

Health Service Executive
KPI Guidelines 2013
Primary Care & Social Inclusion
& Palliative Care

[Version History](#)

Version 1: (15 May 2013)



Feilhmeannacht na Seirbhíse Sláinte
Health Service Executive

Primary Care

1	KPI Title	Number of PCTs implementing the National Integrated Care Package for Diabetes (dependent on the appointment of the ICDNs)
2	KPI Description	This refers to new Chronic Disease Management developed by Clinical Programmes and Strategy Directorate. Primary Care Team: Primary Care Teams or PCTs are teams that delivery a range of primary care services that keep people well in their own communities. Teams can include, GPs, Nurses, Health Care Assistants, Home Helps, Physiotherapists, Occupational Therapists, SocialWorkers and Speech and Language Therapists. The Transformation Development Officer (TDO) supports the formation of these teams.
3	KPI Rationale	To capture the roll out of Structured Integrated Diabetes Care programme.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care <input checked="" type="checkbox"/> Effective Care <input checked="" type="checkbox"/> Safe Care <input type="checkbox"/> Better Health and Wellbeing <input checked="" type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management
4	KPI Target	NSP 2013 target: 51
5	KPI Calculation	Count
6	Data Source	PCT - ISA – Region – National Programme Office - BIU Non- acute team
	Data Completeness	New Metric
	Data Quality Issues	Manually collated at local levels through GP Practices
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
8	Tracer Conditions	Diabetes Patients
9	Minimum Data Set	Service form which includes details of diabetes patients availing of the National Integrated Care Package
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: National Primary Care Office
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> ISA Area <input type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Contact details for Data Manager / Specialist Lead		Ade Oke, Information Analyst, Non Acute BIU. Tel 01 6352688. Email: ade.oke@hse.ie Helen Kelly, National Primary Care Office, Tel: 091 775 908
National Lead and Directorate		Brian Murphy, National Primary Care Group Lead, Tel: 091 775908

Primary Care

1	KPI Title	Number of Health & Social Care Networks in development (dependent on agreed governance model)
2	KPI Description	Health and Social Care Network: The Health & Social Care Networks (HSCN) will be comprised of a number of PCTs and will provide services for a population of 30,000 to 50,000. Specialist community based services and care groups will be organised at this level and will include Mental Health, Child Protection, Disability Intervention Teams etc. A Network will be considered in development when the following have been met: 1. Alignment of PCTs & Network services into identified Health and Social Care Networks areas on a local basis. This involves identification of staffing, specialist teams, facilities and services that are provided within the HSCN Area. 2. Roll out of the nationally agreed guidelines/processes in terms of: - Referral Guidelines between PCTs and HSCN services; - Guidelines and shared care arrangements for patients accessing network services
3	KPI Rationale	To capture the number of Health and Social Care Networks in Development.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care Safe Care <input type="checkbox"/> Better Health and Wellbeing <input checked="" type="checkbox"/> Use of Information <input checked="" type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/>
4	KPI Target	NSP 2013 target: 126 nationally (South – 36; West – 32; DML – 35; DNE- 23)
5	KPI Calculation	Count
6	Data Source	National Programme Office - BIU Non- acute team
	Data Completeness	Complete
	Data Quality Issues	None
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
8	Tracer Conditions	Health and Social Care Network
9	Minimum Data Set	Health and Social Care Network meets the criteria set out in the definition
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other Please indicate who is responsible for monitoring this KPI: National Primary Care Office
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> ISA Area <input type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: PCT Status Report
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
	Contact details for Data Manager / Specialist Lead	Ade Oke, Information Analyst, Non Acute BIU. Tel 01 6352688. Email: ade.oke@hse.ie Helen Kelly, National Primary Care Office, Tel: 091 775 908
	National Lead and Directorate	Brian Murphy, National Primary Care Group Lead, Tel: 091 775908

Primary Care		
1	KPI Title	Percentage of Operational Areas with community representation for Primary Care Team and Network development
2	KPI Description	In order for an ISA to be considered as having appropriate community representation for PCT and Network development it is deemed necessary to meet one of the following criteria; a. Have one or more community representatives on the local implementatino group (LIG); or b. Have one or more community representatives on at least 50% of Primary Care Teams (PCTs) in place within the ISA. or c. Have one or more community representatives on at least 50% of Health and Social Care Networks
		Operational Area: An Operational Area will facilitate the integration of secondary care, primary care and continuing care services, with all personnel and settings providing integrated services for a shared population. The Operational Area will contain a hospital or a number of hospitals that provide for all of the secondary care acute hospital needs for that community.
		Primary Care Team: Primary Care Teams or PCTS are teams that delivery a range of primary care services that keep people well in their own communities. Teams can include, GPs, Nurses, Health Care Assistants, Home Helps, Physiotherapists, Occupational Therapists, SocialWorkers and Speech and Language Therapists. The Transformation Development Officer (TDO) supports the formation of these teams.
		Local Implementation Group: A Local Implementation Group is a local management structure for primary care teams in each local health office area.
		Health and Social Care Network: The Health & Social Care Networks (HSCN) will be comprised of a number of PCTs and will provide services for a population of 30,000 to 50,000. Specialist community based services and care groups will be organised at this level and will include Mental Health, Child Protection, Disability Intervention Teams etc.
		Community representatives: are individuals who are 'representing', 'representative', and/or 'consultative' of one or more populations or affinity groups. They can be stakeholders, opinion leaders, organisers and advocates. They serve as a platform and channel for information and voices of community, communicating ideas and concepts between community and health and social services and who hold people and processes accountable. These representatives can be involved with individual Local Implementation Groups, Primary Care Teams or Health and Social Care Networks etc.
		Note: A common concern when electing a community representative is guaranteeing 'true representation'. It is important to note that guaranteeing 'true representation' can be an impossible task. Service user involvement is perhaps more about a way of thinking that is able to progress beyond personal experience and apply such knowledge to broader healthcare issues.
3	KPI Rationale	Rationale: The Joint Initiative formation evaluation identifies and recommends to the HSE methods and practices and processes for community participation in the development and ongoing work for Primary Care Teams. Purpose: To capture the number of Operational Areas with community representation for Primary Care Team and Network development.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/>
4	KPI Target	NSP 2013 target: 100% (17)
5	KPI Calculation	Count
6	Data Source	PCT - ISA – Region – National Programme Office - BIU Non- acute team
	Data Completeness	•The Transformation Development Officers (TDOs) will report data to the National Primary Care Service Office based on their PCTs, Health and Social Care Networks or LIGs.
	Data Quality Issues	
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
8	Tracer Conditions	Community representatives: are individuals who are 'representing', 'representative', and/or 'consultative' of one or more populations or affinity groups working with Primary Care Teams.
9	Minimum Data Set	Community representatives working with Primary Care Teams

10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other Please indicate who is responsible for monitoring this KPI: National Primary Care Office
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details:PCT Status Report
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	Guidelines and resources available on the web link to data outlined above. The National Advocacy Unit provides practical guidance on service user involvement and community participation. For more information contact: •June Bolger, National Lead Service User Involvement email: june.boulger2@hse.ie; tel: 0868069829) The HSE Regional Managers for Consumer Affairs will also provide guidance for Primary Care Specialists: •Sinead Byrne, HSE South, Regional Manager, Consumer Affairs, Kilcreene Hospital, Kilkenny. (email: SineadJ.Byrne@hse.ie; tel: 056 7785598) •Rosalie Smith Lynch, HSE Dublin North East, Regional Manager, Consumer Affairs, St. Felim's Hospital, Cavan. (email: rosalie.SmithLynch@hse.ie; tel: 049 4360462 or 046 9280511) •Chris Rudland, HSE West, Regional Manager, Consumer Affairs, Merlin Park, Galway. (email: Chris.Rudland@hse.ie; tel: 091 775808) •Deborah Keyes, HSE Dublin Mid Leinster, Regional Manager, Consumer Affairs, Central Business Park, Clonminch, Tullamore, Co. Offaly. (email: deborah.keyes@hse.ie; tel: 057 93 57876)
Contact details for Data Manager / Specialist Lead		Ade Oke, Information Analyst, Non Acute BIU. Tel 01 6352688. Email: ade.oke@hse.ie Helen Kelly, National Primary Care Office, Tel: 091 775 908
National Lead and Directorate		Brian Murphy, National Primary Care Group Lead, Tel: 091 775908

Primary Care G.P Out of Hours Service

1	KPI Title	No. of contacts with GP Out of Hours
2	KPI Description	This refers to the total number of patients who made contact with GP Out of Hours Service through Treatment Centres, Home Services, Triage and Other. Other refers to calls which are not triaged by a clinician, they refer to callers looking for information.
3	KPI Rationale	To capture the number of patients who contacted GP Out of Hours Service nationally in order to monitor activity and service pressures.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care <input checked="" type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/>
4	KPI Target	NSP 2013 target: 975,610 nationally (DML – 136,581; DNE –174,735 ; South – 414,161; West- 250,133)
5	KPI Calculation	Count. Total Number of Contacts by Treatment Centre, Home Service, Triage Only and Other. This should match the number of contacts by age breakdown i.e. 0 - 16 years, 16 - 65 years, 65 years or over
6	Data Source	from 9 GP co-ops grouped into four Regions – BIU Non- acute team
	Data Completeness	100 % data Completeness
	Data Quality Issues	No known data quality issues at this point
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
8	Tracer Conditions	GP OOHs Patients
9	Minimum Data Set	
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: This is to be monitored by the RDOs. Where LHO has not submitted a complete return or where there are anomalies, physiotherapy Manager(s) must submit bullet point commentary to the RDO to explain this to BIU
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input checked="" type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> Coops <input type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Contact details for Data		Ade Oke, Data Analyst, Non Acute BIU. Tel 01 6352688. Email:ade.oke@hse.ie
National Lead and Directorate		Integrated Services Directorate, Dr. Steevens Hospital, Dublin 8

Primary Care : Physiotherapy Referral

1	KPI Title	Number of patients for whom a primary care physiotherapy referral was received in the reporting month
2	KPI Description	Total Number of patients for whom a Primary Care Physiotherapy referral was received in the reporting period (All referrals into Community Services-everything outside acute referrals). This is captured by Age Category (Age Brackets: 0-17yrs; 18-64 yrs; 65+ years) and by Referral Source (Acute Hospital Referrals, GP Referrals and Other Referrals-i.e. PHN, other HSCP, Voluntary Organisations, self and others (including non-acute beds). Referrals include New patients, (ie. not known to the service) and Re-Referrals, (ie. previously discharged).
3	KPI Rationale	To capture the No. of patients for whom a primary care physiotherapy referral was received in the reporting month
	Indicator	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information
	Classification	Workforce <input checked="" type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/>
4	KPI Target	NSP 2013 target:
	2013 Target	172,387 nationally (DML – 41,616; DNE – 31,295; South – 50,211; West- 49,265) NSP 2012 Target – 172,387
5	KPI Calculation	Count. Total in referrals by source should equal total number of referrals received by Age Category
6	Data Source	LHO – Region – BIU Non- acute team
	Data Completeness	100 % data Completeness
	Data Quality Issues	No known data quality issues at this point
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
8	Tracer Conditions	Community Services Physiotherapy Patients
9	Minimum Data Set	Referral note/form which includes details of patients and relevant information relating to the referral
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: This is to be monitored by the RDOs. Where LHO has not submitted a complete return or where there are anomalies, physiotherapy Manager(s) must submit bullet point commentary to the RDO to explain this to BIU
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input checked="" type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Contact details for Data Manager / Specialist Lead		Ade Oke, Information Analyst, Non Acute BIU. Tel 01 6352688. Email: ade.oke@hse.ie Shirley Kane, National Primary Care Office, Tel: 091 775 908
National Lead and		Brian Murphy, National Care Group Lead, Tel: 091 775908

