Health Service

Disability Services KPI Metadata 2014 based on

Division Operational Plan NSP 2014

Version History Version: 14.08.14



Dis	sability Services KPI Guidelines 2014 - Index	Reporting Frequency	Who reports?	Page No.
	Day Services			
Α	No. of work / work-like activity WTE places provided for people with ID and / or autism	BA	National Occupational Guidance Service Database	6
В	No. of people with ID and / or autism benefiting from work / work-like activity services	BA	National Occupational Guidance Service Database	8
С	No. of work / work-like activity WTE places provided for people with physical and / or sensory disability	BA	National Occupational Guidance Service Database	10
D	No. of people with physical and / or sensory disability benefiting from work / work-like activity services	BA	National Occupational Guidance Service Database	12
Е	No. of Rehabilitative Training places provided (all disabilities)	М	National Occupational Guidance Service Database	14
F	No. of people (all disabilities) benefiting from Rehabilitative Training (RT)	М	National Occupational Guidance Service Database	16
G	No. of people with ID and / or autism benefiting from Other Day Services (excl. RT and work / work-like activities) (adults only)	BA	LHO / RDO Business Unit	18
Н	No. of people with physical and / or sensory disability benefiting from Other Day Services (excl. RT and work / work-like activities) (adults only)	BA	LHO / RDO Business Unit	20
ı	% of school leaves and RT graduates who have received a placement which fully meets their needs	Q	TBD	22
	Residential Services			
J	No. of people with ID and or Autism benefiting from residential services	Q	LHO / RDO Business Unit	24
ĸ	No. of people with a physical and sensory disability benefiting from residential services	Q	LHO / RDO Business Unit	26
	Respite Services			
L	No. of people with ID and / or autism benefiting from residential centre based respite services	Q	LHO / RDO Business Unit	28
М	No. of bed nights in residential centre based respite services used by people with ID and / or autism	Q	LHO / RDO Business Unit	30
N	No. of people with a physical and / or sensory disability benefiting from residential centre based respite services	Q	LHO / RDO Business Unit	32
0	No. of bed nights in residential centre based respite services used by people with physical and / or sensory disability	Q	LHO / RDO Business Unit	34
	Personal Assistant (PA) Hours			
Р	No. of adults with a physical and / or sensory disability benefiting PA Hours	Q	LHO / RDO Business Unit	36
Q	No. of PA hours delivered to adults with physical and / or sensory disability		LHO / RDO Business Unit	38
	Home Support Hours			
R	No. of people with a physical and/or sensory disability benefiting from home support hours	Q	LHO / RDO Business Unit	40
s	No. of Home Support hours delivered to people with a physical and/or sensory disability	Q	LHO / RDO Business Unit	42
Т	No. of people with ID and / or autism in receipt of home support hours	Q	LHO / RDO Business Unit	44
U	No. of Home Support hours delivered to people with an ID and / or autism.	Q	LHO / RDO Business Unit	46
	Disability Act Compliance			
٧	No. of requests for assessments received	Q	Assessment of Need database	48
w	% of assessments commenced as provided for in the regulations	Q	Assessment of Need database	49
Х	% of assessments completed within the timelines as provided for in the regulations	Q	Assessment of Need database	50
Υ	% of service statements completed within the timelines as provided for in the regulations	Q	Assessment of Need database	51
	Services for Children and Young People			
z	Proportion of Local Implementation Groups which have Local Implementation Plans for progressing disability services for	Q	LHO / RDO Business Unit	52
	children and young people Proportion of established Children's Disability Network Teams having current individualised plans for each child	Q	LHO / RDO Business Unit	54
7.0	Congregated Settings	Q.	Erro / Noo Business onic	01
AB	Facilitate the movement of people from congregated to community settings under the auspices of the following (1) Genio funded projects (2) Housing Strategy for People with a Disability (3) Other	ВА	TBD	56
	Quality			
AC	In respect of agencies in receipt of £5m or more in public funding, the % which employ an internationally recognised quality improvement methodology such as EFQM, CQL or CARF.	А	TBD	57

Disa	Disability: Day Services Programme Descriptors				
Programme Description Explanation					
PD1.	Day Care Programme	High support services primarily focused on providing a health care service to meet the specific needs of individuals.			
PD2.	Day Activation/Activity	A day programme which is essentially a support and therapeutic service designed to meet the needs of people through individual plans. The environment is designed to maximise the functional levels of service users. Day programmes provide a range of skills and activities such as independent living skills, personal development, education classes, social and recreational activities, and health-related and therapy supports. Day activation is essentially a programme that does not include work activity.			
PD3.	Active Community Participation/Inclusion	Programmes and supports specifically targeted towards the inclusion and active participation of service users in mainstream community programmes and activities. This includes participation in educational opportunities, sport and recreation involvement, social events, local partnership projects and advocacy initiatives. A range of supports that promote and facilitate inclusion are provided to individuals and groups, such as accessing services, liaison, planning, co-ordinating and supporting attendance and active participation by service users.			
PD4.	Sheltered Work Therapeutic	A centre-based programme designed to provide constructive occupation for an individual or group where work activity is a key element of the programme. The work is carried out in a centre or location designed for that purpose but there is no third party involvement, that is, no contract work and not open to public. Examples of this could be a day service that focuses on cooking and baking or arts and crafts. The product is consumed within the service. They may also hold coffee mornings to showcase the work and sell some of the products at nominal cost to encourage service users and prevent a build-up of stock. Service users may or may not receive allowances or discretionary top-up payments.			
PD5.	Sheltered Work Commercial	A day programme which consists of work activity. In these situations, the public has access to the product or service and contract work is carried out for a third party. Money is exchanged for goods or services. Service users may or may not receive allowances or discretionary top-up payments.			
PD6.	Sheltered Work - 'Like Work'	A day programme which involves service users working within HSE or service provider organisations in what could be described as 'like work' situations. This includes service users working in kitchens, maintenance work, landscaping, office, administration, post room, catering, hospital shops, canteens, and so on. Service users receive a discretionary top-up payment. The purpose of this discretionary payment is to give the service user a sense of worth and reward and encourage him or her to continue with the activity. This payment could be argued to be an important part of the therapeutic aspect of the work done.			
PD7.	External Work 'Like Work' – (less than minimum wage)	A day programme which involves service users working in external 'like work' situations. In most cases, the service provider sources the placement in an open employment setting as part of the individual's day programme. Minimum wage or Disability Allowance (DA) plus rules do not apply but the employer normally makes a discretionary top-up payment, either directly to the individual or to the service provider to allocate at its discretion. Examples include service users working in supermarkets, fast food chains, and so on. Short-term work placements that are part of a recognised training programme are not included.			
PD8.	Open Employment (no supports)	This is employment in the open labour market without additional supports. In some instances, a service user may be in open employment with no supports for only part of his or her week. The service provider may have helped the individual to get their job but has now withdrawn all support.			
PD9.	Supported Employment	Supported Employment is paid employment in the open labour market with ongoing supports. The minimum wage and full employee status applies. Service users may be participating in the FÁS-funded Supported Employment Programme or in initiatives run by service providers.			
PD10.	Sheltered Employment	Employment in an enterprise set up specifically to employ people with disabilities and which receives designated funding from the HSE. It refers to employment under sheltered conditions where workers have a contract of employment and are in receipt of the minimum wage.			
PD11.	Rehabilitative Training	Rehabilitative Training programmes are designed to equip participants with basic personal, social and work-related skills that will enable them to progress to greater levels of independence and integration in the community. These are approved programmes with 'Whole Time Equivalent' (WTE) places allocated by the national Occupational Guidance Service structure.			
PD12.	Education Programme	Programmes funded by the Department of Education and Skills to enhance day services.			
PD13.	Voluntary Work	The volunteer works in the community or for the benefit of the natural environment primarily because he or she chooses to do so. A volunteer worker does not get paid or receive compensation for services rendered. Each person's motivation will be unique but will often be a combination of: - altruism (volunteering for the benefit of others), - quality of life (serving the community because doing service makes one's own life better, for example from being with other people, staying active and having a sense of the value of themselves that may not be as clear in other areas of life), and - giving back, a sense of duty or religious conviction.			

KP	KPI Guidelines Explained				
1	VDI Title	Event title of VDI as it appears in the National Capitae Dian or Cornerate Dian			
2	KPI Title KPI Description	Exact title of KPI as it appears in the National Service Plan or Corporate Plan. Description of the KPI including a description of the target population. Where definitions exist in other documents these should be included here (e.g. Vision for Change, etc). Where definitions exist which are very long they can be referenced here.			
3	KPI Rationale	Rationale for the measurement of the KPI (e.g. HSE or Government priority). Importance of area (e.g.: high incidence, high morbidity, high service-user volumes, costly to provide). Consequences of poor performance on target population. Potential for improvement if performance is known. Evidence to support outcome improvement if target reached. Existence of agreed/recognised target or benchmark.			
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). □Person Centred Care □Effective Care □Safe Care □Better Health and Wellbeing			
4	KPI Target	Indicate the target for the KPI – a target should be set for the KPI to inform progress towards an acceptable level of performance.			
5	KPI Calculation	Indicate how the KPI will be calculated. The target population is called the denominator and includes all services users or events that qualify for inclusion in the measurement process (for ratios the numerator is not included in the denominator). The subset of the target population that meets the criteria as defined in the indicator is called the numerator. Specify whether KPI is expressed as a proportion; ratio; percentage; or count and how it should be interpreted against target.			
6	Data Source	Indicate the data source (s) which will be used for the KPI. This should give details of primary data collection (e.g. PHN records, patient charts, administration data bases, survey data). It should indicate the route through which data is communicated and collated (e.g. provided by PHNs to LHOs to RDO Business Unit to BIU).			
	Data Completeness	Comment on any known data completeness issues.			
	Data Quality Issues	Comment on any known data quality issues.			
7	Data Collection Frequency	Indicate how often the data to support the KPI will be collected: □Daily □Weekly □Monthly □Quarterly □Bi-annually □Annually □Other – give details:			
8	Tracer Conditions	Indicate the terms which should be used to identify what should be included in the data. This should include synonyms, International Classification of Disease (ICD) and SNOMED (Systematised Nomenclature of Medicine Clinical Terms) where applicable.			
9	Minimum Data Set	Indicate what core data items (with definitions) should be collected for the purpose of reporting the KPI. The data lines can be included here or an example appended for information where there is a definitive minimum data set available.			
10	International Comparison	Indicate if this KPI is collected in other jurisdictions outside of Ireland and therefore allows for international comparison.			
11	KPI Monitoring	Indicate how often the KPI will be monitored and by whom: □Daily □Weekly □Monthly □Quarterly □Bi-annually □Annually □Other – give details: The local RT Coordinator oversees data verification with the service provider prior to completing national database report.			
12	KPI Reporting Frequency	Indicate how often the KPI will be reported (at a National level this will align with the agreed reporting timeframe in the NSP): □Daily □Weekly □Monthly □Quarterly □Bi-annually □Annually □Other – give details:			

13	KPI report period	Indicate the period to which the data applies: □Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Cuarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter) □Monthly in arrears
14	KPI Reporting Aggregation	Indicate the level of aggregation – this refers to the combination of results to provide a broader picture of performance for example over a geographical location: ☐ National ☐ Regional ☐ LHO Area ☐ Hospital ☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports?	Indicate where the KPI will be reported for example: □ Corporate Plan Report
16	Web link to data	Indicate the web link to the data (where this is available).
17	Additional Information	Include any additional information relevant to the KPI.
Conta Lead	ct details for Data Manager / Specialist	
Nation	nal Lead and Directorate	

(A)	Disability: Day Services		
1	KPI Title	No. of work / work-like activity WTE places provided for people with ID and / or autism. (Disability: Day Services programme descriptors sheet to be used with this metric)	
2	KPI Description	Number of work / work-like activity whole time equivalent (WTE) 30 hour places for people with ID and / or autism as funded by HSE Disability Services.	
		Work / work like activity places include: Sheltered Work-Therapeutic (PD4), Sheltered Work-Commercial (PD5), Sheltered Work-Like Work (PD6), External Work- Like Work (PD7)	
		Work / work like activity places do not include: PD1, PD2, PD3, PD8, PD9, PD10, PD11, PD12, PD13	
3	KPI Rationale	To monitor the number of WTE work / work-like activity places available for people with ID and / or autism as funded by HSE Disability Services.	
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑Person Centred Care ☐Effective Care ☐Safe Care ☑Better Health and Wellbeing	
4	KPI Target	2014 NSP Targets National: 1,547 DML: 364 DNE: 118 South: 663 West: 402	
5	KPI Calculation	Count the number of 30 hour WTE work / work-like activity places (as defined above) utilised by people with an ID and / or autism as funded by HSE Disability Services. Each WTE place is equivalent to 30 hours per week. If a person does not attend for a full 30 hours, the WTE is calculated by dividing the total number of hours actually worked by the person by 30 (e.g. person attends for 25 hours per week, 25/30 = 0.84 WTE). Each WTE place is counted only once per quarter. One person may attend more than one day service or engage in more than one Work/Like work activity. This is a point in time calculation (i.e. do not add bi-annual returns together). For year end annual outturn, the Q4 outturn is used (e.g. DML: Q2: 418, Q4: 422). Therefore the number of work / work like activity WTE places in DML for the year is 422. WTE Work Places must be returned by the HSE Area from which funding is allocated (e.g. Cork service user accessing work place in Kerry). This work place to be returned by Cork Disability Services.	
6	Data Source	Data is submitted by service providers to the local Rehabilitation Training (RT) Co-coordinators. Following local input into the National Occupational Guidance Service Database, reports are produced at national level and issued to the Business Intelligence Unit (BIU).	
	Data Completeness	100% data completeness required.	
	Data Quality Issues	No known data quality issues at this point.	
7	Data Collection Frequency	□Daily □Weekly □Monthly □Quarterly ☑Bi-annually □Annually ☑Other – give details: Data is updated and uploaded locally on an ongoing basis. Data is reported on a bi-annual basis.	
8	Tracer Conditions	people with an ID / autism.	
9	Minimum Data Set	The service user's care plan which includes personal details and relevant information relating to their diagnosis, their needs and services and support they require to meet their needs.	
10	International Comparison	Service developed in line with best practice internationally.	
11	KPI Monitoring	□Daily □Weekly □Monthly □Quarterly ☑Bi-annually □Annually ☑Other – give details: The local RT Coordinator oversees data verification with the service provider prior to completing national database report.	
12	KPI Reporting Frequency	□Daily □Weekly □Monthly □Quarterly ☑Bi-annually □Annually □Other – give details:	

