



Palliative Care Services
Key Performance
Indicator
Metadata 2024



Palliative Care Inpatient Palliative Care Services

1	KPI Title	PAC1A Access to specialist inpatient bed within seven days during the reporting year
1a	KPI Short Title	%> 7 days
2	KPI Description	<p>This is the calculation of the number of patients who were admitted to a specialist palliative care inpatient bed within seven days of receipt of referral expressed as a percentage of the total number of patients admitted in the reporting month. The services submit the number of patients admitted within seven days and the total number of patients admitted in the reporting month, the percentage is calculated by the Business Intelligence Unit.</p> <p>Wait time to admission is calculated in calendar days from the date of receipt of referral 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.</p> <p>When a referred patient is offered a specialist palliative care bed but, due to external factors, is unable to be admitted, the count of the wait time is paused until the patient becomes available for admission.</p> <p>It is 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	KPI Rationale	To determine the percentage of patients accessing specialist palliative care inpatient beds within seven days.
3a	Indicator Classification	Access & Integration
4	National Target	NSP 2024 Target - 98% - from January ,Target Cumulative
4a	Target Trajectory	98% or greater for all CHO's
4b	Volume Metrics	N/A
5	KPI Calculation	<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 & 6 patients waited >28 days for admission. Calculation for access within seven days is as follows: $154 / (154+35+5+6) \rightarrow 154/(200) \rightarrow 0.770$, 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	Data Source	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	Data Sign Off	Chief Officer, Community Healthcare Organisation
6b	Data Quality Issues	Data quality issues are addressed as they arise along the data pathway. Data errors can be observed in the tally rows at the end of each submission template
7	Data Collection Frequency	Monthly: Data to be submitted to the BIU on or before the 10th of the month or nearest Friday
8	Tracer Conditions	The number of people admitted to specialist palliative care inpatient units and wait times for admission in particular wait time 0-7 days. .
9	Minimum Data Set MDS	The number of people admitted to specialist palliative care inpatient units and wait times for admission in particular wait time 0-7 days.
10	International Comparison	http://www.ncpc.org.uk/mds https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/827430/Palliative_care_clinical_data_set_Guidance_and_Definitions_Final.pdf
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/ Institution
15	KPI is reported in which reports?	Performance Report/Management Data Report
16	Web link to data	http://www.hse.ie/eng/services/publications/
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 Inpatient Palliative Care Services

1	KPI Title	PAC33 Number of patients accessing specialist inpatient bed within seven days (during the reporting year)
1a	KPI Short Title	Number > 7 days
2	KPI Description	<p>This is a count of the number of patients who were admitted to a specialist palliative care inpatient bed within seven days of referral during the reporting month</p> <p>It is 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 returns</p>
3	KPI Rationale	<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	Indicator Classification	Access & Integration
4	National Target	NSP 2024 Target - 4,128 by December
4a	Target Trajectory	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	Volume Metrics	N/A
5	KPI Calculation	Count the total number of patients accessing specialist palliative care inpatient beds within seven days of referral / request for transfer.
6	Data Source	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	Data Sign Off	Chief Officer, Community Healthcare Organisation
6b	Data Quality Issues	<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	Data Collection Frequency	Monthly: Data to be submitted to the BIU on or before the 10th of the month or nearest Friday
8	Tracer Conditions	The number of people admitted to specialist palliative care inpatient units within seven days of referral / request for transfer.
9	Minimum Data Set MDS	The number of people admitted to specialist palliative care inpatient units within seven days of referral / request for transfer.
10	International Comparison	http://www.ncpc.org.uk/mds https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/827430/Palliative_care_clinical_data_set_Guidance_and_Definitions_Final.pdf
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 / Institution
15	KPI is reported in which reports?	Management Data Report
16	Web link to data	http://www.hse.ie/eng/services/publications/
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 Community Palliative Care Services		
1	KPI Title	PAC14 No. of patients who received specialist palliative care treatment in their normal place of residence in the month
1a	KPI Short Title	No. in normal place of residence
2	KPI Description	<p>This is a count of the 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, nursing home, community hospital, outpatient clinic etc. All patients in receipt of specialist palliative care in the community on the first day of the month and all new patients who receive a first in-person contact during the month are included with each patient counted once only in the reporting month.</p> <p>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.</p>
3	KPI Rationale	To determine the total number of patients who received specialist palliative care in the community including Outpatient Clinics during the reporting month.
3a	Indicator Classification	Access and Integration
4	National Target	NSP 2024 - 3,612 from January. Monthly Target PIT
4a	Target Trajectory	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	Volume Metrics	N/A
5	KPI Calculation	Count the total number of patients who received specialist palliative care in the community (home care) during the reporting month.
6	Data Source	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	Data Sign Off	Chief Officer, Community Healthcare Organisation
6b	Data Quality Issues	Data quality issues are addressed as they arise along the data pathway.
7	Data Collection Frequency	Monthly
8	Tracer Conditions	The number of people who received specialist palliative care services (home care) in the community in the reporting month.
9	Minimum Data Set MDS	The number of people who received specialist palliative care services (home care) in the community in the reporting month.
10	International Comparison	http://www.ncpc.org.uk/mds https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/827430/Palliative_care_clinical_data_set_Guidance_and_Definitions_Final.pdf
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?	Performance Report/Management Data Report
16	Web link to data	http://www.hse.ie/eng/services/publications/
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 Community Palliative Care Services