Primary Care : Physiotherapy Assessments

1	KPI Title	Total no. of Primary Care Physiotherapy patients seen for a first time Assessment in the reporting period.
2	KPI Description	The total No. of patients seen for a first time Assessment in the reporting period. This includes both new referrals and re-referrals
3	KPI Rationale	The purpose of this metric is to assess the number of patients seen for a first time assessment.
	Indicator	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information
	Classification	Workforce <input checked="" type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/>
4	KPI Target	NSP 2013 target:
	2013 Target	139,102 nationally (DML –34,819; DNE –24,872; South – 41,253; West-38,158) NSP 2012 Target – 139,102
5	KPI Calculation	Count
6	Data Source	LHO – Region – BIU Non- acute team
	Data Completeness	100 % data Completeness
	Data Quality Issues	No known data quality issues at this point
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
8	Tracer Conditions	Community Services Physiotherapy Patients
9	Minimum Data Set	Service form which includes details of patients and relevant information relating to the referral
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: This is to be monitored by the RDOs. Where LHO has not submitted a complete return or where there are anomalies, physiotherapy Manager(s) must submit bullet point commentary to the RDO to explain this to BIU
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input checked="" type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Contact details for Data Manager / Specialist Lead		Ade Oke, Information Analyst, Non Acute BIU. Tel 01 6352688. Email: ade.oke@hse.ie Shirley Kane, National Primary Care Office, Tel: 091 775 908
National Lead and		Brian Murphy, National Care Group Lead, Tel: 091 775908

Primary Care : Physiotherapy Contacts

1	KPI Title	Total no. of Primary Care Physiotherapy face to face contacts / visits / appointments that took place in the reporting month
2	KPI Description	Total no. of Primary Care Physiotherapy face to face contacts / visits / appointments that took place in the reporting month by settings i.e. Domiciliary/Principal Setting-include patient's home address and private nursing home where the home is the patient's main residence or any other setting to which the physio travels for individual physiotherapy contact/visit/appointment. (This includes once-off school visit for an individual. Does not include where physio travels to a unit/setting and sees more than one individual.), Other Individual or Clinic Setting-One to one intervention that does not occur in a patient's main residence. If the physiotherapist is on-site in a community unit (and sees more than one individual), this should also be recorded as 'other individual', Group Setting. This data includes those seen for a first time assessment
3	KPI Rationale	The purpose of this metric is to capture the number of face to face contacts/visits/appointment that took place in the reporting month assess the volume of patients seen for assessment.
	Indicator	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information
	Classification	Workforce <input checked="" type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/>
4	KPI Target	NSP 2013 target:
	2013 Target	720,026 nationally (DML –160,631; DNE –122,405; South –220,957; West-216,033) NSP 2012 Target – 720,026
5	KPI Calculation	Count. In respect of the total Number of Contacts which took place in a group setting, if 2 groups of 6 patients are seen, this equals 12 contacts). If a person is receiving a mixture of individual and group intervention, count in both individual and group settings.
6	Data Source	LHO – Region – BIU Non- acute team
	Data Completeness	100 % data Completeness
	Data Quality Issues	No known data quality issues at this point
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
8	Tracer Conditions	Community Services Physiotherapy Patients
9	Minimum Data Set	Service form which includes details of patients and relevant information relating to the referral
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: This is to be monitored by the RDOs. Where LHO has not submitted a complete return or where there are anomalies, physiotherapy Manager(s) must submit bullet point commentary to the RDO to explain this to BIU
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input checked="" type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Contact details for Data Manager / Specialist Lead		Ade Oke, Information Analyst, Non Acute BIU. Tel 01 6352688. Email: ade.oke@hse.ie Shirley Kane, National Primary Care Office, Tel: 091 775 908
National Lead and		Brian Murphy, National Care Group Lead, Tel: 091 775908

Primary Care : Occupational Therapy

1	KPI Title	No. of clients who received a direct service in the reporting month (per month)
2	KPI Description	<p>The number of individual named clients who have received direct interventions during month.</p> <p>Direct interventions refers to face to face interventions, delivered directly to, or on behalf of a named client. The Client does not have to be present but the intervention is on their behalf and of a 'face to face' nature. Examples of direct interventions. eg • Any face to face sessions; • Client specific parent/family training; • School/pre-school visit to or on behalf of a client; • Domiciliary Visit to client; • Attendance at Case conference; • School visit in advance of child attending school; • Pre-discharge visit to client's home; • Site meeting with Co Council/builder regarding housing adaptations. Each client is counted only once in the reporting month. This covers all Occupational Therapy services provided within Primary and Community Services. This does not include clients in Mental Health, Acute Hospital care or voluntary agency settings.</p> <p>This metric is recorded by age band. Age Bands: 0-4yrs and 11mths; 5-17yrs & 11mths; 18-64yrs & 11mths; 65yrs+.</p>
3	KPI Rationale	<p>Occupational therapy is a client centred health profession concerned with promoting health and well being through occupation. The primary goal of occupational therapy is to enable people to participate in the activities of everyday life. Occupational therapists achieve this outcome by working with people and communities to enhance their ability to engage in the occupations they want to, need to, or are expected to do, or by modifying the occupation or the environment to better support their occupational engagement.</p> <p>Occupational therapy is carried out in Primary Care by assessing people and providing interventions, both directly and indirectly, in either home or clinic locations or other community settings e.g. community centres, day centres, community hospital etc. Home based interventions are an essential component of service delivery where assessing/treating the person performance within their own environment is integral to successful outcomes. Service activity data (both direct and indirect) reflects the number of contacts with people but does not reflect the amount of</p>
	Indicator Classification	<p>Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two).</p> <p><input type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care</p> <p>Safe Care <input type="checkbox"/> Better Health and Wellbeing <input checked="" type="checkbox"/> Use of Information <input type="checkbox"/></p> <p>Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/></p>
4	KPI Target	<p>National Expected Activity 2013 - 12,254</p> <p>DML - 3,661; DNE - 2,696; South - 2,760; West - 3,137</p>
5	KPI Calculation	<p>This is a count of the number of clients who have received direct interventions in the reporting month.</p> <p>Each client is counted only once in the reporting month.</p> <p>Data for each month can only be evaluated in the month as this data is point in time information for clients seen during the month, therefore consecutive months cannot be added together to provide an annual view.</p>
6	Data Source	Source - OT Therapist records - OT Managers - LHO - RDO Office
	Data Completeness	Completeness - 100% data available from all HSE Areas Nationally
	Data Quality Issues	Data Quality Issues - none, metrics piloted in 2012 before inclusion in NSP
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
8	Tracer Conditions	Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families themselves (self referrals). Any person can be referred to OT. Referrals must be received in writing, using the official referral form when available. Referrals which must be completed in full, with as much detail as possible, in order to assess appropriateness of referrals and aid accurate prioritisation.
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc. It also includes sections for details on occupational needs, medical conditions/diagnosis, and social /living/supports etc.
10	International Comparison	No
11	KPI Monitoring	<p>KPI will be monitored on a (please indicate below) basis:</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:</p> <p>Please indicate who is responsible for monitoring this KPI: Occupational Therapy Manager</p>
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<p><input checked="" type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</p> <p><input type="checkbox"/> Monthly in arrears (June data reported in July)</p> <p><input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2)</p> <p><input type="checkbox"/> Rolling 12 months (previous 12 month period)</p>
14	KPI Reporting Aggregation	<p><input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital</p> <p><input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:</p>
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performance-reports

17	Additional Information	
Contact details for Data Manager / Specialist Lead	Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657 Specialist Lead: Shirley Keane: Email shirley.keane@hse.ie Tel: 091 775922	
National Lead and Directorate	Brian Murphy email: Brian.murphy3@hse.ie Tel 091-775908 Directorate: Integrated Services Directorate	

Primary Care : Occupational Therapy Referrals

1	KPI Title	Number of clients for whom a primary care occupational therapy referral was received in the reporting month
2	KPI Description	<p>Number of clients for whom a referral has been accepted to your service in a particular month – includes new referrals, re-referrals and reviews.</p> <p>Each client is counted only once in the reporting month</p> <p>This covers all Occupational Therapy services provided within Primary and Community Services. This does not include clients in Mental Health, Acute Hospital care or voluntary agency settings.</p> <p>This metric is recorded by age band. Age Bands: 0-4yrs and 11mths; 5-17yrs & 11mths; 18-64yrs & 11mths; 65yrs+.</p>
3	KPI Rationale	This KPI allows for planning and management of the monthly throughput of referrals in relation to staffing and resource allocation in relation to demand. Review of the throughput also facilitates recognition of emerging trends in referrals and thus a management response to same.
	Indicator Classification	<p>Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two).</p> <p><input type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care</p> <p>Safe Care <input type="checkbox"/> Better Health and Wellbeing <input checked="" type="checkbox"/> Use of Information <input type="checkbox"/></p> <p>Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/></p>
4	KPI Target	<p>National Expected Activity 2013 - 70,752</p> <p>DML - 20,496; DNE - 15,364; South - 15,928; West - 18,964</p>
5	KPI Calculation	Count of the Number of clients for whom a referral was accepted in the reporting month.
6	Data Source	Source - OT Therapist records - OT Managers - LHO - RDO Office
	Data Completeness	Completeness - 100% data available from all HSE Areas Nationally
	Data Quality Issues	Data Quality Issues - none, metrics piloted in 2012 before inclusion in NSP
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
8	Tracer Conditions	Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families themselves (self referrals). Any person can be referred to OT. Referrals must be received in writing, using the official referral form when available. Referrals which must be completed in full, with as much detail as possible, in order to assess appropriateness of referrals and aid accurate prioritisation.
9	Minimum Data Set	Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc. It also includes sections for details on occupational needs, medical conditions/diagnosis, and social /living/supports etc.
10	International Comparison	No
11	KPI Monitoring	<p>KPI will be monitored on a (please indicate below) basis:</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:</p> <p>Please indicate who is responsible for monitoring this KPI: Occupational Therapy Manager</p>
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<p><input checked="" type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</p> <p><input type="checkbox"/> Monthly in arrears (June data reported in July)</p> <p><input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2)</p> <p><input type="checkbox"/> Rolling 12 months (previous 12 month period)</p>
14	KPI Reporting Aggregation	<p><input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital</p> <p><input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:</p>
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performance-reports
17	Additional Information	
Contact details for Data Manager / Specialist Lead		<p>Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657</p> <p>Specialist Lead: Shirley Keane: Email shirley.keane@hse.ie Tel: 091 775922</p>
National Lead and Directorate		<p>Brian Murphy email: Brian.murphy3@hse.ie Tel 091-775908</p> <p>Directorate: Integrated Services Directorate</p>

Primary Care : Orthodontics		
1	KPI Title	Number of patients on the assessment waiting list during the reporting period
2	KPI Description	Total number of patients who are awaiting assessment for eligibility and categorisation of their orthodontic treatment requirements during the reporting period (Grades 4 & 5). Grade 4 is for severe degrees of irregularity that require treatment for health reasons, e.g. upper front teeth that protrude more than 6mm, deep bites with functional problems. Grade 5 is for very severe dental health problems, e.g. cleft lip & palate, teeth cannot come into the mouth because of overcrowding, additional teeth or any other cause.
3	KPI Rationale	To establish the number of patients on the Orthodontic Assessment waiting lists
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care <input checked="" type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management
4	KPI Target	NSP 2013: no expected activity/target set, new KPI, baseline to be decided in 2013
5	KPI Calculation	Count the number of patients on the Orthodontic Assessment waiting lists in each Orthodontic Service during the reporting period. Data in Orthodontic Services (in the former Health Board areas) in each HSE region will be collated to provide a Regional View. In order to get the yearly outturn the 4th Quarter is taken. This is Point in Time.
6	Data Source	Data is submitted by the Orthodontic Services (in the former Health Board areas) to the National Business Intelligence Unit. The National BIU will liaise with the National Oral Health Lead for validation purposes.
	Data Completeness	100% data completeness required. Where an Orthodontic Service has not submitted a complete return or where there are anomalies the Orthodontic Service Manager and/or Consultant Orthodontist must submit a bullet point commentary to explain this to the National Business Unit and the RDO's Oral Health Lead
	Data Quality Issues	No known data quality issues at this point.
7	Data Collection	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually
8	Tracer Conditions	Patients on the Orthodontic Assessment Waiting list
9	Minimum Data Set	Orthodontic Referral Assessment form with personal details and relevant information relating to their assessment
10	International Comparison	No
11	KPI Monitoring	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period) <input type="checkbox"/> Other - give details:
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Contact details for Data Manager / Specialist Lead		Ade Oke, Information Analyst, Non Acute BIU. Tel 01 6352688. Email: ade.oke@hse.ie Anne Coleman, National Oral Health Office, email: anne.coleman1@hse.ie , tel: 061 483074
National Lead and Directorate		Dympna Kavanagh, National Oral Health Lead. Tel ++353 61 483074. Email: dympna.kavanagh@hse.ie