13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)
		□Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter) □Monthly in arrears (June data reported in July) □Quarterly in arrears (Q1 data reported in Q2) □Rolling 12 months (previous 12 month period)
		☑Other - give details: Biannual (Q2 report covers Jan - Jun data)
14	KPI Reporting	✓ National ✓ Regional ✓ LHO Area □Hospital
	Aggregation	☐ County ☐ Institution ☐ Other – give details: Service Provider
15	KPI is reported in which	☐ Corporate Plan Report ☐ Performance Report (NSP/CBP)
	reports?	□CompStat □Other – give details:
16	Web link to data	
17	Additional Information	
Contact details for Data		Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie
Manager / Specialist Lead		Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 / disability.socialcare@hse.ie
National Lead and Division		National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie

(B)	Disability: Day Services		
1	KPI Title	No. of people with ID and / or autism benefiting from work / work-like activity services (Disability: Day Services programme descriptors sheet to be used with this metric)	
2	KPI Description	Number of people with ID and / or autism benefiting from work / work-like activity services as funded by HSE Disability Services. Work / work like activity places include: Sheltered Work-Therapeutic (PD4), Sheltered Work-Commercial (PD5), Sheltered Work-Like Work (PD6), External Work- Like Work (PD7) Work / work like activity places do not include: PD1, PD2, PD3, PD8, PD9, PD10, PD11, PD12, PD13	
3	KPI Rationale	To monitor the number of people with an ID and / or autism benefiting from work / work like services as funded by HSE Disability Services.	
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑Person Centred Care □Effective Care □Safe Care ☑Better Health and Wellbeing	
4	KPI Target	2014 NSP Targets National: 3,114 DML: 616 DNE: 274 South: 1,503 West: 721	
5	KPI Calculation	Count the number of people with ID and / or autism benefiting from WTE work / work-like activity places (as defined above) as funded by HSE Disability Services. One person may attend more than one day service or engage in more than one Work/Like work activity. This is a point in time calculation (i.e. do not add bi-annual returns together). For year end annual outturn, the Q4 outturn is used (e.g. DNE Q2: 325, Q4: 332). Therefore the number of people benefiting from work / work like activity WTE places in DNE for the year is 332. WTE work places must be returned by the HSE Area from which funding is allocated (e.g. Cork service user accessing work place in Kerry). This person to be returned by Cork Disability Services.	
6	KPI Calculation	Data is submitted by service providers to the local Rehabilitation Training (RT) Co-coordinators. Following local input into the National Occupational Guidance Service Database, reports are produced at national level and issued to the Business Intelligence Unit (BIU).	
	Data Completeness	100% data completeness required.	
	Data Quality Issues	No known data quality issues at this point.	
7	Data Collection Frequency	□ Daily □ Weekly □ Monthly □ Quarterly ☑ Bi-annually □ Annually ☑ Other – give details: Data is updated and uploaded locally on an ongoing basis. Data is reported on a bi-annual basis.	
8	Tracer Conditions	people with an ID / autism.	
9	Minimum Data Set	The service user's care plan which includes personal details and relevant information relating to their diagnosis, their needs and services and support they require to meet their needs.	
10	International Comparison	Service developed in line with best practice internationally.	
	KPI Monitoring	□ Daily □ Weekly □ Monthly □ Quarterly ☑ Bi-annually □ Annually ☑ Other – give details: The local RT Coordinator oversees data verification with the service provider prior to completing national database report.	
12	KPI Reporting Frequency	□ Daily □ Weekly □ Monthly □ Quarterly ☑ Bi-annually □ Annually □ Other – give details:	

13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)
		□Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter)
		☐Monthly in arrears (June data reported in July)
		□Quarterly in arrears (Q1 data reported in Q2)
		□Rolling 12 months (previous 12 month period)
		☑Other - give details: Biannual (Q2 report covers Jan - Jun data)
14	KPI Reporting	✓ National ✓ Regional ✓ LHO Area □Hospital
	Aggregation	☐ County ☐ Institution ☐ Other – give details: Service Provider
15	KPI is reported in which	☐ Corporate Plan Report ☐ Performance Report (NSP/CBP)
	reports?	□CompStat □Other – give details:
16	Web link to data	
17	Additional Information	
Contact details for Data		Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie
Manager / Specialist Lead		Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 / disability.socialcare@hse.ie
National Lead and Division		National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie

(C)	(C) Disability: Day Services				
1	KPI Title	Number of work / work-like activity WTE 30 hour places provided for people with a physical and / or sensory			
ļ'	KI I HUC	disability			
		(Disability: Day Services programme descriptors sheet to be used with this metric)			
2	KPI Description	Number of work / work-like activity whole time equivalent (WTE) places for people with a physical and / or sensory			
	·	disability as funded by HSE Disability Services.			
		Work / work like activity places include: Sheltered Work-Therapeutic (PD4), Sheltered Work-Commercial (PD5),			
		Sheltered Work-Like Work (PD6), External Work- Like Work (PD7)			
		Work / work like activity places do not include: PD1, PD2, PD3, PD8, PD9, PD10, PD11, PD12, PD13			
3	KPI Rationale	To monitor the number of 30 hour WTE work / work-like activity places available for people with a physical and / or			
		sensory disability as funded by HSE Disability Services.			
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases			
		you may need to choose two).			
		✓ Person Centred Care □ Effective Care □ Safe Care			
		☑Better Health and Wellbeing			
4	KPI Target	2014 NSP Targets			
		National: 73			
		DML: 14			
		DNE: 6			
		South: 14 West: 39			
		WEST. 37			
5	KPI Calculation	Count the number of 30 hour WTE work / work-like activity places (as defined above) utilised by people with a			
		physical and / or sensory disability as funded by HSE Disability Services.			
		Each WTE place is equivalent to 30 hours per week. If a person does not attend for a full 30 hours, the WTE is			
		calculated by dividing the total number of hours actually worked by the person by 30 (e.g. person attends for 25			
		hours per week, 25/30 = 0.84 WTE). Each WTE place is counted only once per quarter.			
		, , , , , , , , , , , , , , , , , , ,			
		One person may attend more than one day service or engage in more than one Work/Like work activity.			
		This is a point in time calculation (i.e. do not add bi-annual returns together). For year end annual outturn, the Q4			
		outturn is used (e.g. DML: Q2: 418, Q4: 422). Therefore the number of work / work like activity WTE places for			
		people with a physical and / or sensory disability in DML for the year is 422.			
		WTE Work Places must be returned by the HSE Area from which funding is allocated (e.g. Cork service user			
		accessing work place in Kerry). This work place to be returned by Cork Disability Services.			
6	Data Source	Data is submitted by service providers to the local Rehabilitation Training (RT) Co-coordinators. Following local input			
		into the National Occupational Guidance Service Database, reports are produced at national level and issued to the Business Intelligence Unit (BIU).			
	Data Completeness	100% data completeness required.			
	Data Quality Issues	No known data quality issues at this point.			
7	Data Collection	□Daily □Weekly □Monthly □Quarterly ☑Bi-annually □Annually			
	Frequency	☑Other – give details: Data is updated and uploaded locally on an ongoing basis. Data is reported on a bi-annual			
		basis.			
8	Tracer Conditions	people with a physical and / or sensory disability.			
9	Minimum Data Set	The service user's care plan which includes personal details and relevant information relating to their diagnosis, their			
10	International Communication	needs and services and support they require to meet their needs.			
	•	Service developed in line with best practice internationally.			
11	KPI Monitoring	□Daily □Weekly □Monthly □Quarterly ☑Bi-annually □Annually			
		☑Other – give details: The local RT Coordinator oversees data verification with the service provider prior to			
		completing national database report.			

12	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually
		□Other – give details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of
		activity)
		☑Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter)
		□Monthly in arrears
14	KPI Reporting	☑ National ☑ Regional ☑ LHO Area ☐ Hospital
	Aggregation	☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which	☐ Corporate Plan Report ☐ Performance Report (NSP/CBP)
	reports?	□CompStat □Other – give details:
16	Web link to data	
17	Additional Information	
Con	tact details for Data	Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie
Manager / Specialist Lead		Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 / disability.socialcare@hse.ie
National Lead and Division		National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie

(D)	Disability: Day Ser	vices
1	KPI Title	No. of people with physical and / or sensory disability benefiting from work / work-like activity services (Disability: Day Services programme descriptors sheet to be used with this metric)
2	KPI Description	Number of people with physical and / or sensory disability benefiting from work / work-like activity services as funded by HSE Disability Services.
		Work / work like activity places include: Sheltered Work-Therapeutic (PD4), Sheltered Work-Commercial (PD5), Sheltered Work-Like Work (PD6), External Work- Like Work (PD7)
		Work / work like activity places do not include: PD1, PD2, PD3, PD8, PD9, PD10, PD11, PD12, PD13
3	KPI Rationale	To monitor the number of people with physical and / or sensory disability benefiting from work / work like services as funded by HSE Disability Services.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑Person Centred Care ☐Safe Care ☑Better Health and Wellbeing
		Č
4	KPI Target	2014 NSP Targets National:168 DML: 68 DNE: 7 South: 32 West: 61
5	KPI Calculation	Count the number of people with a physical and / or sensory disability benefiting from WTE work / work-like activity places (as defined above) as funded by HSE Disability Services. One person may attend more than one day service or engage in more than one Work/Like work activity. This is a point in time calculation (i.e. do not add bi-annual returns together). For year end annual outturn, the Q4 outturn is used (e.g. DNE Q2: 325, Q4: 332). Therefore the number of people benefiting from work / work like activity WTE places in DNE for the year is 332. Work Places must be returned by the HSE Area from which funding is allocated (e.g. Cork service user accessing work place in Kerry). This person to be returned by Cork Disability Services.
6	Data Source	Data is submitted by service providers to the local Rehabilitation Training (RT) Co-coordinators. Following local input into the National Occupational Guidance Service Database, reports are produced at national level and issued to the Business Intelligence Unit (BIU).
	Data Completeness	100% data completeness required.
	Data Quality Issues	No known data quality issues at this point.
7	Data Collection Frequency	□Daily □Weekly □Monthly □Quarterly ☑Bi-annually □Annually □Other – give details: Data is updated and uploaded locally on an ongoing basis. Data is reported on a bi-annual basis.
8	Tracer Conditions	people with a physical and / or sensory disability.
9	Minimum Data Set	The service user's care plan which includes personal details and relevant information relating to their diagnosis, their needs and services and support they require to meet their needs.
10	International Comparison	Service developed in line with best practice internationally.
	KPI Monitoring	□ Daily □ Weekly □ Monthly □ Quarterly ☑ Bi-annually □ Annually ☑ Other – give details: The local RT Coordinator oversees data verification with the service provider prior to completing national database report.
12	KPI Reporting Frequency	□ Daily □ Weekly □ Monthly □ Quarterly ☑ Bi-annually □ Annually □ Other – give details:

13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter) □Monthly in arrears (June data reported in July) □Quarterly in arrears (Q1 data reported in Q2) □Rolling 12 months (previous 12 month period) □Other - give details: Biannual (Q2 report covers Jan - Jun data)
14	KPI Reporting Aggregation	 ☑ National ☑ Regional ☑ LHO Area ☐ Hospital ☐ County ☐ Institution ☑ Other – give details: Service Provider
15	KPI is reported in which reports?	□ Corporate Plan Report □ Performance Report (NSP/CBP) □ CompStat □ Other – give details:
16	Web link to data	
17	Additional Information	
		Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 / disability.socialcare@hse.ie
National Lead and Division		National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie

(E)	Disability: Day Ser	vices
1	KPI Title	No. of Rehabilitative Training places provided (all disabilities) (Disability: Day Services programme descriptors sheet to be used with this metric)
2	KPI Description	Number of rehabilitative training (RT) places available to people with an ID and / or autism, physical and Sensory disability and mental health difficulties. An RT place includes: PD11 only An RT place is equivalent to 30 hours per week.
3	KPI Rationale	To monitor the number of RT places available to people with an ID and / or autism, physical and sensory disability and mental health difficulties funded by HSE Disability Services.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑Person Centred Care □Safe Care ☑Better Health and Wellbeing
4	KPI Target	2014 NSP Targets National: 2,583 DML: 723 DNE: 446 South: 609 West: 805
5	KPI Calculation	Count the number of RT training places (as defined above) utilised by people with an ID and / or autism, physical and sensory disability and mental health difficulties as funded by HSE Disability Services. Each RT place is equivalent to 30 hours per week. A person must attend for a minimum of 15 hours per week. If a person does not attend for a full 30 hours, the WTE is calculated by dividing the total number of hours actually worked by the person by 30 (e.g. person attends for 25 hours per week, 25/30 = 0.84 WTE). Each WTE place is counted only once per quarter. people may attend RT and other day services. Where a person is availing of "other day services" their RT attendance is counted, and not the "other day services" attendance. This is a point in time calculation (i.e. do not add bi-annual returns together). For year end annual outturn, the Q4 outturn is used (e.g. HSE South: Q2: 653, Q4: 660). Therefore the number of RT places for people with an ID and / or autism, physical and sensory disability and mental health difficulties in HSE South for the year is 660. WTE RT places must be returned by the HSE Area from which funding is allocated (e.g. Cork service user accessing work place in Kerry). This work place to be returned by Cork Disability Mgr/Nominee.
6	Data Source	Data is submitted by service providers to the local Rehabilitation Training (RT) Co-coordinators. Following local input into the National Occupational Guidance Service database, reports are produced at national level and issued to the Business Intelligence Unit (BIU).
	Data Completeness	100% data completeness required.
	Data Quality Issues	No known data quality issues at this point.
7	Data Collection Frequency	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details: Data is updated and uploaded locally on an ongoing basis.
8	Tracer Conditions	people with an ID and / or autism, physical and sensory disability and mental health difficulties.
9	Minimum Data Set	The service user's care plan which includes personal details and relevant information relating to their diagnosis, their needs and services and support they require to meet their needs.
10	International Comparison	Service developed in line with best practice internationally.

