Health Service

Palliative Care Services KPI Metadata 2014 based on

Division Operational Plan NSP 2014

Version History Version: 14.08.14



Pal	liative Care: Inpatier	nt Units
1	KPI Title	Wait times for: i) Specialist Palliative Care Inpatient bed within 7 days
2	KPI Description	ii) specialist Palliative Care inpatient bed within 1 month This is the number of days from referral or request for transfer to the date of admission to the Specialist Palliative Care Inpatient Unit calculated and reported as a number. There are two types of referral 1 Active, 2 Inactive, pending or deferred.)
		1) The term active is used to distinguish referrals that request a service to start as soon as possible from the common situation in palliative care where referrals are made in a prospective manner (referral made in advance for a service that may be required at some stage in the future). 2.) Inactive. This group are not considered to be active until a service has actually been requested. It is important not to include these prospective (also known as pending, inactive or deferred) referrals in active referrals if wait times from active referral to first seen by service are being calculated. If time of initial prospective referral is used it will artificially lengthen wait times.
3	KPI Rationale	To determine the length of time a new patient has been waiting for admission to the Specialist Palliative Care inpatient bed.
	Indicator Classification	☑ 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 targets: i) Specialist Palliative Care Inpatient bed within 1 month – 100%. (DML 100%, DNE 100%, South 100%, West 100%)
5	KPI Calculation	0 –7days, 0 – 28 days, >28days Example, number of patients who waited for admission in the 3 cohorts outlined above divided by the total number of patients awaiting admission, multiplied by $100 = \%$. i.e. $0-7 = 154$ patients, $0-28 = 184$ patients, >28 = 6 patients. Calculation for <7 days is as follows $154/(184+6) \rightarrow 154/(190) \rightarrow 0.8105$, multiplied by $100 = 81.05\%$. Calculation for <1 month is as follows $(184)/(184+6) \rightarrow 184/(190) \rightarrow 0.9684$, multiplied by $100 = 96.84\%$ (This calculation is carried out in the BIU from raw numerical submitted data)
6	Data Source	Information is sourced by Specialist palliative care units who forward to BIU office Business Intelligence Unit and
	Data Completeness	copy to RDO Business Unit. Data Completeness is expected at 100%. Data quality issues are addressed as they
	Data Quality Issues	arise
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually ☑Other – give details: The data is captured daily, weekly monthly etc., locally recorded and then reported monthly to the BIU.
8	Tracer Conditions	The numbers of persons diagnosed with problems associated with a Life threatening illness (not nescessarily Cancer) and waiting for admission to a Specialist Palliative care unit
9	Minimum Data Set	The required minuimum dataset for wait time to admission is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason. The patient then receives a Specialist palliative care medical team assessment before suitability for admission is agreed and when wait time commences.
10	International Comparison	Yes. E.g. http://www.ncpc.org.uk/mds
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: Daily Weekly Monthly Quarterly Bi-annually Annually Other – give details: The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 13th of the month for collation and submission to the National BIU by the 15th (or nearest Friday) of the month for publication in the national Performance Report (PR).
12	KPI Reporting Frequency	□ 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:
15	KPI is reported in which	□ Corporate Plan Report ☑ Performance Report (NSP/CBP) □ CompStat ☑ Other – give details: Care group
	reports?	reports as requested by the system and possible CompStat in 2013
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Cont	act details for Data Manager	Stephen Toft Information Analyst Non Acute BIU. Tel 01 6352270. Email: Stephen.Toft1@hse.ie
/ Specialist Lead		
National Lead and Division		Mr Ian Carter, National Lead Palliative Care Services, Tel: 01 635 2000