Primary Care : Orthodontics

1	KPI Title	Waiting time from referral to assessment during reporting period: i) no. of patients waiting 1-6 months ii)no. of patients waiting 7-12 months iii)no. of patients waiting 13-24 months iv)no. of patients waiting over 2 years
2	KPI Description	Waiting times for patients on the Orthodontic Assessment waiting lists.
3	KPI Rationale	To monitor the waiting times for patients on the Orthodontic Assessment waiting lists
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care <input checked="" type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce
4	KPI Target	NSP 2013: no expected activity/target set, new KPI, baseline to be decided in 2013
5	KPI Calculation	Count the number of patients on the Orthodontic Assessment waiting lists within the following time bands: 1-6 months; 7-12 months; 13-24 months; over 2 years. Data in Orthodontic Services (in the former Health Board areas) in each HSE region will be collated to provide a Regional View. In order to get the yearly outturn the 4th Quarter is taken. This is Point in Time.
6	Data Source	Data is submitted by the Orthodontic Services (in the former Health Board areas) to the National Business Intelligence Unit. The National BIU will liaise with the National Oral Health Lead for validation purposes.
	Data Completeness	100% data completeness required. Where an Orthodontic Service has not submitted a complete return or where there are anomalies the Orthodontic Service Manager and/or Consultant Orthodontist must submit a bullet point commentary to explain this to the National Business Unit and the RDO's Oral Health Lead
	Data Quality Issues	No known data quality issues at this point.
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
8	Tracer Conditions	Patients on the Orthodontic Referral waiting lists within the relevant time bands.
9	Minimum Data Set	Number of patients, within the relevant time bands, on the Orthodontic Assessment waiting list during the reporting period.
10	International Comparison	No
11	KPI Monitoring	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Quarterly Current (e.g. data reported in each quarter up to and including the last day of that qtr) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period) <input type="checkbox"/> Other - give details:
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Contact details for Data Manager / Specialist Lead	National Lead and Directorate	Ade Oke, Information Analyst, Non Acute BIU. Tel 01 6352688. Email: ade.oke@hse.ie Coleman, National Oral Health Office, email: anne.coleman1@hse.ie , tel: 061 483074 Dympna Kavanagh, National Oral Health Lead. Tel ++353 61 483074. Email: dympna.kavanagh@hse.ie

Primary Care : Orthodontics

1	KPI Title	Number of patients on the treatment waiting list - Grade 4 - during the reporting period
2	KPI Description	Number of patients on the treatment waiting list - Grade 4 - during the reporting period. Patients waiting for growth to be completed are excluded. The Modified Index of Treatment Need is used by the Orthodontic Services to establish cases that are eligible to receive treatment by the HSE Orthodontic Services. Grade 4 is for severe degrees of irregularity that require treatment for health reasons, e.g. upper front teeth that protrude more than 6mm, deep bites with functional problems.
3	KPI Rationale	To monitor the number of patients on the treatment waiting list - Grade 4 - during the reporting period.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management
4	KPI Target	NSP 2013: no expected activity/target set, new KPI, baseline to be decided in 2013
5	KPI Calculation	Count the number of patients on the Orthodontic Treatment waiting lists - Grade 4 - in each Orthodontic Service. Data in Orthodontic Services (in the former Health Board areas) in each HSE region will be collated to provide a Regional View. In order to get the yearly outturn the 4th Quarter is taken. This is Point in Time.
6	Data Source	Data is submitted by the Orthodontic Services (in the former Health Board areas) to the National Business Intelligence Unit. The National BIU will liaise with the National Oral Health Lead for validation purposes.
	Data Completeness	100% data completeness required. Where an Orthodontic Service has not submitted a complete return or where there are anomalies the Orthodontic Service Manager and/or Consultant Orthodontist must submit a bullet point commentary to explain this to the National Business Unit and the RDO's Oral Health Lead
	Data Quality Issues	No known data quality issues at this point.
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
8	Tracer Conditions	Patients on the Orthodontic Treatment Waiting list - Grade 4
9	Minimum Data Set	Detailed information of patients on the Orthodontic Treatment waiting list - Grade 4 - during the reporting period.
10	International Comparison	No
11	KPI Monitoring	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period) <input type="checkbox"/> Other - give details:
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Contact details for Data Manager / Specialist Lead		Ade Oke, Information Analyst, Non Acute BIU. Tel 01 6352688. Email: ade.oke@hse.ie Anne Coleman, National Oral Health Office, email: anne.coleman1@hse.ie , tel: 061 483074
National Lead and Directorate		Dympna Kavanagh, National Oral Health Lead. Tel ++353 61 483074. Email: dympna.kavanagh@hse.ie

Primary Care : Orthodontics		
1	KPI Title	Waiting time from assessment to commencement of treatment during reporting period (Grade 4): i) no. of patients within 1-6 months ii) no. of patients within 7-12 months iii) no. of patients within 13-24 months iv) no. of patients within 2 years v) no. of patients within 2 - 3 years vi) no. of patients over 4 years
2	KPI Description	Waiting times for patients on the Orthodontic Treatment - Grade 4 - waiting lists. Patients waiting for growth to be completed are excluded.
3	KPI Rationale	To monitor the waiting times for patients on the Orthodontic Treatment - Grade 4 - waiting lists
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management
4	KPI Target	NSP 2013: no expected activity/target set, new KPI, baseline to be decided in 2013
5	KPI Calculation	Count the number of patients waiting times from assessment to commencement of Orthodontic treatment - Grade 4 - within the following time bands: 1-6 months; 7-12 months; 13-24 months; 2 years; 2-3 years; over 4 years. Data in Orthodontic Services (in the former Health Board areas) in each HSE region will be collated to provide a Regional View. In order to get the yearly outturn the 4th Quarter is taken. This is Point in Time.
6	Data Source	Data is submitted by the Orthodontic Services (in the former Health Board areas) to the National Business Intelligence Unit. The National BIU will liaise with the National Oral Health Lead for validation purposes.
	Data Completeness	100% data completeness required. Where an Orthodontic Service has not submitted a complete return or where there are anomalies the Orthodontic Service Manager and/or Consultant Orthodontist must submit a bullet point commentary to explain this to the National Business Unit and the RDO's Oral Health Lead
	Data Quality Issues	No known data quality issues at this point.
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
8	Tracer Conditions	Patients waiting times from assessment to commencement of Orthodontic Treatment waiting lists - Grade 4
9	Minimum Data Set	Number of patients waiting times from assessment to commencement of Orthodontic Treatment waiting lists - Grade 4.
10	International Comparison	No
11	KPI Monitoring	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period) <input type="checkbox"/> Other - give details:
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Contact details for Data Manager / Specialist Lead		Ade Oke, Information Analyst, Non Acute BIU. Tel 01 6352688. Email: ade.oke@hse.ie Anne Coleman, National Oral Health Office, email: anne.coleman1@hse.ie , tel: 061 483074
National Lead and		Dympna Kavanagh, National Oral Health Lead. Tel ++353 61 483074. Email: dympna.kavanagh@hse.ie

Primary Care : Orthodontics		
1	KPI Title	Number of patients on the treatment waiting list - Grade 5 - during the reporting period
2	KPI Description	Number of patients on the treatment waiting list - Grade 5 - during the reporting period. Patients waiting for growth to be completed are excluded. The Modified Index of Treatment Need is used by the Orthodontic Services to establish cases that are eligible to receive treatment by the HSE Orthodontic Services. Grade 5 is for very severe dental health problems, e.g. cleft lip & palate, teeth cannot come into the mouth because of overcrowding, additional teeth or any other cause.
3	KPI Rationale	To monitor the number of patients on the treatment waiting list - Grade 5 - during the reporting period.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management
4	KPI Target	NSP 2013: no expected activity/target set, new KPI, baseline to be decided in 2013
5	KPI Calculation	Count the number of patients on the Orthodontic Treatment waiting lists - Grade 5 - in each Orthodontic Service. Data in Orthodontic Services (in the former Health Board areas) in each HSE region will be collated to provide a Regional View. In order to get the yearly outturn the 4th Quarter is taken. This is Point in Time.
6	Data Source	Data is submitted by the Orthodontic Services (in the former Health Board areas) to the National Business Intelligence Unit. The National BIU will liaise with the National Oral Health Lead for validation purposes.
	Data Completeness	100% data completeness required. Where an Orthodontic Service has not submitted a complete return or where there are anomalies the Orthodontic Service Manager and/or Consultant Orthodontist must submit a bullet point commentary to explain this to the National Business Unit and the RDO's Oral Health Lead
	Data Quality Issues	No known data quality issues
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
8	Tracer Conditions	Patients on the Orthodontic Treatment Waiting list - Grade 5
9	Minimum Data Set	Detailed Information of patients on the Orthodontic Treatment waiting list - Grade 5 - during the reporting period.
10	International Comparison	No
11	KPI Monitoring	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Quarterly Current (e.g. data reported in each quarter up to and including the last day of that quarter) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period) <input type="checkbox"/> Other - give details:
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Contact details for Data Manager / Specialist Lead		Ade Oke, Information Analyst, Non Acute BIU. Tel 01 6352688. Email: ade.oke@hse.ie Anne Coleman, National Oral Health Office, email: anne.coleman1@hse.ie , tel: 061 483074
National Lead and		Dympna Kavanagh, National Oral Health Lead. Tel ++353 61 483074. Email: dympna.kavanagh@hse.ie

Primary Care : Orthodontics		
1	KPI Title	Waiting time from assessment to commencement of treatment during the reporting period (Grade 5): i) no. of patients within 1-6 months ii) no. of patients within 7-12 months iii) no. of patients within 13-24 months iv) no. of patients within 2 years v) no. of patients within 2 - 3 years vi) no. of patients over 4 years.
2	KPI Description	Waiting times for patients on the Orthodontic Treatment - Grade 5 - waiting lists. Patients waiting for growth to be completed are excluded.
3	KPI Rationale	To monitor the waiting times for patients on the Orthodontic Treatment - Grade 5 - waiting lists
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management
4	KPI Target	NSP 2013: no expected activity/target set, new KPI, baseline to be decided in 2013
5	KPI Calculation	Count the number of patients waiting times from assessment to commencement of Orthodontic treatment - Grade 5 - within the following time bands: 1-6 months; 7-12 months; 13-24 months; 2 years; 2-3 years; over 4 years. Data in Orthodontic Services (in the former Health Board areas) in each HSE region will be collated to provide a Regional View. In order to get the yearly outturn the 4th Quarter is taken. This is Point in Time.
6	Data Source	Data is submitted by the Orthodontic Services (in the former Health Board areas) to the National Business Intelligence Unit. The National BIU will liaise with the National Oral Health Lead for validation purposes.
	Data Completeness	100% data completeness required. Where an Orthodontic Service has not submitted a complete return or where there are anomalies the Orthodontic Service Manager and/or Consultant Orthodontist must submit a bullet point commentary to explain this to the National Business Unit and the RDO's Oral Health Lead
	Data Quality Issues	No known data quality issues at this point.
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
8	Tracer Conditions	Patients waiting times from assessment to commencement of Orthodontic Treatment waiting lists - Grade 5
9	Minimum Data Set	Detailed information of patients waiting times from assessment to commencement of Orthodontic Treatment waiting lists - Grade 5.
10	International Comparison	No
11	KPI Monitoring	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Quarterly Current (e.g. data reported in each quarter up to and including the last day of that qtr) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period) <input type="checkbox"/> Other - give details:
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
	Contact details for Data Manager / Specialist Lead	Ade Oke, Information Analyst, Non Acute BIU. Tel 01 6352688. Email: ade.oke@hse.ie Coleman, National Oral Health Office, email: anne.coleman1@hse.ie , tel: 061 483074
	National Lead and Directorate	Dympna Kavanagh, National Oral Health Lead. Tel ++353 61 483074. Email: dympna.kavanagh@hse.ie

