Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Health Service Executive

Mental Health

Key Performance Indicator Metadata 2020

Adult Mental Health Services

1	**KPI Title**	MH10 - Rate of admissions to adult acute inpatient units per 100,000 population in mental health catchment per quarter.
2	**KPI Description**	This metric is designed to measure the rate of admission per 100,000 population in mental health catchment to adult mental health acute inpatient units.
3	**KPI Rationale**	Reduced admissions could be used as a proxy measure for provision of community alternatives.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	2020 National 62.6 This target is reported cumulatively
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	n/a
5	**KPI Calculation**	Total number of admissions to acute inpatient units divided by population aged 18 or over in mental health catchment * 100,000. Rates are currently collected and calculated by HRB using existing MH catchment area populations rather than LHO area populations. This is particularly relevant given that rates are calculated per 100,000 population. More info available from HRB.
6	**Data Source**	Health Research Board to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Quarterly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Total number of admissions to acute inpatient units divided by population aged 18 or over in mental health catchment
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Quarterly
12	**KPI Reporting Frequency**	Quarterly
13	**KPI Report Period**	Q-1Q
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Adult Mental Health Services

1	**KPI Title**	MH11 - First admission rates to adult acute units (that is, first ever admission), per 100,000 population in mental health catchment area per quarter
2	**KPI Description**	First admissions are admissions of persons who were not previously admitted to the receiving hospital or unit or to any other psychiatric in-patient facility.
3	**KPI Rationale**	This metric is designed to measure first admission rates to adult acute units (that is, first ever admission). per 100,000 in the mental health catchment area.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	2020 23.3 This metric is reported cumulatively.
4a	**Target Trajectory**	NSP 2020 - This metric is reported cumulatively.
4b	**Volume Metrics**	N/a
5	**KPI Calculation**	Number of First admission to acute units (that is, first ever admission) during reporting period divided by population aged 18 years or over *100,000. First Admissions / rates are currently collected and calculated using existing MH catchment area populations rather than LHO area populations. This is particularly relevant given that rates are calculated per 100,000 population. More info available from HRB.
6	**Data Source**	Health Research Board to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Quarterly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of First admission to acute units (that is, first ever admission) during reporting period divided by population of mental health catchment area aged 18 years or over
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Quarterly
12	**KPI Reporting Frequency**	Quarterly
13	**KPI Report Period**	Q-1Q
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
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Adult Mental Health Services

1	**KPI Title**	MH12 - Acute re-admission as a percentage of admissions
2	**KPI Description**	Rate of readmission as a % of all admissions
3	**KPI Rationale**	This metric is designed to measure the percentage of patients readmitted to adult mental health acute inpatient units and is linked to the earlier metric on Total admissions – see comments there.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	Target 2020 63%: This metric is reported cumulatively.
4a	**Target Trajectory**	
4b	**Volume Metrics**	N/A
5	**KPI Calculation**	1. Total No. of Admissions minus total number of first admissions = total no. of readmissions 2. Total no. of readmissions is divided by total admissions and presented as percentage.
6	**Data Source**	Health Research Board to NBIU Non acute Team
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Quarterly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	1. Total No. of Admissions minus total number of first admissions = total no. of readmissions 2. Total no. of readmissions is divided by total admissions and presented as percentage
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Quarterly
12	**KPI Reporting Frequency**	Quarterly
13	**KPI Report Period**	Q-1Q
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
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Adult Mental Health Services

1	**KPI Title**	MH13 - Inpatient readmission rates to adult acute units per 100,000 population in mental health catchment area per quarter
2	**KPI Description**	Re-admissions are admissions of persons who were either previously admitted to the receiving hospital or unit or to any other psychiatric in-patient facility. The relevant number is calculated by subtracting the number of first admissions from total admissions and expressed as a rate per 100,000 head of population in mental health catchment area.
3	**KPI Rationale**	This metric is designed to measure readmission rates to acute units, per 100,000 population. Readmission rates can be an indicator of the effectiveness of interventions and/or an indicator of the prevalence of severe and enduring mental illness requiring episodic inpatient interventions.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	Target 2020: 39.4 This metric is reported cumulatively.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	N/A
5	**KPI Calculation**	Re-admissions are admissions of persons who were either previously admitted to the receiving hospital or unit or to any other psychiatric in-patient facility. The relevant number is calculated by subtracting the number of first admissions from total admissions and expressed as a rate per 100,000 head of population in mental health catchment area.
6	**Data Source**	Health Research Board to NBIU Non acute team
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Quarterly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of Admissions to acute units, Number of First admission to acute units (that is, first ever admission),
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Quarterly
12	**KPI Reporting Frequency**	Quarterly
13	**KPI Report Period**	Q-1Q
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
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Adult Mental Health Services

1	**KPI Title**	MH14 - Number of adult acute inpatient beds per 100,000 population in the mental health catchment area per quarter
2	**KPI Description**	The total number of acute psychiatric beds within the mental health catchment per 100,000 population.
3	**KPI Rationale**	The metric tracks the number of acute inpatient beds per 100,000 population to be measured against the recommendations in A Vision for Change
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	Target 2020: 21.0. This metric is reported cumulatively.
4a	**Target Trajectory**	
4b	**Volume Metrics**	N/A
5	**KPI Calculation**	Number of acute Inpatient places / Population *100,000 / rates are currently collected and calculated by HRB using existing MH catchment area populations rather than LHO area populations. This is particularly relevant given that rates are calculated per 100,000 population. More info available from HRB.
6	**Data Source**	Health Research Board to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Quarterly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of acute Inpatient places, Population of Mental Health Catchment
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Quarterly
12	**KPI Reporting Frequency**	Quarterly
13	**KPI Report Period**	Q-1Q
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
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Adult Mental Health Services

1	KPI Title	MH15 - Number of adult involuntary admissions
2	KPI Description	HRB (NPIRS) definition: The legal status recorded by NPIRS is that recorded on admission. Changes may occur in legal status following admission but this is not recorded by the NPIRS. In addition in accordance with 16(1)A of the Mental Health Act 2001 details of all Admission Orders must be provided to the Mental Health Commission.
3	KPI Rationale	The metric collects data of the number of adult service users who are admitted involuntarily under the Mental Health Act.
3a	Indicator Classification	National Scorecard Quadrant b) Access
4	National Target	NSP 2020 expected activity 2,043 reported cumulatively
4a	Target Trajectory	a) Performance targets constant over the full year
4b	Volume Metrics	CHO1 (166) CHO2 (216) CHO3 (134) CHO4 (291) CHO5 (140) CHO6 (196) CHO7 (265) CHO8 (248) CHO9 (387)
5	KPI Calculation	Count.
6	Data Source	Health Research Board to National Business Information Unit.
6a	Data Sign Off	Submission at CHO
6b	Data Quality Issues	N/A
7	Data Collection Frequency	Quarterly
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set MDS	Number of adult involuntary admissions
10	International Comparison	Not applicable at this time
11	KPI Monitoring	Quarterly
12	KPI Reporting Frequency	Quarterly
13	KPI Report Period	Q-1Q
14	KPI Reporting Aggregation	CHO Area and individual teams
15	KPI is reported in which reports?	Annual Report; Performance Report/Profile; MDR
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	Additional Information	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
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Adult Mental Health Services

1	**KPI Title**	MH16 - Rate of adult involuntary admissions per 100,000 population in mental health catchment per quarter
2	**KPI Description**	HRB (NPIRS) definition : The legal status recorded by NPIRS is that recorded on admission. Changes may occur in legal status following admission but this is not recorded by the NPIRS. In addition in accordance with 16(1)A of the Mental Health Act 2001 details of all Admission Orders must be provided to the Mental Health
3	**KPI Rationale**	The metric collects data of the rate per 100,000 population of adults admitted involuntarily under the Mental Health Act 2001.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	Target 2020: National 10.4. This metric is reported cumulatively.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	N/A
5	**KPI Calculation**	No. of involuntary admissions expressed as a rate per 100,000 population.
6	**Data Source**	Health Research Board to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Quarterly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of involuntary admissions of adults
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Quarterly
12	**KPI Reporting Frequency**	Quarterly
13	**KPI Report Period**	Q-1Q
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
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Adult Mental Health Services

1	**KPI Title**	MH18 - Number of General Adult Mental Health Teams
1a	**KPI Short Title**	Number of GAMH Teams
2	**KPI Description**	The General Adult Community Mental Health Teams coordinates a range of interventions for individuals in a variety of locations, including home care treatment, day hospital, outpatient facilities and in-patient units, and interacts and liaises with specialist catchment or regional services to coordinate the care of individuals who require special consideration. A Vision for Change recommends that there should be one General Adult Community Mental Health Team per 50,000 population
3	**KPI Rationale**	The General Adult Community Mental Health Team is the core mechanism for the delivery of secondary care mental health services to adults and the KPI is to monitor the provision of community mental health services
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	2020 National expected activity 112. This metric is reported PIT.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	
5	**KPI Calculation**	
6	**Data Source**	From General Adult Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	The number of General Adult Community Mental Health Teams
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
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Adult Mental Health Services

1	**KPI Title**	MH19 - Number of referrals (including re-referred) received by General Adult Mental Health Teams
1a	**KPI Short Title**	No. of referrals received by GAMH
2	**KPI Description**	This metric is designed to measure the number of referrals received (i) over 16y and less than 18 years old (ii) over 18th birthday referred to each General Adult Mental Health Team during the reporting period. First or re-referrals to General Adult Services generally take place in an outpatient clinic or may occasionally be seen in the patient's home. The patients are for the most part home-based. Homes include : - a private house (owned or rented etc) - a private or public residential setting e.g. a nursing home - transitory accommodation e.g. hostel for the homeless , refugee centre or B&B Referrals do not include:i. Referrals between members of the community mental health team.ii. Specialist clinics such as for adults with ADHD.iii. Referrals seen in hospital settings (whether general , maternity , geriatric etc)
3	**KPI Rationale**	The KPI is intended to measure the level of demand for the General Adult Community Mental Health Team
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	2020 National expected activity 44,801. This metric is reported cumulatively.
4a	**Target Trajectory**	
4b	**Volume Metrics**	CHO1 (3,781) CHO2 (7,036) CHO3 (4,461) CHO4 (6,629) CHO5 (4,665) CHO6 (2,384) CHO7 (5,200) CHO8 (6,394) CHO9 (4,251)
5	**KPI Calculation**	
6	**Data Source**	From General Adult Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of referrals by age group
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
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Adult Mental Health Services