1	KPI Title	PAC36 Percentage of patients triaged within one working day of referral (Community)
1a	KPI Short Title	% triaged <1 day
2	KPI Description	<p>This is the calculation of the number of patients triaged within one working day of receipt of referral by the specialist palliative care community team expressed as a percentage of the total number of referrals received by the specialist palliative care community team in the reporting month. The services submit the number of patients triaged within one working day of referral and the total number of patient referrals received by specialist palliative care in the reporting month, the percentage is calculated by the Business Intelligence Unit.</p> <p>One working day is defined as close of business of the next normal working day after receipt of referral (i.e. excluding weekends and Bank Holidays).</p> <p>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 and categorised as per clinical need.</p> <p>Re referrals: If a patient has been discharged and is referred for service a second time in the month then the patient is to be counted as a new referral in the triaged numbers.</p>
3	KPI Rationale	To determine the percentage of referred patients triaged within the timeframe of one working day
3a	Indicator Classification	Quality & Safety
4	National Target	NSP 2024 - 96% - from January, Target Cumulative
4a	Target Trajectory	96% for all CHO's
4b	Volume Metrics	N/A
5	KPI Calculation	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	Data Source	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	Data Sign Off	Chief Officer, Community Healthcare Organisation
6b	Data Quality Issues	Data quality issues are addressed as they arise along the data pathway.
7	Data Collection Frequency	Monthly
8	Tracer Conditions	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	Minimum Data Set MDS	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	International Comparison	http://www.ncpc.org.uk/mds https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/827430/Palliative_care_clinical_data_set_Guidance_and_Definitions_Final.pdf
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	http://www.hse.ie/eng/services/publications/
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 Community Palliative Care Services		
1	KPI Title	PAC58 Percentage of all Category 1 triaged patients who received specialist palliative care within 2 days in the community
1a	KPI Short Title	Cat1<2days
2	KPI Description	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	KPI Rationale	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	Indicator Classification	<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	National Target	National 90%, CHO 90%, LHO 90%
5	KPI Calculation	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	Data Source	
6a	Data Completeness	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	Data Quality Issues	
7	Data Collection Frequency	<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	Tracer Conditions	All patient conditions referred to community specialist palliative care services including cancer and non-cancer patients
9	Minimum Data Set MDS	The Palliative Care Minimum Data Set
10	International Comparison	Yes. E.g. http://www.ncpc.org.uk/mds
11	KPI Monitoring	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	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?	Performance Report/Management Data Report
16	Web link to data	http://www.hse.ie/eng/services/publications/
17	Additional Information	Is this information in CIF:YES
18	KPI owner/lead for implementation	Stephen Toft Information Analyst, Office of National Lead for Palliative Care. Tel 087 0574188. Email: Stephen.Toft1@hse.ie
19	NBIU Data Support	Deirdre Devin, Lead Data Analyst, Palliative Care, 087 1891797, deirdre.devin@hse.ie
20	Governance/sign off	Mr Maurice Dillon, HSE National Lead for Palliative Care, Tel: 0874510735

Palliative Care Community Palliative Care Services		
1	KPI Title	PAC59 Percentage of all Category 2 triaged patients who received specialist palliative care within 7 days in the community
1a	KPI Short Title	cat2<7 days
2	KPI Description	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	KPI Rationale	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	Indicator Classification	<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	National Target	National 90%, CHO 90%, LHO 90%
5	KPI Calculation	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	Data Source	
6a	Data Completeness	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	Data Quality Issues	
7	Data Collection Frequency	<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	Tracer Conditions	
		All patient conditions referred to community specialist palliative care services including cancer and non-cancer patients
9	Minimum Data Set MDS	The Palliative Care Minimum Data Set
10	International Comparison	Yes. E.g. http://www.ncpc.org.uk/mds
11	KPI Monitoring	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	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?	Performance Report/Management Data Report
16	Web link to data	http://www.hse.ie/eng/services/publications/
17	Additional Information	Is this information in CIF: YES
18	KPI owner/lead for implementation	Stephen Toft Information Analyst, Office of National Lead for Palliative Care. Tel 087 0574188. Email: Stephen.Toft1@hse.ie
19	NBIU Data Support	Deirdre Devin, Lead Data Analyst, Palliative Care, 087 1891797, deirdre.devin@hse.ie
20	Governance/sign off	Mr Maurice Dillon, HSE National Lead for Palliative Care, Tel: 08/4510/35