Primary Care : Orthodontics		
1	KPI Title	Number of patients receiving active treatment during the reporting period
2	KPI Description	Total number of patients who are in the process of receiving orthodontic treatment.
3	KPI Rationale	To identify the number of eligible patients receiving orthodontic treatment in the reporting month.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care <input checked="" type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management
4	KPI Target	NSP 2013 Target: 13,600 Nationally, (DML 5,403, DNE 2,050, South 1,135, West 5,012).
5	KPI Calculation	Count the number of patients who are in the process of receiving orthodontic treatment. This is cumulative. To arrive at the yearly outturn, each quarter is added.
6	Data Source	Data is submitted by the Orthodontic Services (in the former Health Board areas) to the National Business Intelligence Unit. The National BIU will liaise with the National Oral Health Lead for validation purposes.
	Data Completeness	100% data completeness required. Where an Orthodontic Service has not submitted a complete return or where there are anomalies the Orthodontic Service Manager and/or Consultant Orthodontist must submit a bullet point commentary to explain this to the National Business Unit and the RDO's Oral Health Lead
	Data Quality Issues	No known data quality issues
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
8	Tracer Conditions	Patients receiving active treatment in the reporting month
9	Minimum Data Set	Orthodontic Treatment form with personal details and relevant information relating to each patient
10	International Comparison	No
11	KPI Monitoring	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Quarterly Current (e.g. data reported in each quarter up to and including the last day of that qtr) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period) <input type="checkbox"/> Other - give details:
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Contact details for Data Manager / Specialist Lead		Ade Oke, Information Analyst, Non Acute BIU. Tel 01 6352688. Email: ade.oke@hse.ie Anne Coleman, National Oral Health Office, email: anne.coleman1@hse.ie , tel: 061 483074
National Lead and Directorate		Dympna Kavanagh, National Oral Health Lead. Tel ++353 61 483074. Email: dympna.kavanagh@hse.ie

Social Inclusion: Methadone Treatment

1	KPI Title	Total number of clients in methadone treatment (outside prisons)
2	KPI Description	Number of clients in methadone treatment at the end of the calendar month.
3	KPI Rationale	Methadone is the best evidence based alternative treatment for those who are opiate addicted. It is important to track the numbers in treatment.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two).
4	KPI Target	NSP 2013 Target – 8,650. DML 4,900 , DNE 3,000 , South 450 , West 300.
5	KPI Calculation	Count, the number of clients in methadone treatment at the end of the calendar month.
6	Data Source	Two national registers record drug treatment data in Ireland: the National Drug Treatment Reporting System (NDTRS) is an epidemiological database that records demand for treatment for problem alcohol and drug use, and the Central Treatment List (CTL) is an administrative database to regulate the dispensing of methadone treatment. This data is submitted to the EMCDDA by the HRB & DoHC.
	Data Completeness	
	Data Quality Issues	
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: This metric is to be reported monthly in arrears.
8	Tracer Conditions	A person who is a heroin user whom is considered suitable for Methadone treatment
9	Minimum Data Set	the required minimum dataset for treatment is the Referral form with standard demographic information, Diagnosis, Treatment record.
10	International Comparison	Engaging and retaining clients in methadone treatment is an international metric.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: The Data collection Co-Ordinator will receive and collate the data obtained from the central treatment list. The validated data is sent to the BIU for Reporting by the 15th of the month for publication in the national Performance Report (PR).
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Contact details for Data		Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie
National Lead and Directorate		Brian Murphy, National Primary Care Services Manager Tel: 016352000 Michael Conroy, Principal officer 016354221

Social Inclusion: Methadone Treatment

1	KPI Title	Total number of clients in methadone treatment (prisons)
2	KPI Description	Number of clients in methadone treatment at the end of the calendar month in Prison
3	KPI Rationale	Continuity of methadone treatment of those entering and leaving prison is an important treatment option. The provision of this treatment serves to minimize the spread of blood-borne diseases in a high risk environment. This metric is aligned to the prison methadone audit system which tracks the effectiveness of the care pathway between prison and community.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care, <input checked="" type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	NSP 2013 Target – 500
5	KPI Calculation	Number of clients in methadone treatment at the end of the calendar month in Prison
6	Data Source	Two national registers record drug treatment data in Ireland: the National Drug Treatment Reporting System (NDTRS) is an epidemiological database that records demand for treatment for problem alcohol and drug use, and the Central Treatment List (CTL) is an administrative database to regulate the dispensing of methadone treatment. This data is submitted to the EMCDDA by the HRB & DoHC.
	Data Completeness	
	Data Quality Issues	
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: This metric is to be reported monthly in arrears.
8	Tracer Conditions	A person who is a heroin user whom is considered suitable for Methadone treatment
9	Minimum Data Set	the required minimum dataset for treatment is the Referral form with standard demographic information, Diagnosis, Treatment record.
10	International Comparison	Engaging and retaining clients in methadone treatment is an international metric.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: The Data collection Co-Ordinator will receive and collate the data obtained from the central treatment list. The validated data is sent to the BIU for Reporting by the 15th of the month for publication in the national Performance Report (PR).
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Contact details for Data		Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie
National Lead and Directorate		Brian Murphy, National Primary Care Services Manager Tel: 016352000 Michael Conroy, Principal officer 016354221

Social Inclusion : Substance Misuse

1	KPI Title	The number of substance misusers (over 18 yrs) for whom treatment has commenced following assessment
2	KPI Description	The number of substance misusers, over 18 years of age, for whom treatment has commenced following assessment. Needs Assessment: aims to determine the seriousness and urgency of the drug/alcohol problem. An assessment of both the nature and extent of the addiction as well as the service user's motivation to engage with treatment and rehabilitation services is carried out. It also includes any immediate risk factors and whether or not the service user is suitable for treatment at a particular centre.
3	KPI Rationale	Access to treatment speedily and readily is important when clients are at this stage of the change cycle: This is a measure for the HSE contained in the NDS (Interim 2009-2016) and the NAPS 2007-2016.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	NSP 2013 target = New KPI 2013– (100%). DML (100%), DNE (100%), South (100%), West (100%)
5	KPI Calculation	Percentage calculation: The number of substance misusers for whom treatment commenced within one month of assessment divided by the total number of Adult substance misusers treated during the month multiplied by 100 = %
6	Data Source	Information is sourced by the service providers who send it to the HRB for verification and validation. The validated information is returned to the RDO's who then forward the validated data to the BIU.
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: This metric is to be reported quarterly in arrears.
8	Tracer Conditions	The numbers of people over the age of 18 years who have been assessed and deemed appropriate for treatment for substance abuse
9	Minimum Data Set	the required minimum dataset for admission is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason.
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: The validated data is received by the RDO from the HRB. This data is then returned to their RDO Business Unit by the 13th of the month for collation and submission to the National BIU CPCS by the 15th of the month for publication in the national Performance Report (PR).
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
	Contact details for Data	Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie
	National Lead and Directorate	Diane Nurse, Ass/National Director, Integrated Services, Tel: 01635 2337 Geraldine Luddy, Principal Officer, Department of Health, Tel: 01 635 4000

Social Inclusion : Substance Misuse

1	KPI Title	Percentage of substance misusers (over 18 yrs) for whom treatment has commenced within one calendar month following assessment
2	KPI Description	The percentage of substance misusers, over 18 years of age, for whom treatment has commenced within one calendar month following assessment. Needs Assessment: aims to determine the seriousness and urgency of the drug/alcohol problem. An assessment of both the nature and extent of the addiction as well as the service user's motivation to engage with treatment and rehabilitation services is carried out. It also includes any immediate risk factors and whether or not the service user is suitable for treatment at a particular centre.
3	KPI Rationale	Access to treatment speedily and readily is important when clients are at this stage of the change cycle: This is a measure for the HSE contained in the NDS (Interim 2009-2016) and the NAPS 2007-2016.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	NSP 2013 target – 1260 (100%). DML 300(100%), DNE 210 (100%), South 550 (100%), West 200 (100%)
5	KPI Calculation	Percentage calculation: The number of substance misusers for whom treatment commenced within one month of assessment divided by the total number of Adult substance misusers treated during the month multiplied by 100 = %
6	Data Source	Information is sourced by the service providers who send it to the HRB for verification and validation. The validated information is returned to the RDO's who then forward the validated data to the BIU.
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: This metric is to be reported quarterly in arrears.
8	Tracer Conditions	The numbers of people over the age of 18 years who have been assessed and deemed appropriate for treatment for substance abuse
9	Minimum Data Set	the required minimum dataset for admission is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason.
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: The validated data is received by the RDO from the HRB. This data is then returned 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	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Contact details for Data		Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie
National Lead and Directorate		Diane Nurse, Ass/National Director, Integrated Services, Tel: 01635 2337 Geraldine Luddy, Principal Officer, Department of Health, Tel: 01 635 4000

Social Inclusion : Substance Misuse

1	KPI Title	Number of substance misusers (under 18 yrs) for whom treatment has commenced following assessment
2	KPI Description	The number of substance misusers under 18 years of age, for whom treatment has commenced following assessment. Needs Assessment: aims to determine the seriousness and urgency of the drug/alcohol problem. An assessment of both the nature and extent of the addiction as well as the service user's motivation to engage with treatment and rehabilitation services is carried out. It also includes any immediate risk factors and whether or not the service user is suitable for treatment at a particular centre.
3	KPI Rationale	Speedy access to treatment is critical when clients are at this stage of the change cycle but particularly so for young people – this is a PI in the NDS (Interim 2009-2016)
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	NSP 2013 target – New KPI 2013 (100%). DML (100%), DNE (100%), South (100%), West (100%)
5	KPI Calculation	The number of substance misusers (under 18yrs) for whom treatment commenced within one week following assessment divided by the total number of substance misusers (under 18yrs) treated during the month multiplied by 100 = %
6	Data Source	Information is sourced by the service providers who send it to the HRB for verification and validation. The validated information is returned to the RDO's who then forward the validated data to the BIU.
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: This metric is to be reported quarterly in arrears.
8	Tracer Conditions	The numbers of people under the age of 18 years who have been assessed and deemed appropriate for treatment for substance abuse
9	Minimum Data Set	the required minimum dataset for admission is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason.
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: The validated data is received by the RDO from the HRB. This data is then returned to their RDO Business Unit by the 13th of the month for collation and submission to the National BIU CPCS by the 15th of the month for publication in the national Performance Report (PR).
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Contact details for Data		Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie
National Lead and Directorate		Diane Nurse, Ass/National Director, Integrated Services, Tel: 01635 2337 Michael Conroy, Principal officer 016354221