1	**KPI Title**	MH20 - Number of referrals (including re-referred) accepted by General Adult Mental Health Team
1a	**KPI Short Title**	no. of referrals accepted by GAMH
2	**KPI Description**	This metric is designed to measure the number of referrals accepted based on the criteria operated by General Adult Mental Health Team in the reported period by (i) over 16y and less than 18 years old (ii) over 18th birthday referred to each General Adult Mental Health Team during the reporting period.
3	**KPI Rationale**	The purpose of this metric is to gain information over time on the numbers of referrals accepted to support the monitoring and evaluating of trends over time per area/ region and across the service nationally.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	2020 National expected activity NSP 38,082. This metric is reported cumulatively.
4a	**Target Trajectory**	This metric is reported cumulatively.
4b	**Volume Metrics**	CHO1 (3,214) CHO2 (5,981) CHO3 (3,791) CHO4 (5,634) CHO5 (3,967) CHO6 (2,025) CHO7 (4,422) CHO8 (5,436) CHO9 (3,612)
5	**KPI Calculation**	
6	**Data Source**	From General Adult Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of referrals accepted, by age
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Adult Mental Health Services

1	**KPI Title**	MH21 - Number of new (including re-referred) cases offered first appointment and Seen or DNA by wait time by (i) over 16y and less than 18 years old (ii) over 18th birthday referred to General Adult Mental Health Team during the reporting period. i) <1 Weeks ii) > 1 Weeks but <= 2 Weeks iii) > 2 Weeks but <= 3 Weeks iv) > 3 Weeks but <= 4 Weeks v) > 4 Weeks but <= 8 Weeks vi) > 8 Weeks but <= 12 Weeks vii) >12 Weeks
1a	**KPI Short Title**	No. of GAMH accepted referrals seen or DNA in the month
2	**KPI Description**	Refers to General Adult Community Mental Health Team. Re-referred case: A re-referral is the referral of a patient to a health professional of a specific profession, when the patient has been previously referred to the same profession for the same condition at the same location. A re-referral always marks the start of a new episode. Wait time: The number of weeks from the point at which the referral is received by a member of the General Adult MH team to the day the assessment takes place (less any delay due to client postponement of assessment) excluding both of those days. Sub Definitions: Wait Time is day referral received in the office when it is date stamped by admin staff. (Triage in each service should be efficient and mechanisms put in place it occurs as close as possible to day received). A DNA if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or re-offer appointment this would then be constituted as a DNA
3	**KPI Rationale**	Wait times to General Adult MH team for mental health assessment provide a measure of service access in the community and the timeliness of that access.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	2020 National expected activity NSP 35,035. This metric is reported cumulatively.
4a	**Target Trajectory**	This metric is reported cumulatively.
4b	**Volume Metrics**	CHO1 (3,699) CHO2 (5,923) CHO3 (3,008) CHO4 (5,620) CHO5 (3,771) CHO6 (2,170) CHO7 (3,531) CHO8 (4,036) CHO9 (3,277)
5	**KPI Calculation**	
6	**Data Source**	From General Adult Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of referrals , number appointments offered, number of DNA, by age
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
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Adult Mental Health Services

1	**KPI Title**	MH22 - Number of new (including re-referred) cases offered first appointment and Seen by wait time by (i) over 16y and less than 18 years old (ii) over 18th birthday referred to General Adult Mental Health Team during the reporting period. i) <1 Weeks ii) > 1 Weeks but <= 2 Weeks iii) > 2 Weeks but <= 3 Weeks iv) > 3 Weeks but <= 4 Weeks v) > 4 Weeks but <= 8 Weeks vi) > 8 Weeks but <= 12 Weeks vii) >12 Weeks
1a	**KPI Short Title**	No. of GAMH accepted referrals seen in the current month
2	**KPI Description**	Refers to General Adult Community Mental Health Team. Re-referred case: A re-referral is the referral of a patient to a health professional of a specific profession, when the patient has been previously referred to the same profession for the same condition at the same location. A re-referral always marks the start of a new episode. Wait time: The number of Weeks from the point at which the referral is received by a member of the General Adult MH team to the day the assessment takes place (less any delay due to client postponement of assessment) excluding both of those days. Sub Definitions: Wait Time is day referral received in the office when it is date stamped by admin staff. (Triage in each service should be efficient and mechanisms put in place it occurs as close as possible to day received)A DNA if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or re-offer appointment this would then be constituted as a DNA
3	**KPI Rationale**	Wait times to General Adult MH team for mental health assessment provide a measure of service access in the community and the timeliness of that access.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	2020 National expected activity NSP 28,716 This metric is reported cumulatively.
4a	**Target Trajectory**	This metric is reported cumulatively
4b	**Volume Metrics**	CHO1 (3,032) CHO2 (4,855) CHO3 (2,465) CHO4 (4,606) CHO5 (3,090) CHO6 (1,778) CHO7 (2,898) CHO8 (3,309) CHO9 (2,686)
5	**KPI Calculation**	
6	**Data Source**	From General Adult Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of referrals ,number appointments offered, number of DNA, by age
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Adult Mental Health Services

1	**KPI Title**	MH23 - Number of new (including re-referred) cases offered first appointment and DNA by wait time by (i) over 16y and less than 18 years old (ii) over 18th birthday referred to General Adult Mental Health Team during the reporting period. i) <1 Weeks ii) > 1 Weeks but <= 2 Weeks iii) > 2 Weeks but <= 3 Weeks iv) > 3 Weeks but <= 4 Weeks v) > 4 Weeks but <= 8 Weeks vi) > 8 Weeks but <= 12 Weeks vii) >12 Weeks
1a	**KPI Short Title**	No. of GAMH accepted referrals DNA in the current month
2	**KPI Description**	Refers to General Adult Community Mental Health Team. Re-referred case: A re-referral is the referral of a patient to a health professional of a specific profession, when the patient has been previously referred to the same profession for the same condition at the same location. A re-referral always marks the start of a new episode. Wait time: The number of weeks from the point at which the referral is received by a member of the General Adult MH team to the day the assessment takes place (less any delay due to client postponement of assessment) excluding both of those days. Sub Definitions: Wait Time is day referral received in the office when it is date stamped by admin staff. (Triage in each service should be efficient and mechanisms put in place it occurs as close as possible to day received)A DNA if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or re-offer appointment this would then be constituted as a DNA
3	**KPI Rationale**	Wait times to General Adult MH team for mental health assessment provide a measure of service access in the community and the timeliness of that access.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	2020 National expected activity NSP 6,319 This metric is reported cumulatively.
4a	**Target Trajectory**	This metric is reported cumulatively
4b	**Volume Metrics**	CHO1 (667) CHO2 (1,068) CHO3 (543) CHO4 (1,014) CHO5 (681) CHO6 (392) CHO7 (636) CHO8 (727) CHO9 (591)
5	**KPI Calculation**	
6	**Data Source**	From General Adult Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of referrals , number appointments offered, number of DNA, by age
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Adult Mental Health Services

1	**KPI Title**	MH24 - %. of new (including re-referred) General Adult Community Mental Health Team cases offered appointment and DNA in the current month
1a	**KPI Short Title**	% of new (including re-referred) General Adult Community Mental Health Team cases offered appointment and DNA in the current month
2	**KPI Description**	Percentage of new (including re-referred) cases offered first appointment and that did not attend (DNA) appointment when referred to General Adult Mental Health Team during the reporting period, by (i) over 16y and less than 18 years old (ii) over 18th birthday A DNA: if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or re-offer appointment this would then be constituted as a DNA
3	**KPI Rationale**	The focus is to reduce the DNA rates for new and re-referrals to Community Mental Health Teams in CAMHS, General Adult and Psychiatry of Later Life. The aim to introduce a standard response to DNAs in each service and identify areas that have a significant DNA problem.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	NSP 2020 target: 22%. This metric is reported cumulatively.
4a	**Target Trajectory**	22%
4b	**Volume Metrics**	N/A
5	**KPI Calculation**	Count number of new cases DNA and divide by total number of new appointments offered and calculate the percentage against overall number of new/re-referred cases accepted.
6	**Data Source**	From General Adult Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of appointments offered
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Adult Mental Health Services

1	**KPI Title**	MH25 - Number of cases closed/discharged by General Adult Mental Health Team
1a	**KPI Short Title**	Number of cases closed/discharged by GAMH
2	**KPI Description**	This metric is designed to measure the number of cases closed/discharged to other service or to Primary Care or through case of death (i) over 16y and less than 18 years old (ii) over 18th birthday from the General Adult Mental Health Team during the reporting period (include in cases closed/discharged those cases that were seen and discharged from service in initial assessment)
3	**KPI Rationale**	KPI is designed to measure throughput of General Adult Community Mental Health Teams in conjunction with other indicators.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	2020 National expected activity 30,462. This metric is reported cumulatively.
4a	**Target Trajectory**	
4b	**Volume Metrics**	CHO1 (2,570) CHO2 (4,784) CHO3 (3,032) CHO4 (4,506) CHO5 (3,174) CHO6 (1,619) CHO7 (3,538) CHO8 (4,348) CHO9 (2,891)
5	**KPI Calculation**	
6	**Data Source**	From General Adult Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of cases, number discharged
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Adult Mental Health Services