11	KPI Monitoring	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually ☑Other – give details: The local RT Coordinator oversees data verification with the service provider prior to completing national database report.
12	KPI Reporting Frequency	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter) □Monthly in arrears (June data reported in July) □Quarterly in arrears (Q1 data reported in Q2) □Rolling 12 months (previous 12 month period) □Other - give details:
14	KPI Reporting Aggregation	✓ National✓ Regional✓ LHO Area✓ Hospital✓ County✓ Institution✓ Other – give details: Service Provider
15	KPI is reported in which reports?	□ Corporate Plan Report □ Performance Report (NSP/CBP) □ CompStat □ Other – give details:
16	Web link to data	
17	Additional Information	
Contact details for Data		Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie
Manager / Specialist Lead		Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 / disability.socialcare@hse.ie
National Lead and Division		National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie

(F)	F) Disability: Day Services		
1	KPI Title	No. of people (all disabilities) benefiting from Rehabilitative Training (RT) (Disability: Day Services programme descriptors sheet to be used with this metric)	
2		Number of people with an ID and / or autism, physical and sensory disability and mental health difficulties benefiting from rehabilitative training (RT) places as funded by HSE Disability Services. An RT place includes: PD11 only An RT place is equivalent to 30 hours per week.	
3	KPI Rationale	To monitor the number of people with an ID and / or autism, physical and sensory disability and mental health difficulties benefiting from RT places as funded by HSE Disability Services.	
		Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑Person Centred Care □Effective Care □Safe Care ☑Better Health and Wellbeing	
4		2014 NSP Targets National: 2,898 DML: 711 DNE: 490 South: 691 West: 1,006	
5		Count the number of people with an ID and / or autism, physical and sensory disability and mental health difficulties who benefit from RT places (as defined above). A person must attend an RT place for a minimum of 15 hours per week. people may attend RT and other day services. Where a person is availing of "other day services" their RT attendance is counted, and not the "other day services" attendance. This is a point in time calculation (i.e. do not add bi-annual returns together). For year end annual outturn, the Q4 outturn is used (e.g. HSE South: Q2: 653, Q4: 660). Therefore the number of people with an ID and / or autism, physical and sensory disability and mental health benefiting from RT places in HSE South for the year is 660. WTE RT places must be returned by the HSE Area from which funding is allocated (e.g. Cork service user accessing work place in Kerry). This person to be returned by Cork Disability Services.	
6	Data Source	Data is submitted by service providers to the local Rehabilitation Training (RT) Co-coordinators. Following local input into the National Occupational Guidance Service database, reports are produced at national level and issued to the Business Intelligence Unit (BIU).	
	Data Completeness	100% data completeness required.	
	Data Quality Issues	No known data quality issues at this point.	
7	Data Collection Frequency	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details: Data is updated and uploaded locally on an ongoing basis.	
8	Tracer Conditions	people with an ID and / or autism, physical and sensory disability and mental health.	
9	Minimum Data Set	The service user's care plan which includes personal details and relevant information relating to their diagnosis, their needs and services and support they require to meet their needs.	
10	International Comparison	Service developed in line with best practice internationally.	

11	KPI Monitoring	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details: The local RT Coordinator oversees data verification with the service provider prior to completing national database report.
12	KPI Reporting Frequency	□Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter) □Monthly in arrears (June data reported in July) □Quarterly in arrears (Q1 data reported in Q2) □Rolling 12 months (previous 12 month period) □Other - give details:
14	KPI Reporting Aggregation	 ☑ National ☑ Regional ☑ LHO Area ☐ Hospital ☐ County ☐ Institution ☑ Other – give details: Service Provider
15	KPI is reported in which reports?	□ Corporate Plan Report □ Performance Report (NSP/CBP) □ CompStat □ Other – give details:
16	Web link to data	
17	Additional Information	
Contact details for Data		Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie
Manager / Specialist Lead		Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 / disability.socialcare@hse.ie
Nati	onal Lead and Division	National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie

(G)	Disability: Day Ser	vices
1	KPI Title	No. of people with ID and /or autism benefiting from Other Day Services (excluding RT and work / work-like activities) (adults only) (Disability: Day Services programme descriptors sheet to be used with this metric)
2	KPI Description	Number of persons with ID and / or autism benefiting from "other day services" as funded by HSE Disability Services. "Other day services" include: PD1, PD2, PD3, PD8, PD9, PD10, PD12, PD13 "Other day services" do not include: PD4, PD5, PD6, PD7 (counted under work / work-like KPIs) and PD11 (counted under Rehabilitative Training KPI)
3	KPI Rationale	To monitor the number of persons with an ID and / or autism benefiting from "other day services" as funded by HSE Disability Services.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑Person Centred Care □Safe Care ☑Better Health and Wellbeing
4	KPI Target	2014 NSP Targets National: 12,607 DML: 3,779 DNE: 2,604 South: 3,590 West: 2,634
5	KPI Calculation	Count the number of persons with an ID who benefit from "other day services" (as defined above). Persons may attend RT and "other day services". Where a person is attending RT and "other day services" their RT attendance is counted, and not the "other day services" attendance. This is a point in time calculation (i.e. do not add bi-annual returns together). For year end annual outturn, the Q4 outturn is used (e.g. HSE South: Q2: 653, Q4: 660). Therefore the number of persons with an ID and / or autism benefiting from "other day Services" in HSE South for the year is 660. WTE RT places must be returned by the HSE Area from which funding is allocated (e.g. Cork service user accessing work place in Kerry). This person to be returned by Cork Disability Services. Note: For ease of collation and to prevent double counting, the following calculation process may help:-Disability Managers to collect the overall figure of all people attending day services from service providers. Disability Managers acquire from RT Occupational Guidance System Coordinators the database reports regarding people in RT services and those availing of Work/ Like Work. Disability Managers subtract the sum of RT and Work /Like Work numbers of people from the overall number and return that figure.
6	Data Source Data Completeness	Data is submitted by the local Disability Mgr/Nominee/Nominee/Nominee to the Area Manager and Regional Disability Lead / Specialist / relevant nominee. The Area Manager forwards to the RDO Business Unit for collation and onward submission to the National Business Intelligence Unit (BIU). 100% data completeness required.
	Data Quality Issues	No known data quality issues at this point.
7	Data Collection Frequency	□ Daily □ Weekly □ Monthly □ Quarterly ☑ Bi-annually □ Annually □ Other – give details: Data is updated and uploaded locally on an ongoing basis. Data is reported on a bi-annual basis.
8	Tracer Conditions	Persons with an ID/ autism

9	Minimum Data Set	The service user's care plan which includes personal details and relevant information relating to their diagnosis, their needs and services and support they require to meet their needs.
10	International Comparison	Service developed in line with best practice internationally.
11	KPI Monitoring	□Daily □Weekly □Monthly □Quarterly ☑Bi-annually □Annually □Other – give details: The Disability Manager/Nominee will receive, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness, month on month comparison and ongoing performance against target. Once satisfied, they will forward the collated KPI on a quarterly basis to their Area Manager (by 10th of month following the quarter) for approval and Regional Disability Lead/Specialist/relevant nominee for oversight. The Regional Disability Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Disability Manager/Nominee 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 13th of the month for collation and submission to the National BIU, PPBI by the 15th of the month for publication in the national Performance Report (PR).
12	KPI Reporting Frequency	□Daily □Weekly □Monthly □Quarterly ☑Bi-annually □Annually □Other – give details:
13	KPI report period	□Current (e.g. daily data reported on same day of activity, monthly data reported within the same month of activity) □Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter) □Monthly in arrears (June data reported in July) □Quarterly in arrears (Q1 data reported in Q2) □Rolling 12 months (previous 12 month period) □Other - give details: Biannual (Q2 report covers Jan - Jun data)
14	KPI Reporting Aggregation	 ✓ National ✓ Regional ✓ LHO Area ✓ Hospital ✓ County ✓ Institution ✓ Other – give details: Service Provider
15	KPI is reported in which reports?	☑Performance Assurance Report (PAR)☑ CompStat☑ Other – give details:
16	Web link to data	
17	Additional Information	
	tact details for Data	Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie
Manager / Specialist Lead		Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 / disability.socialcare@hse.ie
National Lead and Division		National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie

(H)	Disability: Day Ser	vices
1	KPI Title	No. of people with a physical and / or sensory disability benefiting from Other Day Services (excl. RT and work / work-like activities) (adults only) (Disability: Day Services programme descriptors sheet to be used with this metric)
2	KPI Description	Number of persons with a physical and / or sensory disability benefiting from "other day services" as funded by HSE Disability Services. "Other day services" include: PD1, PD2, PD3, PD8, PD9, PD10, PD12, PD13 "Other day services" do not include: PD4, PD5, PD6, PD7 (counted under work / work-like KPIs) and PD11 (counted under Rehabilitative Training KPI)
3	KPI Rationale	To monitor the number of persons with a physical and / or sensory disability benefiting from "other day services" as funded by HSE Disability Services.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑Person Centred Care □Effective Care □Safe Care ☑Better Health and Wellbeing
4	KPI Target	2014 NSP Targets National: 3,377 DML: 856 DNE: 1,041 South: 599 West: 881
5	KPI Calculation	Count the number of persons with a physical and / or sensory disability who benefit from "other day services" (as defined above). Persons may attend RT and "other day services". Where a person is attending RT and "other day services" their RT attendance is counted, and not the "other day services" attendance. This is a point in time calculation (i.e. do not add bi-annual returns together). For year end annual outturn, the Q4 outturn is used (e.g. HSE South: Q2: 653, Q4: 660). Therefore the number of persons with a physical and / or sensory disability benefiting from "other day Services" in HSE South for the year is 660. WTE RT places must be returned by the HSE Area from which funding is allocated (e.g. Cork service user accessing work place in Kerry). This person to be returned by Cork Disability Services. Note: For ease of collation and to prevent double counting, the following calculation process may help:-Disability Managers to collect the overall figure of all people attending day services from service providers. Disability Managers acquire from RT RT Occupational Guidance System Coordinators the database reports regarding people in RT services and those availing of Work/ Like Work. Disability Managers subtract the sum of RT and Work /Like Work numbers of people from the overall number and return that figure.
6	Data Source	Data is submitted by the local Disability Manager/Nominee to the Area Manager and Regional Disability Lead / Specialist / relevant nominee. The Area Manager forwards to the RDO Business Unit for collation and onward submission to the National Business Intelligence Unit (BIU).
	Data Completeness	100% data completeness required.
	Data Quality Issues	No known data quality issues at this point.
7	Data Collection Frequency	□Daily □Weekly □Monthly □Quarterly ☑Bi-annually □Annually ☑Other – give details: Data is updated and uploaded locally on an ongoing basis. Data is reported on a bi-annual basis.

8	Tracer Conditions	Persons with physical and / or sensory disability
9	Minimum Data Set	The service user's care plan which includes personal details and relevant information relating to their diagnosis, their needs and services and support they require to meet their needs.
10	International Comparison	Service developed in line with best practice internationally.
11	KPI Monitoring	□Daily □Weekly □Monthly □Quarterly ☑Bi-annually □Annually □Other – give details: The Disability Manager/Nominee will receive, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness, month on month comparison and ongoing performance against target. Once satisfied, they will forward the collated KPI on a quarterly basis to their Area Manager (by 10th of month following the quarter) for approval and Regional Disability Lead/Specialist/relevant nominee for oversight. The Regional Disability Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Disability Manager 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 13th of the month for collation and submission to the National BIU, PPBI by the 15th of the month for publication in the national Performance Assurance Report (PAR).
12	KPI Reporting Frequency	□Daily □Weekly □Monthly □Quarterly ☑Bi-annually □Annually □Other – give details:
13	KPI report period	□Current (e.g. daily data reported on same day of activity, monthly data reported within the same month of activity) □Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter) □Monthly in arrears (June data reported in July) □Quarterly in arrears (Q1 data reported in Q2) □Rolling 12 months (previous 12 month period) □Other - give details: Biannual (Q2 report covers Jan - Jun data)
14	KPI Reporting Aggregation	 ☑ National ☑ Regional ☑ LHO Area ☐ Hospital ☐ County ☐ Institution ☑ Other – give details: Service Provider
15	KPI is reported in which reports?	☑Performance Assurance Report (PAR)☑ CompStat☑ Other – give details:
16	Web link to data	
17	Additional Information	
Contact details for Data Manager / Specialist Lead		Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 / disability.socialcare@hse.ie
National Lead and Division		National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie

(I) [Disability: Day Serv	rices
1	KPI Title	% of school leaves and RT graduates who have received a placement which fully meets their needs
2	KPI Description	
3	KPI Rationale	
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑Person Centred Care □Effective Care □Safe Care ☑Better Health and Wellbeing
4	KPI Target	2014 NSP Targets National: 100% DML: 100% DNE: 100% South: 100% West: 100%
5	KPI Calculation	
6	Data Source	
	Data Completeness	100% data completeness required.
	Data Quality Issues	
7	Data Collection Frequency	□ Daily □ Weekly □ Monthly □ Quarterly ☑ Bi-annually □ Annually ☑ Other – give details: Data is updated and uploaded locally on an ongoing basis. Data is reported on a bi-annual basis.
8	Tracer Conditions	
9	Minimum Data Set	
10	International Comparison	Service developed in line with best practice internationally.

11	KPI Monitoring	
12	KPI Reporting Frequency	□Daily □Weekly □Monthly □Quarterly ☑Bi-annually □Annually □Other – give details:
13	KPI report period	□Current (e.g. daily data reported on same day of activity, monthly data reported within the same month of activity) □Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter) □Monthly in arrears (June data reported in July) □Quarterly in arrears (Q1 data reported in Q2) □Rolling 12 months (previous 12 month period) □Other - give details: Biannual (Q2 report covers Jan - Jun data)
14	KPI Reporting Aggregation	 ✓ National ✓ Regional ✓ LHO Area ✓ Hospital ✓ County ✓ Institution ✓ Other – give details: Service Provider
15	KPI is reported in which reports?	☑Performance Assurance Report (PAR)☑ CompStat☑ Other – give details:
16	Web link to data	
17	Additional Information	
	act details for Data	Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie
Manager / Specialist Lead		Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 / disability.socialcare@hse.ie
National Lead and Division		National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie

(J)	Disability: Resider	ntial Services
1	KPI Title	Number of people with ID and / or Autism benefiting from residential services.
2	KPI Description	The total number of adults and children with ID and/or Autism in HSE managed and HSE funded residential services.
		Residential Services include: * 3, 4, 5 and 7 day places for adults and children funded by Disability Services, including those provided by private service providers. * Residential units, community group homes individual residential placements and host families. * Clients in receipt of Subvention Grants + 'top-up' payments funded by Disability Services. * Shared care arrangements (e.g. with Mental Health / Children and Families)
		Residential Services do not include: * Places in private Nursing Homes funded by 'Fair Deal' or Older Persons Services.
		For the purpose of this KPI an adult is aged over 18 and under 65. It may include persons aged over 65 years who began with Disability Services prior to turning 65. A child is aged less than 18 years.
		Residential Services must be returned by the HSE Area from which funding is allocated (e.g. Meath service user accessing Residential Services in Cork). This Residential Service to be returned by Meath Disability Services.
3	KPI Rationale	To monitor the numbers of adults and children with an ID and / or autism benefiting from residential services as funded by HSE Disability Services.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑Person Centred Care □Effective Care □Safe Care □Better Health and Wellbeing □Use of Information □Workforce □Use of Resources □Governance, Leadership and Management
4	KPI Target	2014 NSP Targets National: 8,113 DML: 2,157 DNE: 1,702 South: 2,071 West: 2,183
5	KPI Calculation	Count the total number of adults and children with an ID / and or Autism benefiting from Residential Services (as defined above) in the quarter, up to and including the last day of the quarter. Adults and children to be counted separately. Each adult / child is counted only once per quarter.
		Point in time calculation (i.e. do not add quarterly returns together). For year end annual outturn, the 4th quarter outturn is used (e.g. DML: Q1: 60 Q2: 64, Q3:63, Q4:66). Therefore the number of adults and children in benefiting from Residential Services in DML in the year is 66.
6	Data Source	Data is submitted by the local Disability Manager/Nominee to the Area Manager and Regional Disability Lead / Specialist / relevant nominee. The Area Manager forwards to the RDO Business Unit for collation and onward submission to the National Business Intelligence Unit (BIU).
	Data Completeness	100% data completeness required.
		Where an LHO has not submitted a complete return or where there are anomalies, the Disability Manager/ nominee must submit a bullet point commentary to explain this to the Area Manager for onward submission to the RDO and the National BIU.
	Data Quality Issues	No known data quality issues at this point.