Social Inclusion : Substance Misuse

1	KPI Title	Number and Percentage of substance misusers (under 18 yrs) for whom treatment has commenced within one week following assessment
2	KPI Description	The number of substance misusers under 18 years of age, for whom treatment has commenced within one week following assessment. Needs Assessment: aims to determine the seriousness and urgency of the drug/alcohol problem. An assessment of both the nature and extent of the addiction as well as the service user's motivation to engage with treatment and rehabilitation services is carried out. It also includes any immediate risk factors and whether or not the service user is suitable for treatment at a particular centre.
3	KPI Rationale	Speedy access to treatment is critical when clients are at this stage of the change cycle but particularly so for young people – this is a PI in the NDS (Interim 2009-2016)
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	NSP 2013 target – 105 (100%). DML 25 (100%), DNE 15(100%), South 40 (100%), West 25 (100%)
5	KPI Calculation	The number of substance misusers (under 18yrs) for whom treatment commenced within one week following assessment divided by the total number of substance misusers (under 18yrs) treated during the month multiplied by 100 = %
6	Data Source	Information is sourced by the service providers who send it to the HRB for verification and validation. The validated information is returned to the RDO's who then forward the validated data to the BIU.
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: This metric is to be reported quarterly in arrears.
8	Tracer Conditions	The numbers of people under the age of 18 years who have been assessed and deemed appropriate for treatment for substance abuse
9	Minimum Data Set	the required minimum dataset for admission is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason.
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: The validated data is received by the RDO from the HRB. This data is then returned 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	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Contact details for Data		Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie
National Lead and Directorate		Diane Nurse, Ass/National Director, Integrated Services, Tel: 01635 2337 Michael Conroy, Principal officer 016354221

Social Inclusion: Homeless Services

1	KPI Title	Number and percentage of individual service users admitted to statutory and voluntary managed emergency accommodation homeless services who have medical cards.
2	KPI Description	This metric is designed to measure the number and percentage of service users admitted to emergency accommodation homeless hostels / facilities that had a medical card in their possession. Service User A service user is an individual who has been assessed as being homeless and placed in an emergency accommodation hostel/ facility. Emergency Accommodation Emergency accommodation mainly refers to hostel type accommodation for short term / emergency use for people experiencing homelessness. Needs Assessment A "needs assessment" is a formal assessment of an individual's needs covering the full range of a person's care and care related needs and is a fundamental component of the care planning system.
3	KPI Rationale	Health and well being may be severely compromised when one is homeless so it is critical that homeless people are able to access Primary Care Services quickly and easily – thus a medical card is a critical starting point.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input checked="" type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	NSP 2013 target: 75%
	2013 Target	NSP 2012 expected activity/target – 75%
5	KPI Calculation	Total number of persons residing in emergency accommodation homeless services who have a medical card on the last day of each quarter, i.e. 31st March, 30th June, 30th Sept, 31st December. Total number of persons residing in emergency accommodation homeless services on the last day of each quarter, i.e. 31st March, 30th June, 30th Sept, 31st December. Calculation Percentage of homeless people with medical cards in quarter (number of people admitted)/(number with a medical card) x 100 = %
6	Data Source	Emergency Accommodation Providers/ / Social Inclusion Specialists/ Social Inclusion Managers/ Area Managers. Data is sourced from Emergency Accommodation providers who in turn send it to the RDO's and/or Social Inclusion Specialists for verification. Information is then sent by the RDO offices to the BIU for recording
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
8	Tracer Conditions	a person presenting as homeless and who required emergency accommodation who was in possession of a medical card
9	Minimum Data Set	the required minimum dataset for admission is the standard demographic information. Also the completion of the Holistic needs assessment form
10	International Comparison	Yes: e.g http://www.seattle.gov/housing/homeless/HNA_report_11-09.pdf . http://www.huduser.org/Publications/pdf/ahar.pdf

11	KPI Monitoring	KPI will be monitored on a quarterly basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Social Inclusion Specialists / Social Inclusion Managers/ Area Managers. The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a quarterly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 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	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July), <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	Metric to be included in SLA's with Service Providers. Collection template has been developed and in use to capture this KPI. Services users should be counted once in the given reporting period, i.e. Quarter.
Contact details for Data		Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie
National Lead and Directorate		Diane Nurse, Ass/National Director, Integrated Services, Tel: 01635 2337 Geraldine Luddy, Principal Officer, Department of Health, Tel: 01 635 4000

Social Inclusion: Homeless Services

1	KPI Title	Number and percentage of service users admitted to homeless emergency accommodation hostels/ facilities whose needs have been formally assessed within one week.
2	KPI Description	<p>Service User: A service user is an individual who has been assessed as being homeless and placed in an emergency accommodation hostel/ facility.</p> <p>Needs Assessment: is a detailed assessment of an individual's needs and is a fundamental component of the care planning system. It is completed in co operation with the person's key worker/ project worker and should cover the full range of a person's care and care related needs including general healthcare, mental health, addiction issues, housing, income adequacy, training & employment, life skills, etc.</p> <p>Homeless Emergency Accommodation: Emergency accommodation mainly refers to hostel type accommodation for short term / emergency use for people experiencing homelessness.</p>
3	KPI Rationale	Under national homeless policy, the HSE is responsible for the health and in house care needs (Move to top of paragraph) of homeless persons and a significant amount of HSE homeless funding is provided to meet the pay costs of care staff across the hostel network. This metric is designed to measure the number and percentage of service users admitted to emergency accommodation homeless hostels / facilities whose needs have been formally assessed within one week of the date of admission.. The implementation of a formal Needs Assessment is a key component in the effective operation of a Care Planning system and is crucial in addressing and supporting the health and care needs of homeless people to enable them to maximize their potential and return to independent living , where possible. This approach has proven internationally to significantly improve outcomes for service users with varying support needs.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centered Care, <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input checked="" type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, o Workforce, o Use of Resources, o Governance, o Leadership and Management
4	KPI Target	NSP 2012 expected activity/target – 80%
5	KPI Calculation	(a) The count of persons admitted to homeless emergency accommodation hostels/ facilities during the quarter ended 31st March, 30th June, 30th Sept and 31st December. (b) The count of persons admitted to homeless emergency accommodation hostels/ facilities whose needs have been formally assessed within one week from the date of admission, during the quarter ended 31st March, 30th June, 30th Sept and 31st December. This is reported also as a percentage in the Performance report. The percentage is calculated by the BIU. The number is cumulative in the month and each person should be counted once only
6	Data Source	Emergency Accommodation Providers/ / Social Inclusion Specialists/ Social Inclusion Managers/ Area Managers. Data is sourced from Emergency Accommodation providers who in turn send it to the RDO's and/or Social Inclusion Specialists for verification. Information is then sent by the RDO offices to the BIU for recording
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
8	Tracer Conditions	Any person presenting as homeless and deemed by the Homeless Persons Unit / Local Authority to require emergency accommodation would normally be admitted to an emergency hostel/facility if available.
9	Minimum Data Set	the required minimum dataset for admission is the standard demographic information. Also the completion of the Holistic needs assessment form
10	International Comparison	Yes: e.g. http://www.seattle.gov/housing/homeless/HNA_report_11-09.pdf . http://www.huduser.org/Publications/pdf/ahar.pdf

11	KPI Monitoring	KPI will be monitored on a quarterly basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a quarterly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 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	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July), <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	Metric to be included in SLA's with Service Providers. Collection template has been developed and in use to capture this KPI. Services users should be counted once in the given reporting period, i.e. Quarter.
Contact details for Data		Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie
National Lead and Directorate		Diane Nurse, Ass/National Director, Integrated Services, Tel: 01635 2337 Geraldine Luddy, Principal Officer, Department of Health, Tel: 01 635 4000

Social Inclusion: Homeless Services

1	KPI Title	Number and Percentage of service users admitted to homeless emergency accommodation hostels/ facilities who have a written care plan in place within two weeks.
2	KPI Description	Emergency Accommodation: Emergency accommodation mainly refers to hostel type accommodation for short term / emergency use for people experiencing homelessness. This metric is designed to measure the number and percentage of service users admitted to emergency accommodation homeless hostels / facilities that have a written care plan in place within two weeks from the date of admission. Care plan: A care plan formulated by a care worker in consultation with individual residents, their families and other appropriate professionals that describes what kind of services and care that person should receive". (Source: Quality & Fairness – A Health System for You. Health Strategy 2001)
3	KPI Rationale	Under national homeless policy the HSE is responsible for the health and in house care needs of homeless persons across the hostel network. The implementation of a formal Needs Assessment is central to the effective operation of a care planning system in addressing and supporting the health and care needs of homeless people. these care plans are prepared to enable them to maximise their potential and return to independent living, where possible. This approach has proven internationally to significantly improve outcomes for service users with varying support needs
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input checked="" type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	NSP 2012 expected activity/target – 80%
5	KPI Calculation	(a) The count of persons admitted to homeless emergency accommodation hostels/ facilities during the quarter ended 31st March, 30th June, 30th Sept and 31st December. (b) The count of persons admitted to homeless emergency accommodation hostels/ facilities whose needs have been formally assessed within one week from the date of admission, during the quarter ended 31st March, 30th June, 30th Sept and 31st December. This is reported also as a percentage in the Performance report. The percentage is calculated by the BIU. The number is cumulative in the month and each person should be counted once only
6	Data Source	Emergency Accommodation Providers/ / Social Inclusion Specialists/ Social Inclusion Managers/ Area Managers. Data is sourced from Emergency Accommodation providers who in turn send it to the RDO's and/or Social Inclusion Specialists for verification. Information is then sent by the RDO offices to the BIU for recording
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
8	Tracer Conditions	Any person presenting as homeless and deemed by the Homeless Persons Unit / Local Authority to require emergency accommodation would normally be admitted to an emergency hostel/facility if available and who is deemed in need of a written care plan as outlined by the criteria contained by the Holistic needs assessment protocol.
9	Minimum Data Set	the required minimum dataset for admission is the standard demographic information. Also the completion of the Holistic needs assessment form
10	International Comparison	Yes: e.g http://www.seattle.gov/housing/homeless/HNA_report_11-09.pdf . http://www.huduser.org/Publications/pdf/ahar.pdf

11	KPI Monitoring	KPI will be monitored on a quarterly basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Social Inclusion Specialists / Social Inclusion Managers/ Area Managers. The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a quarterly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 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	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July), <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	Metric to be included in SLA's with Service Providers. Collection template has been developed and in use to capture this KPI. Services users should be counted once in the given reporting period, i.e. Quarter.
Contact details for Data		Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie
National Lead and Directorate		Diane Nurse, Ass/National Director, Integrated Services, Tel: 01635 2337 Geraldine Luddy, Principal Officer, Department of Health, Tel: 01 635 4000

Social Inclusion: Needle Exchange

1	KPI Title	Number of Pharmacies recruited to provide Needle Exchange Programme
2	KPI Description	Pharmacies are being recruited and trained to provide a needle exchange service to persons with a substance misuse addiction. Pharmacy based Needle Exchange is being rolled out on a pilot basis for three years across the Country.
3	KPI Rationale	Needle exchange is provided to substance misusers to ensure that if persons with an addiction have to use intravenous drugs, that they do so with sterile equipment. Each unique individual who uses the service is recorded so the PNEX also provides a way in which to monitor persons who have drug issues nationwide. Needle exchange is a key element of the National Drugs Strategy. The pilot programme is a joint partnership with the Elton John AIDS Foundation who are also joint funders of the project. This initiative is intended to become a model of good practice for future service development.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input checked="" type="checkbox"/> Safe Care, <input checked="" type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	NSP recruitment 2013 target: DML 13, DNE 17, South 28, West 7. This is a National Target of 65. The national target is 130 pharmacies recruited by quarter 4 2013
5	KPI Calculation	Count the numbers of pharmacies trained and with an agreed SLA to provide the service by the end of 2013. This figure will increase gradually as the year progresses as more pharmacies are recruited.
6	Data Source	Records submitted by pharmacies and the national liaison pharmacists office.
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: end of quarter's 2 and 4.
8	Tracer Conditions	Any member of the population, service user or non service user can avail of the service for or on behalf of a service user.
9	Minimum Data Set	Anonymous service minimum dataset not applicable
10	International Comparison	Needle exchange is reported annually by 28 countries to the EMCDDA. This will be the second time that Ireland will be in a position to collect/ provide any needle exchange information.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Monitored by the National Pharmacy Needle Exchange Steering Group and National Liaison Pharmacist. Forwarded on to National Specialist for Addiction in Social Inclusion by 15th of the reporting month or previous Friday if this date falls on a weekend. Forward on to Non acute BIU on the 15th of the reporting month
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2, Q3 in Q4) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Contact details for Data		Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie
National Lead and Directorate		Brian Murphy, National Primary Care Services Manager Tel: 016352000 Michael Conroy, Principal officer 016354221