1	**KPI Title**	MH26 - Number of Psychiatry of Later Life Mental HealthTeams
1a	**KPI Short Title**	No. of PLL MH Teams
2	**KPI Description**	The Psychiatry of Later Life Service coordinates a range of interventions for individuals in a variety of locations, including home care treatment, day hospital, outpatient facilities and in-patient units, and interacts and liaises with specialist catchment or regional services to coordinate the care of individuals who require special consideration.
3	**KPI Rationale**	Measure of the provision of Psychiatry of Later Life Teams by population as per Vision recommendations
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	2020 National expected activity 32. This metric is reported PIT
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	CHO 1 (3) CHO 2 (5) CHO 3 (3) CHO 4 (4) CHO 5 (5) CHO 6 (2) CHO 7 (3) CHO 8 (5) CHO 9 (2)
5	**KPI Calculation**	
6	**Data Source**	From Psychiatry of Later Life Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of Teams
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Adult Mental Health Services

1	**KPI Title**	MH27 - Number of referrals (including re-referred) received by Psychiatry of Later Life Mental Health Teams
1a	**KPI Short Title**	No. of PLL MH referrals received
2	**KPI Description**	This metric is designed to measure the number of referrals received by the Psychiatry of Later Life Service team during the reporting period for patients over their 65th birthday. First or re/referrals to the Psychiatry of Old Age Service consist mostly of those whom will be seen on domiciliary assessment but some may be seen in OPD settings. The patients are for the most part home-based. Homes include : - a private house (owned or rented etc) - a private or public residential setting e.g. a nursing home - transitory accommodation e.g. hostel for the homeless , refugee centre or B&B Referrals do not include:i. Referrals between different members of the team.ii. Referrals to specialist clinics such as memory clinics.iii. Referrals seen in hospital settings. (whether general , maternity , geriatric etc)
3	**KPI Rationale**	The purpose of this metric is to gain information over time on the numbers of referrals accepted to support the monitoring and evaluating of trends over time per area/ region and across the service nationally.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	2020 National expected activity 12,593. This metric is reported cumulatively.
4a	**Target Trajectory**	
4b	**Volume Metrics**	CHO1, (1,465) CHO2, (1,922) CHO3, (1,311) CHO4 (839) CHO5 (1,461) CHO6, (1,107) CHO7, (969) CHO8, (1,929) CHO9, (1,590)
5	**KPI Calculation**	
6	**Data Source**	From Psychiatry of Later Life Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of referrals
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Adult Mental Health Services

1	**KPI Title**	MH28 - Number of referrals (including re-referred) accepted by Psychiatry of Later Life Mental Health Team
1a	**KPI Short Title**	No. of PLL MH referrals accepted
2	**KPI Description**	This metric is designed to measure the number of referrals accepted based on the criteria operated the Psychiatry of Later Life Team during the reporting period for patients over their 65th birthday
3	**KPI Rationale**	The purpose of this metric is to gain information over time on the numbers of referrals accepted to support the monitoring and evaluating of trends over time per area/ region and across the service nationally.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	2020 National expected activity 10,707. This metric is reported cumulatively.
4a	**Target Trajectory**	
4b	**Volume Metrics**	CHO1 (1,245) CHO2, (1,635) CHO3 (1,115) CHO4 (713) CHO5 (1,242) CHO6 (941) CHO7 (824) CHO8 (1,640) CHO9, (1,352)
5	**KPI Calculation**	
6	**Data Source**	From Psychiatry of Later Life Community Mental Health Team to ISA Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of referrals
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Adult Mental Health Services

1	**KPI Title**	MH29 - Number of new (including re-referred) cases offered first appointment and Seen or DNA in the Psychiatry of Old Age Mental Health Team by wait time during the reporting period for patients over their 65th birthday i) <1 Weeks ii) > 1 Weeks but <= 2 Weeks iii) > 2 Weeks but <= 3 Weeks iv) > 3 Weeks but <= 4 Weeks v) > 4 Weeks but <= 8 Weeks vi) > 8 Weeks but <= 12 Weeks vii) >12 Weeks
1a	**KPI Short Title**	No. of PLL MH accepted referrals seen and DNA in the current month
2	**KPI Description**	Refers to Psychiatry of Later Life Mental Health Service. Re-referred case: A re-referral is the referral of a patient to a health professional of a specific profession, when the patient has been previously referred to the same profession for the same condition at the same location. A re-referral always marks the start of a new episode. Wait time: The number of Weeks from the point at which the referral is received by a member of the Community MH team to the day the assessment takes place (less any delay due to client postponement of assessment) excluding both of those days. Sub Definitions: Wait Time is day referral received in the office when it is date stamped by admin staff .(Triage in each service should be efficient and mechanisms put in place that this occurs as close as possible to day received) A DNA: if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or re-offer appointment this would then be constituted as a DNA. A domiciliary DNA is defined as a confirmed appointment for the domiciliary but the person not being present in the house when the clinician arrives to carry out the assessment.
3	**KPI Rationale**	Wait times to Psychiatry of Later Life MH team for mental health assessment provide a measure of service access in the community and the timeliness of that access.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	2020 National expected activity 9,170. This metric is reported cumulatively.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	CHO1 (1,284) CHO2 (1,465) CHO3, (1,049) CHO4 (593) CHO5 (1,182) CHO6 (890) CHO7 (553) CHO8 (982) CHO9 (1,172)
5	**KPI Calculation**	
6	**Data Source**	From Psychiatry of Later Life Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	number of appointments offered
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Adult Mental Health Services

1	**KPI Title**	MH30 - Number of new (including re-referred) cases offered first appointment and Seen in the Psychiatry of Later Life Mental Health Team by wait time during the reporting period for patients over their 65th birthdayi) <1 Weeks ii) > 1 Weeks but <= 2 Weeksiii) > 2 Weeks but <= 3 Weeksiv) > 3 Weeks but <= 4 Weeksv) > 4 Weeks but <= 8 Weeksvi) > 8 Weeks but <= 12 Weeksvii) >12 Weeks
1a	**KPI Short Title**	No. of PLL MH accepted referrals seen in the current month
2	**KPI Description**	Refers to Psychiatry of Later Life Mental Health Service. Re-referred case: A re-referral is the referral of a patient to a health professional of a specific profession, when the patient has been previously referred to the same profession for the same condition at the same location. A re-referral always marks the start of a new episode. Wait time: The number of Weeks from the point at which the referral is received by a member of the Community MH team to the day the assessment takes place (less any delay due to client postponement of assessment) excluding both of those days. Sub Definitions: Wait Time is day referral received in the office when it is date stamped by admin staff .(Triage in each service should be efficient and mechanisms put in place that this occurs as close as possible to day received) A DNA: if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or re-offer appointment this would then be constituted as a DNA. A domiciliary DNA is defined as a confirmed appointment for the domiciliary but the person not being present in the house when the clinician arrives to carry out the assessment.
3	**KPI Rationale**	Wait times to Psychiatry of Later Life MH team for mental health assessment provide a measure of service access in the community and the timeliness of that access.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	2020 National expected activity 8,896 This metric is reported cumulatively.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	CHO1 (1,245) CHO2 (1,420) CHO3 (1,017) CHO4 (576) CHO5 (1,147) CHO6 (863) CHO7 (538) CHO8 (953) CHO9 (1,137)
5	**KPI Calculation**	
6	**Data Source**	From Psychiatry of Later Life Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of appointments offered
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Adult Mental Health Services

1	**KPI Title**	MH31 - Number of new (including re-referred) cases offered first appointment and DNA in the Psychiatry of Later Life Mental Health Team by wait time during the reporting period for patients over their 65th birthdayi) <1 Weeks ii) > 1 Weeks but <= 2 Weeksiii) > 2 Weeks but <= 3 Weeksiv) > 3 Weeks but <= 4 Weeksv) > 4 Weeks but <= 8 Weeksvi) > 8 Weeks but <= 12 Weeksvii) >12 Weeks
1a	**KPI Short Title**	No. of PLL MH accepted referrals DNA in the current month
2	**KPI Description**	Refers to Psychiatry of Later Life Mental Health Service. Re-referred case: A re-referral is the referral of a patient to a health professional of a specific profession, when the patient has been previously referred to the same profession for the same condition at the same location. A re-referral always marks the start of a new episode. Wait time: The number of Weeks from the point at which the referral is received by a member of the Community MH team to the day the assessment takes place (less any delay due to client postponement of assessment) excluding both of those days. Sub Definitions: Wait Time is day referral received in the office when it is date stamped by admin staff .(Triage in each service should be efficient and mechanisms put in place that this occurs as close as possible to day received) A DNA: if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or re-offer appointment this would then be constituted as a DNA. A domiciliary DNA is defined as a confirmed appointment for the domiciliary but the person not being present in the house when the clinician arrives to carry out the assessment.
3	**KPI Rationale**	Wait times to Psychiatry of Later Life MH team for mental health assessment provide a measure of service access in the community and the timeliness of that access.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	2020 National expected activity 274
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	CHO1 (39) CHO2 (45) CHO3 (32) CHO4 (17) CHO5 (35) CHO6 (27) CHO7 (15) CHO8 (29) CHO9 (35)
5	**KPI Calculation**	
6	**Data Source**	From Psychiatry of Later Life Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of appointments offered
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Adult Mental Health Services