Pall	liative Care: Inpatien	t Units
1	KPI Title	Number of nations in receipt of treatment in Consistist Pollietive core in nations units
2	KPI Description	Number of patients in receipt of treatment in Specialist Palliative care in-patient units The total number of patients who were deemed as being appropriate to receive Specialist Palliative care services, who received this type of care during the month. The care was provided in a Specialist Palliative care inpatient unit hospice. Each patient is counted once only. All patients who received service are to be counted. If a patient is admitted twice then they are still counted once only.
3	KPI Rationale	To determine the total number of patients who received specialist palliative care inpatient care during the month.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑ 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 targets: Monthly Target i) Number of patients in receipt of treatment – 357. DML 108 (30%), DNE 40 (11%), South 66 (19%), West 143 (40%). Percentages have been rounded
5	KPI Calculation	The total number of patients who received inpatient care during the month. E.g. (108/357)*100 = 30% (This calculation is carried out in the BIU from raw numerical submitted data)
6	Data Source	Information is sourced by Specialist palliative care units who forward to BIU office Business Intelligence Unit and
	Data Completeness	copy to RDO Business Unit. Data Completeness is expected at 100%. Data quality issues are addressed as they
	Data Quality Issues	arise
	Data Collection Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually ☑Other – give details: The data is captured daily, weekly monthly etc., locally recorded and then reported monthly to the BIU.
8	Tracer Conditions	The numbers of persons diagnosed with problems associated with a Life threatening illness (not nescessarily Cancer) who were assessed as being suitable for treatment in a Specialist Palliative care unit
9	Minimum Data Set	The required minuimum dataset for admission is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason.
10	International Comparison	Yes. E.g. http://www.ncpc.org.uk/mds
	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details: The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 13th of the month for collation and submission to the National BIU by the 15th (or nearest Friday) of the month for publication in the national Performance Report (PR).
12	KPI Reporting Frequency	□ 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)
	KPI Reporting Aggregation	 ☑ National ☑ Regional ☑ LHO Area ☐ Hospital ☐ County ☑ Institution ☐ Other – give details:
	KPI is reported in which reports?	□ Corporate Plan Report ☑ Performance Report (NSP/CBP) □ CompStat ☑ Other – give details: Care group reports as requested by the system and possible CompStat in 2013
16	Web link to data Additional Information	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
Conta	act details for Data Manager	Stephen Toft Information Analyst Non Acute BIU. Tel 01 6352270. Email: Stephen.Toft1@hse.ie
/ SDP	cialist Lead	

Number of new patients seen or admitted to the specialist palliative care service i) Specialist Palliative Care Inpatient units ii) Specialist Palliative Care services in the community (Home Care) KPI Description These are the ages of the new patients to these types of Palliative care services. When the patients age is recorded and grouped into 3 cohorts 0 − 17yrs 18 − 64 yrs 65 years and over KPI Rationale To determine the age of new patients to the service by cohort. This will inform service degoing forward especially with regard to service provision for children or older persons. Indicator Classification Please tick which Indicator Classification this indicator applies to, ideally choose one classyou may need to choose two). Person Centred Care, Effective Care Safe Care, Better Health and Wellbeing, Workforce, Use of Resources, Governance, Leadership and Management i)Specialist Palliative care: 2285, DML 662 (29%), DNE 373 (17%), South 444 (19%), Weil) Home Care, 8180 DML 2136 (26%), DNE 1560 (19%), South 2222 (27%), West 2262	elivery and service decisions assification (in some cases
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ii) Home Care, 8180 DML 2136 (26%), DNE 1560 (19%), South 2222 (27%), West 2262	/est 806 (35%).
been rounded	` , 3
5 KPI Calculation	
6 Data Source Information is sourced by Specialist palliative care units or home care teams who forwar	rd to BIU office Business
Data Completeness Intelligence Unit and copy to RDO Business Unit. Data Completeness is expected at 100	0%. Data quality issues are
Data Quality Issues addressed as they arise	
7 Data Collection Frequency □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually ☑Other – g	-
captured daily, weekly monthly etc., locally recorded and then reported monthly to the B	
8 Tracer Conditions A person who has i) the first ever admission to the specialist palliative care inpatient unit	
face visit with the specialist palliative care team in the community (Home Care) and is di	
associated with a life threatening condition (not nescessarily Cancer) and who was deen	
to a Specialist Palliative care unit, ii) Specialist palliative care in the community in their p	•
residence is the location at which the person normally lives including nursing homes or r	ion acute nospital etc)
9 Minimum Data Set Set of clearly defined data that is considered to provide important information on a service	ce. The required minuimum
dataset for a person to receive either service is the Referral form with standard demogra	aphic information, Diagnosis,
Treatment record and referral reason. This information is normally supplied by a medical	ıl professional
10 International Comparison Yes. E.g. http://www.ncpc.org.uk/mds	
11 KPI Monitoring KPI will be monitored on a (please indicate below) basis:	
□ Daily □ Weekly □ Monthly □ Quarterly □ Bi-annually □ Annually □ Other	- give details:
The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI or	utturns on a monthly basis
for accuracy, completeness and ongoing performance against target. Once satisfied, the	ey will forward the collated
KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist	t/relevant nominee for
oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager	. ,
is required and follow up with the relevant Co-Ordinator to provide same to the Area Mar	
Area Manager will then forward the approved KPI return to their RDO Business Unit by t	
collation and submission to the National BIU by the 15th (or nearest Friday) of the month	h for publication in the
national Performance Report (PR).	
12 KPI Reporting Frequency □ Daily □ Weekly □ Monthly □ Quarterly □ Bi-annually □ Annually □ Othe	er – give details:
13 KPI report period	
activity) Monthly in arrears (June data reported in July)	
activity)	
activity) ☐Monthly in arrears (June data reported in July)	
activity) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2)	