Social Inclusion: Needle Exchange

1	KPI Title	Number of unique individuals attending pharmacy needle exchange - average per month
2	KPI Description	Each service user is given a unique identifier the first time they use the service and the total number of unique service users/individuals is then calculated each month. Pharmacies are being recruited and trained to provide a needle exchange service to persons with a substance misuse addiction. Pharmacy based Needle Exchange is being rolled out on a pilot basis for three years across the Country.
3	KPI Rationale	Needle exchange is provided to substance misusers to ensure that if persons with an addiction have to use intravenous drugs, that they do so with sterile equipment. Each unique individual who uses the service is recorded so the PNEX also provides a way in which to monitor persons who have drug issues nationwide. Needle exchange is a key element of the National Drugs Strategy. The pilot programme is a joint partnership with the Elton John AIDS Foundation who are also joint funders of the project. This initiative is intended to become a model of good practice for future service development.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input checked="" type="checkbox"/> Safe Care, <input checked="" type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	NSP 2013 target: 400 unique individuals nationwide, not possible to breakdown regionally as unknown population of injecting drug users. 400 by quarter 4
5	KPI Calculation	Count the number of individuals attending pharmacy needle exchange per month and give a total at the end of the month. Average monthly figure is reported for the target.
6	Data Source	Records submitted by pharmacies and the national liaison pharmacists office.
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: end of quarter's 2 and 4.
8	Tracer Conditions	Any member of the population, service user or non service user can avail of the service for or on behalf of a service user.
9	Minimum Data Set	Anonymous service minimum dataset not applicable
10	International Comparison	Needle exchange is reported annually by 28 countries to the EMCDDA. This will be the first time that Ireland will be in a position to collect/ provide any information on numbers attending pharmacy needle exchange.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: :Monitored by the National Pharmacy Needle Exchange Steering Group and National Liaison Pharmacist. Forwarded on to National Specialist for Addiction in Social Inclusion by 15th of the reporting month or previous Friday if this date falls on a weekend. Forward on to Non acute BIU on the 15th of the reporting month
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: quarterly in arrears.
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2, Q3 in Q4) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input type="checkbox"/> Regional <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report \ Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Contact details for Data		Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie
National Lead and Directorate		Brian Murphy, National Primary Care Services Manager Tel: 016352000 Michael Conroy, Principal officer 016354221

Social Inclusion: Needle Exchange

1	KPI Title	Number of pharmacy needles exchange packs provided per month
2	KPI Description	Pharmacy pack consists of 10 "One hit kits" i.e. 1ml syringes with an inbuilt filter, 10 citric acid sachets, 10 spoons for liquefying the heroin, 10 alcohol swabs, 1 mini sharps bin, 4 condoms and a leaflet which provides information on how to access addiction services, safe injecting practices and what to do in the case of a drug overdose. Pharmacies are being recruited and trained to provide a needle exchange service to persons with a substance misuse addiction. Pharmacy based Needle Exchange is being rolled out on a pilot basis for three years across the Country.
3	KPI Rationale	Needle exchange is provided to substance misusers to ensure that if persons with an addiction have to use intravenous drugs, that they do so with sterile equipment. The contents of the pack have been specifically chosen to reduce the risk to the injecting drug user and to minimise the spread of blood borne viruses. This is an anonymous and confidential service. The number of unique clients attending each pharmacy is collated along with the number of packs given out monthly. Pharmacists strongly encourage all clients to return packs. Pharmacists encourage patients to attend addiction clinics for treatment. The number of unique individuals using the service is collated. The pilot programme is a joint partnership with the Elton John AIDS Foundation who are also joint funders of the project. This initiative is intended to become a model of good practice for future service development.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input checked="" type="checkbox"/> Safe Care, <input checked="" type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	NSP 2013 target: Q4 packs given out per region DML 500 DNE 250, South 1250, West 500. This is a national target of 10,000 pa, i.e 2,500 per quarter. Total annual target of 10,000 packs (2500 in Q4 reported 3 months in arrears)
5	KPI Calculation	The total number of packs given out by pharmacies each month for the entire year. There is no restriction on the number of packs that can be given out to each service user
6	Data Source	Records submitted by pharmacies and the national liaison pharmacists office.
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: monthly metric captured quarterly in arrears. i.e. OCT, Nov & Dec 2012 to be submitted for March PR
8	Tracer Conditions	any member of the population, service user or non service user can avail of the service for or on behalf of a service user.
9	Minimum Data Set	Anonymous service minimum dataset not applicable
10	International Comparison	Needle exchange is reported annually by 28 countries to the EMCDDA. This will be the first time that Ireland will be in a position to collect any needle exchange information.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: :Monitored by the National Pharmacy Needle Exchange Steering Group and National Liaison Pharmacist. Forwarded on to National Specialist for Addiction in Social Inclusion by 15th of the reporting month or previous Friday if this date falls on a weekend. Forward on to Non acute BIU on the 15th of the reporting month
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: Frequency: monthly metric captured quarterly in arrears. i.e. OCT, Nov & Dec 2012 to be submitted for March PR)
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html

17	Additional Information	
Contact details for Data	Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie	
National Lead and Directorate	Brian Murphy, National Primary Care Services Manager Tel: 016352000 Michael Conroy, Principal officer 016354221	

Social Inclusion: Needle Exchange

1	KPI Title	Average number of clean needles per unique individual per month
2	KPI Description	This is the average number of clean needles issued each month to unique individuals who are participating in the needle exchange programme from participating pharmacies. Service users are strongly encouraged to return used needles but are still provided with clean needles if no returns are brought back.
3	KPI Rationale	Needle exchange is provided to substance misusers to ensure that if persons with an addiction have to use intravenous drugs, that they do so with sterile equipment. Each unique individual who uses the service is recorded so the PNEX also provides a way in which to monitor persons who have drug issues nationwide. Needle exchange is a key element of the National Drugs Strategy. The pilot programme is a joint partnership with the Elton John AIDS Foundation who are also joint funders of the project. This initiative is intended to become a model of good practice for future service development.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input checked="" type="checkbox"/> Safe Care, <input checked="" type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	National pharmacy NEX 2013 target, An average of 30 clean needles per month per unique individual
5	KPI Calculation	Number of clean needles provided each month divided by the number of unique individuals attending for that month. E.g. 11600needles/400 unique individuals in the month= 29 clean needles per unique individual per month
6	Data Source	Records submitted by pharmacies and the national liaison pharmacists office.
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: end of quarter's 2 and 4.
8	Tracer Conditions	Any member of the population , service user or non service user can avail of the service for or on behalf of a service user.
9	Minimum Data Set	Anonymous service minimum dataset not applicable
10	International Comparison	Needle exchange is reported annually by 28 countries to the EMCDDA. This will be the first time that Ireland we be in a position to collect any needle exchange information.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: :Monitored by the National Pharmacy Needle Exchange Steering Group and National Liaison Pharmacist. Forwarded on to National Specialist for Addiction in Social Inclusion by 15th of the reporting month or previous Friday if this date falls on a weekend. Forward on to Non acute BIU on the 15th of the reporting month
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: Frequency: monthly metric captured quarterly in arrears. i.e. OCT, Nov & Dec 2012 to be submitted for March PR)
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Contact details for Data		Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie
National Lead and Directorate		Brian Murphy, National Primary Care Services Manager Tel: 016352000 Michael Conroy, Principal officer 016354221

Social Inclusion: Needle Exchange

1	KPI Title	Number and percentage of needle exchange packs returned to the pharmacy needle exchange
2	KPI Description	Pharmacy pack consists of 10 "One hit kits" i.e. 1ml syringes with an inbuilt filter, 10 citric acid sachets, 10 spoons for liquefying the heroin, 10 alcohol swabs, 1 mini sharps bin, 4 condoms and a leaflet which provides information on how to access addiction services, safe injecting practices and what to do in the case of a drug overdose. Pharmacies are being recruited and trained to provide a needle exchange service to persons with a substance misuse addiction. Pharmacy based Needle Exchange is being rolled out on a pilot basis for three years across the Country.
3	KPI Rationale	Needle exchange is provided to substance misusers to ensure that if persons with an addiction have to use intravenous drugs, that they do so with sterile equipment. The contents of the pack have been specifically chosen to reduce the risk to the injecting drug user and to minimise the spread of blood borne viruses. This is an anonymous and confidential service. The number of unique clients attending each pharmacy is collated along with the number of packs given out monthly. Pharmacists strongly encourage all clients to return packs. Pharmacists encourage patients to attend addiction clinics for treatment. The number of unique individuals using the service is collated. The pilot programme is a joint partnership with the Elton John AIDS Foundation who are also joint funders of the project. This initiative is intended to become a model of good practice for future service development.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care, <input type="checkbox"/> Effective Care <input checked="" type="checkbox"/> Safe Care, <input checked="" type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	NSP 2013 target: Regional target Not representative of inter-town/city variances in return rate, 40% by Q4
5	KPI Calculation	The total number of personal sharps bins returned each month divided by the total number of packs given out each month, expressed as a percentage. Calculated at the end of each month.
6	Data Source	Records submitted by pharmacies and the national liaison pharmacists office.
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: monthly metric captured quarterly in arrears. i.e. OCT, Nov & Dec 2012 to be submitted for March PR
8	Tracer Conditions	Any member of the population, service user or non service user can avail of the service for or on behalf of a service user.
9	Minimum Data Set	Anonymous service minimum dataset not applicable
10	International Comparison	Needle exchange is reported annually by 28 countries to the EMCDDA. This will be the first time that Ireland will be in a position to collect any needle exchange information.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: :Monitored by the National Pharmacy Needle Exchange Steering Group and National Liaison Pharmacist. Forwarded on to National Specialist for Addiction in Social Inclusion by 15th of the reporting month or previous Friday if this date falls on a weekend. Forward on to Non acute BIU on the 15th of the reporting month
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: Frequency: monthly metric captured quarterly in arrears. i.e. OCT, Nov & Dec 2012 to be submitted for March PR)
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	

Contact details for Data	Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie
National Lead and Directorate	Brian Murphy, National Primary Care Services Manager Tel: 016352000 Michael Conroy, Principal officer 016354221