7	Data Collection Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually □ Other – give details:
8	Tracer Conditions	Adults and children with an ID / Autism.
9	Minimum Data Set	The service user's care plan which includes personal details and relevant information relating to their diagnosis, their needs and services and support they require to meet their needs.
10	International Comparison	Service developed in line with best practice internationally.
11	KPI Monitoring	□Daily □Weekly ☑Monthly ☑Quarterly □Bi-annually □Annually □Other – give details: The Disability Manager/Nominee will receive, analyse and quality assure KPI outturns on a quarterly basis for accuracy, completeness, quarter on quarter comparison and ongoing performance against target. Once satisfied, they will forward the collated KPI on a quarterly basis to their Area Manager by 10th of month following the quarter for approval and Regional Disability Lead/Specialist/relevant nominee for oversight. The Regional Disability Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Disability Manager/Nominee 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 13th of the month for collation and submission to the National BIU, PPBI by the 15th of the month for publication in the national Performance Assurance Report (PAR).
12	KPI Reporting Frequency	□ Daily □ Weekly □ Monthly ☑ Quarterly □ Bi-annually □ Annually □ Other – give details:
13	KPI report period	□Current (e.g. daily data reported on same day of activity, monthly data reported within the same month of activity) □Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □Other - give details:
14	KPI Reporting Aggregation	☑ National ☑ Regional ☑ LHO Area □ Hospital □ County □ Institution □ Other – give details:
15	KPI is reported in which reports?	✓ Performance Assurance Report (PAR)✓ CompStat✓ Other – give details:
16	Web link to data	
17	Additional Information	
Contact details for Data Manager / Specialist Lead		Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 / disability.socialcare@hse.ie
National Lead and Division		National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie

(K)	Disability: Resider	ntial Services
1	KPI Title	Number of people with a physical and sensory disability benefiting from residential services.
2	KPI Description	The total number of adults and children with a physical and sensory disability in HSE managed and HSE funded residential services.
		Residential Services include: * 4, 5 and 7 day places for adults and children funded by Disability Services, including those provided by private service providers. * Residential units, community group homes individual residential placements and host families. * Clients in receipt of Subvention Grants + 'top-up' payments funded by Disability Services. * Shared care arrangements (e.g. with Mental Health / Children and Families)
		Residential Services do not include: * Places in private Nursing Homes funded by 'Fair Deal' or Older Persons Services.
		For the purpose of this KPI an adult is aged over 18 and under 65. It may include persons aged over 65 years who began with Disability Services prior to turning 65. A child is aged less than 18 years.
		Residential Services must be returned by the HSE Area from which funding is allocated (e.g. Meath service user accessing Residential Services in Cork). This Residential Service to be returned by Meath Disability Services.
3	KPI Rationale	To monitor the numbers of adults and children with a physical and sensory disability benefiting from residential services as funded by HSE Disability Services.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑Person Centred Care □Effective Care □Safe Care □Better Health and Wellbeing □Use of Information □Workforce □Use of Resources □Governance, Leadership and Management
4	Indicator Classification	2014 NSP Targets National: 771 DML: 215 DNE: 269 South: 116 West: 171
5	KPI Calculation	Count the total number of adults and children with a physical and sensory disability benefitting from residential services (as per "KPI Description" above) in the quarter, up to and including the last day of the quarter. Adults and children to be counted separately. Each adult / child is counted only once per quarter.
		Point in time calculation (i.e. do not add quarterly returns together). For year end annual outturn, the 4th quarter outturn is used (e.g. DML: Q1: 60 Q2: 64, Q3:63, Q4:66). Therefore the number of adults and children in benefiting from Residential Services in DML in the year is 66.
6	Data Source	Data is submitted by the local Disability Manager/Nominee to the Area Manager and Regional Disability Lead / Specialist / relevant nominee. The Area Manager forwards to the RDO Business Unit for collation and onward submission to the National Business Intelligence Unit (BIU).
	Data Completeness	100% data completeness required.
		Where an LHO has not submitted a complete return or where there are anomalies, the Disability Manager / nominee must submit a bullet point commentary to explain this to the Area Manager for onward submission to the RDO and the National BIU.
	Data Quality Issues	No known data quality issues at this point.
	1	

7	Data Collection Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually
	T 0 1111	☑Other – give details: This KPI is reported in the Performance Report on a quarterly basis.
9	Tracer Conditions Minimum Data Set	Adults and children with a physical and/or sensory disability.
9	Willimum Data Set	The service user's care plan which includes personal details and relevant information relating to their diagnosis, their needs and services and support they require to meet their needs.
10	International Comparison	Service developed in line with best practice internationally.
11	KPI Monitoring	□Daily □Weekly ☑Monthly ☑Quarterly □Bi-annually □Annually □Annually □Other – give details: The Disability Manager/Nominee will receive, analyse and quality assure KPI outturns on a quarterly basis for accuracy, completeness, quarter on quarter comparison and ongoing performance against target. Once satisfied, they will forward the collated KPI on a quarterly basis to their Area Manager by 10th of month following the quarter for approval and Regional Disability Lead/Specialist/relevant nominee for oversight. The Regional Disability Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Disability Manager/Nominee 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 13th of the month for collation and submission to the National BIU, PPBI by the 15th of the month for publication in the national Performance Assurance Report (PAR).
12	KPI Reporting Frequency	□ Daily □ Weekly □ Monthly ☑ Quarterly □ Bi-annually □ Annually □ Other – give details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □Other - give details:
14	KPI Reporting Aggregation	✓ National✓ Regional✓ LHO Area✓ Hospital✓ County✓ Institution✓ Other – give details:
15	KPI is reported in which reports?	✓ Performance Assurance Report (PAR)✓ CompStat✓ Other – give details:
16	Web link to data	
17	Additional Information	
	tact details for Data	Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie
Manager / Specialist Lead		Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 / disability.socialcare@hse.ie
National Lead and Division		National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie

(L)	Disability: Respite	Services
2	KPI Title KPI Description	Number of people with ID and/or autism benefiting from residential centre-based respite services. Number of adults and children with an ID and/or autism benefiting from residential centre-based respite services, based on definition below, up to and including the last day of the quarter.
		Residential centre based respite locations include: * Disability residential centres, community houses, private nursing homes, holiday respite locations.
		Residential centre based respite locations do not include: * Day respite, extended day / evening respite, host family respite or overnight respite stays with relative / carer. * Overnight stays provided and funded by other care groups (e.g. Older Persons).
		Respite bed nights must be returned by the HSE Area from which funding is allocated (e.g. Meath service user accessing respite nights in Cuisle Centre in Roscommon). These clients to be returned by Meath Disability Services.
		Respite bednights to be returned as a residential bed after stays of 30 continuous days by same Adult / Child.
		For the purpose of this KPI an adult is aged over 18 and under 65. It may include persons aged over 65 years who began with Disability Services prior to turning 65. A child is aged less than 18 years.
3	KPI Rationale	To monitor the numbers of adults and children benefiting from residential centre respite stays as funded by HSE Disability Services.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑Person Centred Care □Effective Care □Safe Care □Better Health and Wellbeing □Use of Information □Workforce □Use of Resources □Governance, Leadership and Management
4	KPI Target	2014 NSP Targets National: 4,526 DML: 1,423 DNE: 1,011 South: 997 West: 1,095
5	KPI Calculation	Count the total number of adults and children with an ID / and or Autism in the quarter benefiting from overnight residential centre based respite stays. Adults and children to be counted separately. Each adult / child is counted only once per quarter. This is a cumulative KPI i.e. at year end, each region's four quarterly outturns will be added together to obtain the
6	Data Source	total regional end of year annual outturn for that year. Data is submitted by the local Disability Manager/Nominee to the Area Manager and Regional Disability Lead / Specialist / relevant nominee. The Area Manager forwards to the RDO Business Unit for collation and onward submission to the National Business Intelligence Unit.
	Data Completeness	100% data completeness required. Where an LHO has not submitted a complete return or where there are anomalies, the Disability Manager / nominee must submit a bullet point commentary to explain this to the Area Manager for onward submission to the RDO and the National BIU.
	Data Quality Issues	No known data quality issues at this point.
7	Data Collection Frequency	□ Daily □ Weekly □ Monthly ☑ Quarterly □ Bi-annually □ Annually □ Other – give details: This KPI is reported in the Performance Assurance Report on a quarterly basis.

8	Tracer Conditions	Adults and children with ID and/or autism
9	Minimum Data Set	The service user's care plan which includes personal details and relevant information relating to their diagnosis, their needs and services and support they require to meet their needs.
10	International Comparison	Service developed in line with best practice internationally.
11	KPI Monitoring	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually □Other – give details: The Disability Manager/Nominee will receive, analyse and quality assure KPI outturns on a quarterly basis for accuracy, completeness, quarter on quarter comparison and ongoing performance against target. Once satisfied, they will forward the collated KPI on a quarterly basis to their Area Manager by 10th of
		month following the quarter) for approval and Regional Disability Lead/Specialist/relevant nominee for oversight. The Regional Disability Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Disability Manager/Nominee 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 13th of the month for collation and submission to the National BIU, PPBI by the 15th of the month for publication in the national Performance Assurance Report (PAR).
12	KPI Reporting Frequency	□ Daily □ Weekly □ Monthly ☑ Quarterly □ Bi-annually □ Annually □ Other – give details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □Other - give details:
14	KPI Reporting Aggregation	✓ National ✓ Regional ✓ LHO Area ☐ Hospital ☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports?	✓ Performance Assurance Report (PAR)✓ CompStat✓ Other – give details:
16	Web link to data	
17	Additional Information	
	tact details for Data	Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie
Manager / Specialist Lead		Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 / disability.socialcare@hse.ie
National Lead and Division		National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie

(M)	Disability: Respite	e Services	
1	KPI Title	Number of bed nights in residential centre-based respite services used by people with ID and/or autism.	
2	KPI Description	Total number of bed nights in residential centre-based respite services used by adults and children with ID / and or Autism during each quarter. Only overnight respite stays should be counted. Adults and children are collected separately.	
		Residential centre based respite locations include: * Disability residential centres, community houses, private nursing homes, holiday respite locations.	
		Residential centre based respite locations do not include: * Day respite, extended day / evening respite, host family respite or overnight respite stays with relative / carer. * Overnight stays provided and funded by other care groups (e.g. Older Persons).	
		Respite bed nights must be returned by the HSE Area from which funding is allocated (e.g. Meath service user accessing respite nights in Cuisle Centre in Roscommon). These clients to be returned by Meath Disability Services.	
		Respite bednights to be returned as a residential bed after stays of 30 continuous days by same Adult / Child.	
		For the purpose of this KPI an adult is aged over 18 and under 65. It may include persons aged over 65 years who began with Disability Services prior to turning 65. A child is aged less than 18 years.	
3	KPI Rationale	To monitor the usage of respite bed nights by adults and children with an ID and/or autism as funded by HSE Disability Services.	
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑Person Centred Care □Effective Care □Safe Care □Better Health and Wellbeing □Use of Information □Workforce □Use of Resources □Governance, Leadership and Management	
4	KPI Target	2014 NSP Targets National: 211,275 DML: 84,171 DNE: 33,683 South: 40,333 West: 53,088	
5	KPI Calculation	Count the total number of respite bed nights used by adults and children with an ID / and or Autism in the quarter. Only overnight respite stays should be counted. Adults and children to be counted separately.	
		This is a cumulative KPI i.e. at year end, each region's four quarterly outturns will be added together to obtain the total regional end of year annual outturn for that year.	
6	KPI Source	Data is submitted by the local Disability Manager/Nominee to the Area Manager and Regional Disability Lead / Specialist / relevant nominee. The Area Manager forwards to the RDO Business Unit for collation and onward submission to the National Business Intelligence Unit.	
	Data Completeness	100% data completeness required.	
		Where an LHO has not submitted a complete return or where there are anomalies, the Disability Manager/nominee must submit a bullet point commentary to explain this to the Area Manager for onward submission to the RDO and the National BIU.	
	Data Quality Issues	No known data quality issues at this point.	

