft Information Analyst, Office of National Lead for Palliative Care. Tel 087 0574188. Email: Stephen.Toft1@hse.ie
19	<b>NBIU Data Support</b>	Deirdre Devin, Lead Data Analyst, Palliative Care, 087 1891797, deirdre.devin@hse.ie
20	<b>Governance/sign off</b>	Mr Maurice Dillon, HSE National Lead for Palliative Care, Tel: 0874510735



## Palliative Care Children's Palliative Care Services

1	<b>KPI Title</b>	PAC37 No. of children in the care of the Clinical Nurse Co-ordinator for Children with Life Limiting Conditions (children's outreach nurse)
1a	<b>KPI Short Title</b>	No. in CNC during the month
2	<b>KPI Description</b>	This is a count of the total number of children who were on the active patient list of the children's outreach nurse (clinical nurse co-ordinator) in the reporting month. It includes children on the list on the first day of the month plus new children plus transfers accepted and receiving active care during the reporting month.
3	<b>KPI Rationale</b>	To determine the number of children / families being supported by the service and to assist in service planning.
3a	<b>Indicator Classification</b>	Access and Integration
4	<b>National Target</b>	NSP 2024 - 320 from January, Target PIT
4a	<b>Target Trajectory</b>	CHO 1 - 41, CHO 2 - 35, CHO 3 - 40, CHO 4 - 46, CHO 5 - 33, CHO 6 - 18, CHO 7 - 40, CHO 8 - 33, CHO 9 - 34
4b	<b>Volume Metrics</b>	N/A
5	<b>KPI Calculation</b>	Count the total number of children in the active care of the children's outreach nurse (clinical nurse co-ordinator) during the reporting month.
6	<b>Data Source</b>	Data is sourced by the children's outreach nurse (clinical nurse co-ordinator), submits it to the Business Information Unit (BIU) Community Healthcare Team.
6a	<b>Data Sign Off</b>	Chief Officer, Community Healthcare Organisation
6b	<b>Data Quality Issues</b>	Data quality issues are addressed as they arise along the data pathway.
7	<b>Data Collection Frequency</b>	Monthly
8	<b>Tracer Conditions</b>	The number of children in the active care of the children's outreach nurse (clinical nurse co-ordinator) in the reporting month.
9	<b>Minimum Data Set MDS</b>	The number of children in the active care of the children's outreach nurse (clinical nurse co-ordinator) in the reporting month.
10	<b>International Comparison</b>	No
11	<b>KPI Monitoring</b>	Monthly
12	<b>KPI Reporting Frequency</b>	Monthly
13	<b>KPI Report Period</b>	Current (e.g. monthly data reported by the 10th of the following month)
14	<b>KPI Reporting Aggregation</b>	National / CHO / LHO
15	<b>KPI is reported in which reports?</b>	Management Data Report
16	<b>Web link to data</b>	<a href="http://www.hse.ie/eng/services/publications/">http://www.hse.ie/eng/services/publications/</a>
17	<b>Additional Information</b>	
	<b>KPI owner/lead for implementation</b>	Stephen Toft Programme Officer for Palliative Care, Integrated Operations - Planning
	<b>NBIU Data Support</b>	Deirdre Devin, Lead Data Analyst, Palliative Care, 087 1891797, deirdre.devin@hse.ie
	<b>Governance/sign off</b>	Maurice Dillon, National Lead for Palliative Care, Integrated Operations - Planning

