

wenta	al Health Services	
1	KPI Title	% of accepted referrals / re-referrals offered first appointment within 12 weeks / 3 months by General Adult Community Mental Health Teams
2	KPI Description	
		Wait time: The number of weeks/months 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.
	Indicator Classification	□Person Centred Care □Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐ Use of Information
		Workforce□ Use of Resources ☑ Governance, Leadership and Management □
4	KPI Target	NSP 2015 target: > =90%
5	KPI Calculation	Count number of new cases seen within 3 months and divide by number of new appointments offerred witin threee months and calculate the percentage against overall number of new/re-referred cases accepted
6	Data Source	
	Data Completeness	From General Adult Community Mental Health Team to ISA Managers to RDPI to Business
	Data Quality Issues	Intelligence Unit.
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly Quarterly □Bi-annually Annually □Other – give details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	Number of accepted referrals/re-referrals; number of accepted referrals.re-referrals within timeframe;
10	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
		Please indicate who is responsible for monitoring this KPI:_Nationally -Yvonne O'Neill, Head of
		Planning, Performance and Programme Management, Mental Health Division, each ISA Manager and Executive Clinical Director, Area Mental Health Management Team.
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) ☑ Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	□ National □ Regional ☑ CHO Area □ Hospital □ County Institution ☑ Other – give details: individual teams
15	KPI is reported in which reports ?	☑ Performance Report (NSP) ☑ CompStat Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html
17	Additional Information	As reported in the HSE Performance Report
Contact details for Data Manager /		Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
Specialist Lead		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
National	I Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Mental Health Services		
1	KPI Title	% of accepted referrals / re-referrals offered first appointment and seen within 12 weeks / 3 months by General Adult Community Mental Health Teams
2	KPI Description	
		Wait time: The number of weeks/months 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.
	Indicator Classification	□Person Centred Care □Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐ Use of Information
		Workforce□ Use of Resources ☑ Governance, Leadership and Management □
4	KPI Target	NSP 2014 target: > =75%
5	KPI Calculation	Count number of new cases seen within 3 months and divide by number of new appointments
		offerred witin threee months and calculate the percentage against overall number of new/re-referred cases accepted
6	Data Source	
	Data Completeness	From General Adult Community Mental Health Team to ISA Managers to RDPI to Business
	Data Quality Issues	Intelligence Unit.
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly Quarterly □Bi-annually Annually □Other – give details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	Number of accepted referrals/re-referrals; number of accepted referrals.re-referrals within
		timeframe;
10	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give
		details:
		Please indicate who is responsible for monitoring this KPI:_Nationally -Yvonne O'Neill, Head of
		Planning, Performance and Programme Management, Mental Health Division, each ISA Manager
12	KPI Reporting Frequency	and Executive Clinical Director, Area Mental Health Management Team. □ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually □ Other − give
12	The reporting Frequency	details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the
'0	Ta Troport poriou	same month of activity)
		✓ Monthly in arrears (June data reported in July)
		□Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
		☐ County Institution ☐ Other – give details: individual teams
15	KPI is reported in which	☑ Performance Report (NSP) ☑ CompStat Other – give details:
	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html
17	Additional Information	As reported in the HSE Performance Report
Contact details for Data Manager /		Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
On a delicat I and		Division Ph. 045 880400
		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
inationa	I Lead and Division	Anno O'Connor, National Director Montal Hoolth, Tal. 04 6252542, Division: Montal Hoolth
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Mental Health Services		
1	KPI Title	% of accepted referrals / re-referrals offered first appointment within 12 weeks / 3 months by
		Psychiatry of Old Age Community Mental Health Teams
2	KPI Description	Wait time: The number of weeks/months from the point at which the referral is received by a
		member of the Psychiatry of Old Age 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
	KDI D. C. I	days.
3	KPI Rationale	Wait times to access Psychiatry of Old Age Community Mental Health Team for mental health assessment provides a measure of service availability in the community and the timeliness of that access.
	Indicator Classification	□Person Centred Care □Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐Use of Information
		Workforce□ Use of Resources ☑ Governance, Leadership and Management □
4	KPI Target	NSP 2015 target: >=99%
5	KPI Calculation	Count number of new cases seen within 3 months and divide by number of new appointments
		offered within three months and calculate the percentage against the overall number of new/re-
		referred cases accepted.
6	Data Source	
	Data Completeness	From POA team toISA Manager to RDPI to Business Intelligence Unit.
-	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly √Monthly Quarterly □Bi-annually Annually □Other – give details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	
40		Number of accepted referrals/re-referrals; numer of accepted referrals/re-referrals within timeframe
10 11	International Comparison KPI Monitoring	Not applicable at this time KPI will be monitored on a (please indicate below) basis:
''	Kri wontoning	· · · · · · · · · · · · · · · · · · ·
		□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give
		details:
		Please indicate who is responsible for monitoring this KPI:Nationally:- Yvonne O'Neill, Head of
		Planning, Performance and Programme Management, Mental Health Division. each ISA Manager
		and Executive Clinical Director, Area Mental Health Management Team
12	KPI Reporting Frequency	□ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually □ Other – give details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		✓ Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
14	KPI Reporting Aggregation	□Rolling 12 months (previous 12 month period) □National □Regional ☑ CHO Area □Hospital
'*	The interportung Aggregation	☐ County Institution ☐ Other – give details: individual teams
15	KPI is reported in which	☑ Performance Report (NSP) ☑ CompStat Other – give details:
	reports ?	3.12 July 2010
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	As reported in the HSE Performance Report
Contact	details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
		Division Ph. 045 880400
Specialist Lead		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
National Lead and Division		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Mental Health Services		
1	KPI Title	% of accepted referrals / re-referrals offered first appointment and seen within 12 weeks / 3 months by Psychiatry of Old Age Community Mental Health Teams
2	KPI Description	Wait time: The number of weeks/months from the point at which the referral is received by a member of the Psychiatry of Old Age 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 Old Age Community Mental Health Team for mental health assessment provides a measure of service availability in the community and the timeliness of that access.
	Indicator Classification	□Person Centred Care □Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐Use of Information
		Workforce□ Use of Resources ☑ Governance, Leadership and Management □
4	KPI Target	NSP 2015 target: >=95%
5	KPI Calculation	Count number of new cases seen within 3 months and divide by number of new appointments offered within three months and calculate the percentage against the overall number of new/re-referred cases accepted.
6	Data Source	
	Data Completeness	From POA team toISA Manager to RDPI to Business Intelligence Unit.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly √Monthly Quarterly □Bi-annually Annually □Other – give details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	
40		Number of accepted referrals/re-referrals; numer of accepted referrals/re-referrals within timeframe
10	International Comparison KPI Monitoring	Not applicable at this time KPI will be monitored on a (please indicate below) basis:
11	Kri Montornig	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details: Please indicate who is responsible for monitoring this KPI:Nationally:- Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division. each ISA Manager and Executive Clinical Director, Area Mental Health Management Team
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) ☑ Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	□ National □ Regional ☑ CHO Area □ Hospital □ County Institution ☑ Other – give details: individual teams
15	KPI is reported in which reports ?	☑ Performance Report (NSP) ☑ CompStat Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	As reported in the HSE Performance Report
Contact	details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
Specialist Lead		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
	Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health
		Affile O Connot, National Director Mental Fleatiff Fel. 01 0332342 Division, Mental Fleatiff

Mental Health Services		
THOTHAI TIGARIT GOT TIOOG		
1	KPI Title	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
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 benefots realisation from the investment in CAMHS acute inpatient provision.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). □Person Centred Care ☑ Effective Care Safe Care □ Better Health and Wellbeing □Use of Information
		Workforce ☐ Use of Resources ☑ Governance, Leadership and Management ☐
A	KDI Torgot	
<u>4</u> 5	KPI Target KPI Calculation	NSP 2015 target: > 95%
3	RFI 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	
	Data Completeness	Health Research Board to BIU Non acute Team.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	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	KPI will be monitored on a (please indicate below) basis: □Daily □Weekly □ Monthly ☑ Quarterly □Bi-annually □Annually □Other – give details: Please indicate who is responsible for monitoring this KPI:Nationally:- Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division; ISA Managers and Executive Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Monthly in arrears (June data reported in July) ☑ Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	□ National ☑ Regional □ Hospital □ County Institution ☑ Other – give details: CAMHs Acute Inpatient Units
15	KPI is reported in which reports ?	☑ Performance Report (NSP) ☑ CompStat Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html
17	Additional Information	As reported in the HSE Performance Report
Contact details for Data Manager /		Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
Specialist Lead		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
National Lead and Division		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Menta	Mental Health Services			
1	KPI Title	% of accepted referrals / re-referrals offered first appointment within 12 weeks / 3 months by Child and Adolescent Community Mental Health Teams.		
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 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.		
	Indicator Classification	□Person Centred Care □Effective Care		
		Safe Care ☐ Better Health and Wellbeing ☐Use of Information √		
		Workforce ☐ Use of Resources √ Governance, Leadership and Management ☐		
4	KPI Target	NSP 2015 target: >=78%		
5	KPI Calculation	Count number of new cases seen within 3 months and divide by number of new appointments		
		offered within three months and calculate the percentage against the overall number of new/re- referred cases accepted		
6	Data Source	From CAMHS Community Mental Health team to ISA Manager to RDPI to Business Intelligence		
	Data Completeness	Unit.		
-	Data Quality Issues			
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly Quarterly □Bi-annually Annually □Other – give details:		
8	Tracer Conditions	Not applicable at this time		
9	Minimum Data Set	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	KPI will be monitored on a (please indicate below) basis:		
		□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details: Please indicate who is responsible for monitoring this KPI: Nationally:- Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division; ISA Managers, Executive Clinical Directors and Area Mental Health Management Teams.		
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:		
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) ☑ Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period)		
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital		
		☐ County Institution ☐ Other – give details: individual teams		
15	KPI is reported in which reports ?	☑ Performance Report (NSP) ☑ CompStat Other – give details:		
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html		
17	Additional Information	As reported in the HSE Performance Report		
	details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health		
		Division Ph. 045 880400		
Specialist Lead		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie		
National Lead and Division		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health		