15	KPI is reported in which	□ Corporate Plan Report ☑ Performance Report (NSP/CBP) □ CompStat ☑ Other – give details: Care group
	reports?	reports as requested by the system and possible CompStat in 2013
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Contact details for Data Manager		Stephen Toft Information Analyst Non Acute BIU. Tel 01 6352270. Email: Stephen.Toft1@hse.ie
/ Specialist Lead		
National Lead and Division		Mr Ian Carter, National Lead Palliative Care Services, Tel: 01 635 2000

Pal	liative Care: Inpatier	nt Units
	I/DI TIII	
	KPI Title KPI Description	Number of admissions to Specialist Palliative Care inpatient Units The total number of patients who were deemed as being appropriate for admission and received treatment in a Specialist Palliative care services unit/hospice during the monthEach admission is counted. If a patient is admitted twice then they are counted twice.
3	KPI Rationale Indicator Classification	To determine the total number of admissions to Specialist Palliative care inpatient units during the month. 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 2014 Target – 2,998 DML 653 (22%), DNE 577 (19%), South 834 (28%), West 934 (31%)
5	KPI Calculation	Count, total number of admissions for Specialist palliative care inpatient stay during the month. E.g. (653/2998)*100 = 22% (This calculation is carried out in the BIU from raw numerical submitted data) This metric is a monthly cumulative metric, i.e. the submissions for the month is added to the previous month and compared to a profiled target. A profiled target is an mathematical portion of the yearly target
6	Data Source Data Completeness Data Quality Issues	Information is sourced by Specialist palliative care units or home care teams who forward to BIU office Business Intelligence Unit and copy to RDO Business Unit. Data Completeness is expected at 100%. Data quality issues are addressed as they arise
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually ☑Other – give details: The data is captured daily, weekly monthly etc., locally recorded and then reported monthly to the BIU.
8	Tracer Conditions	The numbers of persons diagnosed with problems associated with life threatening illness (not nescessarily Cancer) whoe were suitable for admission to a Specialist Palliative care unit
9	Minimum Data Set	Set of clearly defined data that is considered to provide important information on a service. The required minuimum dataset for admission is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason.
10	International Comparison	Yes. E.g. http://www.ncpc.org.uk/mds
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details: The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 13th of the month for collation and submission to the National BIU by the 15th (or nearest Friday) of the month for publication in the national Performance Report (PR).
12	KPI Reporting Frequency	□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)
	KPI Reporting Aggregation	✓ National ✓ Regional ✓ LHO Area ☐Hospital ☐ County ✓ Institution ☐Other – give details:
15	KPI is reported in which reports?	□ Corporate Plan Report ☑ Performance Report (NSP/CBP) □ CompStat ☑ Other – give details: Care group reports as requested by the system and possible CompStat in 2013
	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
Cont / Sne	Additional Information act details for Data Manager	Stephen Toft Information Analyst Non Acute BIU. Tel 01 6352270. Email: Stephen.Toft1@hse.ie
Natio	onal Lead and Division	Mr Ian Carter, National Lead Palliative Care Services, Tel: 01 635 2000