1	**KPI Title**	MH32 - %. of new (including re-referred) Later Life Psychiatry Team cases offered appointment and DNA in the current month
1a	**KPI Short Title**	% of PLL MH accepted referrals DNA in the current month
2	**KPI Description**	Number of new (including re-referred) cases offered first appointment and and that did not attend (DNA) appointment in the Psychiatry of Later Life Mental Health Team during the reporting period for patients over their 65th birthday. A DNA: if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or re-offer appointment this would then be constituted as a DNA. A domiciliary DNA is defined as a confirmed appointment for the domiciliary but the person not being present in the house when the clinician arrives to carry out the assessment.
3	**KPI Rationale**	The focus is to reduce the DNA rates for new and re-referrals to Community Mental Health Teams in CAMHS, General Adult and Psychiatry of Later Life. The aim to introduce a standard response to DNAs in each service and identify areas that have a significant DNA problem.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	NSP 2020 target: 3%. This metric is reported cumulatively.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	N/A
5	**KPI Calculation**	Count number of new cases DNA and divide by total number of new appointments offered and calculate the percentage against overall number of new/re-referred cases accepted
6	**Data Source**	From Psychiatry of Later Life Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of appointments offered
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Adult Mental Health Services

1	**KPI Title**	MH33 - Number of cases closed/discharged by Psychiatry of Later Life Mental Health Team
1a	**KPI Short Title**	No. of PLL MH cases closed
2	**KPI Description**	This metric is designed to measure the number of cases closed/discharged to other service or Primary Care or through case of death by the Psychiatry of Later Life Team during the reporting period for patients over their 65th birthday.(include in cases closed/discharged those cases that were seen and discharged from service in initial assessment)
3	**KPI Rationale**	The purpose of this metric is to gain information over time on the numbers of cases closed/discharged and monitoring and evaluating the trends over time per area/ region and across the service nationally.
3a	**Indicator Classification**	National Scorecard Quadrant a) Quality and Safety b) Access
4	**National Target**	2020 National expected activity 8,969 This metric is reported cumulatively.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	CHO1 (923) CHO2 (1,211) CHO3 (826) CHO4 (529) CHO5 (920) CHO6 (698) CHO7(610) CHO8 (1,215) CHO9 (1,002)
5	**KPI Calculation**	
6	**Data Source**	From Psychiatry of Later Life Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of cases discharged, closed
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Adult Mental Health Services

1	**KPI Title**	MH8- Number of admissions to adult acute inpatient units
1a	**KPI Short Title**	Number of admissions to adult acute inpatient units
2	**KPI Description**	This metric is designed to measure the total number admitted to adult mental health acute inpatient units.
3	**KPI Rationale**	This metric is used to support the preparation of indicators based on rates of admission. Reduced admissions could be used as a proxy measure for provision of community alternatives. Similarly, a trend of increasing admission rates could alert the Area Mental Health Management Team to a lack of capacity in community settings and/or increased demand for secondary care mental health services
3a	**Indicator Classification**	National Scorecard Quadrant a) Qualty and Safety b) Access
4	**National Target**	2020 National expected activity 12,147 This metric is reported cumulatively.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	CHO1 (1,319) CHO2 (1,177) CHO3 (885) CHO4 (2,033) CHO5 (1,346) CHO6 (967) CHO7 (1,271) CHO8 (1,526) CHO9 (1,624)
5	**KPI Calculation**	Count.
6	**Data Source**	Health Research Board to National Business Information Unit
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Quarterly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	The total number admitted to adult mental health acute inpatient units.
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Quarterly
12	**KPI Reporting Frequency**	Quarterly
13	**KPI Report Period**	Q-1Q
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Adult Mental Health Services

1	**KPI Title**	MH9 - Median length of stay
1a	**KPI Short Title**	Median length of stay
2	**KPI Description**	Median length of stay is the middle number in the sequence of numbers created by listing all of the figures for length of stay during the period of less than one year. Where such a sequence has an even amount of numbers, the median is the average of the two middle numbers.
3	**KPI Rationale**	Measurement of length of stay can be used as a comparator of service provision in conjunction with other data having regard to evidence base for addressing certain diagnosis. It can also act as a proxy for effective community secondary care provision.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	NSP 2020 11.0 This metric is reported PIT.
4a	**Target Trajectory**	11.0
4b	**Volume Metrics**	N/A
5	**KPI Calculation**	Median length of stay is the middle number in the sequence of numbers created by listing all of the figures for length of stay during the period of less than one year. Where such a sequence has an even amount of numbers, the median is the average of the two middle numbers.
6	**Data Source**	Health Research Board to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Quarterly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	The middle number in the sequence of numbers created by listing all of the figures for length of stay during the period of less than one year. Where such a sequence has an even amount of numbers, the median is the average of the two middle numbers.
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Quarterly
12	**KPI Reporting Frequency**	Quarterly
13	**KPI Report Period**	Q-1Q
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	KPI Title	MH34 - Number of Child and Adolescent Community Mental Health Teams
1a	KPI Short Title	No. of CAMHS Teams
2	KPI Description	Vision for Change recommended the number of Community Child and Adolescent Mental Health Teams.
3	KPI Rationale	Implementation of recommendations of A Vision for Change and to address the Regulations of the Mental Health Commission.
3a	Indicator Classification	National Scorecard Quadrant b) Access
4	National Target	2020 National expected activity 74. This metric is reported PIT
4a	Target Trajectory	a) Performance targets constant over the full year
4b	Volume Metrics	
5	KPI Calculation	
6	Data Source	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	Data Sign Off	Submission at CHO
6b	Data Quality Issues	N/A
7	Data Collection Frequency	Monthly
8	Tracer Conditions	1 team per 50,000 head of population as per VFC
9	Minimum Data Set MDS	No of CAMHS Commnunity Mental Health Teams
10	International Comparison	No
11	KPI Monitoring	Monthly
12	KPI Reporting Frequency	Monthly
13	KPI Report Period	M
14	KPI Reporting Aggregation	CHO Area and individual teams
15	KPI is reported in which reports?	Annual Report; Performance Report/Profile; MDR
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	Additional Information	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH35 - Number of Child and Adolescent Day Hospital Teams
1a	**KPI Short Title**	No. of CAMHS Day Hospital Teams
2	**KPI Description**	Vision for Change has recommended the number of Child and Adolescent Day Hospital Teams.
3	**KPI Rationale**	Implementation of recommendations of A Vision for Change and to address the Regulations of the Mental Health Commission.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	N/A. This metric is reported PIT
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	N/A
5	**KPI Calculation**	
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	As per VFC
9	**Minimum Data Set MDS**	As per VFC
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	KPI Title	MH36 - Number of Paediatric Liaison Teams
1a	KPI Short Title	Number of Paediatric Liaison Teams
2	KPI Description	Vision for Change recommended number of Paediatric Liaison Teams.
3	KPI Rationale	Monitor implementation of recommendations of A Vision for Change
3a	Indicator Classification	National Scorecard Quadrant b) Access
4	National Target	N/A. This metric is reported PIT
4a	Target Trajectory	a) Performance targets constant over the full year
4b	Volume Metrics	N/A
5	KPI Calculation	
6	Data Source	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	Data Sign Off	Submission at CHO
6b	Data Quality Issues	N/A
7	Data Collection Frequency	Monthly
8	Tracer Conditions	1 team per 300,000 head of population as per VFC
9	Minimum Data Set MDS	As per VFC
10	International Comparison	yes
11	KPI Monitoring	Monthly
12	KPI Reporting Frequency	Monthly
13	KPI Report Period	M
14	KPI Reporting Aggregation	CHO Area and individual teams
15	KPI is reported in which reports?	Annual Report; Performance Report/Profile; MDR
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	Additional Information	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH37 - Number of Child/Adolescent admissions to HSE/HSE Funded Child and Adolescent mental health in-patient units
1a	**KPI Short Title**	No. of CAMHS admissions to HSE/HSE funded CAMHS inpatient units
2	**KPI Description**	Number of admissions to HSE Child and Adolescent Inpatient Units.
3	**KPI Rationale**	To monitor the number of admissions to each C&A unit
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	2020 National Expected Activity 325. This metric is reported cumulatively.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	CHO 2 (90) CHO 4 (81) CHO 7 (100) CHO 9 (54)
5	**KPI Calculation**	
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Inpatient psychiatric treatment is usually indicated for children and adolescents with severe psychiatric disorders such as schizophrenia, depression, and mania. Other presentations include severe complex medical-psychiatric disorders such as anorexia / bulimia. Admission may also be required for clarification of diagnosis and appropriate treatment or for the commencement and monitoring of medication. The increasing incidence of the more severe mental health disorders in later adolescence increases the need for inpatient admission.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details. For each admission a form is sent to the Mental Health Commission informing of admission
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH38-41 - Number of children/adolescents admitted to adult HSE mental health inpatient units: i) <16 yrs ii) <17 yrs iii) <18 yrs
1a	**KPI Short Title**	No. of children/adolescents admitted to adult HSE mental health inpatient units
2	**KPI Description**	Number of children/adolescents admitted to adult HSE mental health inpatient units.
3	**KPI Rationale**	The Mental Health Commission code of practice on regulating the admission of children under 18 to adult inpatient units. From July 1st 2009, no child under 16 is to be admitted to an adult inpatient unit except in exceptional circumstances, from December 2010, no child under 17 can be admitted to an adult inpatient unit except under exceptional circumstances. With effect from 1st December 2011, no child under 18 should be admitted to an adult inpatient unit unless in exceptional circumstances. This metric is to monitor compliance with the code of practice.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	2020 National expected activity 30 This metric is reported cumulatively.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	<18 yrs (<30)
5	**KPI Calculation**	
6	**Data Source**	Mental Health Commission to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	The Mental Health Commission set a timeline for achievement of this goal. From July 2009 no admission of children under the age of 16 years, except in specified exceptional circumstances, to adult units was to take place. In December 2010 this age limit increased to include children under the age of 17 years. In December 2011 this increased to include all children under the age of 18 years.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details. For each admission a form is sent to the Mental Health Commission informing of admission
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH43 - Number of child/adolescent referrals (including re-referred) received by mental health services
1a	**KPI Short Title**	No. of referrals received by CAMHs
2	**KPI Description**	This metric is designed to measure the number of child/ adolescents (i) under 16yrs and (ii) over 16years but not yet reached their 18th birthday referred to each CAMH Service during the reporting period.
3	**KPI Rationale**	The purpose of this metric is to gain information over time on the numbers of referrals to support the monitoring and evaluating of trends over time per area/ region and across the service nationally.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	2020 National Expected Activity 18,128 This metric is reported cumulatively
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	CHO1 (1,448) CHO2 (1,788) CHO3 (1,720) CHO4 (2,314) CHO5 (2,155) CHO6 (1,925) CHO7 (2,235) CHO8 (3,049) CHO9 (1,494)
5	**KPI Calculation**	The total number of child/adolescent referrals received each month
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH44 - No. of child / adolescent referrals (including re-referred) accepted by Mental Health Services
1a	**KPI Short Title**	No. of referrals accepted by CAMHS
2	**KPI Description**	This metric is designed to measure the number child/ adolescent (i) under 16y and (ii) over 16y but not yet reached their 18th birthday accepted by each CAMH Service during the reporting period.
3	**KPI Rationale**	The purpose of this metric is to gain information over time on the numbers of referrals accepted, based on the criteria operated by the CAMHS team in that particular reporting period and monitoring and evaluating the trends over time per HSE region and across the service nationally. .
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	2020 National Expected Activity 12,697 This metric is reported cumulatively.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	CHO1 (1,014) CHO2 (1,252) CHO3 (1,204) CHO4 (1,622) CHO5 (1,510) CHO6 (1,348) CHO7 (1,565) CHO8 (2,136) CHO9 (1,046)
5	**KPI Calculation**	The total number of child/adolescent referrals accepted each month
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH45 - No. of new (including re-referred) CAMHs Team cases offered first appointment for the current month (seen and DNA)
1a	**KPI Short Title**	No. of CAMHS accepted referrals offered first appointment in the current month (seen and DNA)
2	**KPI Description**	Number of new (including re-referred) child / adolescent cases seen or Did Not Attend their first appointment
3	**KPI Rationale**	To monitor trends in relation to referrals..
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	2020 National Expected Activity 11,974 This metric is reported cumulatively.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	CHO1 (969) CHO2 (1,216) CHO3 (1,653) CHO4 (1,461) CHO5 (1,216) CHO6 (1,167) CHO7 (1,345) CHO8 (1,882) CHO9 (1,065)
5	**KPI Calculation**	Count number of new appointments offered and subtract those who did not attend.
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH46 - No. of new (including re-referred) child/adolescent referrals seen in the current month
1a	**KPI Short Title**	No. of accepted referrals seen by CAMHS in the current month
2	**KPI Description**	Number of new (including re-referred) child / adolescent cases seen or Did Not Attend their first appointment
3	**KPI Rationale**	To monitor trends in relation to referrals..
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	2020 National expected activity: 10,833 This metric is reported cumulatively.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	CHO1 (877) CHO2 (1,102) CHO3 (1,498) CHO4 (1,323) CHO5 (1,100) CHO6 (1,055) CHO7 (1,215) CHO8 (1,703) CHO9 (960)
5	**KPI Calculation**	Count number of new appointments offered and subtract those who did not attend.
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH47 - No. of new (including re-referred) child/adolescent referrals offered appointment and DNA in the current month
2	**KPI Description**	Number of new (including re-referred) child / adolescent cases seen or Did Not Attend their first appointment
3	**KPI Rationale**	To monitor trends in relation to referrals..
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	2020 National Expected Activity : 1,141. This metric is reported cumulatively.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	CHO1 (92) CHO2 (114) CHO3 (155) CHO4 (138) CHO5 (116) CHO6 (112) CHO7 (130) CHO8 (179) CHO9 (105)
5	**KPI Calculation**	Count number of new appointments offered and subtract those who did not attend.
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	