Menta	l Health Services	
	KDI T'U	
1	KPI Title	% of accepted referrals / re-referrals offered first appointment and seen within 12 weeks / 3 months by Child and Adolescent Community Mental Health Teams.
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 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.
	Indicator Classification	□Person Centred Care □Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐Use of Information √
		Workforce ☐ Use of Resources ✓ Governance, Leadership and Management ☐
4	KPI Target	NSP 2015 target: > =72%
5	KPI Calculation	Count number of new cases seen within 3 months and divide by number of new appointments offered within three months and calculate the percentage against the overall number of new/re-referred cases accepted
6	Data Source	From CAMHS Community Mental Health team to ISA Manager to RDPI to Business Intelligence
	Data Completeness	Unit.
7	Nata Cullection Fraguency	
'	Data Collection Frequency	□Daily □Weekly ☑ Monthly Quarterly □Bi-annually Annually □Other – give details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	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	KPI will be monitored on a (please indicate below) basis:
	-	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details: Please indicate who is responsible for monitoring this KPI: Nationally:- Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division; ISA Managers, Executive Clinical Directors and Area Mental Health Management Teams.
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) ☑ Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ LHO Area ☑ ISA Area □Hospital
		☐ County Institution ☐ Other – give details: individual teams
15	KPI is reported in which reports ?	☑ Performance Report (NSP) ☑ CompStat Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html
17	Additional Information	As reported in the HSE Performance Report
Contact details for Data Manager /		Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
National Lead and Division		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health
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Mei	Mental Health Services		
	KPI 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	
	Indicator Classification	□Person Centred Care □Effective Care	
		Safe Care ☐ Better Health and Wellbeing ☑ Use of Information	
		Workforce ☑Use of Resources Governance, Leadership and Management ☐	
4	KPI Target	NSP 2015 target: 12,947	
5	KPI Calculation	Count	
6	Data Source		
	Data Completeness	Health Research Board to Business Information Unit.	
	Data Quality Issues		
7	Data Collection Frequency	□Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give	
		details:	
8	Tracer Conditions	Not applicable at this time	
9	Minimum Data Set	The total number admitted to adult mental health acute inpatient units.	
10	International Comparison		
		Not applicable at this time	
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:	
		□Daily □Weekly □ Monthly ☑ Quarterly □Bi-annually □Annually □Other – give	
		details:	
		Please indicate who is responsible for monitoring this KPI: Nationally:- Yvonne O'Neill, Head of	
		Planning, Performance and Programme Management, Mental Health Division. ; ISa Managers,	
		Executive Clinical Directors and area Mental Health Management Teams	
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give	
L.		details:	
13	KPI report period	Current (e.g. daily data reported on that same day of activity, monthly data reported within the	
		same month of activity)	
		Monthly in arrears (June data reported in July)	
		Quarterly in arrears (quarter 1 data reported in quarter 2)	
L .	KDID (A (□Rolling 12 months (previous 12 month period)	
14	KPI Reporting Aggregation	□National □Regional □LHO Area □Hospital	
15	KPI is reported in which	☑ County ☑ Institution ☐Other – give details: ☑ Performance Report (NSP) ☑ CompStat ☑ Other – give details: ISD PC	
15	reports ?	Market Performance Report (NSP) Market Compostat Market Politicia – give details. ISD PC	
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html	
"	Web link to data	Inter-name	
17	Additional Information		
Contact details for Data Manager /		Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health	
		Division Ph. 045 880400	
Specialist Lead		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie	
National Lead and Division			
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health	

Mei	Mental Health Services		
1	KPI 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.	
	Indicator Classification	□Person Centred Care □Effective Care	
		Safe Care□ Better Health and Wellbeing ☑ Use of Information	
		Workforce□Use of Resources ☑ Governance, Leadership and Management□	
	KPI Target	NSP 2015 target: -10	
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		
	Data Completeness	Health Research Board to Business Information Unit.	
	Data Quality Issues		
7	Data Collection Frequency	□Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give	
		details:	
8	Tracer Conditions	Not applicable at this time	
9	Minimum Data Set	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	KPI will be monitored on a (please indicate below) basis:	
		□Daily □Weekly □ Monthly ☑ Quarterly □Bi-annually □Annually □Other – give	
		details:	
		Please indicate who is responsible for monitoring this KPI: Nationally, Yvonne O'Neill, Head of	
		Planning, Performance and Programme Management, Mental Health Division; ISA Manager;	
		Executive Clinical Directors and Area Mental Health Management Teams	
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give	
		details:	
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the	
		same month of activity)	
		☐Monthly in arrears (June data reported in July)	
		☑ Quarterly in arrears (quarter 1 data reported in quarter 2)	
		□Rolling 12 months (previous 12 month period)	
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital	
		☐ County ☐ Institution ☐ Other – give details:	
15	KPI is reported in which	☑ Performance Report (NSP) ☑ CompStat ☑ Other – give details: ISD PC	
	reports ?		
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html	
17	Additional Information	The HRB collects and reports on the mean (i.e. the average) the median (as described at No. 7	
		above and the range of length of stay. The calculations exclude patients with a length of stay	
		greater than one year. Further information about the way in which the calculations are made is	
		detailed on Page 5 of the Quarterly HRB Report.	
Cont	act details for Data Manager	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health	
	· · · · · · · · · · · · · · · · · · ·	Division Ph. 045 880400	
Specialist Lead		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie	
National Lead and Division		, , , , , , , , , , , , , , , , , , , ,	
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health	
		part 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

Mei	ntal Health Services	
1	KPI Title	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
	Indicator Classification	□Person Centred Care ☑ Effective Care
		Safe Care ☐ Better Health and Wellbeing ☑ Use of Information √
		Workforce□Use of Resources□Governance, Leadership and Management□
4	KPI Target	NSP 2015 target: 70.5
	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	
	Data Completeness	Health Research Board to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give
-		details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	Total number of admissions to acute inpatient units divided by population aged 18 or over in mental
	minimum Data Got	health catchment
10	International Comparison	induit outominent
		Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
	g	□Daily □Weekly □ Monthly ☑ Quarterly □Bi-annually □Annually □Other – give
		details:
		Please indicate who is responsible for monitoring this KPI: Nationally;- Yvonne O'Neill, Head of
		Planning, Performance and Programme Management, Mental Health Division, ISA Managers,
		Executive Clinical directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give
		details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the
	- P P	same month of activity)
		Monthly in arrears (June data reported in July)
		✓ Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional LHO Area □Hospital
1	,	☐ County ☐ Institution ☐ Other — Mental Health Catchment Area
15	KPI is reported in which	☑ Performance Report (NSP) ☑ CompStat ☑ Other – give details: ISD PC
	reports ?	_
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html
17	Additional Information	
		/Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
	and working for batta manager	Division Ph. 045 880400
Spec	ialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
	onal Lead and Division	in mily i lanagan bio montai zulaiyat Email. pililip.lianagan@nae.ie
lanc	mai boda ana bivision	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health
		Paris Common, National Director Mental Flediti 161, 01 0002042 Division, Mental Flediti

Title First admission rates to adult acute units (that is, first ever admission mental health catchment area per quarter	sion), per 100,000 population in
2 KPI Description First admissions are admissions of persons who were not previous	usly 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.	
Indicator Classification □Person Centred Care ☑ Effective Care	
Safe Care Better Health and Wellbeing Use of Infor	rmation
☑ Workforce ☐Use of Resources☐Governance, Leadership a	
4 KPI Target NSP 2015 target: 23.1	ina managoment
5 KPI Calculation Number of First admission to acute units (that is, first ever admiss	sion) during reporting period
divided by population aged 18 years or over *100,000 First Admi collected and calculated using existing MH catchment area popul populations. This is particularly relevant given that rates are calculated More info available from HRB.	issions / rates are currently lations rather than LHO area
6 Data Source	
Data Completeness Health Research Board to Business Information Unit.	
Data Quality Issues	
7 Data Collection Frequency □Daily □Weekly □Monthly ☑ Quarterly □Bi-annual	ly □Annually □Other – give
details:	
8 Tracer Conditions Not applicable at this time	
9 Minimum Data Set Number of First admission to acute units (that is, first ever admission)	
divided by population of mental health catchment area aged 18 y	ears or over
10 International Comparison Not applicable at this time	
11 KPI Monitoring KPI will be monitored on a (please indicate below) basis:	
□Daily □Weekly □ Monthly ☑ Quarterly □Bi-annually	□Annually □Other – give
	Entitionally Edition – give
details:	
Please indicate who is responsible for monitoring this KPI:_Natio	onally:- Yvonne O'Neill, Head of
Planning, Performance and Programme Management, Mental He	ealth Division.; ISA Managers,
Execuitve Clinical Directors and Area Mental Health Managemen	nt Teams
12 KPI Reporting Frequency □Daily □Weekly □Monthly ☑ Quarterly □Bi-annually	
details:	,,
13 KPI report period	monthly data reported within the
same month of activity)	
☐Monthly in arrears (June data reported in July)	
☑ Quarterly in arrears (quarter 1 data reported in quarter 2)	
□Rolling 12 months (previous 12 month period)	
14 KPI Reporting Aggregation □ National □ Regional □ CHO Area □ Hospital	
☐ County ☐ Institution ☐ Other – give details: Mental Heal	Ith Catchment Area
15 KPI is reported in which ☑ Performance Report (NSP) ☑ CompStat ☑ Other – give	
reports ?	
16 Web link to data http://www.hse.ie/eng/services/Publications/corporate/Performan	nce Reports Monthly.html
17 Additional Information	
Contact details for Data Manager / Yvonne O'Neill, Head of Planning, Performance and Programme	Management, Mental Health
Division Ph. 045 880400	. 5
Specialist Lead Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.i	ie
National Lead and Division	
Anne O'Connor, National Director Mental Health Tel: 01 635254.	2 Dvision: Mental Health

Mei	ntal Health Services	
	KPI Title	Acute re-admission as a percentage of admissions
	KPI Description	Reate 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.
	Indicator Classification	□Person Centred Care ☑ Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐ Use of Information ☑
		Workforce□Use of Resources□Governance, Leadership and Management□
4	KPI Target	NSP 2015 target: 67%
	KPI Calculation	Total No. of Admissions minus total number of first admissions = total no. of readmissions
"	Calculation	Total no. of readmissions is divided by total admissions and presented as percentage
		2. Total no. of readmissions is divided by total admissions and presented as percentage
<u> </u>		
	Data Source	
	Data Completeness	Health Research Board to BIU Non acute Team
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give
		details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	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	
'	miomational companion	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
''	Ki i wontoning	□ Daily □ Weekly □ Monthly ☑ Quarterly □ Bi-annually □ Annually □ Other – give
		details:
		Please indicate who is responsible for monitoring this KPI: Nationally:- Yvonne O'Neill, Head of
		Planning, Performance and Programme Management, Mental Health Division.; ISA Managers,
L		Executive Clinical Directors, Area Mental Health Management Teams
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give
		details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		☐Monthly in arrears (June data reported in July)
		☑ Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional □ CHO Area □Hospital
		☐ County ☐ Institution ☐ Other – give details: Mental Health Catchment
15	KPI is reported in which	☑ Performance Report (NSP) □CompStat Other – give details:
	reports ?	3
	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html
'`	Trow min to dutu	The state of the s
17	Additional Information	
	act details for Data Manager /	Vicenza O'Noill Hood of Diagning Dorfermance and Decreases Management Martin His-life
Cont	aci detalis ioi Data Maliager /	3 , 1 1 1 3 , 1 1 1 1 3 , 1 1 1 1 3
		Division Ph. 045 880400
Specialist Lead		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
Natio	onal Lead and Division	
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Mei	ntal Health Services	
	KDI Tidle	Leading and a second se
1	KPI Title	Inpatient readmission rates to adult acute units per 100,000 population in mental health catchment
2	KPI Description	area per quarter
-	KFI 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	100,000 flead of population in filental fleatin catchinent area.
"	INT I Nationale	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.
	Indicator Classification	□ Person Centred Care □ Effective Care
	maioator Olaoomioation	Safe Care ☐ Better Health and Wellbeing ☐ Use of Information ☑
		Workforce□ Use of Resources□Governance, Leadership and Management□
4	KPI Target	NSP 2015 target: 47.6
	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	
	Data Completeness	Health Research Board to BIU Non acute Team
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give
		details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	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
44	KPI Monitoring	VDI will be manifered as a (sleepe indicate below) besign
111	KPI Wonitoring	KPI will be monitored on a (please indicate below) basis: □Daily □Weekly □ Monthly ☑ Quarterly □Bi-annually □Annually □Other – give
		□Daily □Weekly □ Monthly ☑ Quarterly □Bi-annually □Annually □Other – give details:
		Please indicate who is responsible for monitoring this KPI:_Yvonne O'Neill, Head of Planning,
		Performance and Programme Management, Mental Health Division; ISA Managers, Executive
		Clinical directors and Area mental Health Management Teams
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give
		details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		☐Monthly in arrears (June data reported in July)
		☑ Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional CHO Area √Hospital
		☐ County ☐ Institution ☐ Other – Mental Health catchment
15	KPI is reported in which	☑ Performance Report (NSP) ☑ CompStat Other – give details:
L.	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html
17	Additional Information	
	act details for Data Manager	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
Jone	as. actano foi Data manayer	Division Ph. 045 880400
Spec	ialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
	onal Lead and Division	r may ranagan bio monta rinarjot Email, primpinanagan@noolo
	3000 min 211101011	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health
		The state of the s