7	Data Collection Frequency	□Daily □Weekly ☑Monthly ☑Quarterly □Bi-annually □Annually
		☑Other – give details: Data will be collected monthly by the Disability Manager/Nominee for monitoring purposes. This KPI is reported in the Performance Assurance Report on a quarterly basis.
8	Tracer Conditions	Adults and children with ID and/or autism.
9	Minimum Data Set	The service user's care plan which includes personal details and relevant information relating to their diagnosis, their needs and services and support they require to meet their needs.
10	International Comparison	Service developed in line with best practice internationally.
11	KPI Monitoring	□Daily □Weekly ☑Monthly ☑Quarterly □Bi-annually □Annually □Annually □Other – give details: The Disability Manager/Nominee will receive, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness, month on month comparison and ongoing performance against target. Once satisfied, they will forward the collated KPI on a quarterly basis to their Area Manager by 10th of month following the quarter for approval and Regional Disability Lead/Specialist/relevant nominee for oversight. The Regional Disability Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Disability Manager/Nominee 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 13th of the month for collation and submission to the National BIU, PPBI by the 15th of the month for publication in the national Performance Assurance Report (PAR).
12	KPI Reporting Frequency	□ Daily □ Weekly □ Monthly ☑ Quarterly □ Bi-annually □ Annually □ Other – give details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □Other - give details:
14	KPI Reporting Aggregation	✓ National✓ Regional✓ LHO Area✓ Hospital✓ County✓ Institution✓ Other – give details:
15	KPI is reported in which	✓ Performance Assurance Report (PAR)
	reports?	☑ CompStat ☐ Other – give details:
16	Web link to data	
17	Additional Information	
	tact details for Data	Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie
Manager / Specialist Lead		Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 / disability.socialcare@hse.ie
National Lead and Division		National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie

(N)	Disability: Respite	Services
1	KPI Title	Number of people with a physical and / or sensory disability benefiting from residential centre-based respite services.
2	KPI Description	Number of adults and children with physical and / or sensory disability benefiting from residential centre-based respite services. Adults and children are collected separately.
		Residential centre based respite locations include: * Disability residential centres, community houses, private nursing homes, holiday respite locations.
		Residential centre based respite locations do not include: * Day respite, extended day / evening respite, host family respite or overnight respite stays with relative / carer. * Overnight stays provided and funded by other care groups (e.g. Older Persons).
		Respite bed nights must be returned by the HSE Area from which funding is allocated (e.g. Meath service user accessing respite nights in Cuisle Centre in Roscommon). These clients to be returned by Meath Disability Services.
		Respite bednights to be returned as a residential bed after stays of 30 continuous days by same Adult / Child.
		For the purpose of this KPI an adult is aged over 18 and under 65. It may include persons aged over 65 years who began with Disability Services prior to turning 65. A child is aged less than 18 years.
3	KPI Rationale	To monitor the numbers of adults and children with physical and / or sensory disability benefiting from residential centre respite stays as funded by HSE Disability Services.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑Person Centred Care ☐Better Health and Wellbeing ☐Use of Resources ☐Governance, Leadership and Management
4	KPI Target	2014 NSP Targets National: 1,364 DML: 713 DNE: 204 South: 176 West: 271
5	KPI Calculation	Count the total number of adults and children with physical and / or sensory disability in the quarter benefiting from overnight residential centre based respite stays. Adults and children to be counted separately. Each adult / child is counted only once per quarter.
		This is a cumulative KPI i.e. at year end, each region's four quarterly outturns will be added together to obtain the total regional end of year annual outturn for that year.
		Respite bed nights must be returned by the HSE Area from which funding is allocated e.g. Meath service user accessing respite nights in Cuisle Centre in Roscommon. These nights to be returned by Meath Disability Services.
		Respite nights provided by other care groups (e.g. Older Persons) <u>must not to be counted</u> .
		Respite bednights to be returned as a residential bed after stays of 30 continuous days by same Adult / Child.
6	Data Source	Data is submitted by the local Disability Manager/Nominee to the Area Manager and Regional Disability Lead / Specialist / relevant nominee. The Area Manager forwards to the RDO Business Unit for collation and onward submission to the National Business Intelligence Unit.

	Data Completeness	100% data completeness required.
		Where an LHO has not submitted a complete return or where there are anomalies, the Disability Manager / nominee
		must submit a bullet point commentary to explain this to the Area Manager for onward submission to the RDO and
		the National BIU.
	Data Quality Issues	No known data quality issues at this point.
7	Data Collection	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually
	Frequency	□Other – give details:
8	Tracer Conditions	Adults and children with a physical and/or sensory disability.
9	Minimum Data Set	The service user's care plan which includes personal details and relevant information relating to their diagnosis, their needs and services and support they require to meet their needs.
10	International Comparison	Service developed in line with best practice internationally.
11	KPI Monitoring	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually
		☑Other – give details: The Disability Manager/Nominee will receive, analyse and quality assure KPI outturns on a quarterly basis for accuracy, completeness, quarter on quarter comparison and ongoing performance against target. Once satisfied, they will forward the collated KPI on a quarterly basis to their Area Manager by 10th of month following the quarter for approval and Regional Disability Lead/Specialist/relevant nominee for oversight. The Regional Disability Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Disability Manager/Nominee 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 13th of the month for collation and submission to the National BIU, PPBI by the 15th of the month for publication in the national Performance Assurance Report (PAR).
12	KPI Reporting Frequency	□ Daily □ Weekly □ Monthly ☑ Quarterly □ Bi-annually □ Annually □ Other – give details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □Other - give details:
14	KPI Reporting	✓ National ✓ Regional ✓ LHO Area ☐ Hospital
	Aggregation	☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which	
	reports?	☑ CompStat ☐ Other – give details:
16	Web link to data	
17	Additional Information	
	tact details for Data	Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie
Man	ager / Specialist Lead	Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 / disability.socialcare@hse.ie
Natio	onal Lead and Division	National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie

(O)	Disability: Respite	Services
1	KPI Title	Number of bed nights in residential centre based respite services used by people with a physical and/or sensory disability
2	KPI Description	Total number of bed nights in residential centre-based respite services used by adults and children with a physical and / or sensory disability during each quarter. Only overnight respite stays should be counted. Adults and children are collected separately.
		Residential centre based respite locations include: * Disability residential centres, community houses, private nursing homes, holiday respite locations.
		Residential centre based respite locations do not include: * Day respite, extended day / evening respite, host family respite or overnight respite stays with relative / carer. * Overnight stays provided and funded by other care groups (e.g. Older Persons).
		Respite bed nights must be returned by the HSE Area from which funding is allocated (e.g. Meath service user accessing respite nights in Cuisle Centre in Roscommon). These clients to be returned by Meath Disability Services.
		Respite bednights to be returned as a residential bed after stays of 30 continuous days by same Adult / Child.
		For the purpose of this KPI an adult is aged over 18 and under 65. It may include persons aged over 65 years who began with Disability Services prior to turning 65. A child is aged less than 18 years.
3	KPI Rationale	To monitor utilisation of centre based respite services for adults and children with a physical and / or sensory disability as funded by HSE Disability Services.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑Person Centred Care □ Effective Care □ Safe Care □ Better Health and Wellbeing □ Use of Information □ Workforce □ Use of Resources □ Governance, Leadership and Management
4	KPI Target	2014 NSP Targets National: 31,985 DML: 13,864 DNE: 5,308 South: 6,496 West: 6,317
5	KPI Calculation	Count total number of respite bed nights in residential centres (as defined above) used by adults and children with a physical and / or sensory disability.
		Only overnight respite stays should be counted. Adults and children to be counted separately.
		This is a cumulative KPI (i.e. at year end, each region's four quarterly outturns will be added together to obtain the total regional end of year annual outturn for that year).
6	Data Source	Data is submitted by the local Disability Manager/Nominee to the Area Manager and Regional Disability Lead / Specialist / relevant nominee. The Area Manager forwards to the RDO Business Unit for collation and onward submission to the National Business Intelligence Unit (BIU).
	Data Completeness	100% data completeness required.
		Where an LHO has not submitted a complete return or where there are anomalies, the Disability Manager / nominee must submit a bullet point commentary to explain this to the Area Manager for onward submission to the RDO and the National BIU.
	Data Quality Issues	No known data quality issues at this point.

7	Data Collection Frequency	□Daily □Weekly ☑Monthly ☑Quarterly □Bi-annually □Annually
		☑Other – give details: Data will be collected monthly by the Disability Manager/Nominee for monitoring purposes. This KPI is reported in the Performance Report on a quarterly basis.
8	Tracer Conditions	Adults and children with a physical and/or sensory disability.
9	Minimum Data Set	The service user's care plan which includes personal details and relevant information relating to their diagnosis, their needs and services and support they require to meet their needs.
10	International Comparison	Service developed in line with best practice internationally.
11	KPI Monitoring	□Daily □Weekly ☑Monthly ☑Quarterly □Bi-annually □Annually □Other – give details: The Disability Manager/Nominee will receive, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness, month on month comparison and ongoing performance against target. Once satisfied, they will forward the collated KPI on a quarterly basis to their Area Manager by 10th of month following the quarter for approval and Regional Disability Lead/Specialist/relevant nominee for oversight. The Regional Disability Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Disability Manager/Nominee 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 13th of the month for collation and submission to the National BIU, PPBI by the 15th of the month for publication in the national Performance Assurance Report (PAR).
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □Other - give details:
14	KPI Reporting Aggregation	✓ National ✓ Regional ✓ LHO Area ☐ Hospital ☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports?	☑Performance Assurance Report (PAR)☑ CompStat☑ Other – give details:
16	Web link to data	
17	Additional Information	
	tact details for Data	Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie
Manager / Specialist Lead		Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 / disability.socialcare@hse.ie
Natio	onal Lead and Division	National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie

(P)	P) Disability: Personal Assistant (PA) Hours		
1	KPI Title	Number of <u>adults</u> with a physical and / or sensory disability benefiting from PA Hours	
2	KPI Description	Total number of adults with a physical and / or sensory disability benefiting from PA hours (based on PA Definition below) in the quarter, up to and including the last day of the quarter.	
		Personal Assistant (PA): "Personal Assistant" employed by the person with a disability to enable them to live an independent life. The PA provides assistance, at the discretion and direction of the person with the disability, thus promoting choice and control for the person with the disability to live independently" (National Physical and Sensory Disability Database – Description of Services).	
		For the purposes of this KPI 'employed by' is taken to mean that the service user has full control over the recruitment and day to day direction of their PA. The service user may devolve responsibility for employment administrative arrangements e.g. Garda vetting, references, insurance, tax returns and salary payment, to a service provider such as CIL, IWA.	
		Persons with ID / Autism are not returned in this KPI.	
		All adults accessing PA Hours must be returned by the HSE Area from which their funding is allocated e.g. a service user from Sligo accessing PA Hours through Longford CIL whose hours are paid for by Sligo PA budget must be returned by Sligo Disability Services.	
		Database of Service Users: As the cohort for adults with physical and/or sensory disability who benefit from this service is relatively small, a database of service users (identified by a numeric identifier), will be maintained by the Regional Disability Lead.	
		Hours provided by other care groups (e.g. Older Persons) must not to be counted.	
		Hours provided by a Home Support Service are counted in separate KPIs and should not be included here.	
		For the purpose of this KPI an adult is aged over 18 and under 65. It may include persons aged over 65 years who began with Disability Services prior to turning 65.	
3	KPI Rationale	To monitor the number of adults with a physical and / or sensory disability benefiting from PA hours as funded by HSE Disability Services.	
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). Person Centred Care Better Health and Wellbeing	
4	KPI Target	2014 NSP Targets National: 1,959 DML: 335 DNE: 262 South: 510 West: 852	
5	KPI Calculation	Count the total number of adults with a physical and / or sensory disability benefiting from PA hours (based on the "KPI Description" above) in the quarter, up to and including the last day of the quarter. Each adult is counted only once per quarter.	
		Point in time calculation i.e. do not add quarterly returns together, use the most recent return to report activity. For year end annual outturn, the 4th quarter outturn is used (e.g. DML: Q1: 260 Q2: 264, Q3:263, Q4:266). Therefore the number of adults / children benefiting from PA Hours in the year is 266.	
6	Data Source	Data is submitted by the local Disability Manager/Nominee to the Area Manager and Regional Disability Lead / Specialist / relevant nominee. The Area Manager forwards to the RDO Business Unit for collation and onward submission to the National Business Intelligence Unit.	

	Data Completeness	100% data completeness required.
		Where an LHO has not submitted a complete return or where there are anomalies, the Disability Manager / nominee must submit a bullet point commentary to explain this to the Area Manager for onward submission to the RDO and the National BIU.
	Data Quality Issues	No known data quality issues at this point.
7	Data Collection Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Adults with a physical and/or sensory disability.
9	Minimum Data Set	The service user's care plan which includes personal details and relevant information relating to their diagnosis, their needs and services and support they require to meet their needs.
10	International Comparison	Service developed in line with best practice internationally.
11	KPI Monitoring	□Daily □Weekly ☑Monthly ☑Quarterly □Bi-annually □Annually □Other – give details: The Disability Manager/Nominee will receive, analyse and quality assure KPI outturns on a quarterly basis for accuracy, completeness, quarter on quarterl comparison and ongoing performance against target. Once satisfied, they will forward the collated KPI on a quarterly basis to their Area Manager by 10th of month following the quarter for approval and Regional Disability Lead/Specialist/relevant nominee for oversight. The Regional Disability Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Disability Manager/Nominee 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 13th of the month for collation and submission to the National BIU, PPBI by the 15th of the month for publication in the national Performance Assurance Report (PAR).
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Quarter
14	KPI Reporting Aggregation	✓ National ✓ Regional ✓ LHO Area ☐ Hospital ☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports?	☑Performance Assurance Report (PAR)☑ CompStat☑ Other – give details:
16	Web link to data	
17	Additional Information	
Contact details for Data Manager / Specialist Lead		Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 / disability.socialcare@hse.ie
National Lead and Division		National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie

(Q)	Q) Disability: Personal Assistant (PA) Hours		
1	KPI Title	Number of Personal Assistant (PA) hours delivered to <u>adults</u> with a physical and / or sensory disability.	
2	KPI Description	Total number of PA hours, delivered to adults with a physical and / or sensory disability, in the quarter, up to and including the last day of the quarter.	
		Personal Assistant (PA): "Personal Assistant" employed by the person with a disability to enable them to live an independent life. The PA provides assistance, at the discretion and direction of the person with the disability, thus promoting choice and control for the person with the disability to live independently" (National Physical and Sensory Disability Database – Description of Services).	
		For the purposes of this KPI 'employed by' is taken to mean that the service user has full control over the recruitment and day to day direction of their PA. The service user may devolve responsibility for employment administrative arrangements e.g. Garda vetting, references, insurance, tax returns and salary payment, to a service provider such as CIL, IWA.	
		All adults accessing PA Hours must be returned by the HSE Area from which their funding is allocated e.g. a service user from Sligo accessing PA Hours through Longford CIL whose hours are paid for by Sligo PA budget must be returned by Sligo Disability Services.	
		Database of Service Users: As the cohort for adults with physical and/or sensory disability who benefit from this service is relatively small, a database of service users (identified by a numeric identifier), will be maintained by the Regional Disability Lead.	
		Hours provided by other care groups (e.g. Older Persons) must not to be counted.	
		Hours provided by a Home Support Service are counted in separate KPIs and should not be included here.	
		For the purpose of this KPI an adult is aged over 18 and under 65. It may include persons aged over 65 years who began with Disability Services prior to turning 65.	
3	KPI Rationale	To monitor the number of Personal Assistant (PA) hours delivered to adults with a physical and / or sensory disability as funded by HSE Disability Services.	
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑Person Centred Care □Safe Care □Better Health and Wellbeing	
4	KPI Target	2014 NSP Targets National: 1,279,445 DML: 176,014 DNE: 285,006 South: 182,281 West: 636,144	
5	KPI Calculation	Count the total number of PA Hours (based on the "KPI Description" above) that have been delivered to adults with physical and / or sensory disability, up to and including the last day of the quarter.	
		This is a cumulative KPI (i.e. at year end, each region's four quarterly outturns will be added together to obtain the total regional end of year annual outturn for that year).	
6	Data Source	Data is submitted by the local Disability Manager/Nominee to the Area Manager and Regional Disability Lead / Specialist / relevant nominee. The Area Manager forwards to the RDO Business Unit for collation and onward submission to the National Business Intelligence Unit.	