Social Inclusion: Traveller Health Screening

1	KPI Title	Number of clients to who receive national health awareness raising/ screening programmes (breast check, cervical smear screening, men's health screening, blood pressure testing) delivered through the Traveller Health Units/ Primary Health care projects.
2	KPI Description	Monitoring of the number of clients per THU/ISA region facilitated to access National screening programmes and participating in awareness raising programmes and, where necessary referred for assessment for treatment.
3	KPI Rationale	The All Ireland Traveller Health Study - published in September 2010 - found that <ul style="list-style-type: none"> • 52% of Travellers aged 40 – 60 had been diagnosed with high blood pressure in the past 12 months compared to 35% of the general Irish Population. • 25 % of Travellers died from Heart Disease, and 19% from Cancer. Traveller Primary Health Care Projects will: <ol style="list-style-type: none"> 1) assist Traveller clients to access National Screening Programmes such as Breast Check and Cervical Check; 2) conduct awareness programmes for cardiovascular disease and, where necessary, assist those who need further assessment to be referred to PCT's and acute 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). <input checked="" type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management
4	KPI Target	NSP 2013 Target - 1,650 clients (Based on a Traveller population of 36,224 with 46% in the 18 – to 65 years of age. The target is 10% of 18-65 population per THU/Primary Health Care Project with appropriate age groups to be targeted based on current national screening guidelines).
5	KPI Calculation	Number of clients per THU assisted to access National screening programmes at the end of each six month period. Number of clients per THU participating in awareness raising programmes for Cardiovascular disease.
6	Data Source	Regional Social Inclusion Unit via Traveller Health Units
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
8	Tracer Conditions	The numbers of persons who presented for screening
9	Minimum Data Set	The required minimum dataset for this metric is standard demographic information, Diagnosis, Treatment record, referral reason. commences.
10	International Comparison	The disease profile of the Traveller community is similar to certain minority ethnic populations in other countries eg Australian Aboriginals, Native Americans.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: This KPI is submitted to each Regional Social Inclusion Specialist for oversight who in turn submit it to the national office for collation into a national return.
12	KPI Reporting Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	Plans are in place to carry out an effectiveness review of all types of needle exchange.
	Contact details for Data	Stephen Toft, Analyst, Non Acute BIU. Tel 01 6352270. Email: stephentoft1@hse.ie

National Lead and Directorate

Diane Nurse, Assistant National Director, Social Inclusion Service. Tel. 01 6201666 email diane.nurse@hse.ie
Michael Conroy, Principal officer 016354221

Palliative Care: Inpatient Units

1	KPI Title	Wait times for: i) Specialist Palliative Care Inpatient bed within 7 days ii) specialist Palliative Care inpatient bed within 1 month
2	KPI Description	This is the number of days from referral or request for transfer to the date of admission to the Specialist Palliative Care Inpatient Unit calculated and reported as a number. There are two types of referral 1 Active, 2 Inactive, pending or deferred.) 1) The term active is used to distinguish referrals that request a service to start as soon as possible from the common situation in palliative care where referrals are made in a prospective manner (referral made in advance for a service that may be required at some stage in the future). 2.) Inactive. This group are not considered to be active until a service has actually been requested. It is important not to include these prospective (also known as pending, inactive or deferred) referrals in active referrals if wait times from active referral to first seen by service are being calculated. If time of initial prospective referral is used it will artificially lengthen wait times.
3	KPI Rationale	To determine the length of time a new patient has been waiting for admission to the Specialist Palliative Care inpatient bed.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care, <input checked="" type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	NSP 2013 targets: i) Specialist Palliative Care Inpatient bed within 1 month – 98%. (DML 97%, DNE 97%, South 100%, West 98%) ii) Specialist Palliative Care Inpatient bed within 7 days – 92%. (DML 88%, DNE 80%, South 100%, West 97%)
5	KPI Calculation	0 –7days, 8 – 28 days, >28days Example, number of patients who waited for admission in the 3 cohorts outlined above divided by the total number of patients awaiting admission, multiplied by 100 = %. i.e. 0-7 = 154 patients, 8-28 = 30 patients, >28 = 6 patients. Calculation for <7 days is as follows $154/(154+30+6) \rightarrow 154/(190) \rightarrow 0.8105$, multiplied by 100 = 81.05% . Calculation for < 1 month is as follows $(154+30)/(154+30+6) \rightarrow 184/(190) \rightarrow 0.9684$, multiplied by 100 = 96.84% (This calculation is carried out in the BIU from raw numerical submitted data)
6	Data Source	Information is sourced by Specialist care units who forward to RDO office and RDO office in turn forwards to the Business Intelligence Unit, (BIU) CPCP. Data Completeness is expected at 100%. Data quality issues are addressed as they arise
	Data Completeness	
	Data Quality Issues	
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: The data is captured daily, weekly monthly etc., locally recorded and then reported monthly to the BIU.
8	Tracer Conditions	The numbers of persons diagnosed with problems associated with a Life threatening illness (not necessarily Cancer) and waiting for admission to a Specialist Palliative care unit
9	Minimum Data Set	The required minimum dataset for wait time to admission is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason. The patient then receives a Specialist palliative care medical team assessment before suitability for admission is agreed and when wait time commences.
10	International Comparison	Yes. E.g. http://www.ncpc.org.uk/mds
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 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	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input checked="" type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: Care group reports as requested by the system and possible CompStat in 2013
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Contact details for Data Manager		Stephen Toft Information Analyst Non Acute BIU. Tel 01 6352270. Email: Stephen.Toft1@hse.ie
National Lead and Directorate		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Geraldine Fitzpatrick, Principal Officer, Department of Health, 01 635 4585

Palliative Care: Inpatient Units		
1	KPI Title	Number of patients in receipt of treatment in Specialist Palliative care in-patient units
2	KPI Description	The total number of patients who were deemed as being appropriate to receive Specialist Palliative care services, who received this type of care during the month. The care was provided in a Specialist Palliative care inpatient unit hospice. Each patient is counted once only. All patients who received service are to be counted. If a patient is admitted twice then they are still counted once only.
3	KPI Rationale	To determine the total number of patients who received specialist palliative care inpatient care during the month.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care, <input checked="" type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	NSP 2013 targets: i) Number of patients in receipt of treatment – 340. DML 106 (31%) , DNE 42 (12%), South 64 (19%) , West 128 (38%)
5	KPI Calculation	The total number of patients who received inpatient care during the month. E.g. (106/340)*100 = 31% (This calculation is carried out in the BIU from raw numerical submitted data)
6	Data Source	Information is sourced by Specialist care units who forward to RDO office and RDO office in turn forwards to the Business Intelligence Unit, (BIU) CPCP. Data Completeness is expected at 100%. Data quality issues are addressed as they arise
	Data Completeness	
	Data Quality Issues	
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: The data is captured daily, weekly monthly etc., locally recorded and then reported monthly to the BIU.
8	Tracer Conditions	The numbers of persons diagnosed with problems associated with a Life threatening illness (not necessarily Cancer) who were assessed as being suitable for treatment in a Specialist Palliative care unit
9	Minimum Data Set	Set of clearly defined data that is considered to provide important information on a service. The required minimum dataset for admission is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason.
10	International Comparison	Yes. E.g. http://www.ncpc.org.uk/mds
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 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	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input checked="" type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: Care group reports as requested by the system and possible CompStat in 2013
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Contact details for Data Manager		Stephen Toft Information Analyst Non Acute BIU. Tel 01 6352270. Email: Stephen.Toft1@hse.ie

National Lead and Directorate	Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Geraldine Fitzpatrick, Principal Officer, Department of Health, 01 635 4585
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Palliative Care: Inpatient Units

1	KPI Title	Number of new patients seen or admitted to the specialist palliative care service i) Specialist Palliative Care Inpatient units ii) Specialist Palliative Care services in the community (Home Care)
2	KPI Description	These are the ages of the new patients to these types of Palliative care services. When the care is provided the patients age is recorded and grouped into 3 cohorts 0 – 17yrs 18 – 64 yrs 65 years and over
3	KPI Rationale	To determine the age of new patients to the service by cohort. This will inform service delivery and service decisions going forward especially with regard to service provision for children or older persons.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care, <input checked="" type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	i) Specialist Palliative care: 173, DML 53 (31%), DNE 23 (13%), South 37 (21%), West 60 (35%). ii) Home Care, 664 DML 178 (27%), DNE 130 (20%), South 180 (27%), West 176 (26%).
5	KPI Calculation	i) Count, total number of new patients admitted to Specialist palliative care inpatient stay during the month. E.g. $(53/173)*100 = 31\%$ (This calculation is carried out in the BIU from raw numerical submitted data) ii) Count, total number of new patients seen by the Specialist palliative care homecare team during the month. E.g. $(178/664)*100 = 27\%$ (This calculation is carried out in the BIU from raw numerical submitted data
6	Data Source	Information is sourced by Specialist care units who forward to RDO office and RDO office in turn forwards to the Business Intelligence Unit, (BIU) CPCP. Data Completeness is expected at 100%. Data quality issues are addressed as they arise
	Data Completeness	
	Data Quality Issues	
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: The data is captured daily, weekly monthly etc., locally recorded and then reported monthly to the BIU.
8	Tracer Conditions	A person who has i) the first ever admission to the specialist palliative care inpatient unit ii) the first ever face to face visit with the specialist palliative care team in the community (Home Care) and is diagnosed with problems associated with a life threatening condition (not necessarily Cancer) and who was deemed suitable for i) admission to a Specialist Palliative care unit, ii) Specialist palliative care in the community in their place of residence. (place of residence is the location at which the person normally lives including nursing homes or non acute hospital etc)
9	Minimum Data Set	Set of clearly defined data that is considered to provide important information on a service. The required minimum dataset for a person to receive either service is the Referral form with standard demographic information, Diagnosis, Treatment record and referral reason. This information is normally supplied by a medical professional
10	International Comparison	Yes. E.g. http://www.ncpc.org.uk/mds
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 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	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:

13	KPI report period	<input checked="" type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: Care group reports as requested by the system and possible CompStat in 2013
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Contact details for Data Manager		Stephen Toft Information Analyst Non Acute BIU. Tel 01 6352270. Email: Stephen.Toft1@hse.ie
National Lead and Directorate		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Geraldine Fitzpatrick, Principal Officer, Department of Health, 01 635 4585

Palliative Care: Inpatient Units		
1	KPI Title	Number of admissions to Specialist Palliative Care inpatient Units
2	KPI Description	The total number of patients who were deemed as being appropriate for admission and received treatment in a Specialist Palliative care services during the month. The care was provided in a Specialist Palliative care inpatient unit hospice. Each admission is counted. If a patient is admitted twice then they are counted twice.
3	KPI Rationale	To determine the total number of admissions to Specialist Palliative care inpatient units during the month.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care, <input checked="" type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	NSP 2013 Target – 2,892 DML 886 (31%), DNE 337 (12%), South 536 (18%), West 1133 (39%)
	KPI Calculation	Count, total number of admissions for Specialist palliative care inpatient stay during the month. E.g. (886/2892)*100 = 31% (This calculation is carried out in the BIU from raw numerical submitted data) This metric is a monthly cumulative metric, i.e. the submissions for the month is added to the previous month and compared to a profiled target. A profiled target is an mathematical portion of the yearly target
6	Data Source	Information is sourced by Specialist care units who forward to RDO office and RDO office inturn forwards to the Business Intelligence Unit, (BIU) CPCP. Data Completeness is expected at 100%. Data quality issues are addressed as they arise
	Data Completeness	
	Data Quality Issues	
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: The data is captured daily, weekly monthly etc., locally recorded and then reported monthly to the BIU.
8	Tracer Conditions	The numbers of persons diagnosed with problems associated with life threatening illness (not necessarily Cancer) whoe were suitable for admission to a Specialist Palliative care unit
9	Minimum Data Set	Set of clearly defined data that is considered to provide important information on a service. The required minimum dataset for admission is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason.
10	International Comparison	Yes. E.g. http://www.ncpc.org.uk/mds
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 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	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input checked="" type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: Care group reports as requested by the system and possible CompStat in 2013
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Contact details for Data Manager		Stephen Toft Information Analyst Non Acute BIU. Tel 01 6352270. Email: Stephen.Toft1@hse.ie
National Lead and Directorate		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Geraldine Fitzpatrick, Principal Officer, Department of Health, 01 635 4585