Palliative Care Community Palliative Care Services		
1	KPI Title	PAC60 Percentage of all Category 3 triaged patients who received specialist palliative care within 14 days in the community
1a	KPI Short Title	cat3<14 days
2	KPI Description	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	KPI Rationale	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	Indicator Classification	<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	National Target	National 80%, CHO 80%, LHO 80%
5	KPI Calculation	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	Data Source	
6a	Data Completeness	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	Data Quality Issues	
7	Data Collection Frequency	<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	Tracer Conditions	
		All patient conditions referred to community specialist palliative care services including cancer and non-cancer patients
9	Minimum Data Set MDS	The Palliative Care Minimum Data Set
10	International Comparison	Yes. E.g. http://www.ncpc.org.uk/mds
11	KPI Monitoring	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	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?	Performance Report/Management Data Report
16	Web link to data	http://www.hse.ie/eng/services/publications/
17	Additional Information	Is this information in CIF: YES
18	KPI owner/lead for implementation	Stephen Toft Information Analyst, Office of National Lead for Palliative Care. Tel 087 0574188. Email: Stephen.Toft1@hse.ie
19	NBIU Data Support	Deirdre Devin, Lead Data Analyst, Palliative Care, 087 1891797, deirdre.devin@hse.ie
20	Governance/sign off	Mr Maurice Dillon, HSE National Lead for Palliative Care, Tel: 0874510735

Palliative Care Children's Palliative Care Services

1	KPI Title	PAC37 No. of children in the care of the Clinical Nurse Co-ordinator for Children with Life Limiting Conditions (children's outreach nurse)
1a	KPI Short Title	No. in CNC during the month
2	KPI Description	This is a count of the total number of children who were on the active patient list of the Clinical Nurse Co-ordinator, CNC, in the reporting month. It includes children on the list on the first day of the month plus new children receiving active care during the reporting month
3	KPI Rationale	To determine the number of children / families being supported by the service and to assist in service planning.
3a	Indicator Classification	Access and Integration
4	National Target	NSP 2024 - 320 from January, Target PIT
4a	Target Trajectory	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	Volume Metrics	N/A
5	KPI Calculation	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	Data Source	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	Data Sign Off	Chief Officer, Community Healthcare Organisation
6b	Data Quality Issues	Data quality issues are addressed as they arise along the data pathway.
7	Data Collection Frequency	Monthly
8	Tracer Conditions	The number of children in the active care of the children's outreach nurse (clinical nurse co-ordinator) in the reporting month.
9	Minimum Data Set MDS	The number of children in the active care of the children's outreach nurse (clinical nurse co-ordinator) in the reporting month.
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	http://www.hse.ie/eng/services/publications/
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 Children's Palliative Care Services		
1	KPI Title	PAC39 Number of children in the care of the acute specialist paediatric palliative care team (during the reporting month)
1a	KPI Short Title	No. in Acutes during the month
2	KPI Description	This is a count of the total number of children who received care from the Specialist Paediatric Palliative Care Teams in Children's Hospital Ireland Crumlin and Temple Street during the reporting month. The CHI Specialist Paediatric Palliative Care Teams provide care to children admitted to the hospital and also through outpatient clinics to patients and their families living at home.
3	KPI Rationale	To determine the total number of children / families in the care of CHI Specialist Paediatric Palliative Care Team
3a	Indicator Classification	Access and Integration
4	National Target	NSP 2024 - 65 from January- Target PIT
4a	Target Trajectory	Children's Health Ireland at Crumlin (48) Children's Health Ireland at Temple Street (17)
4b	Volume Metrics	N/A
5	KPI Calculation	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	Data Source	Data is sourced by the Specialist Palliative Care teams who submit it to the Business Information Unit (BIU) Community Healthcare Team.
6a	Data Sign Off	Chief Officer, Community Healthcare Organisation
6b	Data Quality Issues	Data quality issues are addressed as they arise along the data pathway.
7	Data Collection Frequency	Monthly
8	Tracer Conditions	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	Minimum Data Set MDS	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	International Comparison	None
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 / Hospital
15	KPI is reported in which reports?	Management Data Report
16	Web link to data	http://www.hse.ie/eng/services/publications/
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	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 (LL Children's Hospice) during the reporting year. There are two types of admissions: 1) Planned: for short-break/respice 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.
3	KPI Rationale	To determine the number of admissions to LauraLynn House (LL Children's Hospice) during the reporting month / year
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	http://www.hse.ie/eng/services/publications/
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)</p> <p>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"> • Physiotherapy • Occupational Therapy • Psychology • Music Therapy • Play Therapy • Psychosocial supports provided by our Bereavement Coordinator or Family Support Coordinator (MSW) • Medical Interventions <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	http://www.hse.ie/eng/services/publications/
17	Additional Information	
	KPI owner/lead for implementation	Stephen Toft Programme Officer for Palliative Care, Integrated Operations - Planning
	NSIU 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