Mental Healt	th Services	
1 KPI Title		Number of adult acute inpatient beds per 100,000 population in the mental health catchment area per quarter
2 KPI Descrip	tion	The total number of acute psychiatric beds within the mental health catchment per 100,000 population.
3 KPI Rationa	ıle	The metric tracks the number of acute inpatient beds per 100,000 population to be measured
		against the recommendations in A Vision for Change
Indicator Cl	assification	□Person Centred Care □Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐ Use of Information
		Workforce Use of Resources ☑ Governance, Leadership and Management □
4 KPI Target		NSP 2015 target: 21.6
5 KPI Calcula	tion	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	е	
Data Compl	leteness	Health Research Board to Business Information Unit.
Data Quality	y Issues	
7 Data Collect	tion Frequency	□Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give
		details:
8 Tracer Cond		Not applicable at this time
9 Minimum Da	ata Set	Number of acute Inpatient places, Population of Mental Health Catchment
10 Internationa	al Comparison	Not applicable at this time
11 KPI Monitor	ring	KPI will be monitored on a (please indicate below) basis:
		□Daily □Weekly □ Monthly ☑ Quarterly □Bi-annually □Annually □Other – give
		details:
		Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Planning, Performance
		and Programme Management; ISA Managers; Executive Clinical Directors and Area Menal Health
		and Programme Management; ISA Managers; Executive Clinical Directors and Area Menal Health Management Teams
12 KPI Reporti	ng Frequency	and Programme Management; ISA Managers; Executive Clinical Directors and Area Menal Health
		and Programme Management; ISA Managers; Executive Clinical Directors and Area Menal Health Management Teams □Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other − give details:
12 KPI Reporti		and Programme Management; ISA Managers; Executive Clinical Directors and Area Menal Health Management Teams □ Daily □ Weekly □ Monthly ☑ Quarterly □ Bi-annually □ Annually □ Other − give details: □ Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		and Programme Management; ISA Managers; Executive Clinical Directors and Area Menal Health Management Teams Daily
		and Programme Management; ISA Managers; Executive Clinical Directors and Area Menal Health Management Teams Daily Weekly Monthly Quarterly Bi-annually Annually Other – give details: Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) Monthly in arrears (June data reported in July)
		and Programme Management; ISA Managers; Executive Clinical Directors and Area Menal Health Management Teams Daily Weekly Monthly Quarterly Bi-annually Annually Other – give details: Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) Monthly in arrears (June data reported in July) Quarterly in arrears (quarter 1 data reported in quarter 2)
13 KPI report p	period	and Programme Management; ISA Managers; Executive Clinical Directors and Area Menal Health Management Teams □Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give details: □Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Monthly in arrears (June data reported in July) ☑ Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period)
13 KPI report p		and Programme Management; ISA Managers; Executive Clinical Directors and Area Menal Health Management Teams □Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give details: □Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Monthly in arrears (June data reported in July) ☑ Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □National □Regional LHO Area □Hospital
13 KPI report p	period ng Aggregation	and Programme Management; ISA Managers; Executive Clinical Directors and Area Menal Health Management Teams □Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give details: □Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Monthly in arrears (June data reported in July) ☑ Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □National □Regional LHO Area □Hospital □ County ☑ Institution ☑ Other – give details: Mental Health Catchment Area
13 KPI report p 14 KPI Reportii 15 KPI is repor	period	and Programme Management; ISA Managers; Executive Clinical Directors and Area Menal Health Management Teams □Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give details: □Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Monthly in arrears (June data reported in July) ☑ Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □National □Regional LHO Area □Hospital
13 KPI report p 14 KPI Reportii 15 KPI is reporreports ?	ng Aggregation	and Programme Management; ISA Managers; Executive Clinical Directors and Area Menal Health Management Teams □Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give details: □Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Monthly in arrears (June data reported in July) ☑ Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □National □Regional LHO Area □Hospital □ County ☑ Institution ☑ Other – give details: Mental Health Catchment Area ☑ Performance Report (NSP) □CompStat Other – give details:
13 KPI report p 14 KPI Reportii 15 KPI is repor reports? 16 Web link to	ng Aggregation rted in which	and Programme Management; ISA Managers; Executive Clinical Directors and Area Menal Health Management Teams □Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give details: □Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Monthly in arrears (June data reported in July) ☑ Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □National □Regional LHO Area □Hospital □ County ☑ Institution ☑ Other – give details: Mental Health Catchment Area
13 KPI report p 14 KPI Reportii 15 KPI is reportier reports?	ng Aggregation rted in which	and Programme Management; ISA Managers; Executive Clinical Directors and Area Menal Health Management Teams □Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give details: □Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Monthly in arrears (June data reported in July) ☑ Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □National □Regional LHO Area □Hospital □ County ☑ Institution ☑ Other – give details: Mental Health Catchment Area ☑ Performance Report (NSP) □CompStat Other – give details:
13 KPI report p 14 KPI Reportii 15 KPI is repor reports? 16 Web link to	ng Aggregation rted in which data	and Programme Management; ISA Managers; Executive Clinical Directors and Area Menal Health Management Teams □Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give details: □Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Monthly in arrears (June data reported in July) ☑ Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □National □Regional LHO Area □Hospital □ County ☑ Institution ☑ Other – give details: Mental Health Catchment Area ☑ Performance Report (NSP) □CompStat Other – give details:
13 KPI report p 14 KPI Reportii 15 KPI is repor reports? 16 Web link to 17 Additional li	ng Aggregation rted in which data	and Programme Management; ISA Managers; Executive Clinical Directors and Area Menal Health Management Teams □Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give details: □Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Monthly in arrears (June data reported in July) ☑ Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □National □Regional LHO Area □Hospital □ County ☑ Institution ☑ Other – give details: Mental Health Catchment Area ☑ Performance Report (NSP) □CompStat Other – give details: http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html
13 KPI report p 14 KPI Reportin 15 KPI is repor reports? 16 Web link to 17 Additional in Contact details for Specialist Lead	ng Aggregation rted in which data nformation or Data Manager /	and Programme Management; ISA Managers; Executive Clinical Directors and Area Menal Health Management Teams □Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give details: □Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Monthly in arrears (June data reported in July) ☑ Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □National □Regional LHO Area □Hospital □ County ☑ Institution ☑ Other – give details: Mental Health Catchment Area ☑ Performance Report (NSP) □CompStat Other – give details: http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
13 KPI report p 14 KPI Reportin 15 KPI is repor reports? 16 Web link to 17 Additional is Contact details for	ng Aggregation rted in which data nformation or Data Manager /	and Programme Management; ISA Managers; Executive Clinical Directors and Area Menal Health Management Teams □Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give details: □Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Monthly in arrears (June data reported in July) ☑ Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □National □Regional LHO Area □Hospital □ County ☑ Institution ☑ Other – give details: Mental Health Catchment Area ☑ Performance Report (NSP) □CompStat Other – give details: http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400

Mei	ntal Health Services	
	KPI Title	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.
	Indicator Classification	□Person Centred Care ☑ Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐ Use of Information ☑
		Workforce□Use of Resources□Governance, Leadership and Management□
4	KPI Target	NSP 2015 target: 1,714
5	KPI Calculation	Count
6	Data Source	
	Data Completeness	Health Research Board to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give
		details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	Number of adult involuntary admissions
10	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		□Daily □Weekly □ Monthly ☑ Quarterly □Bi-annually □Annually □Other – give
		details:
		Please indicate who is responsible for monitoring this KPI:Yvonne O'Neill, Head of Planning,
		Performance and Programme Management; ISA Managers; Executive Clinical Directors and Area
		Mental Health Management Teams
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other –
		give details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		☐Monthly in arrears (June data reported in July)
		$\sqrt{\text{Quarterly in arrears}}$ (quarter 1 data reported in quarter 2)
		□Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
		☐ County ☑ Institution ☐ Other – Mental Health Catchment Area
	KPI is reported in which	☑ Performance Report (NSP) □CompStat Other – give details:
_	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Cont	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
	ŭ	Division Ph. 045 880400
Spec	ialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
National Lead and Division		, , , , , ,
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Mei	ntal Health Services	
1	KPI Title	
		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.
	Indicator Classification	□Person Centred Care ☑ Effective Care
		Safe Care☐ Better Health and Wellbeing ☐ Use of Information ☑
		Workforce□Use of Resources□Governance, Leadership and Management□
4	KPI Target	NSP 2015 target: 9.3
	KPI Calculation	No. of involuntary admissions expressed as a rate per 100,000 populatior
6	Data Source	
	Data Completeness	Health Research Board to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give
		details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	Number of involuntary admissions of adults
10	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		□Daily □Weekly □ Monthly ☑ Quarterly □Bi-annually □Annually □Other – give
		details:
		Please indicate who is responsible for monitoring this KPI Yvonne O'Neill, Head of Planning,
		Performance and Programme Management, Mental Health Division; ISA Managers, Executive
		Clinical directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give
		details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		☐Monthly in arrears (June data reported in July)
		☑ Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional LHO Area □Hospital
		☐ County ☐ Institution ☐ Other – give details: Mental Health Catchment Area
15	KPI is reported in which	☑ Performance Report (NSP) □CompStat Other – give details:
	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
Cont	uot uetalis ioi Data Malidyel /	Division Ph. 045 880400
Spec	ialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
	onal Lead and Division	i miip i ianagan Dio wentai Anaiyst Emaii. piiiip.iianagan@nse.ie
Nauc	mai Leau anu Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health
		Anne O Connor, National Director Mental Fleath 161. UT 0332342 DVISION. Mental Fleath