Palliative Care: Community Home Care

1	KPI Title	<p>Wait times for:</p> <p>1 Specialist palliative care services in the community (home care) is care provided to patients in their place of residence within 7 days</p> <ul style="list-style-type: none"> • Home • Nursing Home • Non Acute hospital <p>2 Specialist palliative care services in the community (home care) is care provided to patients in their place of residence within 1 month</p> <ul style="list-style-type: none"> • Home • Nursing Home • Non Acute hospital
2	KPI Description	<p>The Specialist palliative care in the community based team (home care) provide care in patient's place of residence .The wait times for specialist palliative care in the community (home care) is the number of days from referral or request for transfer to the date of first face to face home care visit. This is the time interval from a referral to first seen by specialist palliative care in the community (home care)services or time interval from acceptance of a referral to first seen. Time interval from active request for transfer (from one setting of Specialist Palliative Care to another) to first seen by other setting can also be calculated. If a referral to a service is made in advance of a patient needing a service e.g. a Specialist Palliative Care Acute Hospital makes a specialist palliative care in the community (home care) referral for a patient in an acute hospital but the service is to start at a future date when the patient is discharged, then the calculated period for the metric is only from when the patient is ready to receive the service.</p>
3	KPI Rationale	<p>To determine the number of days the new patient has been waiting for the first face to face specialist palliative care in the community (home care) visit</p>
	Indicator Classification	<p>Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two).</p> <p><input checked="" type="checkbox"/> Person Centred Care, <input checked="" type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management</p>
4	KPI Target	<p>NSP 2013 targets:</p> <p>i) Specialist Palliative care services in the community (home care) provided to patients in their place of residence within 7 days– 82%, (DML 81%, DNE 72%, South 82%, West 91%)</p> <p>ii) Specialist Palliative care services in the community (home care) provided to patients in their place of residence within 1 month – 99%, (DML 100%, DNE 96%, South 99%, West 99%)</p>
5	KPI Calculation	<p>0 –7days, 8 – 28 days, >28days</p> <p>Calculation example: number of patients who waited for home care services in the three cohorts (outlined above), divided by the total no. of patients who waited for services, multiplied by 100 = %. i.e. 0-7 = 154 patients, 8-28 = 30 patients, >28 = 6 patients.</p> <p>Calculation for <7 days is as follows $154/(154+30+6) \rightarrow 154/(190) \rightarrow 0.8105$, multiplied by 100 = 81.05%.</p> <p>Calculation for < 1 month is as follows $(154+30)/(154+30+6) \rightarrow 184/(190) \rightarrow 0.9684$, multiplied by 100 = 96.84% (This calculation is carried out in the BIU from raw numerical submitted data)</p>
6	Data Source	<p>Information is sourced by Specialist care units who forward to RDO office and RDO office inturn forwards to the Business Intelligence Unit, (BIU) CPCP.</p>
	Data Completeness	<p>Data Completeness is expected at 100%.</p>
	Data Quality Issues	<p>Data quality issues are addressed as they arise.</p>
7	Data Collection Frequency	<p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: The data is captured daily, weekly monthly etc., locally recorded and then reported monthly to the BIU.</p>
8	Tracer Conditions	<p>The number of persons diagnosed with problems associated with Life threatening illness (not necessarily Cancer) and waiting for first face to face specialist palliative care in the community (home care) visit.</p>
9	Minimum Data Set	<p>Set of clearly defined data that is considered to provide important information on a service. The required minimum dataset for wait time to first visit is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason. The patient then receives a first visit from a member of the specialist palliative care team in the community (Home Care).</p>
10	International Comparison	<p>Yes. E.g. http://www.ncpc.org.uk/mds</p>

11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 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	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input checked="" type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: Care group reports as requested by the system and possible CompStat in 2013
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Contact details for Data		Stephen Toft Information Analyst Non Acute BIU. Tel 01 6352270. Email: Stephen.Toft1@hse.ie
National Lead and Directorate		Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Geraldine Fitzpatrick, Principal Officer, Department of Health, 01 635 4585

Palliative Care: Community Home Care		
1	KPI Title	Number of patients in receipt of Specialist Palliative care in the community
2	KPI Description	The number of patients in receipt of specialist palliative care in the community (home care) at any time during the month. Each patient is counted once only. Specialist palliative care in the community (home care) is care provided to patients in their place of residence (home, non acute hospital or nursing home). This includes all patients in receipt of specialist palliative care in the community (home care) on the first day of the month and all new patients who receive a first face to face visit during the month.
3	KPI Rationale	To determine the total number of patients who received specialist palliative care in the community (home care) during the month. This is done as it gives an accurate account of all the patients receiving service
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care, <input checked="" type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	NSP 2013 Target - 2948 DML 653 (22%), DNE 577 (20%), South 834 (28%), West 884 (30%)
5	KPI Calculation	Count, the total number of patients who received Specialist Palliative Care in the community (home care) at any time during the month. This is a cumulative metric reported by number and percentage. The calculation is calculated in the bIU from submitted raw data. The data from each month is added and compared to a profiled target ,month by month.
6	Data Source	Information is sourced by Specialist Palliative care home care teams who forward to RDO office and RDO office inturn forwards to the Business Intelligence Unit, (BIU) CPCP.
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: The data is captured daily, weekly monthly etc., locally recorded and then reported monthly to the BIU.
8	Tracer Conditions	The numbers of persons diagnosed with problems associated with a Life threatening illness (not necessarily Cancer) and in receipt of specialist palliative care in the community (home care) in their place of residence during the month.
9	Minimum Data Set	Set of clearly defined data that is considered to provide important information on a service. The required minimum dataset for receipt of specialist palliative care in the community (home care) is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason.
10	International Comparison	Yes. E.g. http://www.ncpc.org.uk/mds
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 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	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input checked="" type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: Care group reports as requested by the system and possible CompStat in 2013
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html

17	Additional Information	
Contact details for Data	Stephen Toft Information Analyst Non Acute BIU. Tel 01 6352270. Email: Stephen.Toft1@hse.ie	
National Lead and Directorate	Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Geraldine Fitzpatrick, Principal Officer, Department of Health, 01 635 4585	

Palliative Care: Community Home Care		
1	KPI Title	Number of new patients who attended the Specialist Palliative Day Care/ Day Hospice (by age profile)
2	KPI Description	These are the ages of the new patients to specialist palliative day care/ day hospice during the month. When the care is provided the patients age is recorded and grouped into 3 cohorts 0 - 17yrs, 18 - 64yrs, 65yrs and over.
3	KPI Rationale	To determine the age of new patients to specialist palliative day care/ day hospice by cohort during the month. This will inform service delivery and determine the number of patients that receive their care outside of a specialist unit, hospital or own residence.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care, <input checked="" type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	NSP 2013 Target - 848 DML 243 (29%), DNE 177 (21%), South 245 (29%), West 183 (21%)
5	KPI Calculation	The total number of new patients who attended Specialist palliative day care/ day hospice services during the month. This metric is reported by age. The calculation is carried out in the BIU from raw numerical submitted age data.
6	Data Source	Information is sourced by Specialist day care units who forward to RDO office and RDO office in turn forwards to the Business Intelligence Unit, (BIU) CPCP. Data Completeness is expected at 100%. Data quality issues are addressed as they arise
	Data Completeness	
	Data Quality Issues	
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: The data is captured daily, weekly monthly etc., locally recorded and then reported monthly to the BIU.
8	Tracer Conditions	A person who has attended the Specialist palliative day care/ day hospice in the month and diagnosed with problems associated with a Life threatening illness (not necessarily Cancer) and who is deemed suitable to attend Specialist palliative day care/ day hospice setting.
9	Minimum Data Set	Set of clearly defined data that is considered to provide important information on a service. The required minimum dataset for a patient to attend is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason. The patient then receives a Specialist palliative care assessment before suitability for day care is agreed
10	International Comparison	Yes. E.g. http://www.ncpc.org.uk/mds
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 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	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input checked="" type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: Care group reports as requested by the system and possible CompStat in 2013
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html

17	Additional Information	
Contact details for Data	Stephen Toft Information Analyst Non Acute BIU. Tel 01 6352270. Email: Stephen.Toft1@hse.ie	
National Lead and Directorate	Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Geraldine Fitzpatrick, Principal Officer, Department of Health, 01 635 4585	

Palliative Care: Day Care		
1	KPI Title	Number of patients in receipt of Specialist palliative day care services
2	KPI Description	The number of patients in receipt of Specialist Palliative Day Care/ Day Hospice services at any time during the month. Each patient is counted once only. Specialist palliative day care/ day hospice is care provided to patients in a day care/day hospice setting. This includes all patients in receipt of specialist palliative day care/ day hospice services on the first day of the month and all new patients who attend specialist palliative day care during the month.
3	KPI Rationale	To determine the total number of patients who received Specialist palliative day care/ day hospice during the month. This is done as it gives an accurate account of all the patients receiving service.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care, <input checked="" type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	NSP 2013 Target - 331 DML 85 (25%), DNE 73 (22%), South 98 (30%), West 75 (23%)
5	KPI Calculation	Count the total number of patients who received of Specialist palliative day care/ day hospice services at any time during the month. This metric is reported by number and percentage. The calculation is calculated in the BIU from submitted raw data. The data from each month is added and compared to a profiled target ,month by month.
6	Data Source	Information is sourced by Specialist day care units who forward to RDO office and RDO office in turn forwards to the Business Intelligence Unit, (BIU) CPCP. Data Completeness is expected at 100%. Data quality issues are addressed as they arise
	Data Completeness	
	Data Quality Issues	
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: The data is captured daily, weekly monthly etc., locally recorded and then reported monthly to the BIU.
8	Tracer Conditions	The number of persons diagnosed with problems associated with Life Threatening illness (not necessarily Cancer) and in receipt of Specialist palliative care in a day care/ day hospice services.
9	Minimum Data Set	Set of clearly defined data that is considered to provide important information on a service. The required minimum dataset for receipt of Specialist palliative day care/ day hospice is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason. The patient then receives a Specialist palliative care assessment before suitability for day care is agreed.
10	International Comparison	Yes. E.g. http://www.ncpc.org.uk/mds
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 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	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details:
13	KPI report period	<input checked="" type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
15	KPI is reported in which reports ?	<input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: Care group reports as requested by the system and possible CompStat in 2013
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html

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National Lead and Directorate	Dr. Ciaran Browne, National Lead Acute Hospital Services, Tel: 635 2232 Geraldine Fitzpatrick, Principal Officer, Department of Health, 01 635 4585

Palliative Care: Community Hospitals		
1	KPI Title	Number patients in receipt of care in designated Palliative care support beds
2	KPI Description	The number of patients in receipt of care in a designated palliative care support bed. Each patient is counted once only. A palliative care support bed is a bed/ service providing an intermediate level of inpatient care for patients in a local environment typically in a designated centre for older people.
3	KPI Rationale	To determine the total number of patients who received care in designated palliative care support beds during the month.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care, <input checked="" type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care, <input type="checkbox"/> Better Health and Wellbeing, <input type="checkbox"/> Use of Information, <input type="checkbox"/> Workforce, <input type="checkbox"/> Use of Resources, <input type="checkbox"/> Governance, <input type="checkbox"/> Leadership and Management
4	KPI Target	NSP 2013 Target - 149 DML 46 , DNE 7 , South 61 , West 35
5	KPI Calculation	The total number of patients in receipt of a palliative care support bed in designated centre for older people.
6	Data Source	Information is sourced by community units units who forward to RDO office and RDO office inturn forwards to the Business Intelligence Unit, (BIU) CPCP. Data Completeness is expected at 100%. Data quality issues are addressed as they arise
	Data Completeness	
	Data Quality Issues	
7	Data Collection Frequency	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: The data is captured daily, weekly monthly etc., locally recorded and then reported monthly to the BIU.
8	Tracer Conditions	A person who requires respite, control of symptoms and end of life care (not necessarily Cancer) and who is deemed suitable for admission to a palliative care support bed.
9	Minimum Data Set	Set of clearly defined data that is considered to provide important information on a service. The required minimum dataset for admission to a palliative care support bed is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason.
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 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).
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13	KPI report period	<input checked="" type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	<input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input checked="" type="checkbox"/> Institution <input type="checkbox"/> Other – give details:
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16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
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