Child & Adolescent

1	**KPI Title**	MH48 - %. of new (including re-referred) child/adolescent referrals offered appointment and DNA in the current month
1a	**KPI Short Title**	% of CAMHS accepted referrals DNA in the current month
2	**KPI Description**	Number of new (including re-referred) child / adolescent cases and Did Not Attend their first appointment
3	**KPI Rationale**	The focus is to reduce the DNA rates for new and re-referrals to Community Mental Health Teams in CAMHS, General Adult and Psychiatry of Old Age. The aim to introduce a standard response to DNAs in each service and identify areas that have a significant DNA problem.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	10%. This metric is reported cumulatively.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	N/A
5	**KPI Calculation**	Count number of new cases DNA and divide by total number of new appointments offered and calculate the percentage against overall number of new/re-referred cases accepted
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details, Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH49 - Number of cases closed/discharged by CAMHS service
1a	**KPI Short Title**	Number of cases closed/discharged by CAMHS service
2	**KPI Description**	This metric is designed to measure the number of cases closed/discharged from each CAMH Service during the reporting period.
3	**KPI Rationale**	The purpose of this metric is to gain information over time on the numbers of cases closed/discharged and monitoring and evaluating the trends over time per area/ region and across the service nationally.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	2020 National Expected Activity 10,762 This metric is reported cumulatively.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	CHO1 (863) CHO2 (1,053) CHO3 (1,014) CHO4 (1,373) CHO5 (1,274) CHO6 (1,143) CHO7 (1,350) CHO8 (1,787) CHO9 (905)
5	**KPI Calculation**	Total number of child/adolescent cases closed/discharged.
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Cases are closed or discharged back to GP, Other CAMHS, Other Community Service and Adult Service
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.Discharge summary letter
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH50 - Total No. to be seen for a first appointment at the end of each month.
1a	**KPI Short Title**	Total no. to be seen for a first appointment at the end of each month
2	**KPI Description**	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment).
3	**KPI Rationale**	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	NSP 2020 expected activity 1,894. This metric is reported PIT
4a	**Target Trajectory**	Performance targets constant over the full year
4b	**Volume Metrics**	CHO1 (247) CHO2 (22) CHO3 (127) CHO4 (400) CHO5 (135) CHO6 (329) CHO7 (148) CHO8 (301) CHO9 (185)
5	**KPI Calculation**	The number of child/adolescent on waiting list at the each month by time length of time on wait list.
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH51 - Total No. to be seen by CAMHS waiting 0-3 months
1a	**KPI Short Title**	Total No. to be seen by CAMHS waiting 0-3 months
2	**KPI Description**	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment).
3	**KPI Rationale**	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	NSP 2020 National Expected Activity 1,071 This metric is reported PIT
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	CHO1 (149) CHO2 (20) CHO3 (69) CHO4 (166) CHO5 (103) CHO6 (159) CHO7 (112) CHO8 (189) CHO9 (104)
5	**KPI Calculation**	The number of child/adolescent on waiting list at the each quarter by time length of time on wait list. .
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH52 - Total No. to be seen by CAMHS waiting 3-6 months
1a	**KPI Short Title**	Total No. to be seen by CAMHS waiting 3-6 months
2	**KPI Description**	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment).
3	**KPI Rationale**	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	NSP 2020 Expected Activity 462 This metric is reported PIT.
4a	**Target Trajectory**	A) Performance targets constant over the full year
4b	**Volume Metrics**	CHO 1 (56) CHO 2 (2) CHO 3 (37) CHO 4 (116) CHO 5 (22) CHO 6 (94) CHO 7 (24) CHO 8 (66) CHO 9 (45)
5	**KPI Calculation**	The number of child/adolescent on waiting list at the each quarter by time length of time on wait list.
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH53 - Total No. to be seen by CAMHS waiting 6-9 months
1a	**KPI Short Title**	Total No. to be seen by CAMHS waiting 6-9 months
2	**KPI Description**	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment).
3	**KPI Rationale**	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	NSP 2020 National Expected Activity 220. This metric is reported PIT.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	CHO 1 (24) CHO 2 (0) CHO 3 (13) CHO 4 (59) CHO 5 (6) CHO 6 (51) CHO 7 (7) CHO 8 (38) CHO 9 (22)
5	**KPI Calculation**	The number of child/adolescent on waiting list at the each quarter by time length of time on wait list.
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH54 - Total No. to be seen by CAMHS waiting 9-12 months
1a	**KPI Short Title**	Total no. to be seen by CAMHS waiting 9-12 months
2	**KPI Description**	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment).
3	**KPI Rationale**	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	NSP 2020 National Expected Activity 141 This metric is reported PIT.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	CHO 1 (18) CHO 2 (0) CHO 3 (8) CHO 4 (59) CHO 5 (4) CHO 6 (25) CHO 7 (5) CHO 8 (8) CHO 9 (14)
5	**KPI Calculation**	The number of child/adolescent on waiting list at the each quarter by time length of time on wait list.
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH55 - Total No. to be seen by CAMHS waiting > 12 months
1a	**KPI Short Title**	Total No. to be seen by CAMHS waiting > 12 months
2	**KPI Description**	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment).
3	**KPI Rationale**	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	NSP 2020 0 This metric is reported PIT.
4a	**Target Trajectory**	0
4b	**Volume Metrics**	0
5	**KPI Calculation**	The number of child/adolescent on waiting list at the each quarter by time length of time on wait list.
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH59 - Total No. to be seen by CAMHS waiting 15 months - 18 months
1a	**KPI Short Title**	Total No. to be seen by CAMHS waiting 15-18 months
2	**KPI Description**	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment).
3	**KPI Rationale**	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	N/A. This metric is reported PIT.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	0
5	**KPI Calculation**	The number of child/adolescent on waiting list at the each quarter by time length of time on wait list.
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH60 - Total No. to be seen by CAMHS waiting 18 months - 21 months
1a	**KPI Short Title**	Total No. to be seen by CAMHS waiting 18-21 months
2	**KPI Description**	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment).
3	**KPI Rationale**	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	N/A. This metric is reported PIT.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	0
5	**KPI Calculation**	The number of child/adolescent on waiting list at the each quarter by time length of time on wait list.
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH61 - Total No. to be seen by CAMHS waiting 21 months - 24 months
1a	**KPI Short Title**	Total No. to be seen by CAMHS waiting 21-24 months
2	**KPI Description**	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment).
3	**KPI Rationale**	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
3a	**Indicator Classification**	National Scorecard Quadrant a) Quality and Safety b) Access
4	**National Target**	N/A. This metric is reported PIT.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	0
5	**KPI Calculation**	The number of child/adolescent on waiting list at the each quarter by time length of time on wait list.
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH62 - Total No. to be seen by CAMHS waiting 24 months - 27 months
1a	**KPI Short Title**	Total No. to be seen by CAMHS waiting 24-27 months
2	**KPI Description**	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment).
3	**KPI Rationale**	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	N/A. This metric is reported PIT.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	0
5	**KPI Calculation**	The number of child/adolescent on waiting list at the each quarter by time length of time on wait list.
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH64 - Total No. to be seen by CAMHS waiting 30 months - 33 months
1a	**KPI Short Title**	Total No. to be seen by CAMHS waiting 30-33 months
2	**KPI Description**	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment).
3	**KPI Rationale**	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	N/A. This metric is reported PIT.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	0
5	**KPI Calculation**	The number of child/adolescent on waiting list at the each quarter by time length of time on wait list.
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH65- Total No. to be seen by CAMHS waiting 33 months - 36 months
1a	**KPI Short Title**	Total No. to be seen by CAMHS waiting 33-36 months
2	**KPI Description**	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment).
3	**KPI Rationale**	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	N/A. This metric is reported PIT.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	0
5	**KPI Calculation**	The number of child/adolescent on waiting list at the each quarter by time length of time on wait list.
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH66 - Total No. to be seen by CAMHS waiting 36 months - 39 months
1a	**KPI Short Title**	Total No. to be seen by CAMHS waiting 36-39 months
2	**KPI Description**	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment).
3	**KPI Rationale**	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	N/A. This metric is reported PIT.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	0
5	**KPI Calculation**	The number of child/adolescent on waiting list at the each quarter by time length of time on wait list.
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH67 - Total No. to be seen by CAMHS waiting 39 months - 42 months
1a	**KPI Short Title**	Total No. to be seen by CAMHS waiting 39-42 months
2	**KPI Description**	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment).
3	**KPI Rationale**	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	N/A. This metric is reported PIT.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	0
5	**KPI Calculation**	The number of child/adolescent on waiting list at the each quarter by time length of time on wait list.
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH68 - Total No. to be seen by CAMHS waiting 42 months - 45 months
1a	**KPI Short Title**	Total No. to be seen by CAMHS waiting 42-45 months
2	**KPI Description**	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment).
3	**KPI Rationale**	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	N/A. This metric is reported PIT.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	0
5	**KPI Calculation**	The number of child/adolescent on waiting list at the each quarter by time length of time on wait list.
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH69- Total No. to be seen by CAMHS waiting 45 months - 48 months
1a	**KPI Short Title**	Total No. to be seen by CAMHS waiting 45-48 months
2	**KPI Description**	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment).
3	**KPI Rationale**	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	N/A. This metric is reported PIT.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	0
5	**KPI Calculation**	The number of child/adolescent on waiting list at the each quarter by time length of time on wait list.
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH70 - Total No. to be seen by CAMHS waiting > 48 months
1a	**KPI Short Title**	Total No. to be seen by CAMHS waiting > 48 months
2	**KPI Description**	Wait time: The time elapsed from the point at which the referral is received by a member of the CAMHS team to the day the assessment takes place (less any delay due to client postponement of assessment).
3	**KPI Rationale**	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	N/A. This metric is reported PIT.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	0
5	**KPI Calculation**	The number of child/adolescent on waiting list at the each quarter by time length of time on wait list.
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH72 - % of accepted referrals / re-referrals offered first appointment and seen within 12 months by Child and Adolescent Community Mental Health Teams excluding DNAs
1a	**KPI Short Title**	% to be seen for a first appointment within 12 months
2	**KPI Description**	Wait time: The number of weeks/ months from the point at which the referral is received by a member of the CAMHS Community Mental Health Team to the day the assessment takes place (less any delay due to client postponement of assessment) and excluding both of those days.
3	**KPI Rationale**	Wait times to CAMHS for mental health assessment provide a measure of the response time of the service.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	NSP 2020 - 95% This metric is reported Cumulative
4a	**Target Trajectory**	
4b	**Volume Metrics**	95%
5	**KPI Calculation**	Count of cases seen as a % of all seen within 12 months
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to Performance Management and Improvement Unit
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	MH73 - % of urgent referrals to Child and Adolescent Mental Health Teams responded to within three working days
1a	**KPI Short Title**	% of urgent referrals to Child and Adolescent Mental Health Teams responded to within three working days
2	**KPI Description**	% of urgent referrals to Child and Adolescent Mental Health Teams responded to within three working days
3	**KPI Rationale**	NEW KPI 2019
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	NSP 2020 100% This metric is reported Cumulative
4a	**Target Trajectory**	
4b	**Volume Metrics**	> 80%
5	**KPI Calculation**	Sum of urgent referrals, 0-15 and 16/17 years old responded to within 3 days divided by all urgent referrals responds time.
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to Performance Management and Improvement Unit
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	Teams Number of Active Cases
1a	**KPI Short Title**	Short title
2	**KPI Description**	The total number of cases currently active in the team at the end of March and at the end of September.
3	**KPI Rationale**	Allows the service to measure Caseload trends across teams and caseload can then be compared per whole time equvilent numbers.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	N/A KPI. This is a point in time metric
4a	**Target Trajectory**	a) Performance targets constant over the full year
5	**KPI Calculation**	Count
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	File on case must be open i.e not discharged to another service.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	
11	**KPI Monitoring**	Quarterly
12	**KPI Reporting Frequency**	Quarterly
13	**KPI Report Period**	Q
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