Pal	liative Care: Comn	nunity Home Care
1	KPI Title	Wait times for: 1 Specialist palliative care services in the community (home care) is care provided to patients in their place of residence within 7 days • Home • Nursing Home • Non Acute hospital 2 Specialist palliative care services in the community (home care) is care provided to patients in their place of residence within 1 month • Home • Nursing Home • Nursing Home • Non Acute hospital
2	KPI Description	The Specialist palliative care in the community based team (home care) provide care in patient's place of residence . The wait times for specialist palliative care in the community (home care) is the number of days from referral or request for transfer to the date of first face to face home care visit. This is the time interval from a referral to first seen by specialist palliative care in the community (home care) services or time interval from acceptance of a referral to first face to face home visit. Time interval from active request for transfer (from one setting of Specialist Palliative Care to another) to first seen by other setting can also be calculated. If a referral to a service is made in advance of a patient needing a service e.g. a Specialist Palliative Care Acute Hospital makes a specialist palliative care in the community (home care) referral for a patient in an acute hospital but the service is to start at a future date when the patient is discharged, then the calculated period for the metric is only from when the patient is ready to receive the service.
3	KPI Rationale	To determine the number of days the new patient has been waiting for the first face to face specialist palliative care in
		the community (home care) visit
	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		NSP 2014 targets: i) Specialist Palliative care services in the community (home care) provided to patients in their place of residence within 7 days– 82%, (DML 81%, DNE 72%, South 82%, West 91%) ii) Specialist Palliative care services in the community (home care) provided to patients in their place of residence within 1 month – 100%, (DML 100%, DNE 100%, South 100%, West 100%)
5		0 –7days, 0 – 28 days, >28days Calculation example: number of patients who waited for home care services in the three cohorts (outlined above), divided by the total no. of patients who waited for services, multiplied by $100 = \%$. i.e. $0-7 = 154$ patients, $0-28 = 184$ patients, >28 = 6 patients. Calculation for <7 days is as follows $154/(184+6) \rightarrow 154/(190) \rightarrow 0.8105$, multiplied by $100 = 81.05\%$. Calculation for < 1 month is as follows $(184)/(184+6) \rightarrow 184/(190) \rightarrow 0.9684$, multiplied by $100 = 96.84\%$ (This calculation is carried out in the BIU from raw numerical submitted data)
6	Data Source Data Completeness Data Quality Issues	Information is sourced by Specialist palliative care units who forward to BIU office Business Intelligence Unit and copy to RDO Business Unit. Data Completeness is expected at 100%. Data quality issues are addressed as they arise
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually ☑Other – give details: The data is captured daily, weekly monthly etc., locally recorded and then reported monthly to the BIU.
8	Tracer Conditions	The number of persons diagnosed with problems associated with Life threatening illness (not nescessarily Cancer) and waiting for first face to face specialist palliative care in the community (home care) visit.
		Set of clearly defined data that is considered to provide important information on a service. The required minuimum dataset for wait time to first visit is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason. The patient then receives a first visit from a member of the specialist palliative care team in the community (Home Care).
10	International Comparison	Yes. E.g. http://www.ncpc.org.uk/mds
	<u> </u>	

11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
''	Krimonitoring	□ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually □ Other – give details:
		The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a monthly basis for
		accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on
		a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The
		Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and
		follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will
		then forward the approved KPI return to their RDO Business Unit by the 13th of the month for collation and
		submission to the National BIU by the 15th (or nearest Friday) of the month for publication in the national Performance
- 10		Report (PR).
12	KPI Reporting Frequency	
		□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
13	KPI report period	☐ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of
		activity)
		□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	☑ National ☑ Regional ☑ LHO Area ☐ Hospital
	Aggregation	□ County ☑ Institution □Other – give details:
15	KPI is reported in which	□ Corporate Plan Report ☑ Performance Report (NSP/CBP) □ CompStat ☑ Other – give details: Care group
	reports?	reports as requested by the system and possible CompStat in 2013
	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Cont	act details for Data	Stephen Toft Information Analyst Non Acute BIU. Tel 01 6352270. Email: Stephen.Toft1@hse.ie
National Lead and Division		Mr Ian Carter, National Lead Palliative Care Services, Tel: 01 635 2000