Mei	ntal Health Services	
1	KPI Title	% of General Adult Community Mental Health Teams serving a population of circa 50,000 (range of 45,000 to 60,000) as recommended in Vision
2	KPI Description	This metric is designed to measure the % of General Adult Community Mental Health Teams serving a population of circa 50,000 (range of 45,000 to 60,000)
3	KPI Rationale	This metric is used to measure progress on the reconfiguration of General Adult Community Mental Health Teams for service a populations within the range of 45,000 to 60,000 people as laid out in the Vision for Change 2006 recommendations (General Adult Community Mental Health Teams to service a population of 50,000.
	Indicator Classification	□Person Centred Care □Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐ Use of Information ☑
		Workforce□ Use of Resources ☑ Governance, Leadership and Management □
4	KPI Target	NSP 2015 target: ≥ 50%
	KPI Calculation	Count
6	Data Source	From General Adult Community Mental Health Team to CHO Managers to Business Information
	Data Completeness	From General Adult Community Mental Health Team to CHO Managers to Business information Unit.
	Data Quality Issues	OTIIL.
7	Data Collection Frequency	□Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	The number of General Adult Community Mental Health Teams (GACMHT) per CHO and the populations served by each GACMHT.
10	International Comparison	
	-	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		□Daily □Weekly □ Monthly ☑ Quarterly □Bi-annually □Annually □Other – give
		details:
		Please indicate who is responsible for monitoring this KPI: Nationally -Yvonne O'Neill, Head of
		Planning, Performance and Programme Management, Mental Health Division, each ISA Manager
		and Executive Clinical Director, Area Mental Health Management Team.
	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		Monthly in arrears (June data reported in July)
		☑ Quarterly (quarter 1 data reported at end quarter 1)
	KDI Danasida a A	□Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	□National ☑ Regional ☑ CHO Area □Hospital
A E	I/Di ia wanawtad inhiah	County Institution ☑ Other – by sector
13	KPI is reported in which	☑ Performance Report (NSP) ☑ CompStat Other – give details:
10	reports ? Web link to data	http://www.hcg.jg/gng/cgnyiggs/Dublications/corporate/Derformance Departs Manthly.html
		http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html
	Additional Information	
Cont	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
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	ialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
Natio	National Lead and Division	
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Mei	ntal Health Services	
1	KPI Title	Number of General Adult Mental Health Team
2	KPI Description	The General Adult Community Mental Health Team 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
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). □Person Centred Care □ Effective Care Safe Care□ Better Health and Wellbeing □Use of Information
4	KDI Target	Workforce□Use of Resources ☑ Governance, Leadership and Management □
	KPI Target KPI Calculation	NSP 2015 target: 114 Count (point in time)
	Data Source	· ·
	Data Completeness Data Quality Issues	From General Adult Community Mental Health Team to CHO Manager to Business Information Unit.
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly oQuarterly □Bi-annually □Annually □Other – give details:
	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	The number of General Adult Community Mental Health Teams
10	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details: Please indicate who is responsible for monitoring this KPI:_RDPI, Yvonne O'Neill, Head of Planning, Performance and Programme Management.
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	□Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) ☑ Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional CHO Area □Hospital □ County □Institution ☑ Other – individual team
15	KPI is reported in which reports ?	☑ Performance Report (NSP) □CompStat Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Cont	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
		Division Ph. 045 880400
	ialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
Natio	nal Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Me	ntal Health Services	
1	KPI Title	
		Number of referrals (including re-referred) received by General Adult Mental Health Team
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
	Indicator Classification	□Person Centred Care ☑ Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐Use of Information
		Workforce□ Use of Resources ☑ Governance, Leadership and Management□
	KPI Target	NSP 2015 target: 41,486
5	KPI Calculation	Count (Cumulative)
6	Data Source	From General Adult Community Mental Health Team to CHO Manager to Business Information
	Data Completeness	Unit.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly oQuarterly □Bi-annually □Annually □Other – give
_	T 0 1111	details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	number of referrals by age group
10	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
''	iti i monitornig	,
		oDaily qWeekly ☑ Monthly oQuarterly oBi-annually oAnnually oOther – give details:
		Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,
		Performance and Programme Management, Mental Health Division, ISA Managers, Executive
		Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other –
	g.roquoney	give details:
13	KPI report period	Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		√ Monthly in arrears (June data reported in July)
		□Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
		☐ County ☐ Institution ☑ Other – individual team
15	KPI is reported in which	☑ Performance Report (NSP) □CompStat Other – give details:
L	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html
L		
	Additional Information	
Cont	act details for Data Manager	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
		Division Ph. 045 880400
Spec	ialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
Natio	onal Lead and Division	
L		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Mei	ntal Health Services	
1	KPI Title	
		Number of referrals (including re-referred) accepted by General Adult Mental Health Team
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.
	Indicator Classification	□Person Centred Care ☑ Effective Care
		Safe Care☐ Better Health and Wellbeing ☐Use of Information
		Workforce□Use of Resources ☑ Governance, Leadership and Management□
4	KPI Target	NSP 2015 target: 39,412
	KPI Calculation	Count (Cumulative)
	Data Source	
	Data Completeness	From General Adult Community Mental Health Team to CHO Manager to Business Information
	Data Quality Issues	Unit.
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly oQuarterly □Bi-annually □Annually □Other – give
•	Data Concentration (requestor)	details:
8	Tracer Conditions	Not applicable at this time
	Minimum Data Set	number of referrals accepted, by age
	International Comparison	Not applicable at this time
'		Two applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
''	iti i momtornig	· · · · · · · · · · · · · · · · · · ·
		oDaily qWeekly ☑ Monthly oQuarterly oBi-annually oAnnually oOther – give details:
		Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,
		Performance and Programme Management, Mental Health Division, ISA Managers, Executive
		Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	□ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually □ Other – give
'-	itti i iteporting i requency	details:
13	KPI report period	☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the
'	Troport period	same month of activity)
		Monthly in arrears (June data reported in July)
		□Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional CHO Area □Hospital
14	The reporting Aggregation	☐ County Institution ☑ Other – give details: individual teams
15	KPI is reported in which	☐ County Institution ☐ Other – give details: Individual teams ☐ Performance Report (NSP) ☐ CompStat Other – give details:
13	reports ?	Direction nance report (1901) Louinpotat Other – give details.
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
'	min to data	The part of the control of the contr
17	Additional Information	
	act details for Data Manager	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
	Data manager	Division Ph. 045 880400
Spec	ialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
National Lead and Division		r may r whagan bro montai r maryot Email. primp nanagan winono
	2000 0110 217101011	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health
		Well of Collino, Hational Director Mental Floatin Tol. of Coccota Division. Mental Health

	ntal Health Services	
1	KPI Title	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
_	KDI D. I. (I	
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 reoffer 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.
	Indicator Classification	□Person Centred Care ☑ Effective Care
		Safe Care☐ Better Health and Wellbeing ☐ Use of Information ☑
		Workforce ☑ Use of Resources Governance, Leadership and Management ☐
	KPI Target	NSP 2015 target: 46,367
	KPI Calculation Data Source	Count (Cumulative)
-	Data Completeness	From General Adult Community Mental Health Team to CHO Manager to Business Information
	Data Quality Issues	Unit.
	Data Collection Frequency	□Daily □Weekly ☑ Monthly oQuarterly □Bi-annually □Annually □Other – give details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	
1 70	IInternational Comparison	Number of referrals , number appointments offered, number of DNA, by age Not applicable at this time
10	International Comparison	Not applicable at this time
	International Comparison KPI Monitoring	Not applicable at this time KPI will be monitored on a (please indicate below) basis: Daily Weekly Monthly Quarterly Bi-annually Annually Other – give details: Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division, ISA Managers, Executive
11		Not applicable at this time KPI will be monitored on a (please indicate below) basis: Daily Weekly Monthly Quarterly Bi-annually Annually Other – give details: Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division, ISA Managers, Executive Clinical Directors and Area Mental Health Management Teams Daily Weekly Monthly Quarterly DBi-annually Annually Other – give
11 12	KPI Monitoring	Not applicable at this time KPI will be monitored on a (please indicate below) basis: Daily Weekly ☑ Monthly Quarterly Bi-annually Annually Other – give details: Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division, ISA Managers, Executive Clinical Directors and Area Mental Health Management Teams
11 12	KPI Monitoring KPI Reporting Frequency	Not applicable at this time KPI will be monitored on a (please indicate below) basis: Daily Weekly Monthly Quarterly Bi-annually Annually Other – give details: Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division, ISA Managers, Executive Clinical Directors and Area Mental Health Management Teams Daily Weekly Monthly Quarterly Bi-annually Annually Other – give details: Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) Monthly in arrears (June data reported in July) Quarterly in arrears (quarter 1 data reported in quarter 2)
11 12 13	KPI Monitoring KPI Reporting Frequency KPI report period	Not applicable at this time KPI will be monitored on a (please indicate below) basis: Daily Weekly ☑ Monthly Quarterly Bi-annually Annually Other – give details: Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division, ISA Managers, Executive Clinical Directors and Area Mental Health Management Teams □ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually □ Other – give details: ☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □ Monthly in arrears (June data reported in July) □ Quarterly in arrears (quarter 1 data reported in quarter 2) □ Rolling 12 months(previous 12 month period)
11 12 13	KPI Monitoring KPI Reporting Frequency	Not applicable at this time KPI will be monitored on a (please indicate below) basis: Daily Weekly ☑ Monthly Quarterly Bi-annually Annually Other – give details: Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division, ISA Managers, Executive Clinical Directors and Area Mental Health Management Teams □ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually □ Other – give details: ☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □ Monthly in arrears (June data reported in July) □ Quarterly in arrears (quarter 1 data reported in quarter 2) □ Rolling 12 months(previous 12 month period) □ National □ Regional ☑ CHO Area □ Hospital
11 12 13	KPI Monitoring KPI Reporting Frequency KPI report period KPI Reporting Aggregation KPI is reported in which	Not applicable at this time KPI will be monitored on a (please indicate below) basis: Daily Weekly ☑ Monthly Quarterly Bi-annually Annually Other – give details: Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division, ISA Managers, Executive Clinical Directors and Area Mental Health Management Teams □ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually □ Other – give details: ☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □ Monthly in arrears (June data reported in July) □ Quarterly in arrears (quarter 1 data reported in quarter 2) □ Rolling 12 months(previous 12 month period)
11 12 13 14 15	KPI Monitoring KPI Reporting Frequency KPI report period KPI Reporting Aggregation	Not applicable at this time KPI will be monitored on a (please indicate below) basis: Daily Weekly ☑ Monthly Quarterly Bi-annually Annually Other – give details: Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division, ISA Managers, Executive Clinical Directors and Area Mental Health Management Teams □ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually □ Other – give details: ☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □ Monthly in arrears (June data reported in July) □ Quarterly in arrears (quarter 1 data reported in quarter 2) □ Rolling 12 months(previous 12 month period) □ National □ Regional ☑ CHO Area □ Hospital □ County Institution ☑ Other – give details: individual teams
11 12 13 14 15	KPI Monitoring KPI Reporting Frequency KPI report period KPI Reporting Aggregation KPI is reported in which reports? Web link to data	Not applicable at this time KPI will be monitored on a (please indicate below) basis: Daily Weekly ☑ Monthly Quarterly Bi-annually Annually Other – give details: Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division, ISA Managers, Executive Clinical Directors and Area Mental Health Management Teams □ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually □ Other – give details: ☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □ Monthly in arrears (June data reported in July) □ Quarterly in arrears (quarter 1 data reported in quarter 2) □ Rolling 12 months(previous 12 month period) □ National □ Regional ☑ CHO Area □ Hospital □ County Institution ☑ Other – give details: individual teams ☑ Performance Report (NSP) □ CompStat Other – give details:
11 12 13 14 15 16	KPI Monitoring KPI Reporting Frequency KPI report period KPI Reporting Aggregation KPI is reported in which reports ?	Not applicable at this time KPI will be monitored on a (please indicate below) basis: Daily Weekly ☑ Monthly Quarterly Bi-annually Annually Other – give details: Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division, ISA Managers, Executive Clinical Directors and Area Mental Health Management Teams □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details: ☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months(previous 12 month period) □National □Regional ☑ CHO Area □Hospital □ County Institution ☑ Other – give details: individual teams ☑ Performance Report (NSP) □CompStat Other – give details: http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html
11 12 13 14 15 16 17 Cont	KPI Monitoring KPI Reporting Frequency KPI report period KPI Reporting Aggregation KPI is reported in which reports? Web link to data Additional Information act details for Data Manager /	Not applicable at this time KPI will be monitored on a (please indicate below) basis: Daily Weekly ☑ Monthly Quarterly Bi-annually Annually Other – give details: Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division, ISA Managers, Executive Clinical Directors and Area Mental Health Management Teams □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details: ☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months(previous 12 month period) □National □Regional ☑ CHO Area □Hospital □ County Institution ☑ Other – give details: individual teams ☑ Performance Report (NSP) □CompStat Other – give details: http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
11 12 13 14 15 16 17 Cont Spec	KPI Monitoring KPI Reporting Frequency KPI report period KPI Reporting Aggregation KPI is reported in which reports? Web link to data Additional Information	Not applicable at this time KPI will be monitored on a (please indicate below) basis: Daily Weekly ☑ Monthly Quarterly Bi-annually Annually Other – give details: Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division, ISA Managers, Executive Clinical Directors and Area Mental Health Management Teams □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details: ☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months(previous 12 month period) □National □Regional ☑ CHO Area □Hospital □ County Institution ☑ Other – give details: individual teams ☑ Performance Report (NSP) □CompStat Other – give details: http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html