Child & Adolescent

1	**KPI Title**	Total Number of 'face to face' Consultation Appointments
1a	**KPI Short Title**	Total Number of 'face to face' Consultation Appointments
2	**KPI Description**	The total number of 'face to face' Consultation Appointments,Clinic,Home,Hospital,School or Other
3	**KPI Rationale**	The purpose of this metric is to gain information over time on the numbers of appointments offered by the CAMHS team in that particular reporting period and monitoring and evaluating the trends over time per HSE region and across the service nationally.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	N/A KPI. This is a point in time metric.
4a	**Target Trajectory**	a) Performance targets constant over the full year
4b	**Volume Metrics**	
5	**KPI Calculation**	Count
6	**Data Source**	From CAMHS Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	File on case must be open i.e not discharged to another service.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

NSP Metrics

1	**KPI Title**	MH1- % of accepted referrals / re-referrals offered first appointment within 12 weeks by General Adult Community Mental Health Teams
1a	**KPI Short Title**	General Adult % Accepted referals / re offered first appointment within 12 weeks.
2	**KPI Description**	Wait time: The number of weeks from the point at which the referral is received by a member of the General Adult Community Mental Health team to the day the assessment takes place (less any delay due to client postponement of assessment) and excluding both of those days.
3	**KPI Rationale**	Wait times to access General Adult Community Mental Health Team for a mental health assessment provides a measure of service availability in the community and the timeliness of that access.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	NSP 2020 - 90%. This metric is reported cumulatively.
4a	**Target Trajectory**	90%
4b	**Volume Metrics**	N/A
5	**KPI Calculation**	Count number of new cases seen within 12 weeks and divide by number of new appointments offered within 12 weeks and calculate the percentage against overall number of new/re-referred cases accepted.
6	**Data Source**	From General Adult Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of accepted referrals/re-referrals; number of accepted referrals. ?Re-referrals within time frame;
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report/ Performance Report/Profile/ MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

NSP Metrics

1	**KPI Title**	MH2- % of accepted referrals / re-referrals offered first appointment and seen within 12 weeks by General Adult Community Mental Health Teams
1a	**KPI Short Title**	General Adult % of accepted referrals / re-referrals offered first appointment and seen within 12 weeks
2	**KPI Description**	Wait time: The number of weeks from the point at which the referral is received by a member of the General Adult Community Mental Health team to the day the assessment takes place (less any delay due to client postponement of assessment) and excluding both of those days.
3	**KPI Rationale**	Wait times to access General Adult Community Mental Health Team for a mental health assessment provides a measure of service availability in the community and the timeliness of that access.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	NSP 2020 - 75%. This metric is reported cumulatively.
4a	**Target Trajectory**	75%
4b	**Volume Metrics**	N/A
5	**KPI Calculation**	Count number of new cases seen within 12 weeks and divide by number of new appointments offered within 12 weeks and calculate the percentage against overall number of new/re-referred cases accepted.
6	**Data Source**	From General Adult Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of accepted referrals/re-referrals; number of accepted referrals. Re-referrals within time frame;
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report/ Performance Report/Profile/ MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

NSP Metrics

1	**KPI Title**	MH22 - Number of Adult Referrals seen by Mental Health Services
1a	**KPI Short Title**	No. of adult referrals seen by mental health services
2	**KPI Description**	Refers to General Adult Community Mental Health Team. Re-referred case: A re-referral is the referral of a patient to a health professional of a specific profession, when the patient has been previously referred to the same profession for the same condition at the same location. A re-referral always marks the start of a new episode. Wait time: The number of weeks from the point at which the referral is received by a member of the General Adult MH team to the day the assessment takes place (less any delay due to client postponement of assessment) excluding both of those days. Wait Time: The number of weeks from the point at which the referral is received by a member of the General Adult MH team to the day assessment takes place (less any delay due to client postponement of assessment) excluding both of those days. Sub Definitions: Wait time is day referral received in the office when it is date stamped by admin staff. (Triage in each service should be efficient and mechanisms put in place it occurs as close as possible to day received). A DNA if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or re-offer appointment this would then be constituted as a DNA
3	**KPI Rationale**	Wait times to General Adult MH team for mental health assessment provide a measure of service access in the community and the timeliness of that access.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	NSP 2020, Expected Activity 28,716 This Metric is measured as Cumulative
4a	**Target Trajectory**	N.A.
4b	**Volume Metrics**	CHO1 (2525) CHO2 (4424) CHO3 (2450) CHO4 (4138) CHO5 (3465) CHO6 (2273) CHO7 (2822) CHO8 (3632) CHO9 (2987)
5	**KPI Calculation**	Count (Cumulative)
6	**Data Source**	From General Adult Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of referrals, number appointments offered, number of DNA, by age
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