Pal	liative Care: Comn	nunity Home Care
4	KDI Till-	Now has a final cate in a social of Consisted Dell'ed and a final cate of the constant
	KPI Title KPI Description	Number of patients in receipt of Specialist Palliative care in the community The number of patients in receipt of specialist palliative care in the community (home care) at any time during the month. Each patient is counted once only. Specialist palliative care in the community (home care) is care provided to patients in their place of residence (home, non acute hospital or nursing home). This includes all patients in receipt of specialist palliative care in the community (home care) on the first day of the month and all new patients who receive a first face to face visit during the month.
3	KPI Rationale	To determine the total number of patients who received specialist palliative care in the community (home care) during the month. This is done as it gives an accurate account of all the patients receiving service
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑ 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 2013 Target - 3050 DML 665 (22%), DNE 587 (19%), South 848 (28%), West 950 (31%)
5	KPI Calculation	Count, the total number of patients who received Specialist Palliative Care in the community (home care) at any time during the month. This is a cumulative metric reported by number and percentage. The calculation is calculated in the bIU from submitted raw data. The data from each month is added and compared to a profiled target ,month by month.
6	Data Source Data Completeness Data Quality Issues	Information is sourced by Specialist palliative care units who forward to BIU office Business Intelligence Unit and copy to RDO Business Unit. Data Completeness is expected at 100%. Data quality issues are addressed as they arise
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually ☑Other – give details: The data is captured daily, weekly monthly etc., locally recorded and then reported monthly to the BIU.
8	Tracer Conditions	The numbers of persons diagnosed with problems associated with a Life threatening illness (not nescessarily Cancer) and in receipt of specialist palliative care in the community (home care) in their place of residence during the month.
	Minimum Data Set	Set of clearly defined data that is considered to provide important information on a service. The required minuimum dataset for receipt of specialist palliative care in the community (home care) is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason.
10	International Comparison	Yes. E.g. http://www.ncpc.org.uk/mds
	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details: The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 13th of the month for collation and submission to the National BIU by the 15th (or nearest Friday) of the month for publication in the national Performance Report (PR).
	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)
	KPI Reporting Aggregation	☑ National ☑ Regional ☑ LHO Area ☐ Hospital ☐ County ☑ Institution ☐ Other – give details:
	KPI is reported in which reports?	□ Corporate Plan Report ☑ Performance Report (NSP/CBP) □ CompStat ☑ Other – give details: Care group reports as requested by the system and possible CompStat in 2013
	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
	Additional Information	Ctanhan Tatt Information Analyst Nan Asyta DILL Tal 01 (2022) Frank Ctanhan Taff (@has is
CONT	act details for Data	Stephen Toft Information Analyst Non Acute BIU. Tel 01 6352270. Email: Stephen.Toft1@hse.ie

National Lead and Division	Mr Ian Carter, National Lead Palliative Care Services, Tel: 01 635 2000