	Data Completeness	100% data completeness required.
		Where an LHO has not submitted a complete return or where there are anomalies, the Disability Manager / nominee must submit a bullet point commentary to explain this to the Area Manager for onward submission to the RDO and the National BIU.
	Data Quality Issues	No known data quality issues at this point.
7	Data Collection Frequency	□ Daily □ Weekly ☑ Monthly ☑ Quarterly □ Bi-annually □ Annually □ Other – give details: Data will be collected monthly by the Disability Manager/Nominee for monitoring purposes.
		This KPI is reported in the Performance Report on a quarterly bas
8	Tracer Conditions	Adults with physical and / or sensory disabilities.
9	Minimum Data Set	The service user's care plan which includes personal details and relevant information relating to their diagnosis, their needs and services and support they require to meet their needs.
10	International Comparison	Drawn from best practice internationally to develop this customised service
11	KPI Monitoring	□Daily □Weekly ☑Monthly ☑Quarterly □Bi-annually □Annually
		☑Other – give details: The Disability Manager/Nominee will receive, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness, month on month comparison and ongoing performance against target. Once satisfied, they will forward the collated KPI on a quarterly basis to their Area Manager by 10th of month following the quarter for approval and Regional Disability Lead/Specialist/relevant nominee for oversight. The Regional Disability Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Disability Manager/Nominee 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 13th of the month for collation and submission to the National BIU, PPBI by the 15th of the month for publication in the national Performance Assurance Report (PAR).
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Quarter
14	KPI Reporting Aggregation	✓ National✓ Regional✓ LHO Area✓ Hospital✓ County✓ Institution✓ Other – give details:
15	KPI is reported in which	☑ Performance Assurance Report (PAR)
13	reports?	☐ CompStat ☐ Other – give details:
16	Web link to data	g. c telement
17	Additional Information	
Cont	tact details for Data	Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie
Manager / Specialist Lead		Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 / disability.socialcare@hse.ie
National Lead and Division		National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie

(R)	R) Disability: Home Support Hours		
1	KPI Title	Number of people with a physical and/or sensory disability benefiting from Home Support hours	
2	KPI Description	Total number of adults and children with a physical and / or sensory disability, benefiting from Home Support hours, based on the definition below, in each quarter up to and including the last day of the quarter.	
		Adult: a person aged over 18 and under 65 years (in a small number of cases people may continue to access disability respite post 65 years of age) Child: Under 18 years. people with ID / Autism are not returned in this KPI.	
		Home Support provides personal and/or essential domestic care and support to facilitate participation in social / leisure activities. This service can be provided by the HSE or by a private provider funded by the HSE. Home Support is often provided outside of normal day service hours and is a disability funded service. It includes, as defined in the National Physical and Sensory Disability Database (NPSDD) and the National ID Database (NIDD):	
		* Home Care Assistant Service: "a personal care service which provides personal support including washing, dressing and other activities of daily living and facilitation in social and recreational activities".	
		* Home Help: "(assistance with household chores). Home Helps currently provide domestic type support (e.g. cooking / cleaning, etc) but in many cases where a Home Care Assistant is not available, the Home Help may also provide support of a personal nature (e.g. washing, dressing, etc)".	
		* Home Support: Assistance provided to the family in terms of assisting with care, facilitating attendance at social activities. Assistance is often provided outside of normal day service hours.	
		Nursing Hours funded by Disability Services (e.g. bowel evacuation) hours must be included. Nursing hours provided through PHN / Public Health (non Disability areas) must not be counted.	
		All adults and children receiving home support hours must be returned by the HSE Area from which their funding is allocated e.g. a service user from Sligo accessing Home Support in Longford but whose hours are paid from the Sligo home support budget must be returned by Sligo Disability Services.	
		The Home Support budget is taken directly from an allocated resource in the Disability Service for adults and children who have been identified with a physical and/or sensory disability. Home Support Services provided by other care groups (e.g. Older people) must not to be counted.	
		PA Adults are counted in a separate KPI and should not be included here.	
3	KPI Rationale	To monitor the number of adults and children with a physical and / or sensory disability benefiting from Home Support hours as funded by HSE Disability Services.	
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑Person Centred Care □Effective Care □Safe Care □Better Health and Wellbeing □Use of Information □Workforce □Use of Resources □Governance, Leadership and Management	
4	KPI Target	2014 NSP Targets National: 2,882 DML: 732 DNE: 862 South: 648 West: 640	

5	KPI Calculation	Count the total number of adults and children with a physical and / or sensory disability benefiting from Home Support (as per "KPI Description" above) up to and including the last day of the quarter. Each adult / child is counted only once per quarter. Adults and children to be counted separately. Point in time calculation i.e. do not add quarterly returns together, use the most recent return to report activity. For
		year end annual outturn, the 4th quarter outturn is used (e.g. DML: Q1: 260 Q2: 264, Q3:263, Q4:266). Therefore the number of adults / children in receipt of Home Support in the year is 266.
6	Data Source	Data is submitted by the local Disability Manager/Nominee to the Area Manager and Regional Disability Lead / Specialist / relevant nominee. The Area Manager forwards to the RDO Business Unit for collation and onward submission to the National Business Intelligence Unit (BIU).
	Data Completeness	100% data completeness required. Where an LHO has not submitted a complete return or where there are anomalies, the Disability Manager / nominee must submit a bullet point commentary to explain this to the Area Manager for onward submission to the RDO and the National BIU.
	Data Quality Issues	No known data quality issues at this point.
7	Data Collection Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually
		☑Other – give details: This KPI is reported in the Performance Assurance Report on a quarterly basis.
8	Tracer Conditions	Adults and children with a physical and/or sensory disability
9	Minimum Data Set	The service user's care plan which includes personal details and relevant information relating to their diagnosis, their needs and services and support they require to meet their needs.
10	International Comparison	Drawn from best practice internationally to develop this customised service
11	KPI Monitoring	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually
		☑Other – give details: The Disability Manager/Nominee will receive, analyse and quality assure this KPI outturns on a quarterly basis for accuracy, completeness, quarter on quarter comparison and ongoing performance against target. Once satisfied, they will forward the collated KPI on a quarterly basis to their Area Manager by 10th of month following the quarter) for approval and Regional Disability Lead/Specialist/relevant nominee for oversight. The Regional Disability Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Disability Manager/Nominee 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 13th of the month for collation and submission to the National BIU, PPBI by the 15th of the month for publication in the national Performance Assurance Report (PAR).
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Current (e.g. data reported in each quarter up to and including the last day of that quarter) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □Other - give details:
14	KPI Reporting	☑ National ☑ Regional ☑ LHO Area ☐ Hospital
15	Aggregation	□ County □ Institution □ Other – give details:
15	KPI is reported in which reports?	✓ Performance Assurance Report (PAR)✓ CompStat✓ Other – give details:
16	Web link to data	☑ CompStat □Other – give details:
17	Additional Information	
	act details for Data	Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie
	ager / Specialist Lead	Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 / disability.socialcare@hse.ie
Natio	onal Lead and Division	National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie

(S)	(S) Disability: Home Support Hours		
1	KPI Title	Number of Home Support hours delivered to people with a physical and / or sensory disability	
2	KPI Description	Total number of Home Support hours delivered to adults and children with a physical and / or sensory disability, based on the definition below, in each quarter up to and including the last day of the quarter.	
		For the purpose of this KPI an adult is a person aged over 18 and under 65 years and a child is aged under 18. people with ID / Autism are not returned in this KPI.	
		Home Support provides personal and/or essential domestic care and support to facilitate participation in social / leisure activities. This service can be provided by the HSE or by a private provider funded by the HSE. Home Support is often provided outside of normal day service hours and is a disability funded service. It includes, as defined in the National Physical and Sensory Disability Database (NPSDD) and the National ID Database (NIDD):	
		* Home Care Assistant Service: "a personal care service which provides personal support including washing, dressing and other activities of daily living and facilitation in social and recreational activities".	
		* Home Help: "(assistance with household chores). Home Helps currently provide domestic type support (e.g. cooking / cleaning, etc) but in many cases where a Home Care Assistant is not available, the Home Help may also provide support of a personal nature (e.g. washing, dressing, etc)".	
		* Home Support: assistance provided to the family in terms of assisting with care, facilitating attendance at social activities. Assistance is often provided outside of normal day service hours.	
		Nursing Hours funded by Disability Services (e.g. bowel evacuation) hours must be included. Nursing hours provided through PHN / Public Health (non Disability areas) must not be counted. All home support hours provided to adults and children must be returned by the HSE Area from which their funding	
		is allocated e.g. where a service user from Sligo is accessing Home Support in Longford but whose hours are paid from the Sligo home support budget, these hours must be returned by Sligo Disability Services.	
3	KPI Rationale	To monitor the number of hours delivered to adults and children with a physical and / or sensory disability as funded by HSE Disability Services.	
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑Person Centred Care □Safe Care ☑Better Health and Wellbeing	
4	KPI Target	2014 NSP Targets National: 1,467,017 DML: 539,236 DNE: 481,040 South: 215,181 West: 231,560	
5	KPI Calculation	Count the total number of Home Support Hours (as per "KPI Description" above) delivered to adults and children with a Physical and / or Sensory Disability during the quarter. Hours delivered to adults and children to be counted separately.	
		Cumulative KPI (i.e. at year end, each region's four quarterly outturns will be added together to obtain the total regional end of year annual outturn for that year).	
		All Home Support Hours must be returned by the HSE Area from which funding is allocated (e.g. Sligo service user accessing Home Support Hours through Longford Centre for Independent Living). These hours to be returned by Sligo Disability Services.	
		Home Support is delivered through home visits by a home help worker employed by HSE or private provider receiving funding from the HSE (from Disability Budget). This KPI relates to hours funded from the Disability budget only. Hours provided by other care groups (e.g. Older people) must not be counted. PA Adults are counted in a separate KPI and should not be included here.	

6	Data Source	Data is submitted by the local Disability Manager/Nominee to the Area Manager and Regional Disability Lead / Specialist / relevant nominee. The Area Manager forwards to the RDO Business Unit for collation and onward submission to the National Business Intelligence Unit (BIU).
	Data Completeness	100% data completeness required. Where an LHO has not submitted a complete return or where there are anomalies, the Disability Manager / nominee must submit a bullet point commentary to explain this to the Area Manager for onward submission to the RDO and the National BIU.
	Data Quality Issues	No known data quality issues at this point.
7	Data Collection Frequency	□ Daily □ Weekly ☑ Monthly ☑ Quarterly □ Bi-annually □ Annually ☑ Other – give details: Data will be collected monthly by the Disability Manager/Nominee for monitoring purposes. This KPI is reported in the Performance Assurance Report on a quarterly basis.
8	Tracer Conditions	Adults and children with a physical and / or sensory disability.
9	Minimum Data Set	The service user's care plan which includes personal details, relevant information relating to their diagnosis, their needs and services and support they require to meet their need.
10	International Comparison	Drawn from best practice internationally to develop this customised service
11	KPI Monitoring	□Daily □Weekly ☑Monthly ☑Quarterly □Bi-annually □Annually
		☑Other – give details: The Disability Manager/Nominee will receive, analyse and quality assure this KPI outturns on a monthly basis for accuracy, completeness, month on month comparison and ongoing performance against target. Once satisfied, they will forward the collated KPI on a quarterly basis to their Area Manager by 10th of month following the quarter) for approval and Regional Disability Lead/Specialist/relevant nominee for oversight. The Regional Disability Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Disability Manager/Nominee 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 13th of the month for collation and submission to the National BIU, CPCP by the 15th of the month for publication in the national Performance Assurance Report (PAR).
12	KPI Reporting Frequency	□ Daily □ Weekly □ Monthly ☑ Quarterly □ Bi-annually □ Annually □ Other – give details:
	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □Other - give details:
14	KPI Reporting Aggregation	☑ National☑ Regional☑ LHO Area☐ Hospital☐ County☐ Institution☐ Other – give details:
	KPI is reported in which reports?	☑Performance Assurance Report (PAR)☑ CompStat☑ Other – give details:
	Web link to data	
17	Additional Information	
Contact details for Data		Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie
Manager / Specialist Lead National Lead and Division		Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 / disability.socialcare@hse.ie
ivatio	mai Lead and Division	National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie

(T)	(T) Disability: Home Support Hours		
2	KPI Title KPI Description	Number of people with ID / and or Autism benefiting from home support hours. Total number of adults and children with an ID and / or Autism benefitting from home support hours, based on the definition below, in the quarter up to and including the last day of the quarter.	
		For the purpose of this KPI an adult is aged over 18 and under 65 years and a child is aged under 18. people with physical and sensory disability are not returned in this KPI.	
		Home Support provides personal and/or essential domestic care and support to facilitate participation in social / leisure activities. This service can be provided by the HSE or by a private provider funded by the HSE. Home Support is often provided outside of normal day service hours and is a disability funded service. It includes, as defined in the National Physical and Sensory Disability Database (NPSDD) and the National ID Database (NIDD):	
		* Home Care Assistant Service: "a personal care service which provides personal support including washing, dressing and other activities of daily living and facilitation in social and recreational activities".	
		* Home Help: "(assistance with household chores). Home Helps currently provide domestic type support (e.g. cooking / cleaning, etc) but in many cases where a Home Care Assistant is not available, the Home Help may also provide support of a personal nature (e.g. washing, dressing, etc)".	
		* Home Support: assistance provided to the family in terms of assisting with care, facilitating attendance at social activities. Assistance is often provided outside of normal day service hours.	
		Nursing Hours funded by Disability Services (e.g. bowel evacuation) hours must be included. Nursing hours provided through PHN / Public Health (non Disability areas) must not be counted.	
		All adults and children receiving home support hours must be returned by the HSE Area from which their funding is allocated e.g. service user from Sligo accessing Home Support in Longford but whose hours are paid from the Sligo home support budget must be returned by Sligo Disability Services.	
3	KPI Rationale	To monitor the number of adults / children with an ID / Autism benefiting from Home Support hours as funded by HSE Disability Services.	
	Indicator Classification	The Home Support budget is taken directly from an allocated resource in the Disability Service for adults and children who have been identified with an ID and/or autism. Home Support Services provided by other care groups (e.g. Older people) must not to be counted.	
4	KPI Target	New KPI for 2013. Data collection in 2013 will be used to determine baseline.	
5	KPI Calculation	Count the total number of adults and children with an ID and / or autism benefiting from Home Support hours (as per "KPI Description" above) up to and including the last day of the quarter. Each adult / child is counted only once per quarter. Adults and children to be counted separately.	
		Point in time calculation i.e. do not add quarterly returns together, use the most recent return to report activity. For year end annual outturn, the 4th quarter outturn is used (e.g. DML: Q1: 260 Q2: 264, Q3:263, Q4:266). Therefore the number of adults / children in receipt of Home Support in the year is 266.	
6	Data Source	Data is submitted by the local Disability Manager/Nominee to the Area Manager and Regional Disability Lead / Specialist / relevant nominee. The Area Manager forwards to the RDO Business Unit for collation and onward submission to the National Business Intelligence Unit (BIU).	
	Data Completeness	100% data completeness required. Where an LHO has not submitted a complete return or where there are anomalies, the Disability Manager / nominee must submit a bullet point commentary to explain this to the Area Manager for onward submission to the RDO and the National BIU.	
	Data Quality Issues	No known data quality issues at this point.	
7	Data Collection Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually	
		☑Other – give details: This KPI is reported in the Performance Assurance Report on a quarterly basis.	