Mei	ntal Health Services	
	I/DI T''	
	KPI Title	Number of cases closed/discharged by General Adult Mental Health Team
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 Healht Teams in
		conjunction with other indicators.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		□Person Centred Care ☑ Effective Care
		Safe Care☐ Better Health and Wellbeing ☐Use of Information√
		Workforce ☑ Use of Resources□Governance, Leadership and Management□
	KPI Target	NSP 2015 target: <i>31,529</i>
_	KPI Calculation	Count (Cumulative)
	Data Source	From General Adult Community Mental Health Team to CHO Manager to Business Information
	Data Completeness	Unit.
<u></u>	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly oQuarterly □Bi-annually □Annually □Other – give
_		details:
_	Tracer Conditions	not applicable at this time
	Minimum Data Set	number of cases, number discharged
10	International Comparison	not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
l ''	iti i monitoring	Daily Weekly ☑ Monthly Quarterly Bi-annually Annually oOther – give details:
		Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,
		Performance and Programme Management, Mental Health Division, ISA Managers, Executive
		Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	□ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually □ Other – give
'-	itti i itoporting i requency	details:
13	KPI report period	☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		☐Monthly in arrears (June data reported in July)
		□Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
		☐ County Institution ☑ Other – give details: individual teams
15	KPI is reported in which	☑ Performance Report (NSP) □CompStat Other – give details:
1	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html
	Additional Information	
Cont	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
		Division Ph. 045 880400
	ialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
Natio	nal Lead and Division	
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Mei	ntal Health Services	
	KPI Title	Number of Psychiatry of Old Age Mental HealthTeams
2	KPI Description	The Psychiatry of Old Age 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 Old Age Teams by population as per Vision
		recommendations
	Indicator Classification	□Person Centred Care ☑ Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐ Use of Information ☑
		Workforce□Use of Resources ☑ Governance, Leadership and Management□
	KPI Target	NSP 2015 target: 25
_	KPI Calculation	Count (point in time)
6	Data Source	From Psychiatry of Old Age Community Mental Health Team to CHO Manager to Business
	Data Completeness	Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly Quarterly □Bi-annually □Annually □Other – give details:
	Tracer Conditions	Not applicable at this time
-	Minimum Data Set	Number of Teams
10	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		Daily Weekly ☑ Monthly Quarterly Bi-annually Annually oOther – give details:
		Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,
		Performance and Programme Management, Mental Health Division, ISA Managers, Executive
		Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give
		details:
13	KPI report period	☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		☐Monthly in arrears (June data reported in July)
		□Quarterly in arrears (quarter 1 data reported in quarter 2)
<u> </u>		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional □ CHO Area □Hospital
L		☐ County Institution ☑ Other – give details: individual teams
15	KPI is reported in which	☑ Performance Report (NSP) □CompStat Other – give details:
L	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
	A 1 100 11 6 00	
	Additional Information	
Cont	act details for Data Manager i	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
		Division Ph. 045 880400
<u> </u>	ialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
Natio	onal Lead and Division	
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Mei	ntal Health Services	
1	KPI Title	
		Number of referrals (including re-referred) received by Psychiatry of Old Age Mental Health Teams
2	KPI Description	This metric is designed to measure the number of referrals received by the Psychiatry of Old Age 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.
	Indicator Classification	□Person Centred Care ☑ Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐Use of Information √
		Workforce √ Use of Resources□Governance, Leadership and Management □
4	KPI Target	NSP 2015 target: 10,986
	KPI Calculation	Count (Cumulative)
6	Data Source	From Bouchista, of Old Ana Community Mantal Health Toom to CHO Manager to Dusings
	Data Completeness	From Psychiatry of Old Age Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	Information Unit.
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly oQuarterly □Bi-annually □Annually □Other – give
		details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	Number of referrals
10	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		Daily Weekly ☑ Monthly Quarterly Bi-annually Annually oOther – give details:
		Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,
		Performance and Programme Management, Mental Health Division, ISA Managers, Executive
		Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give
		details:
13	KPI report period	☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		☐Monthly in arrears (June data reported in July)
		□Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional LHO Area □Hospital
		☐ County Institution ☐ Other – give details: individual teams
15	KPI is reported in which	☑ Performance Report (NSP) □CompStat Other – give details:
40	reports ?	http://www.hos.is/sou/sourises/Dublications/source-1/Duf-
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html
17	Additional Information	
Cont	act details for Data Manager	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
	y	Division Ph. 045 880400
Spec	ialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
	onal Lead and Division	, , , , , , , , , , , , , , , , , , ,
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health
		· · · · · · · · · · · · · · · · · · ·

Mei	ntal Health Services	
1	KPI Title	
		Number of referrals (including re-referred) accepted by Psychiatry of Old Age Mental Health Team
2	KPI Description	This metric is designed to measure the number of referrals accepted based on the criteria operated
	-	the Psychiatry of Old Age 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.
	Indicator Classification	□Person Centred Care ☑ Effective Care
		Safe Care☐ Better Health and Wellbeing ☐Use of Information
		Workforce□ Use of Resources ☑ Governance, Leadership and Management□
		Osc of Nessarces E. Governance, Ecadorship and Management E.
4	KPI Target	NSD 2015 target: 0.007
	KPI Calculation	NSP 2015 target: 9,887 Count (Cumulative)
	Data Source	Outil (Outilidative)
	Data Completeness	From Psychiatry of Old Age Community Mental Health Team to ISA Manager to Business
		Information Unit.
7	Data Quality Issues	Deily DWashly O Marthly of wasterly Di granuelly DAnnyally Dother sive
'	Data Collection Frequency	□Daily □Weekly ☑ Monthly oQuarterly □Bi-annually □Annually □Other – give
_	Tuesan Canditiana	details:
	Tracer Conditions	Not applicable at this time
	Minimum Data Set	Number of referrals
10	International Comparison	Not applicable at this time
4.	I/DI 14	
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		Daily Weekly ☑ Monthly Quarterly Bi-annually oAnnually oOther – give details:
		Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,
		Performance and Programme Management, Mental Health Division, ISA Managers, Executive
		Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give
		details:
13	KPI report period	☐ Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		☐Monthly in arrears (June data reported in July)
		□Quarterly in arrears (quarter 1 data reported in quarter 2)
L		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional CHO Area □Hospital
		☐ County Institution ☐ Other – give details: individual teams
15	KPI is reported in which	☑ Performance Report (NSP) □CompStat Other – give details:
	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Cont	act details for Data Manager	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
	•	Division Ph. 045 880400
Specialist Lead		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
National Lead and Division		p
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health
		5 55