Pall	iative Care: Comn	nunity Home Care
	LVDI TIII	
2	KPI Description	Number of new patients who attended the Specialist Palliative Day Care/ Day Hospice The number of new patients in receipt of specialist palliative care in the community (home care) at any time during the month (first everpatient). Each patient is counted once only. Specialist palliative care in the community (home care) is care provided to patients in their place of residence (home, non acute hospital or nursing home). This includes all new patients in receipt of specialist palliative care in the community (home care) on the first day of the month and all new patients who receive a first face to face visit during the month.
3		To determine the age of new patients to specialist palliative day care/ day hospice by cohort during the month. This will inform service delivery and determine the number of patients that receive their care outside of a specialist unit, hospital or own residence.
		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
		NSP 2013 Target - 8180 DML 2136 (26%), DNE 1560 (19%), South 2222 (27%), West 2262 (28%).Percentages have been rounded
	KPI Calculation	
6	Data Source Data Completeness Data Quality Issues	Information is sourced by Specialist palliative care units who forward to BIU office Business Intelligence Unit and copy to RDO Business Unit. Data Completeness is expected at 100%. Data quality issues are addressed as they arise
	Data Collection Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually ☑Other – give details: The data is captured daily, weekly monthly etc., locally recorded and then reported monthly to the BIU.
	Tracer Conditions	A person who has attended the Specialist palliative day care/ day hospice in the month and diagnosed with problems associated with a Life threatening illness (not nescessarily Cancer) and who is deemed suitable to attend Specialist palliative day care/ day hospice setting.
9	Minimum Data Set	Set of clearly defined data that is considered to provide important information on a service. The required minuimum dataset for a patient to attend is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason. The patient then receives a Specialist palliative care assessment before suitability for day care is agreed
10	International Comparison	Yes. E.g. http://www.ncpc.org.uk/mds
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details: The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 13th of the month for collation and submission to the National BIU by the 15th (or nearest Friday) of the month for publication in the national Performance Report (PR).
12	KPI Reporting Frequency	□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	☑ National ☑ Regional ☑ LHO Area ☐ Hospital
	Aggregation	□ County □ Institution □Other – give details:
	KPI is reported in which reports?	□ Corporate Plan Report ☑ Performance Report (NSP/CBP) □ CompStat ☑ Other – give details: Care group reports as requested by the system and possible CompStat in 2013
	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
	Additional Information	Ctonhon Toff Information Analyst Non Asyto DILL Tol 01 4252270 Fmails Ctanhon Toff Chas in
	act details for Data nal Lead and Division	Stephen Toft Information Analyst Non Acute BIU. Tel 01 6352270. Email: Stephen.Toft1@hse.ie Mr Ian Carter, National Lead Palliative Care Services, Tel: 01 635 2000
ivalio	iiai Ecau diiu Divisiuii	ivii iaii Carter, Ivatioriai Leau Failiative Care Services, Tel. 01 055 2000

Pa	Iliative Care: Day (Care
1	KPI Title	Number of patients in receipt of Specialist palliative day care services
2	KPI Description	The number of patients in receipt of Specialist Palliative Day Care/ Day Hospice services at any time during the month. Each patient is counted once only. Specialist palliative day care/ day hospice is care provided to patients in a day care/day hospice setting. This includes all patients in receipt of specialist palliative day care/ day hospice services on the first day of the month and all new patients who attend specialist palliative day care during the month.
3	KPI Rationale	To determine the total number of patients who received Specialist palliative day care/ day hospice during the month. This is done as it gives an accurate account of all the patients receiving service.
	Indicator Classification	 ☑ 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 - 331 DML 85 (25%), DNE 73 (22%), South 98 (30%), West 75 (23%)
5	KPI Calculation	Count the total number of patients who received of Specialist palliative day care/ day hospice services at any time during the month. This metric is reported by number and percentage. The calculation is calculated in the BIU from submitted raw data. The data from each month is added and compared to a profiled target ,month by month.
6	Data Source Data Completeness	Information is sourced by Specialist palliative care units who forward to BIU office Business Intelligence Unit and copy to RDO Business Unit. Data Completeness is expected at 100%. Data quality issues are addressed as they
7	Data Quality Issues Data Collection Frequency	arise □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually ☑Other – give details: The data is captured daily, weekly monthly etc., locally recorded and then reported monthly to the BIU.
8	Tracer Conditions	The number of persons diagnosed with problems associated with Life Threarening illness (not nescessarily Cancer) and in receipt of Specialist palliative care in a day care/ day hospice services.
	Minimum Data Set	Set of clearly defined data that is considered to provide important information on a service. The required minuimum dataset for receipt of Specialist palliative day care/ day hospice is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason. The patient then receives a Specialist palliative care assessment before suitability for day care is agreed.
10	International Comparison	Yes. E.g. http://www.ncpc.org.uk/mds
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: Daily
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
	KPI report period	 □ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □ 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:
	KPI is reported in which reports ?	□ Corporate Plan Report ☑ Performance Report (NSP/CBP) □ CompStat ☑ Other – give details: Care group reports as requested by the system and possible CompStat in 2013
	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
	Additional Information	
	ntact details for Data	Stephen Toft Information Analyst Non Acute BIU. Tel 01 6352270. Email: Stephen.Toft1@hse.ie
Mar	nager / Specialist Lead	