8	Tracer Conditions	Adults and children with an ID and / or autism.
9	Minimum Data Set	The service user's care plan which includes personal details, relevant information relating to their diagnosis, their
		needs and services and support they require to meet their need.
10	International Comparison	Drawn from best practice internationally to develop this customised service
11	KPI Monitoring	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually
		☑Other – give details: The Disability Manager/Nominee will receive, analyse and quality assure KPI outturns on a quarterly basis for accuracy, completeness, quarter on quarter comparison and ongoing performance against target. Once satisfied, they will forward the collated KPI on a quarterly basis to their Area Manager by 10th of month following the quarter for approval and Regional Disability Lead/Specialist/relevant nominee for oversight. The Regional Disability Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Disability Manager/Nominee 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 13th of the month for collation and submission to the National BIU, PPBI by the 15th of the month for publication in the national Performance Assurance Report (PAR).
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Current (e.g. data reported in each quarter up to and including the last day of that quarter) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □Other - give details:
14	KPI Reporting	☑ National ☑ Regional ☑ LHO Area ☐ Hospital
	Aggregation	☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which	☑Performance Assurance Report (PAR)
1/	reports?	☐ CompStat ☐ Other – give details:
16	Web link to data	
17	Additional Information	L C
Contact details for Data		Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie
Manager / Specialist Lead		Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 / disability.socialcare@hse.ie
National Lead and Division		National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie

(U)	U) Disability: Home Support Hours		
1	KPI Title	Total number of Home Support hours delivered to people with ID and / or autism	
2	KPI Description	Total number of Home Support hours delivered to adults and children with an ID and / or autism, based on the definition below, in each quarter up to and including the last day of the quarter.	
		For the purpose of this KPI an adult is aged over 18 and under 65 years and a child is aged under 18. people with physical and sensory disability are not returned in this KPI.	
		Home Support provides personal and/or essential domestic care and support to facilitate participation in social / leisure activities. This service can be provided by the HSE or by a private provider funded by the HSE. Home Support is often provided outside of normal day service hours and is a disability funded service. It includes, as defined in the National Physical and Sensory Disability Database (NPSDD) and the National ID Database (NIDD):	
		* Home Care Assistant Service: "a personal care service which provides personal support including washing, dressing and other activities of daily living and facilitation in social and recreational activities".	
		* Home Help: "(assistance with household chores). Home Helps currently provide domestic type support (e.g. cooking / cleaning, etc) but in many cases where a Home Care Assistant is not available, the Home Help may also provide support of a personal nature (e.g. washing, dressing, etc)".	
		* Home Support: assistance provided to the family in terms of assisting with care, facilitating attendance at social activities. Assistance is often provided outside of normal day service hours.	
		Nursing Hours funded by Disability Services (e.g. bowel evacuation) hours must be included. Nursing hours provided through PHN / Public Health (non Disability areas) must not be counted.	
		All home support hours provided to adults and children must be returned by the HSE Area from which their funding is allocated e.g. where a service user from Sligo is accessing Home Support in Longford but whose hours are paid from the Sligo home support budget, these hours are returned by Sligo Disability Services.	
		The Home Support budget is taken directly from an allocated resource in the Disability Service for adults and children who have been identified with an ID and/or autism. Home Support Services provided by other care groups (e.g. Older people) must not to be counted.	
		PA Adults are counted in a separate KPI and should not be included here.	
3	KPI Rationale	To monitor the number of Home Support hours delivered to adults and children with an ID as funded by HSE Disability Services.	
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑Person Centred Care ☐Effective Care ☐Safe Care ☐Better Health and Wellbeing ☐Use of Information ☐Workforce ☐Use of Resources ☐Governance, Leadership and Management	
4	KPI Target	2014 NSP Targets National: 925,295 DML: 266,845 DNE: 235,489 South: 161,632 West: 261,329	

5	KPI Calculation	Count the total number of Home Support Hours (as per "KPI Description" above) delivered to adults and children with an ID during the quarter. Hours delivered to adults and children to be counted separately.
		Cumulative KPI (i.e. at year end, each region's four quarterly outturns will be added together to obtain the total regional end of year annual outturn for that year).
		All Home Support Hours must be returned by the HSE Area from which funding is allocated (e.g. Sligo service user accessing Home Support Hours through Longford Centre for Independent Living). These hours to be returned by Sligo Disability Services.
		Home Support is delivered through home visits by a home help worker employed by HSE or private provider receiving funding from the HSE (from Disability Budget). This KPI relates to hours funded from the Disability budget only. Hours provided by other care groups (e.g. Older people) must not be counted.
6	Data Source	Data is submitted by the local Disability Manager/Nominee to the Area Manager and Regional Disability Lead / Specialist / relevant nominee. The Area Manager forwards to the RDO Business Unit for collation and onward submission to the National Business Intelligence Unit.
	Data Completeness	100% data completeness required. Where an LHO has not submitted a complete return or where there are anomalies, the Disability Manager / nominee must submit a bullet point commentary to explain this to the Area Manager for onward submission to the RDO and the National BIU.
	Data Quality Issues	No known data quality issues at this point.
7	Data Collection Frequency	□Daily □Weekly ☑Monthly ☑Quarterly □Bi-annually □Annually
	, , , , , , , , , , , , , , , , , , , ,	☑Other – give details: Data will be collected monthly by the Disability Manager/Nominee for monitoring purposes. This KPI is reported in the Performance Assurance Report on a quarterly basis.
8	Tracer Conditions	Adults and children with a physical and / or sensory disability.
9	Minimum Data Set	The service user's care plan which includes personal details, relevant information relating to their diagnosis, their
		needs and services and support they require to meet their need.
10	International Comparison	Drawn from best practice internationally to develop this customised service
11	KPI Monitoring	□Daily □Weekly ☑Monthly ☑Quarterly □Bi-annually □Annually ☑Other – give details: The Disability Manager/Nominee will receive, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness, month on month comparison and ongoing performance against target. Once satisfied, they will forward the collated KPI on a quarterly basis to their Area Manager by 10th of month following the quarter for approval and Regional Disability Lead/Specialist/relevant nominee for oversight. The Regional Disability Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Disability Manager/Nominee 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 13th of the month for collation and submission to the National BIU, PPBI by the 15th of the month for publication in the national Performance Assurance Report (PAR).
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Current (e.g. data reported in each quarter up to and including the last day of that quarter) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □Other - give details:
	KPI Reporting Aggregation	✓ National✓ Regional✓ LHO Area✓ Hospital✓ County✓ Institution✓ Other – give details:
15	KPI is reported in which reports?	☑ Performance Assurance Report (PAR)☑ CompStat☑ Other – give details:
16	Web link to data	
17	Additional Information	
	act details for Data ager / Specialist Lead	Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 / disability.socialcare@hse.ie
Natio	onal Lead and Division	National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie

(V)	Disability: Disability Act (Compliance
	MDI TIII	No de la constant de
1	KPI Title	Number of requests for assessments received
2	KPI Description	The number of complete applications for Assessment of Need as recorded in the Assessment of Need
		database.(Implementation: Part 2-Disability Act).
3	KPI Rationale	This metric is in line with the Disability Act 2005.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some
		cases you may need to choose two).
		□Person Centred Care □Effective Care
		Safe Care☐ Better Health and Wellbeing ☐Use of Information☐
		Workforce□Use of Resources□Governance, Leadership and Management □
4	KPI Target	2014 NSP Targets
		National: 4,542
		DML: 1,431
		DNE: 763
		South: 1,631
		West: 717
5	KPI Calculation	Count the total number of complete applications for Assessment of Need received, as recorded on the
		Assessment of Need database.
6	Data Source	Quarterly activity reports issued to the Business Information Unit by the Disability Information Unit via the
		National Disability Unit.
	Data Completeness	100% data completeness required and expected.
	Data Quality Issues	No known data quality issues at this point.
7	Data Collection Frequency	□Daily □Weekly ☑Monthly ☑Quarterly □Bi-annually □Annually
	T 0 !!!!	Other – give details: Monthly reporting for local management purposes
8	Tracer Conditions	
9	Minimum Data Set	Comition developed in the could be an extraction into an extraction of the country of the countr
	International Comparison	Service developed in line with best practice internationally. □Daily □Weekly Monthly ☑Quarterly □Bi-annually □Annually Other – give details:
11	KPI Monitoring	□Daily □Weekly Monthly □Quarterly □Bi-annually □Annually Other – give details:
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ✓Quarterly □Bi-annually □Annually □Other – give details: Q in arrears
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same
		month of activity)
		☑Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter)
		☐Monthly in arrears (June data reported in July)
		□Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months (previous 12 month period)
		□Other - give details:
14	KPI Reporting Aggregation	✓ National ✓ Regional ✓ LHO Area □Hospital
		☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which reports?	□ Corporate Plan Report ✓ Performance Report (NSP/CBP) CompStat □Other – give details:
16	Web link to data	
17	Additional Information	
	act details for Data Manager /	Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie
Specialist Lead		Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 /
National Lead and Division		National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie

(W)	Disability: Disability Act	Compliance	
1	KPI Title	% of assessments completed within the timelines as provided for in the regulations	
'	KITHIC	To or assessments completed within the fillenines as provided for in the regulations	
2	KPI Description	The % of Assessments of Need which completed stage 2 of the process, as recorded in the Assessment of Need database. (Implementation: Part 2-Disability Act).	
	KPI Rationale	This metric is in line with the Disability Act 2005.	
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some	
		cases you may need to choose two).	
		□Person Centred Care □Effective Care Safe Care□ Better Health and Wellbeing □Use of Information□	
		Workforce□Use of Resources□Governance, Leadership and Management □	
4	KPI Target	2013 NSP Targets	
	G	National: 100%	
		DML: 100%	
		DNE: 100%	
		South: 100%	
		West: 100%	
5	KPI Calculation	The total number of Assessments of Need which commenced stage 2 of the process, as provided for in the	
		regulations and recorded on the Assessment of Need database.	
6	Data Source	Quarterly activity reports issued to the Business Information Unit by the Disability Information Unit via the	
		National Disability Unit.	
	Data Completeness	100% data completeness required and expected.	
	Data Quality Issues	No known data quality issues at this point.	
7	Data Collection Frequency	□Daily □Weekly ☑Monthly ☑Quarterly □Bi-annually □Annually	
8	Tracer Conditions	Other – give details: Monthly reporting for local management purposes	
	Minimum Data Set		
	International Comparison	Service developed in line with best practice internationally.	
	KPI Monitoring	Solving developed in the with soot produce internationally.	
	,	□Daily □Weekly Monthly ☑Quarterly □Bi-annually □Annually Other – give details:	
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ✓Quarterly □Bi-annually □Annually □Other – give details: Q in arrears	
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same	
		month of activity)	
		Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter)	
		☐Monthly in arrears (June data reported in July) ☐Quarterly in arrears (quarter 1 data reported in quarter 2)	
		□Rolling 12 months (previous 12 month period)	
		Other - give details:	
14	KPI Reporting Aggregation	✓ National ✓ Regional ✓ LHO Area □ Hospital	
		☐ County ☐ Institution ☐ Other – give details:	
15	KPI is reported in which reports?	□ Corporate Plan Report ✓ Performance Report (NSP/CBP) □ CompStat □ Other – give details:	
16	Web link to data		
	Additional Information		
Contact details for Data Manager / Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie			
Specialist Lead Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 /			
Natio	National Lead and Division National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie		

(X)	(X) Disability: Disability Act Compliance		
1	KPI Title	% of assessments completed within the timelines as provided for in the regulations	
2	KPI Description	The number of Assessments of Need completed within three months of their commencement OR within a revised time frame negotiated as per paragraph 10 of the Regulations accompanying the Disability Act which allows for exceptional circumstances. Total number also expressed in percentage terms. (Implementation: Part 2-Disability Act).	
3	KPI Rationale	This metric is in line with the Disability Act 2005.	
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). □Person Centred Care □Effective Care Safe Care□ Better Health and Wellbeing □Use of Information□ Workforce□Use of Resources□Governance, Leadership and Management □	
4	KPI Target	2013 NSP Targets	
		National: 100% DML: 100% DNE: 100% South: 100% West: 100%	
5	KPI Calculation	The total number of Assessments of Need completed within three months of their commencement OR within a revised time frame negotiated as per paragraph 10 of the Regulations accompanying the Disability Act which allows for exceptional circumstances. Total number also expressed in percentage terms.	
6	Data Source	Quarterly activity reports issued to the Business Information Unit by the Disability Information Unit via the National Disability Unit.	
	Data Completeness	100% data completeness required and expected.	
	Data Quality Issues	No known data quality issues at this point.	
	Data Collection Frequency	□Daily □Weekly Monthly ☑Quarterly □Bi-annually □Annually Other – give details:	
	Tracer Conditions		
	Minimum Data Set		
	International Comparison	Service developed in line with best practice internationally.	
	KPI Monitoring	□Daily □Weekly Monthly ☑Quarterly □Bi-annually □Annually Other – give details:	
12	KPI Reporting Frequency	□ Daily □ Weekly □ Monthly ✓ Quarterly □ Bi-annually □ Annually □ Other – give details: Q in arrears	
	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period)	
	KPI Reporting Aggregation	✓ National ✓ Regional ✓ LHO Area □ Hospital □ County □ Institution □ Other – give details:	
	KPI is reported in which reports?	□ Corporate Plan Report ✓ Performance Report (NSP/CBP) ✓ CompStat □ Other – give details:	
	Web link to data		
	Additional Information		
Contact details for Data Manager / Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie Specialist Lead Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 /			
Natio	National Lead and Division National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie		