Mei	ntal Health Services	
1	KPI Title	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 iii) > 2 Weeks but <= 4 Weeks v) > 3 Weeks but <= 4 Weeks v) > 4 Weeks but <= 8 Weeks vi) > 8 Weeks but <= 12 Weeks vii) > 12 Weeks
2	KPI Description	Refers to Psychiatry of Old Age 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 reoffer 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 Old Age MH team for mental health assessment provide a measure of service access in the community and the timeliness of that access.
	Indicator Classification	□Person Centred Care ☑ Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐Use of Information
		Workforce Use of Resources ☑ Governance, Leadership and Management □
4	KPI Target	NSP 2015 target: 11,238
5	KPI Calculation	Count (Cumulative)
6	Data Source	From Psychiatry of Old Age Community Mental Health Team to CHO Manager to Business
	Data Completeness	Information Unit.
7	Data Quality Issues Data Collection Frequency	□Daily □Weekly ☑ Monthly oQuarterly □Bi-annually □Annually □Other – give
_	Tuesau Canditiana	details:
8	Tracer Conditions Minimum Data Set	Not applicable at this time number of appointments offered
_	International Comparison	Not applicable at this time
	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
	, and the second	Daily Weekly Monthly Quarterly Bi-annually Annually oOther – give details: Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division, ISA Managers, Executive Clinical Directors and Area Mental Health Management Teams
	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
	KPI report period	 ☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) ☐ Monthly in arrears (June data reported in July) ☐ Quarterly in arrears (quarter 1 data reported in quarter 2) ☐ Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital □ County Institution ☑ Other – give details: individual teams
15	KPI is reported in which reports ?	☑ Performance Report (NSP) □CompStat Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
	Additional Information	
Cont	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
Specialist Lead		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
National Lead and Division		
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Mei	ntal Health Services	
	KPI Title	Number of cases closed/discharged by Psychiatry of Old Age Mental Health Team
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 Old Age 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.
	Indicator Classification	□Person Centred Care ☑ Effective Care
		Safe Care□ Better Health and Wellbeing □Use of Information
		Workforce□ Use of Resources ☑ Governance, Leadership and Management □
4	KPI Target	NSP 2015 target: 7,910
	KPI Calculation	Count (Cumulative)
6	Data Source	From Dayahistay of Old Aga Community Mantal Health Toom to CHO Managar to Business
	Data Completeness	From Psychiatry of Old Age Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	illiottiduoti Otiit.
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give
		details:
8	Tracer Conditions	Not applicable at this time
9	Minimum Data Set	Number of cases discharged, closed
10	International Comparison	Not applicable at this time
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
••	Ta Timomicomig	Daily Weekly ☑ Monthly Quarterly Bi-annually Annually oOther – give details:
		Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,
		Performance and Programme Management, Mental Health Division, ISA Managers, Executive
		Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give
	, , , , , , , , , , , , , , , , , , ,	details:
13	KPI report period	☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		☐Monthly in arrears (June data reported in July)
		□Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
		☐ County Institution ☐ Other – give details: individual teams
15	KPI is reported in which	☑ Performance Report (NSP) □CompStat Other – give details:
	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html
17	Additional Information	
_	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
	_	Division Ph. 045 880400
Specialist Lead		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
Natio	National Lead and Division	
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Me	ntal Health Services	
1	KPI Title	Number of Child and Adolescent Community Mental Health 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
	Tradionalo	Mental Health Commission.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		□Person Centred Care □Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐Use of Information ☐
		WorkforceoUse of Resources √ Governance, Leadership and Management o
4	KPI Target	NSP 2015 target: -64
5	KPI Calculation	Count point in time
6	Data Source	Count point in time
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	Thom CANITO Community Wellar reality reality to one manager to business information onit.
7	Data Collection Frequency	□Daily □Weekly □Monthly √Quarterly □Bi-annually □Annually □Other – give
'	Data Collection Frequency	details:
8	Tracer Conditions	1 team per 50,000 head of population as per VFC
9	Minimum Data Set	No of CAMHS Community Mental Health Teams
	International Comparison	No
	KPI Monitoring	Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,
''	KFI Worldoning	Performance and Programme Management, Mental Health Division, ISA Managers, Executive
		Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	□Daily □Weekly □Monthly √Quarterly □Bi-annually □Annually □Other – give
12	RFI Reporting Frequency	details:
12	KPI report period	√Current (e.g. daily data reported on that same day of activity, monthly data reported within the
13	KFI Teport period	same month of activity)
		□Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
14	KPI Reporting Aggregation	□Rolling 12 months(previous 12 month period) □National □Regional √CHO Area □Hospital
14	RFI Reporting Aggregation	☐ County ☐ Institution √Other – give details: Individual Teams; ISA
45	KPI is reported in which	☐ County ☐ Institution Votiter – give details. Individual Teams, ISA ☐ Performance Report (NSP) ☐ CompStat ☐ Other – give details: Annual CAMHS report
15	reports ?	Performance Report (NSP) Licompotat Licompotat Licompotat Licompotation Grant Grant Calvino report
46	•	http://www.hse.ie/eng/services/Publications/corporate/performancereports/2012pr.html
16	Web link to data	http://www.hse.ie/eng/services/Publications/services/Mentalhealth/camhs2010.html
	Additional Information	
Cont	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
		Division Ph. 045 880400
	ialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
National Lead and Division		
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Me	ntal Health Services	
1	KPI Title	Number of Child and Adolescent 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.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		□Person Centred Care □Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐Use of Information ☐
		WorkforceoUse of Resources √ Governance, Leadership and Management o
4	KPI Target	NSP 2015 target: -4
5	KPI Calculation	Count point in time
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly □Monthly √Quarterly □Bi-annually □Annually □Other – give
		details:
8	Tracer Conditions	As per VFC
9	Minimum Data Set	As per VFC
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		oDaily oWeekly o Monthly oQuarterly oBi-annually $\sqrt{Annually}$ oOther – give details:
		Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,
		Performance and Programme Management, Mental Health Division, ISA Managers, Executive
		Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	□Daily □Weekly □Monthly √Quarterly □Bi-annually □Annually □Other – give
		details:
13	KPI report period	√Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		☐Monthly in arrears (June data reported in July)
		□Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
		☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which	☑ Performance Report (NSP) ☐CompStat ☑ Other – give details: Annual CAMHS report
	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performancereports/2012pr.html
17	Additional Information	http://www.hse.ie/eng/services/Publications/services/Mentalhealth/camhs2010.html
	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
Donact details for Data Manager /		Division Ph. 045 880400
Snec	cialist Lead	
	onal Lead and Division	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
ivatio	DIIAI LEAU AIIU DIVISION	Appa O'Coppor National Director Montal Hoolth, Tal. 04 6250540, Director Montal Hoolth
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Me	Mental Health Services	
1	KPI 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
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		□Person Centred Care □Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐ Use of Information ☐
		Workforce□Use of Resources ☑ Governance, Leadership and Management □
4	KPI Target	NSP 2015 target: -3
5	KPI Calculation	Count point in time
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give
		details:
8	Tracer Conditions	1 team per 300,000 head of population as per VFC
9	Minimum Data Set	As per VFC
	International Comparison	yes
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		oDaily oWeekly o Monthly oQuarterly oBi-annually √Annually oOther – give details:
		Please indicate who is responsible for monitoring this KPI: Yvonne O'Neill, Head of Planning,
		1
		Performance and Programme Management, Mental Health Division, ISA Managers, Executive
		Clinical Directors and Area Mental Health Management Teams
12	KPI Reporting Frequency	□Daily □Weekly □Monthly ☑ Quarterly □Bi-annually □Annually □Other – give
		details:
13	KPI report period	√Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		☐Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital
		☐ County ☐ Institution ☐ Other – give details:
15	KPI is reported in which	☑ Performance Report (NSP) □CompStat ☑ Other – give details: Annual CAMHS report
	reports ?	No. 1
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performancereports/2012pr.html http://www.hse.ie/eng/services/Publications/services/Mentalhealth/camhs2010.html
17	Additional Information	
Conf	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
Tanada actano for Batta manager /		Division Ph. 045 880400
Specialist Lead		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
National Lead and Division		
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health
		Paris C Common, regular birotto montan ricatan 10. 01 0002042 Dission. Montan ricatan

Mei	ntal Health Services	
	VDI THE	Number of ObitA/Address of Advissions to UOF/UOF Funded ObitA and Advissors to UoF/UOF
1	KPI Title	Number of Child/Adolescent admissions to HSE/HSE Funded Child and Adolescent mental health in-patient units
2	KPI Description	Number of admissions to HSE Child and Adolescent Inpatient Units.
	KPI Rationale	To monitor the number of admissions to each C&A unit
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		□Person Centred Care □Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐Use of Information ☐
		WorkforceoUse of Resources ☑ Governance, Leadership and Management o
4	KPI Target	NSP 2015 target: -231
	KPI Calculation	Count Cumulative
6	Data Source	ount oundains
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	The state of the s
7	Data Collection Frequency	□Daily □Weekly √Monthly □Quarterly □Bi-annually □Annually □Other – give
•	Data Conconon Froquency	details:
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	Patient Name, Address, Date of Birth, Referral source, General Practitioners
		details, Parental/Guardian consent forms. Parent/Guardian contact details. For each addmission a
		form is sent to the Mental Health Commission informing of admission
10	International Comparison	No
	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give
		details:
		Please indicate who is responsible for monitoring this KPI: Health Service and Mental Health
		commission
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give
	Tricporting Frequency	details:
13	KPI report period	√Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		□Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	
14	NET Neporting Aggregation	□ National □ Regional ☑ CHO Area □ Hospital □ County √Institution □ Other – give details:
15	KPI is reported in which	☐ County Viristitution ☐ Other – give details. ☐ Performance Report (NSP) ☐ CompStat ☐ Other – give details: Annual CAMHS report
IJ	reports ?	E i enormance report (NOF) — Doompotat & Other – give details. Annual CANITO report
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performancereports/2012pr.html
		http://www.hse.ie/eng/services/Publications/services/Mentalhealth/camhs2010.html
	Additional Information	
Contact details for Data Manager /		Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
_		Division Ph. 045 880400
	cialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
Natio	onal Lead and Division	
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Mei	ntal Health Services	
1	KPI Title	Number of children/adolescents admitted to adult HSE mental health inpatient units:
'	Kritiue	i) <16 yrs
		ii) <17 yrs
		iii) <18 yrs
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.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		□Person Centred Care □Effective Care
		Safe Care Better Health and Wellbeing Use of Information
4	KPI Target	WorkforceoUse of Resources ☑ Governance, Leadership and Management o NSP 2015 target: - 30 (<16 yrs - 0, <17 yrs - 0, <18 yrs - <30)
5	KPI Calculation	Count Cumulative
6	Data Source	Count Cumulative
	Data Completeness	Mental Health Commission to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly Monthly ☑ Quarterly □Bi-annually □Annually □Other – give
	, ,	details:
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
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners
		details,Parental/Guardian consent forms. Parent/Guardian contact details. For each addmission a
40	1.4	form is sent to the Mental Health Commission informing of admission
	International Comparison KPI Monitoring	No
11	KPI Wonitoring	KPI will be monitored on a (please indicate below) basis: □Daily □Weekly □ Monthly ☑ Quarterly □Bi-annually □Annually □Other – give
		□Daily □Weekly □ Monthly ☑ Quarterly □Bi-annually □Annually □Other – give details: Mental Health Commission
12	KPI Reporting Frequency	□Daily □Weekly Monthly √Quarterly □Bi-annually □Annually □Other – give
'-	The recogniting recognition	details:
13	KPI report period	☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		☐Monthly in arrears (June data reported in July)
		□Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional √ CHO Area □ Hospital
45	KDI is assessed the subtable	☐ County Institution ☐ Other – give details:
15	KPI is reported in which	☑ Performance Report (NSP) □CompStat ☑ Other – give details: Annual CAMHS report
16	reports ? Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performancereports/2012pr.html
		http://www.hse.ie/eng/services/Publications/services/Mentalhealth/camhs2010.html
	Additional Information	
Cont	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
8	sialist Load	Division Ph. 045 880400
	cialist Lead onal Lead and Division	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
Ivatio	DIIAI LEAU AIIU DIVISIOII	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health
		Printo O Contitor, Mational Director Michael Ficaltif (FC), 01 0002042 DVISION, Michael Ficaltif

Mai	Mental Health Services		
ME			
1	KPI Title	Number of involuntary admissions of children and adolescents	
	KPI Description	Involuntary admission of children is regulated by procedures under Section 25 of the Mental Health	
	P	Act.	
3	KPI Rationale	To monitor the trend of involuntary admission.	
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification	
		(in some cases you may need to choose two).	
		□Person Centred Care	
		Safe Care ☐ Better Health and Wellbeing ☐Use of Information ☐	
		WorkforceoUse of Resources Governance, Leadership and Management o	
4	KPI Target	NSP 2015 target: - 16	
5	KPI Calculation	Count Cumulative	
6	Data Source		
	Data Completeness	CAMHS Team /Approved Centre to Business Information Unit.	
	Data Quality Issues		
7	Data Collection Frequency	□Daily □Weekly Monthly Quarterly □Bi-annually √Annually □Other – give details:	
8	Tracer Conditions	Involuntary admission of children is regulated by procedures under Section 25 of the Mental Health	
		Act.	
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners	
		details, Parental/Guardian consent forms. Parent/Guardian contact details. For each addmission a	
		form is sent to the Mental Health Commission informing of admission	
10	International Comparison	Yes	
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:	
		□Daily □Weekly ☑ Monthly Quarterly □Bi-annually □ Annually □Other – give	
		details:	
		Please indicate who is responsible for monitoring this KPI:Yvonne O'Neill, Head of Planning,	
		Performance and Programme Management, Mental Health Division, ISA Managers, Executive	
		Clinical directors and Area Mental Health Management Teams	
12	KPI Reporting Frequency		
		□ Daily □ Weekly Monthly Quarterly □ Bi-annually √ Annually □ Other – give details:	
13	KPI report period	$\sqrt{\text{Current}}$ (e.g. daily data reported on that same day of activity, monthly data reported within the	
		same month of activity)	
		☐Monthly in arrears (June data reported in July)	
		□Quarterly in arrears (quarter 1 data reported in quarter 2)	
	1/21 Z	□Rolling 12 months(previous 12 month period)	
14	KPI Reporting Aggregation	□National □Regional √CHO Area □Hospital	
		☐ County √ Institution ☐ Other – give details:	
15	KPI is reported in which	☑ Performance Report (NSP) □CompStat ☑ Other – give details: Annual CAMHS report	
40	reports ?	http://www.hoo.io/ong/gon/joog/Dublications/gongrats/gonfarmanagranats/2042ar.html	
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performancereports/2012pr.html http://www.hse.ie/eng/services/Publications/services/Mentalhealth/camhs2010.html	
17	Additional Information		
Cont	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health	
	-	Division Ph. 045 880400	
Specialist Lead		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie	
National Lead and Division			
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health	