## Palliative Care Children's Palliative Care Services

1	<b>KPI Title</b>	PAC39 Number of children in the care of the acute specialist paediatric palliative care team (during the reporting month)
1a	<b>KPI Short Title</b>	No. in Acutes during the month
2	<b>KPI Description</b>	This is a count of the total number of children who received care from the Specialist Paediatric Palliative Care Teams in Our Lady's Children's Hospital Crumlin and Children's University Hospital Temple Street during the reporting month. The Specialist Paediatric Palliative Care Teams in Our Lady's Children's Hospital Crumlin and Children's University Hospital Temple Street provide care to children in the hospital and support to former patients and their families living at home. The total number of children recorded at Our Lady's Children's Hospital, Crumlin and Children's University Hospital Temple Street include all children under the care of the Consultant Paediatrician with a Special Interest in Palliative Medicine and may be resident anywhere in the country.
3	<b>KPI Rationale</b>	To determine the number of new children / families being supported by the service and to assist in service planning.
3a	<b>Indicator Classification</b>	Access and Integration
4	<b>National Target</b>	NSP 2024 - 65 from January- Target PIT
4a	<b>Target Trajectory</b>	Children's Health Ireland at Crumlin (48) Children's Health Ireland at Temple Street (17)
4b	<b>Volume Metrics</b>	N/A
5	<b>KPI Calculation</b>	Count the total number of children in the care of the specialist palliative care teams Our Lady's Children's Hospital Crumlin and Children's University Hospital Temple Street in the reporting month.
6	<b>Data Source</b>	Data is sourced by the Specialist Palliative Care teams who submit it to the Business Information Unit (BIU) Community Healthcare Team.
6a	<b>Data Sign Off</b>	Chief Officer, Community Healthcare Organisation
6b	<b>Data Quality Issues</b>	Data quality issues are addressed as they arise along the data pathway.
7	<b>Data Collection Frequency</b>	Monthly
8	<b>Tracer Conditions</b>	Children in the care of the specialist palliative care teams Our Lady's Children's Hospital, Crumlin and Children's University Hospital Temple Street in the reporting month.
9	<b>Minimum Data Set MDS</b>	Children in the care of the specialist palliative care teams Our Lady's Children's Hospital, Crumlin and Children's University Hospital Temple Street in the reporting month.
10	<b>International Comparison</b>	None
11	<b>KPI Monitoring</b>	Monthly
12	<b>KPI Reporting Frequency</b>	Monthly
13	<b>KPI Report Period</b>	Current (e.g. monthly data reported by the 10th of the following month)
14	<b>KPI Reporting Aggregation</b>	National / Hospital
15	<b>KPI is reported in which reports?</b>	Management Data Report
16	<b>Web link to data</b>	<a href="http://www.hse.ie/eng/services/publications/">http://www.hse.ie/eng/services/publications/</a>
17	<b>Additional Information</b>	
	<b>KPI owner/lead for implementation</b>	Stephen Toft Programme Officer for Palliative Care, Integrated Operations - Planning
	<b>NBIU Data Support</b>	Deirdre Devin, Lead Data Analyst, Palliative Care, 087 1891797, deirdre.devin@hse.ie
	<b>Governance/sign off</b>	Maurice Dillon, National Lead for Palliative Care, Integrated Operations - Planning

## Palliative Care LauraLynn

1	KPI Title	PAC54 No of admissions to LauraLynn Children's Hospice (during the reporting year)
1a	KPI Short Title	No. admitted to LauraLynn
2	KPI Description	This is the total number of admissions to LauraLynn House (during the reporting year). There are two types of admissions: 1) Planned: for short-break/respite or 2) Unplanned: For Crisis, Symptom Management or End of Life Care The term refers to all admissions for children/family units for stays in LauraLynn House and does not refer to new referrals admitted to the service as LauraLynn Provides Inpatient and Community services.
3	KPI Rationale	To determine the number of patients who received care at LauraLynn children's hospice and their home location throughout the country
3a	Indicator Classification	Person Centred Care, Effective Care
4	National Target	NSP 2024 - 500 - Target Cumulative
4a	Target Trajectory	Full target in January
4b	Volume Metrics	N/A
5	KPI Calculation	Total number of children who were admitted to LauraLynn during the month plus total number of new children who were admitted to LauraLynn during the month
6	Data Source	Information is sourced by LauraLynn children's hospice who forward to BIU office Business Intelligence Unit and copy to CHO Business Unit. Data Completeness is expected at 100%. Data quality issues are addressed as they arise
6a	Data Sign Off	LauraLynn Childrens Hospice
6b	Data Quality Issues	Data quality issues are addressed as they arise
7	Data Collection Frequency	Monthly
8	Tracer Conditions	The numbers of persons diagnosed with problems associated with a Life-threatening illness (not necessarily Cancer) who received services in LauraLynn children's Hospice
9	Minimum Data Set MDS	The required minimum dataset for receipt of treatment is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason. The patient then receives a Specialist palliative care medical team assessment before suitability for admission is agreed and when wait time commences.
10	International Comparison	No
11	KPI Monitoring	Monthly
12	KPI Reporting Frequency	Monthly
13	KPI Report Period	Current (e.g. monthly data reported by the 10th of the following month)
14	KPI Reporting Aggregation	National / CHO / LHO
15	KPI is reported in which reports?	Management Data Report
16	Web link to data	<a href="http://www.hse.ie/eng/services/publications/">http://www.hse.ie/eng/services/publications/</a>
17	Additional Information	
	KPI owner/lead for implementation	Stephen Toft Programme Officer for Palliative Care, Integrated Operations - Planning
	NBIU Data Support	Deirdre Devin, Lead Data Analyst, Palliative Care, 087 1891797, deirdre.devin@hse.ie
	Governance/sign off	Maurice Dillon, National Lead for Palliative Care, Integrated Operations - Planning