(Y)	Disability: Disability Act (Compliance	
1	KPI Title	% of service statements completed within the timelines as provided for in the regulations.	
	KPI Description	The % of Service Statements completed within one month of the date of receipt of the Assessment Report by the Liaison Officer / Case Manager, as provided for in the regulations.	
3	KPI Rationale	This metric is in line with the Disability Act 2005.	
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). □Person Centred Care □Effective Care	
		Safe Care ☐ Better Health and Wellbeing ☐ Use of Information ☐	
4	VDI Torgot	Workforce□Use of Resources□Governance, Leadership and Management □	
4	KPI Target	2013 NSP Targets	
		National: 100%	
		DML: 100%	
		DNE: 100%	
		South: 100%	
		West: 100%	
5	KPI Calculation	The total number of Service Statements completed within one month of the date of receipt of the	
		Assessment Report by the Liaison Officer / Case Manager, as provided for in the regulations.	
6	Data Source	Quarterly activity reports issued to the Business Information Unit by the Disability Information Unit via the National Disability Unit.	
	Data Completeness	100% data completeness required and expected.	
	Data Quality Issues	No known data quality issues at this point.	
	Data Collection Frequency	□Daily □Weekly Monthly ☑Quarterly □Bi-annually □Annually Other – give details:	
	Tracer Conditions		
	Minimum Data Set		
	International Comparison	Service developed in line with best practice internationally.	
	KPI Monitoring	□Daily □Weekly Monthly ☑Quarterly □Bi-annually □Annually Other – give details:	
12	KPI Reporting Frequency	□ Daily □ Weekly □ Monthly ✓ Quarterly □ Bi-annually □ Annually □ Other – give details: Q in arrears	
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period)	
14	KPI Reporting Aggregation	✓ National ✓ Regional ✓ LHO Area □ Hospital □ County □ Institution □ Other – give details:	
15	KPI is reported in which reports?	☐ Corporate Plan Report ✓ Performance Report (NSP/CBP) ☐ CompStat ☐ Other – give details:	
16	Web link to data		
17	Additional Information		
Contact details for Data Manager / Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie			
Spec	ialist Lead	Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 /	
Natio	National Lead and Division National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie		

(Z)	Disability: Services for C	hildren and Young People
1	KPI Title	Proportion of Local Implementation Groups which have Local Implementation Plans for progressing disability services for children and young people.
2	KPI Description	The proportion of local implementation groups (LIGs) who have submitted their completed and agreed Local Implementation Plan to the Disability Manager/Nominee and the National Coordinator of Progressing Disability Services for Children and Young People.
		Completed plans must include sections on: 1. Principles and values for delivery of services 2. Governance and management structures for services 3. Service policies and procedures
		4. Organisation of change
3	KPI Rationale	To monitor progress of local implementation groups in submitting their completed and agreed Local Implementation Plan for reconfiguration into disability services for children and young people
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). □Person Centred Care □Effective Care Safe Care□ Better Health and Wellbeing □Use of Information□
		Workforce□Use of Resources□Governance, Leadership and Management □
4	KPI Target	2014 NSP Targets National: 25 of 25 DML: 6 of 6 DNE: 4 of 4 South: 9 of 9 West: 6 of 6
5	KPI Calculation	Count the total number of LIGs who have submitted a complete and agreed Local Implementation Plan . Report this number as a percentage of the total no. of local implementation groups in the region. Point in time calculation i.e. do not add quarterly returns together. For year end annual outturn, the 4th quarter outturn is used e.g. DML Q1 22%, Q2 40%, Q3 65%, Q4 80% . Therefore, the percentage of Local Implementation Plans submitted in the year is 80%
6	Data Source	Data is submitted by the Local Implementation Group Lead to the Disability Manager/Nominee for onwards submission to the Area Manager and Regional Disability Lead / Specialist / relevant nominee. The Area Manager forwards to the RDO Business Unit for collation and onward submission to the National Business Intelligence Unit.
	Data Completeness	100% data completeness required. Where an LHO has not submitted a complete return or where there are anomalies, the Disability Manager / nominee must submit a bullet point commentary to explain this to the Area Manager for onward submission to the RDO and the National BIU.
	Data Quality Issues	No known data quality issues at this point.
7	Data Collection Frequency	□ Daily □ Weekly ☑ Monthly ☑ Quarterly □ Bi-annually □ Annually ☑ Other – give details: Data will be collected monthly by the Disability Manager/Nominee for monitoring purposes. This KPI is reported in the Performance Report on a quarterly basis.
8	Tracer Conditions	
9	Minimum Data Set	The Local Implementation Plan
10	International Comparison	Service developed in line with best practice internationally.

11	KPI Monitoring	□Daily □Weekly Monthly ☑Quarterly □Bi-annually □Annually
		Other – give details: The LIG Lead will submit completed KPI Outturn to the Disability Manage/Nomineer who will review and quality assure for accuracy, completeness, quarterly comparison and ongoing performance against target. Once satisfied, the Disability Manager/Nominee will forward the collated KPI on a quarterly basis by the 10th of the month following the quarter to their Area Manager for approval and Regional Disability Lead/Specialist/relevant nominee for oversight. The Regional Disability Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Disability Manager/Nominee 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 13th of the month for collation and submission to the National BIU CPCP by the 15th of the month for publication in the national Performance Report (PR).
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ✓Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	✓ National ✓ Regional ✓ LHO Area □ Hospital □ County □ Institution □ Other – give details:
15	KPI is reported in which reports?	☐ Corporate Plan Report ✓ Performance Report (NSP/CBP) ☐ CompStat ☐ Other – give details:
16	Web link to data	
17 Additional Information		
Contact details for Data Manager /		Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie
Specialist Lead		Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 /
National Lead and Division		National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie

(AA	Disability: Services for	Children and Young People
1	KPI Title	Proportion of established Children's Disability Network Teams having current individualised plans for each child
2	KPI Description	The number of established geographically based children's disability teams who have current individual plans e.g. Individual Family Service Plan (IFSP), Individual Development Plan (IDP) etc for each child. Geographically based teams: refers to a children's disability network team which provides services for all children with complex needs in a given geographical area, regardless of their disability.
3	KPI Rationale	To monitor the number of children's disability teams who have current individualised plans for each child
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). □ Person Centred Care □ Effective Care Safe Care□ Better Health and Wellbeing □ Use of Information□ Workforce□ Use of Resources□ Governance, Leadership and Management □
4	KPI Target	2014 NSP Targets National: 33 of 87 DML: 5 of 22 DNE: 10 of 18 South: 8 of 16 West: 10 of 31
5	KPI Calculation	Count the total number of established geographically based teams who have current individualised plans for each child. Point in time calculation i.e. do not add quarterly returns together. For year end annual outturn, the 4th quarter outturn is used e.g. DNE Q1 3, Q2 5 Q3 9 Q4 10. Therefore, total submitted for annual outturn = 10.
6	Data Source	Data is submitted by all established geographically based teams to the Disability Manager/Nominee for onwards submission to the Area Manager and Regional Disability Lead / Specialist / relevant nominee. The Area Manager forwards to the RDO Business Unit for collation and onward submission to the National Business Intelligence Unit.
	Data Completeness	100% data completeness required. Where an LHO has not submitted a complete return or where there are anomalies, the Disability Manager / nominee must submit a bullet point commentary to explain this to the Area Manager for onward submission to the RDO and the National BIU.
	Data Quality Issues	No known data quality issues at this point.
7	Data Collection Frequency	□Daily □Weekly Monthly ☑Quarterly □Bi-annually □Annually
8	Tracer Conditions	Other – give details: This KPI is reported in the Performance Report on a quarterly basis.
9	Minimum Data Set	The service user's current individualised plan.
10	International Comparison	Service developed in line with best practice internationally.

11	KPI Monitoring	□Daily □Weekly Monthly ☑Quarterly □Bi-annually □Annually
		Other – give details: The LIG Lead will submit completed KPI Outturn to the Disability Manager/Nominee who will review and quality assure for accuracy, completeness, quarterly comparison and ongoing performance against target. Once satisfied, the Disability Manager/Nominee will forward the collated KPI on a quarterly basis by the 10th of the month following the quarter to their Area Manager for approval and Regional Disability Lead/Specialist/relevant nominee for oversight. The Regional Disability Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Disability Manager/Nominee 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 13th of the month for collation and submission to the National BIU CPCP by the 15th of the month for publication in the national Performance Report (PR).
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ✓Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	✓ National ✓ Regional ✓ LHO Area □ Hospital □ County □ Institution □ Other – give details:
15	KPI is reported in which reports?	□ Corporate Plan Report ✓ Performance Report (NSP/CBP) □ CompStat □ Other – give details:
16	Web link to data	
17 Additional Information		
Contact details for Data Manager /		Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie
Specialist Lead		Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 /
National Lead and Division		National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie

(AB	(AB) Disability: Congregated Settings			
1	KPI Title	Facilitate the movement of people from congregated to community settings under the auspices of the following (1) Genio funded projects (2) Housing Strategy for People with a Disability		
2	KPI Description			
3	KPI Rationale Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑Person Centred Care □Safe Care □Better Health and Wellbeing □Use of Information □Workforce □Use of Resources □Governance, Leadership and Management		
4	KPI Target	2014 NSP Targets National: 150 DML: 55 DNE: 25 South: 40 West: 30		
5	KPI Calculation			
6	Data Source			
	Data Completeness	100% data completeness required. Where an LHO has not submitted a complete return or where there are anomalies, the Disability Manager / nominee must submit a bullet point commentary to explain this to the Area Manager for onward submission to the RDO and the National BIU.		
7	Data Quality Issues Data Collection Frequency	No known data quality issues at this point. □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually ☑Other – give details: This KPI is reported in the Performance Assurance Report on a quarterly basis.		
8	Tracer Conditions	Adults and children with a physical and/or sensory disability		
9	Minimum Data Set	The second secon		
10	International Comparison	Drawn from best practice internationally to develop this customised service		

11	KPI Monitoring	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually
		☑Other – give details: The Disability Manager/Nominee will receive, analyse and quality assure this KPI outturns on a quarterly basis for accuracy, completeness, quarter on quarter comparison and ongoing performance against target. Once satisfied, they will forward the collated KPI on a quarterly basis to their Area Manager by 10th of month following the quarter) for approval and Regional Disability Lead/Specialist/relevant nominee for oversight. The Regional Disability Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Disability Manager/Nominee 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 13th of the month for collation and submission to the National BIU, PPBI by the 15th of the month for publication in the national Performance Assurance Report (PAR).
12	KPI Reporting Frequency	□Other – give details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Current (e.g. data reported in each quarter up to and including the last day of that quarter) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □Other - give details:
14	KPI Reporting Aggregation	✓ National✓ Regional✓ LHO Area✓ Hospital✓ County✓ Institution✓ Other – give details:
15	KPI is reported in which reports?	✓ Performance Assurance Report (PAR)✓ CompStat✓ Other – give details:
16	Web link to data	
17	Additional Information	
Contact details for Data		Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie
Manager / Specialist Lead		Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 / disability.socialcare@hse.ie
Natio	onal Lead and Division	National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie

(AC	(AC) Disability: Quality			
1	KPI Title	In respect of agencies in receipt of €5m or more in public funding, the % which employ an internationally recognised quality improvement methodology such as EFQM, CQL or CARF.		
	KPI Description			
3	KPI Rationale Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑Person Centred Care □Effective Care □Safe Care □Better Health and Wellbeing □Use of Information □Workforce □Use of Resources □Governance, Leadership and Management		
4	KPI Target	2014 NSP Targets National: 150 DML: 55 DNE: 25 South: 40 West: 30		
5	KPI Calculation			
6	Data Source			
	Data Completeness Data Quality Issues	100% data completeness required. Where an LHO has not submitted a complete return or where there are anomalies, the Disability Manager / nominee must submit a bullet point commentary to explain this to the Area Manager for onward submission to the RDO and the National BIU. No known data quality issues at this point.		
7	Data Collection Frequency	□ Daily □ Weekly □ Monthly ☑ Quarterly □ Bi-annually □ Annually □ Other – give details: This KPI is reported in the Performance Assurance Report on a quarterly basis.		
8	Tracer Conditions	Adults and children with a physical and/or sensory disability		
		Addition and children with a physical and/or sensory disability		
	Minimum Data Set	Drawn from best prestige internationally to develop this systemics described		
10	international Comparison	Drawn from best practice internationally to develop this customised service		

11	KPI Monitoring	□Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually
		☑Other – give details: The Disability Manager/Nominee will receive, analyse and quality assure this KPI outturns on a quarterly basis for accuracy, completeness, quarter on quarter comparison and ongoing performance against target. Once satisfied, they will forward the collated KPI on a quarterly basis to their Area Manager by 10th of month following the quarter) for approval and Regional Disability Lead/Specialist/relevant nominee for oversight. The Regional Disability Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Disability Manager/Nominee 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 13th of the month for collation and submission to the National BIU, PPBI by the 15th of the month for publication in the national Performance Assurance Report (PAR).
12	KPI Reporting Frequency	□ Daily □ Weekly □ Monthly ☑ Quarterly □ Bi-annually □ Annually □ Other – give details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Current (e.g. data reported in each quarter up to and including the last day of that quarter) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □Other - give details:
14	KPI Reporting Aggregation	✓ National✓ Regional✓ LHO Area✓ Hospital✓ County✓ Institution✓ Other – give details:
15	KPI is reported in which reports?	☑Performance Assurance Report (PAR)☑ CompStat☑ Other – give details:
16	Web link to data	
17	Additional Information	
Contact details for Data		Information Analyst: Lisa Farrelly / Tel 046 9251329 / lisam.farrelly@hse.ie
• •		Head of Operations & Service Improvement Disability: Marion Meany / 01 6201755 / disability.socialcare@hse.ie
National Lead and Division		National Lead: Pat Healy, National Director Social Care Division / Email: socialcare@hse.ie