Mei	Mental Health Services		
III O	That Houself Got Floor		
1	KPI Title	Percentage of involuntary admissions of children and adolescents	
2	KPI Description		
		Involuntary admissions expressed as a percentage of all admissions of children and adolescents.	
3	KPI Rationale	To monitor trends of involuntary admission	
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification	
		(in some cases you may need to choose two).	
		□Person Centred Care □Effective Care	
		Safe Care ☐ Better Health and Wellbeing ☐Use of Information ☐	
		WorkforceoUse of Resources √ Governance, Leadership and Management o	
4	KPI Target	NSP 2015 target:-5%	
5	KPI Calculation		
		Involuntary admissions expressed as a percentage of all admissions of children and adolescents.	
6	Data Source		
	Data Completeness	CAMHS Unit /Approved Centre to Business Information Unit.	
	Data Quality Issues		
7	Data Collection Frequency	□Daily □Weekly Monthly Quarterly □Bi-annually √Annually □Other – give details:	
8	Tracer Conditions	As per description	
9	Minimum Data Set	Yes	
10	International Comparison	Yes	
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:	
		□Daily □Weekly □ Monthly □Quarterly □Bi-annually □Annually □Other – give	
		details:	
		Please indicate who is responsible for monitoring this	
		KPI:	
12	KPI Reporting Frequency		
		□Daily □Weekly Monthly Quarterly □Bi-annually √Annually □Other – give details:	
13	KPI report period	√Current (e.g. daily data reported on that same day of activity, monthly data reported within the	
		same month of activity)	
		☐Monthly in arrears (June data reported in July)	
		Quarterly in arrears (quarter 1 data reported in quarter 2)	
		□Rolling 12 months(previous 12 month period)	
14	KPI Reporting Aggregation	□National □Regional √ CHO Area □Hospital	
		☐ County √ Institution ☐ Other – give details:	
15	KPI is reported in which	☑ Performance Report (NSP) □CompStat ☑ Other – give details: Annual CAMHS report	
	reports ?	http://www.hos.is/sou/comings/Dublications/companyle/configurations/Dublications/companyle/configurations/Dublications/companyle/configurations/Dublications/companyle/configurations/Dublications/companyle/configurations/Dublications/companyle/configurations/Dublications/companyle/configurations/Dublications/companyle/configurations/Dublications/companyle/configurations/Dublications/Configurati	
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performancereports/2012pr.html http://www.hse.ie/eng/services/Publications/services/Mentalhealth/camhs2010.html	
17	Additional Information		
Cont	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health	
		Division Ph. 045 880400	
Spec	cialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie	
National Lead and Division		- Timp Transgart Dio montai Finalio Eritain primpinanagan@noono	
, tau	JIMI EUUM MIIM DIVISIVII	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health	
		Printe C Control, National Director Mental Fleature 16t. 01 0002042 Division. Mental Fleature	

Mei	ntal Health Services		
1	KPI Title	Number of child/adolescent referrals (including re-referred) 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 16years but not yet reached their 18th birthday referred to each CAMH Service during the reporting period.	
3	KPI Rationale	poriod.	
		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.	
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification	
		(in some cases you may need to choose two).	
		□Person Centred Care □Effective Care	
		Safe Care ☐ Better Health and Wellbeing ☐Use of Information ☐	
		WorkforceoUse of Resources √ Governance, Leadership and Management o	
	KPI Target	NSP 2015 target:-17,254	
5	KPI Calculation	Count Cumulative— the total number of child/adolescent referrals received each month	
6	Data Source	C CAMILO C SI M CITT I COLOM	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.	
	Data Quality Issues		
7	Data Collection Frequency	□Daily □Weekly √Monthly Quarterly □Bi-annually Annually □Other – give details:	
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	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	KPI will be monitored on a (please indicate below) basis:	
		□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give	
		details:	
		Please indicate who is responsible for monitoring this KPI:	
12	KPI Reporting Frequency	Doile Discoulte Manthly Quarterly Discourselly Amounts Discourselly Dother wire detailed	
42	KDI repet period	□Daily □Weekly √Monthly Quarterly □Bi-annually Annually □Other – give details:	
13	KPI report period	√Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)	
		□Monthly in arrears (June data reported in July)	
		• • • • • • • • • • • • • • • • • • • •	
		□Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months(previous 12 month period)	
14	KPI Reporting Aggregation	□Notining 12 months(previous 12 month period) □National □Regional √CHO Area □Hospital	
14	Ari Keporung Aggregation	☐ County Institution √Other – give details: individual teams	
15	KPI is reported in which	☐ Godiny Institution Votice—give details: Individual teams ☐ Performance Report (NSP) ☐ CompStat ☑ Other – give details: Annual CAMHS report	
	reports ?	give detailed respect (1901) = 10011 point = 101101 give detailed ruiniled or will be report	
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performancereports/2012pr.html	
17	Additional Information	http://www.hse.ie/eng/services/Publications/services/Mentalhealth/camhs2010.html	
Cont	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health	
		Division Ph. 045 880400	
Spec	ialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie	
	lational Lead and Division		
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health	

Ме	ntal Health Services	
1	KPI Title	No. of child / adolescent referrals (including re-referred) accepted by Mental Health Services
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 18 th birthday accepted by each CAMH Service during the reporting period.
3	KPI Rationale	Interfect reading and the state of the state
		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.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		□Person Centred Care □Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐Use of Information ☐
		WorkforceoUse of Resources √ Governance, Leadership and Management o
4	KPI Target	NSP 2015 target - 13,803
5	KPI Calculation	Count Cumulative— the total number of child/adolescent referrals acepted each month
6	Data Source	Count Carrialitative the total number of chila/adolescent folerals deeppted edol month
_	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	Troni or winte community montair rount to orre manager to backnoss miorination onto
7	Data Collection Frequency	□Daily □Weekly √Monthly Quarterly □Bi-annually Annually □Other – give details:
l '	Data Concention Frequency	Tibolity Daily Diversity Walterly Distribution Airitally Dotter - give details.
8	Tracer Conditions	All CAMHS teams screen referrals received, those deemed to be urgent are seen as a priority,
"	Tracer Containons	while those deemed to be routine are placed on a waiting list to be seen.
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners
	Millindin Bata Get	details, Parental/Guardian consent forms. Parent/Guardian contact details.
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
''	Tti Timomtornig	□Daily □Weekly √Monthly □Quarterly □Bi-annually □Annually □Other – give
		details:
		Please indicate who is responsible for monitoring this
		KPI:
12	KPI Reporting Frequency	NT I.
12	RFI Reporting Frequency	□Daily □Weekly √Monthly Quarterly □Bi-annually Annually □Other – give details:
12	KPI report period	√Current (e.g. daily data reported on that same day of activity, monthly data reported within the
13	KFT Teport period	same month of activity)
		□Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional √CHO Area □Hospital
14	A reporting Aggregation	☐ County Institution √Other – give details: individual teams
15	KPI is reported in which	☐ County Institution Votrier – give details. Individual teams ☐ Performance Report (NSP) ☐ CompStat ☑ Other – give details: Annual CAMHS report
13	reports ?	Enormance Report (Nor) — Doompotat & Other — give details. Annual CAIVITS report
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performancereports/2012pr.html
		http://www.hse.ie/eng/services/Publications/services/Mentalhealth/camhs2010.html
	Additional Information	
Cont	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
		Division Ph. 045 880400
Specialist Lead		Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
	onal Lead and Division	
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health
		production of the state of the

Me	ntal Health Services	
1	KPI Title	Total number of new (including re-referred) child/adolescent cases offered first appointment (seen &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
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). □Person Centred Care □Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐Use of Information ☐
_	KDI T	WorkforceoUse of Resources √ Governance, Leadership and Management o
4	KPI Target	NSP 2015 target - 14,155
5	KPI Calculation	Count number of new appointments offerred and subtract those who did not attend
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly √Monthly Quarterly □Bi-annually Annually □Other – give details:
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	Patient Name, Address, Date of Birth, Referral source, General Practitioners
		details, Parental/Guardian consent forms. Parent/Guardian contact details.
10	International Comparison	No
	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
	g	□Daily □Weekly √Monthly □Quarterly □Bi-annually □Annually □Other – give details: Please indicate who is responsible for monitoring this KPI:
12	KPI Reporting Frequency	□Daily □Weekly √Monthly □Quarterly □Bi-annually Annually □Other – give details:
13	KPI report period	√Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□ National □ Regional √ CHO Area □ Hospital □ County Institution √ Other – give details: individual teams
15	KPI is reported in which	☐ Performance Report (NSP) ☐ CompStat ☐ Other – give details: Annual CAMHS report
	reports ?	http://www.hse.ie/eng/services/Publications/corporate/performancereports/2012pr.html
16	Web link to data	
17	Additional Information	http://www.hse.ie/eng/services/Publications/services/Mentalhealth/camhs2010.html
Contact details for Data Manager /		Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
Spec	cialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
Natio	onal Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Mai	ntal Health Services	
INICI	ital ricaltii Services	
1	KPI Title	Number of cases closed/discharged by CAMHS service
	KPI Description	This metric is designed to measure the number of cases closed/discharged from each CAMH
_	Tit i Boodilption	Service during the reporting period.
		os nos damig als 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.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		□Person Centred Care □Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐Use of Information ☐
		WorkforceoUse of Resources √ Governance, Leadership and Management o
4	KPI Target	NSP 2015 target: - 11,042
	KPI Calculation	Total number of child/adolescent cases closed/discharged.
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly √Monthly Quarterly □Bi-annually Annually □Other – give details:
8	Tracer Conditions	Cases are closed or discharged back to GP, Other CAMHS, Other Community Service and Adult
		Service
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners
		details, Parental/Guardian consent forms. Parent/Guardian contact details. Discharge summary letter
	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		□Daily □Weekly √ Monthly □Quarterly □Bi-annually □Annually □Other – give
		details:
		Please indicate who is responsible for monitoring this KPI:RDO & Care Group
12	KPI Reporting Frequency	□Daily □Weekly √Monthly □Quarterly □Bi-annually Annually □Other – give
		details:
13	KPI report period	$\sqrt{\text{Current}}$ (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		☐Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional √CHO Area □Hospital
4.5	VB.:	☐ County Institution √Other – give details: individual teams
15	KPI is reported in which	☑ Performance Report (NSP) □CompStat ☑ Other – give details: Annual CAMHS report
40	reports ?	http://www.hse.ie/eng/services/Publications/corporate/performancereports/2012pr.html
16	Web link to data	http://www.hse.ie/eng/services/Publications/services/Mentalhealth/camhs2010.html
17 Additional Information		
Contact details for Data Manager /		Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
		Division Ph. 045 880400
Spec	ialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
National Lead and Division		
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health
		Property of the second