## Palliative Care LauraLynn

1	KPI Title	<p>PAC 53 Number of children/Family units who received therapeutic support from LauraLynn Childrens Hospice (during the reporting month) Therapeutic care covers direct care (hands-on) and also "family supports" that are typically offered based on assessed need and for a specific purpose:</p> <ul style="list-style-type: none"> <li>• Physiotherapy</li> <li>• Occupational Therapy</li> <li>• Psychology</li> <li>• Music Therapy</li> <li>• Play Therapy</li> <li>• Psychosocial supports provided by our Bereavement Coordinator or Family Support Coordinator (MSW)</li> <li>• Medical Interventions</li> </ul> <p>It does not include routine, general check-ins etc..</p> <p>A family unit is described as includes the child referred to the service, the siblings, parents/guardians, and can also include relevant other family members e.g. grandparents.</p>
1a	KPI Short Title	No. of children and families receiving therapeutic support
2	KPI Description	This is a count of the total number of children and or their family units who received therapeutic support from LauraLynn
3	KPI Rationale	To determine the extent of care that is provided to a family unit and patient which determines in turn the amount of care provided to the extended family in its care
3a	Indicator Classification	Person Centred Care, Effective Care
4	National Target	NSP 2024 Target- 140 per month
4a	Target Trajectory	Full target in January
4b	Volume Metrics	N/A
5	KPI Calculation	Count of all people who fit into the KPI title
6	Data Source	Information is sourced by LauraLynn children's hospice who forward to BIU office Business Intelligence Unit and copy to CHO Business Unit. Data Completeness is expected at 100%. Data quality issues are addressed as they arise
6a	Data Sign Off	LauraLynn Childrens Hospice
6b	Data Quality Issues	Data quality issues are addressed as they arise
7	Data Collection Frequency	Monthly
8	Tracer Conditions	The numbers of persons diagnosed with problems associated with a Life-threatening illness (not necessarily Cancer) who received services in LauraLynn children's Hospice
9	Minimum Data Set MDS	The required minimum dataset for receipt of treatment is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason. The patient then receives a Specialist palliative care medical team assessment before suitability for admission is agreed and when wait time commences.
10	International Comparison	No
11	KPI Monitoring	Monthly
12	KPI Reporting Frequency	Monthly
13	KPI Report Period	Current (e.g. monthly data reported by the 10th of the following month)
14	KPI Reporting Aggregation	National / CHO / LHO
15	KPI is reported in which reports?	Management Data Report
16	Web link to data	<a href="http://www.hse.ie/eng/services/publications/">http://www.hse.ie/eng/services/publications/</a>
17	Additional Information	
	KPI owner/lead for implementation	Stephen Toft Programme Officer for Palliative Care, Integrated Operations - Planning
	NBIU Data Support	Deirdre Devin, Lead Data Analyst, Palliative Care, 087 1891797, deirdre.devin@hse.ie
	Governance/sign off	Maurice Dillon, National Lead for Palliative Care, Integrated Operations - Planning