NSP Metrics

1	**KPI Title**	MH24- %. of new (including re-referred) General Adult Community Mental Health Team cases offered appointment and DNA in the current month
1a	**KPI Short Title**	General Adult % DNA in current month.
2	**KPI Description**	Percentage of new (including re-referred) cases offered first appointment and that did not attend (DNA) appointment when referred to General Adult Mental Health Team during the reporting period, by (i) over 16y and less than 18 years old (ii) over 18th birthday. A DNA: if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or re-offer appointment this would then be constituted as a DNA
3	**KPI Rationale**	The focus is to reduce the DNA rates for new and re-referrals to Community Mental Health Teams in CAMHS, General Adult and Psychiatry of Old Age. The aim to introduce a standard response to DNAs in each service and identify areas that have a significant DNA problem.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	NSP 2020 target: <22%. This metric is reported cumulatively.
4a	**Target Trajectory**	<22%
4b	**Volume Metrics**	N/A
5	**KPI Calculation**	Count number of new cases DNA and divide by total number of new appointments offered and calculate the percentage against overall number of new/re-referred cases accepted.
6	**Data Source**	From General Adult Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	number of appointments offered
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M-1M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

NSP Metrics

1	**KPI Title**	MH3- % of accepted referrals / re-referrals offered first appointment within 12 weeks by Psychiatry of Later Life Community Mental Health Teams
1a	**KPI Short Title**	PLL % of accepted referrals / re-referrals offered first appointment within 12 weeks
2	**KPI Description**	Wait time: The number of weeks from the point at which the referral is received by a member of the Psychiatry of Later Life Community Mental Health team to the day the assessment takes place (less any delay due to client postponement of assessment) and excluding both of those days.
3	**KPI Rationale**	Wait times to access Psychiatry of Later Life Community Mental Health Team for mental health assessment provides a measure of service availability in the community and the timeliness of that access.
3a	**Indicator Classification**	National Scorecard Quadrant a) Quality and Safety
4	**National Target**	NSP 2020 target:98%. This metric is reported cumulatively.
4a	**Target Trajectory**	98%
4b	**Volume Metrics**	N/A
5	**KPI Calculation**	Count number of new cases seen within 12 weeks and divide by number of new appointments offered within 12 weeks and calculate the percentage against the overall number of new/re-referred cases accepted.
6	**Data Source**	From General Adult Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of accepted referrals/re-referrals; numer of accepted referrals/re-referrals within timeframe
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M-1M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report/ Performance Report/Profile/ MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

NSP Metrics

1	**KPI Title**	MH30 - No. of new (including re-referred) Psychiatry of Later Life Team cases seen in the current month
1a	**KPI Short Title**	No. of Psychiatry of Later Life referrals seen by mental health services
2	**KPI Description**	Refers to Psychiatry of Later Life Mental Health Service. Re-referred case: A re-referral is the referral of a patient to a health professional of a specific profession, when the patient has been previously referred to the same profession for the same condition at the same location. A re-referral always marks the start of a new episode. Wait time: The number of weeks from the point at which the referral is received by a member of the Community MH team to the day the assessment takes place (less any delay due to client postponement of assessment) excluding both of those days. Sub Definitions: Wait Time is day referral received in the office when it is date stamped by admin staff .(Triage in each service should be efficient and mechanisms put in place that this occurs as close as possible to day received) A DNA: if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or re-offer appointment this would then be constituted as a DNA. A domiciliary DNA is defined as a confirmed appointment for the domiciliary but the person not being present in the house when the clinician arrives to carry out the assessment.
3	**KPI Rationale**	Wait times to Psychiatry of Later Life MH team for mental health assessment provide a measure of service access in the community and the timeliness of that access.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	NSP 2020 Expected Activity 8,896 This metric is reported cumulatively.
4a	**Target Trajectory**	N.A.
4b	**Volume Metrics**	CHO1 1,217 CHO2 1,550 CHO3 1,101 CHO4 311 CHO5 1,210 CHO6 952 CHO7 463 CHO8 1,001 CHO9 1,091
5	**KPI Calculation**	Count (Cumulative)
6	**Data Source**	From General Adult Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of appointments offered
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M-1M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

NSP Metrics

1	**KPI Title**	MH32- %. of new (including re-referred) Later Life Psychiatry Team cases offered appointment and DNA in the current month
1a	**KPI Short Title**	PLL % of DNA in Current Month
2	**KPI Description**	Number of new (including re-referred) cases offered first appointment and and that did not attend (DNA) appointment in the Psychiatry of Later Life Mental Health Team during the reporting period for patients over their 65th birthday. A DNA: if an appointment is offered and the patient fails to attend or make contact in sufficient time as to allow the service to reschedule or re-offer appointment this would then be constituted as a DNA. A domiciliary DNA is defined as a confirmed appointment for the domiciliary but the person not being present in the house when the clinician arrives to carry out the assessment.
3	**KPI Rationale**	The focus is to reduce the DNA rates for new and re-referrals to Community Mental Health Teams in CAMHS, General Adult and Psychiatry of Later Life. The aim to introduce a standard response to DNAs in each service and identify areas that have a significant DNA problem.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	NSP 2020 target: <3%. This metric is reported cumulatively.
4a	**Target Trajectory**	<3%
4b	**Volume Metrics**	N/A
5	**KPI Calculation**	Count number of new cases DNA and divide by total number of new appointments offered and calculate the percentage against overall number of new/re-referred cases accepted.
6	**Data Source**	From General Adult Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of appointments offered
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M-1M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

NSP Metrics

1	**KPI Title**	MH4- % of accepted referrals / re-referrals offered first appointment and seen within 12 weeks by Psychiatry of Later Life Community Mental Health Teams
1a	**KPI Short Title**	PLL % of accepted referrals / re-referrals offered first appointment and seen within 12 weeks
2	**KPI Description**	Wait time: The number of weeks from the point at which the referral is received by a member of the Psychiatry of Later Life Community Mental Health team to the day the assessment takes place (less any delay due to client postponement of assessment) and excluding both of those days.
3	**KPI Rationale**	Wait times to access Psychiatry of Later Life Community Mental Health Team for mental health assessment provides a measure of service availability in the community and the timeliness of that access.
3a	**Indicator Classification**	National Scorecard Quadrant a) Quality and Safety
4	**National Target**	NSP 2020 target: 95%. This metric is reported cumulatively.
4a	**Target Trajectory**	95%
4b	**Volume Metrics**	N/A
5	**KPI Calculation**	Count number of new cases seen within 12 weeks and divide by number of new appointments offered within 12 weeks and calculate the percentage against the overall number of new/re-referred cases accepted.
6	**Data Source**	From General Adult Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of accepted referrals/re-referrals; numer of accepted referrals/re-referrals within timeframe
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report/ Performance Report/Profile/ MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

NSP Metrics

1	**KPI Title**	MH43 - Number of child/adolescent referrals (including re-referred) received by mental health services
1a	**KPI Short Title**	No. of CAMHs referrals received by mental health services
2	**KPI Description**	This metric is designed to measure the number of child/ adolescents (i) under 16yrs and (ii) over 16 years but not yet reached their 18th birthday referred to each CAMH Service during the reporting period.
3	**KPI Rationale**	The purpose of this metric is to gain information over time on the numbers of referrals to support the monitoring and evaluating of trends over time per area/ region and across the service nationally.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	NSP 2020 Expected Activity 18,128 This metric is reported cumulatively.
4a	**Target Trajectory**	N.A.
4b	**Volume Metrics**	CHO1(1,404) CHO2 (1,691) CHO3 (1,953) CHO4 (2,204) CHO5 (1,867) CHO6 (1,954) CHO7 (2,537) CHO8 (3,021) CHO9 (1,497)
5	**KPI Calculation**	Count Cumulative– the total number of child/adolescent referrals received each month
6	**Data Source**	From General Adult Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

NSP Metrics

1	**KPI Title**	MH46 - No. of new (including re-referred) child/adolescent referrals seen in the current month
1a	**KPI Short Title**	No. of CAMHs referrals seen in the current month by mental health services
2	**KPI Description**	Number of new (including re-referred) child / adolescent cases seen for their first appointment
3	**KPI Rationale**	To monitor trends in relation to referrals..
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	NSP 2020 Expected Activity 10,833
4a	**Target Trajectory**	N.A.
4b	**Volume Metrics**	CHO1 (880) CHO2 (1,125) CHO3 (1,389) CHO4 (1,519) CHO5 (897) CHO6 (1,121) CHO7 (1,274) CHO8 (1,824) CHO9 (804)
5	**KPI Calculation**	Count number of new appointments offered and subtract those who did not attend
6	**Data Source**	From General Adult Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