Me	ntal Health Services	
1	KPI Title	Percentage of cases closed/discharged by CAMHS service
	KPI Description	
		This metric is designed to measure the number of cases closed/discharged by each CAMH Service during the reporting period expressed as a percentage of accepted referrals.
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 /nationally.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
	maicator orassincation	(in some cases you may need to choose two).
		□Person Centred Care □Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐Use of Information ☐
		WorkforceoUse of Resources √ Governance, Leadership and Management o
4	KPI Target	NSP 2015 target: -80%
5	KPI Calculation	Count (Cumal, total number of child/adolescent cases closed/discharged and divide by number of
		referrals accepted
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly √Monthly Quarterly □Bi-annually Annually □Other – give details:
8	Tracer Conditions	Cases are closed or discharged back to GP, Other CAMHS, Other Community Service and Adult Service
9	Minimum Data Set	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
	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details: Please indicate who is responsible for monitoring this KPI:
12	KPI Reporting Frequency	□Daily □Weekly √Monthly □Quarterly □Bi-annually Annually □Other – give details:
13	KPI report period	√Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
	KDI Donoution A	□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional √CHO Area □Hospital
45	KPI is reported in which	☐ County Institution √Other – give details: individual teams
15	•	☑ Performance Report (NSP) □CompStat ☑ Other – give details: Annual CAMHS report
16	reports ? Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performancereports/2012pr.html
		http://www.hse.ie/eng/services/Publications/services/Mentalhealth/camhs2010.html
	Additional Information	
Cont	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health Division Ph. 045 880400
	cialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
Natio	onal Lead and Division	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health
		Fund of Comment, Heaternan Birocker Mondai Front of Cooper E. British Mondai Front of

Mei	ntal Health Services	
1	KPI Title	Percentage on waiting list for first appointment at end of each quarter by wait time:
'	THE THE	i) <3 months
		ii) 3-6 months
		iii) 6-9 months
		iv) 9-12 months
		v) >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) as a percentage of all waiting.
3	KPI Rationale	Wait times to CAMHS for mental health assessment provide a measure of the response time of the
		service.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		□Person Centred Care □Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐Use of Information ☐
	KDI Tavasi	WorkforceoUse of Resources √ Governance, Leadership and Management o
4	KPI Target	NSP 2015 target: - (<3mths - 44%, 3-6 mths - 20%, 6-9 mths - 13%, 9-12 mths - 23%, >12 mths
5	KPI Calculation	– 0) Count point in time – the number of child/adolescent on waiting list at the each quarter by time
"	N i Calculation	length of time on wait list and divide by total number on wait list
6	Data Source	length of time on wait list and divide by total number on wait list
_	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	g
7	Data Collection Frequency	□Daily □Weekly Monthly √Quarterly □Bi-annually Annually □Other – give details:
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	Patient Name, Address, Date of Birth, Referral source, General Practitioners
		details,Parental/Guardian consent forms. Parent/Guardian contact details.
	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		□Daily □Weekly □ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
		Please indicate who is responsible for monitoring this
		KPI:
12	KPI Reporting Frequency	N 1
'-	Transferring Frequency	□Daily □Weekly Monthly √Quarterly □Bi-annually Annually □Other – give details:
13	KPI report period	√Current (e.g. daily data reported on that same day of activity, monthly data reported within the
1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	same month of activity)
		□Monthly in arrears (June data reported in July)
1		□Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional √ CHO Area □Hospital
		☐ County Institution √Other – give details: individual teams
15	KPI is reported in which	☑ Performance Report (NSP) □CompStat ☑ Other – give details: Annual CAMHS report
	reports ?	http://www.hog.io/ong/ong/ong/on/Dublications/
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performancereports/2012pr.html http://www.hse.ie/eng/services/Publications/services/Mentalhealth/camhs2010.html
	Additional Information	
Cont	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
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	ialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
Natio	onal Lead and Division	010 N. C. I. D. C. M. C. I. D. C. M. C. I. D. C.
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Mei	ntal Health Services	
	KDI T''	
1	KPI Title	Number on waiting list for first appointment at end of each quarter by wait time:
		i) <3 months
		ii) 3-6 months
		iii) 6-9 months iv) 9-12 months
		v) >12 months
2	KPI Description	Wait time: The time elapsed from the point at which the referral is received by a member of the
_	iti i Description	CAMHS team to the day the assessment takes place (less any delay due to client postponement of
		assessment).
		dooddinenty.
3	KPI Rationale	Wait times to CAMHS for mental health assessment provide a measure of the response time of the
		service.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		□Person Centred Care □Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐Use of Information ☐
		WorkforceoUse of Resources √ Governance, Leadership and Management o
4	KPI Target	NSP 2015 target/Expected activity: - (<3 mths - 1,153, 3-6 mths - 534, 6-9 mths - 331, 9-12 mths
		– 614, >12 mths – 0)
5	KPI Calculation	Count Point in time – the number of child/adolescent on waiting list at the each quarter by time
		length of time on wait list
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly Monthly √Quarterly □Bi-annually Annually □Other – give details:
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	Patient Name, Address, Date of Birth, Referral source, General Practitioners
		details,Parental/Guardian consent forms. Parent/Guardian contact details.
	International Comparison	No .
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		□Daily □Weekly □ Monthly □Quarterly □Bi-annually □Annually □Other – give
		details:
		Please indicate who is responsible for monitoring this
42	KPI Reporting Frequency	KPI:
12	Ker Reporting Frequency	□Daily □Weekly Monthly √Quarterly □Bi-annually Annually □Other – give details:
13	KPI report period	√Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
1		□Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
		□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional √ CHO Area □Hospital
		☐ County Institution √Other – give details: individual teams
15	KPI is reported in which	☑ Performance Report (NSP) □CompStat ☑ Other – give details: Annual CAMHS report
	reports ?	
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performancereports/2012pr.html http://www.hse.ie/eng/services/Publications/services/Mentalhealth/camhs2010.html
17	Additional Information	
Cont	act details for Data Manager /	Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
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Spec	ialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
National Lead and Division		
		Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health

Ma	Mental Health Services	
IVIC	illai Health Services	
1	KPI Title	Teams Number of Active Cases
	KPI Description	The total number of cases currently active in the team at the end of March and at the end of
	T Description	September.
3	KPI Rationale	Allows the service to measure Caseload trends across teams and caseload can then be compared
"		per whole time equvilent numbers.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification
		(in some cases you may need to choose two).
		□Person Centred Care □Effective Care
		Safe Care ☐ Better Health and Wellbeing ☐Use of Information ☐
		WorkforceoUse of Resources √ Governance, Leadership and Management o
4	KPI Target	No specific target
5	KPI Calculation	Count point in time
6	Data Source	
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.
	Data Quality Issues	
7	Data Collection Frequency	□Daily □Weekly Monthly Quarterly √Bi-annually Annually □Other – give details:
8	Tracer Conditions	File on case must be open i.e not discharged to another service.
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners
		details,Parental/Guardian consent forms. Parent/Guardian contact details.
	International Comparison	
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
		□Daily □Weekly □ Monthly □Quarterly □Bi-annually □Annually □Other – give
		details:
		Please indicate who is responsible for monitoring this
		KPI:
12	KPI Reporting Frequency	
		□Daily □Weekly Monthly Quarterly √Bi-annually Annually □Other – give details:
13	KPI report period	√Current (e.g. daily data reported on that same day of activity, monthly data reported within the
		same month of activity)
		Monthly in arrears (June data reported in July)
		Quarterly in arrears (quarter 1 data reported in quarter 2)
	KDID (I I I	□Rolling 12 months(previous 12 month period)
14	KPI Reporting Aggregation	□National □Regional √CHO Area □Hospital
	KDI. ()	☐ County Institution √Other – give details: individual teams
15	KPI is reported in which	☑ Performance Report (NSP) □CompStat ☑ Other – give details: Annual CAMHS report
40	reports ?	http://www.hse.ie/eng/services/Publications/corporate/performancereports/2012pr.html
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/periormancereports/2012pr.ntml http://www.hse.ie/eng/services/Publications/services/Mentalhealth/camhs2010.html
17 Additional Information		
Contact details for Data Manager /		Yvonne O'Neill, Head of Planning, Performance and Programme Management, Mental Health
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Spec	cialist Lead	Philip Flanagan BIU Mental Analyst Email: philip.flanagan@hse.ie
National Lead and Division		, , , , , , , , , , , , , , , , , , , ,
		Anne O'Connor, National Director Mental Health Tel: 01 6352542

Mei	Mental Health Services		
1	KPI 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 offerred	
		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.	
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification	
		(in some cases you may need to choose two).	
		□Person Centred Care □Effective Care	
		Safe Care ☐ Better Health and Wellbeing ☐ Use of Information ☐	
		WorkforceoUse of Resources √ Governance, Leadership and Management o	
4	KPI Target	New KPI	
5	KPI Calculation	Count point in time	
6	Data Source		
	Data Completeness	From CAMHS Community Mental Health Team to CHO Manager to Business Information Unit.	
	Data Quality Issues		
7	Data Collection Frequency	□Daily □Weekly Monthly Quarterly ☑ Bi-annually Annually □Other – give details:	
8	Tracer Conditions	File on case must be open i.e not discharged to another service.	
9	Minimum Data Set	Patient Name, Address, Date of Birth, Referral source, General Practitioners	
		details, Parental/Guardian consent forms. Parent/Guardian contact details.	
10	International Comparison		
	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:	
	3	□Daily □Weekly □ Monthly □Quarterly ☑ Bi-annually □Annually □Other – give	
		details:	
		Please indicate who is responsible for monitoring this KPI:	
12	KPI Reporting Frequency	Todas maisas mis is responsible for memoring and rain	
	in the permity	□Daily □Weekly Monthly Quarterly ☑ Bi-annually Annually □Other – give details:	
13	KPI report period	☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the	
	The state of the s	same month of activity)	
		□Monthly in arrears (June data reported in July)	
		Quarterly in arrears (quarter 1 data reported in quarter 2)	
		□Rolling 12 months(previous 12 month period)	
14	KPI Reporting Aggregation	□National □Regional ☑ CHO Area □Hospital	
'-		☐ County Institution √Other – give details: individual teams	
15	KPI is reported in which	☐ Performance Report (NSP) ☐ CompStat ☐ Other – give details: Annual CAMHS report	
'	reports ?	give detaile. A united to the topolit	
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/performancereports/2012pr.html	
		http://www.hse.ie/eng/services/Publications/services/Mentalhealth/camhs2010.html	
17	Additional Information		
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ivatio	DIIAI LEAU AIIU DIVISION	Anne O'Connor, National Director Mental Health Tel: 01 6352542 Dvision: Mental Health	