NSP Metrics

1	**KPI Title**	MH48- %. of new (including re-referred) child/adolescent referrals offered appointment and DNA in the current month
1a	**KPI Short Title**	CAMHS % offered appointment and DNA
2	**KPI Description**	Number of new (including re-referred) child / adolescent cases and Did Not Attend their first appointment
3	**KPI Rationale**	The focus is to reduce the DNA rates for new and re-referrals to Community Mental Health Teams in CAMHS, General Adult and Psychiatry of Old Age. The aim to introduce a standard response to DNAs in each service and identify areas that have a significant DNA problem.
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	NSP 2020 target <10%. This metric is reported cumulatively.
4a	**Target Trajectory**	<10%
4b	**Volume Metrics**	N/A
5	**KPI Calculation**	Count number of new cases DNA and divide by total number of new appointments offered and calculate the percentage against overall number of new/re-referred cases accepted.
6	**Data Source**	From General Adult Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority, while those deemed to be routine are placed on a waiting list to be seen.
9	**Minimum Data Set MDS**	Patient Name, Address, Date of Birth, Referral source, General Practitioners details,Parental/Guardian consent forms. Parent/Guardian contact details.
10	**International Comparison**	No
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

NSP Metrics

1	**KPI Title**	MH5- Admissions of children to HSE Child and Adolescent Acute Inpatient Units as a % of the total number of admissions of children to mental health acute inpatient units
1a	**KPI Short Title**	CAMHs Admission to Adult Units as a % of the total number of admissions of children to mental health acute inpatient units
2	**KPI Description**	This metric is designed to measure the total number of HSE/HSE funded Child and Adolescent Acute Inpatient admissions as a percentage of all acute inpatient admissions of children and adolescents whether admitted to HSE/HSE funded CAMHS acute inpatient units and or HSE/HSE funded Adult Mental Health Acute Inpatient Units and excluding admissions to private units.
3	**KPI Rationale**	This is a quality metric to measure compliance with the Mental Health Commission regulation in respect of admission of children and adolescents to age appropriate acute inpatient units. It is also designed to monitor the operation of the HSE/HSE funded Child and Adolescent Acute Inpatient units and demonstrate the benefits realisation from the investment in CAMHS acute inpatient provision.
3a	**Indicator Classification**	National Scorcard Quadrant a) Quality and Safety
4	**National Target**	NSP 2020 target: 75%. This metric is reported cumulatively.
4a	**Target Trajectory**	75%
4b	**Volume Metrics**	N/A
5	**KPI Calculation**	Count of all admissions of children to HSE/HSE funded CAMHs Acute Inpatient Units, count of all admissions of children and adolescents to HSE/HSE funded Adult Acute Mental Health Inpatient Units; Sum of both counts. Calculate percentage of number of children and adolescents admitted to HSE/HSE funded CAMHs inpatient units as against total number of admissions of children and adolescents excluding admissions to private units.
6	**Data Source**	From General Adult Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	The number of children and adolescents admitted to HSE/HSE funded CAMHS Inpatient Units; The number of children and adolescents admitted to HSE/HSE funded Adult Acute Mental Health Inpatient Units
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

NSP Metrics

1	**KPI Title**	MH57- Percentage of Bed days used in HSE Child and Adolescent Acute Inpatient Units as a total of Bed days used by children in mental health acute inpatient units
1a	**KPI Short Title**	CAMHs % Bed Days used in CAMHS units as to total of bed days used.
2	**KPI Description**	This metric is designed to measure the total number of HSE/HSE funded Child and Adolescent Acute Inpatient bed days used as a percentage of all acute inpatient bed days of children and adolescents whether admitted to HSE/HSE funded CAMHS acute inpatient units and or HSE/HSE funded Adult Mental Health Acute Inpatient Units and excluding admissions to private units.
3	**KPI Rationale**	This is a quality metric to measure compliance with the Mental Health Commission regulation in respect of admission of children and adolescents to age appropriate acute inpatient units. It is also designed to monitor the operation of the HSE/HSE funded Child and Adolescent Acute Inpatient units and demonstrate the benefits realisation from the investment in CAMHS acute inpatient provision.
3a	**Indicator Classification**	National Scorecard Quadrant a) Quality and Safety
4	**National Target**	NSP 2020 target: 95%. This metric is reported cumulatively.
4a	**Target Trajectory**	95%
4b	**Volume Metrics**	N/A
5	**KPI Calculation**	Count of all Bed days of children to HSE/HSE funded CAMHs Acute Inpatient Units, count of all Bed Days of children and adolescents to HSE/HSE funded Adult Acute Mental Health Inpatient Units; Sum of both counts. Calculate percentage of number of children and adolescents bed days used to HSE/HSE funded CAMHs inpatient units as against total number of bed days used of children and adolescents excluding admissions to private units.
6	**Data Source**	From General Adult Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	The number of children and adolescents admitted to HSE/Hse funded CAMHS Inpatient Units; The number of children and adolescents admitted to HSE/HSE funded Adult Acute Mental Health Inpatient Units
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

NSP Metrics

1	**KPI Title**	MH6- % of accepted referrals / re-referrals offered first appointment within 12 weeks by Child and Adolescent Community Mental Health Teams.
1a	**KPI Short Title**	CAMHS % of accepted referrals / re-referrals offered first appointment within 12 weeks
2	**KPI Description**	Wait time: The number of weeks from the point at which the referral is received by a member of the CAMHS Community Mental Health Team to the day the assessment takes place (less any delay due to client postponement of assessment) and excluding both of those days.
3	**KPI Rationale**	Wait times to access CAMHS Community Mental Health Teams for a mental health assessment provides a measure of service availability in the community and the timeliness of that access.Monitoring the number of new (including re-referred) cases seen overall from referral and evaluating the trends over time per HSE region and across the service nationally as it relates to target. Nitor trends in relation to referrals.
3a	**Indicator Classification**	National Scorcard Quadrant a) Quality and Safety
4	**National Target**	NSP 2020 target 78%. This metric is reported cumulatively.
4a	**Target Trajectory**	78%
4b	**Volume Metrics**	N/A
5	**KPI Calculation**	Count number of new cases seen within 12 weeks and divide by number of new appointments offered within 12 weeks and calculate the percentage against the overall number of new/re-referred cases accepted.
6	**Data Source**	From General Adult Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of accespted referrals/re-referrals; number of accepted referrals/re-referrals within timeframe
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

NSP Metrics

1	**KPI Title**	MH7- % of accepted referrals / re-referrals offered first appointment and seen within 12 weeks by Child and Adolescent Community Mental Health Teams.
1a	**KPI Short Title**	CAMHs % of accepted referrals / re-referrals offered first appointment and seen within 12 weeks
2	**KPI Description**	Wait time: The number of weeks from the point at which the referral is received by a member of the CAMHS Community Mental Health Team to the day the assessment takes place (less any delay due to client postponement of assessment) and excluding both of those days.
3	**KPI Rationale**	Wait times to access CAMHS Community Mental Health Teams for a mental health assessment provides a measure of service availability in the community and the timeliness of that access. Monitoring the number of new (including re-referred) cases seen overall from referral and evaluating the trends over time per HSE region and across the service nationally as it relates to target. Monitor trends in relation to referrals.
3a	**Indicator Classification**	National Scorcard Quadrant a) Quality and Safety
4	**National Target**	NSP 2020 target 72%. This metric is reported cumulatively.
4a	**Target Trajectory**	72%
4b	**Volume Metrics**	N/A
5	**KPI Calculation**	Count number of new cases seen within 12 weeks and divide by number of new appointments offered within 12 weeks and calculate the percentage against the overall number of new/re-referred cases accepted.
6	**Data Source**	From General Adult Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Monthly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	Number of accespted referrals/re-referrals; number of accepted referrals/re-referrals within timeframe
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Monthly
12	**KPI Reporting Frequency**	Monthly
13	**KPI Report Period**	M
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report, Performance Report/Profile, MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement

NSP Metrics

1	**KPI Title**	MH8 - Number of admissions to adult acute inpatient units
1a	**KPI Short Title**	No. of admissions to adult acute inpatient units
2	**KPI Description**	This metric is designed to measure the total number admitted to adult mental health acute inpatient units.
3	**KPI Rationale**	This metric is used to support the preparation of indicators based on rates of admission. Reduced admissions could be used as a proxy measure for provision of community alternatives. Similarly, a trend of increasing admission rates could alert the Area Mental Health Management Team to a lack of capacity in community settings and/or increased demand for secondary care mental health services
3a	**Indicator Classification**	National Scorecard Quadrant b) Access
4	**National Target**	NSP 2020 Expected Activity 12,148
4a	**Target Trajectory**	N.A.
4b	**Volume Metrics**	CHO1(1,353) CHO2 (1,144) CHO3 (985) CHO4 (2,088) CHO5 (1,244) CHO6 (980) CHO7 (1,207) CHO8 (1,479) CHO9 (1,668)
5	**KPI Calculation**	Count
6	**Data Source**	From General Adult Community Mental Health Team to CHO Manager to National Business Information Unit.
6a	**Data Sign Off**	Submission at CHO
6b	**Data Quality Issues**	N/A
7	**Data Collection Frequency**	Quarterly
8	**Tracer Conditions**	Not applicable at this time
9	**Minimum Data Set MDS**	The total number admitted to adult mental health acute inpatient units.
10	**International Comparison**	Not applicable at this time
11	**KPI Monitoring**	Quarterly - 1 Qtr in arrears
12	**KPI Reporting Frequency**	Quarterly - 1Qtr
13	**KPI Report Period**	Q-1Q
14	**KPI Reporting Aggregation**	CHO Area and individual teams
15	**KPI is reported in which reports?**	Annual Report; Performance Report/Profile; MDR
16	**Web link to data**	http://www.hse.ie/eng/services/publications/corporate/performancereports/
17	**Additional Information**	As reported in the HSE Performance Report
	KPI owner/lead for implementation	John Meehan, Assistant National Director / Head of National Office for Suicide Prevention and Lead for Community Strategy & Planning
	PBI data support	Diane Duignan, diane.duignan@hse.ie, 046 925 1325
	Governance/sign off	Jim Ryan, Head of Operations, Quality and Service Improvement