National Lead and Division		Mr Ian Carter, National Lead Palliative Care Services, Tel: 01 635 2000
Pa	Illiative Care: Day C	Care
	KPI Title	Number of new patients in receipt of Specialist palliative day care services
2	KPI Description	The number of new patients in receipt of Specialist Palliative Day Care/ Day Hospice services at any time during the month. Each patient is counted once only. Specialist palliative day care/ day hospice is care provided to patients in a day care/day hospice setting. This includes all patients in receipt of specialist palliative day care/ day hospice services on the first day of the month and all new patients who attend specialist palliative day care during the month.
3	KPI Rationale	To determine the total number of new patients who received Specialist palliative day care/ day hospice during the month. This is done as it gives an accurate account of all the patients receiving service.
	Indicator Classification	☑ 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 - new PI (no target)
5	KPI Calculation	Count the total number of new patients who received of Specialist palliative day care/ day hospice services at any time during the month. This metric is reported by number and percentage. The calculation is calculated in the bIU from submitted raw data. The data from each month is added and compared to a profiled target ,month by month.
6	Data Source	Information is sourced by Specialist palliative care units who forward to BIU office Business Intelligence Unit and
	Data Completeness	copy to RDO Business Unit. Data Completeness is expected at 100%. Data quality issues are addressed as they
	Data Quality Issues	arise
7	Data Collection	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually ☑Other – give details: The data is
8	Frequency Tracer Conditions	captured daily, weekly monthly etc., locally recorded and then reported monthly to the BIU.
0	Tracer Conditions	The number of persons diagnosed with problems associated with Life Threarening illness (not nescessarily Cancer) and in receipt of Specialist palliative care in a day care/ day hospice services.
9	Minimum Data Set	Set of clearly defined data that is considered to provide important information on a service. The required minuimum dataset for receipt of Specialist palliative day care/ day hospice is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason. The patient then receives a Specialist palliative care assessment before suitability for day care is agreed.
10	International Comparison	Yes. E.g. http://www.ncpc.org.uk/mds
	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: Daily Weekly Monthly Quarterly Bi-annually Annually Other – give details: The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 13th of the month for collation and submission to the National BIU by the 15th (or nearest Friday) of the month for publication in the national Performance Report (PR).
12	KPI Reporting Frequency	
10	KPI report period	□ 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
13	кеттероп репои	☐ Current (e.g. daily data reported on that same day 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	☑ National ☑ Regional ☑ LHO Area ☐ Hospital
L	Aggregation	□ County ☑ Institution □Other – give details:
15	KPI is reported in which	□ Corporate Plan Report ☑ Performance Report (NSP/CBP) □ CompStat ☑ Other – give details: Care group
14	reports ? Web link to data	reports as requested by the system and possible CompStat in 2013 http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
	Additional Information	<u>naparwww.nscae/eng/services/r-abilications/corporate/r-enormance-reports-ivioliting.html</u>

Contact details for Data	Stephen Toft Information Analyst Non Acute BIU. Tel 01 6352270. Email: Stephen.Toft1@hse.ie
National Lead and Division	Mr Ian Carter, National Lead Palliative Care Services, Tel: 01 635 2000

Pall	liative Care: Comm	unity Hospitals
1	KPI Title	Number patients in receipt of care in designated Palliative care support beds
2	KPI Description	The number of patients in receipt of care in a designated palliative care support bed. Each patient is counted once only. A palliative care support bed is a bed/ service providing an intermediate level of inpatient care for patients in a local environment typically in a designated centre for older people.
3	KPI Rationale	To determine the total number of patients who received care in designated palliative care support beds during the month.
	Indicator Classification	☑ 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 - 131 DML 42 , DNE 7 , South 53 , West 29
5	KPI Calculation	The total number of patients in receipt of a palliative care support bed in designated centre for older people.
6	Data Source Data Completeness	Information is sourced by Specialist palliative care units who forward to BIU office Business Intelligence Unit and copy to RDO Business Unit. Data Completeness is expected at 100%. Data quality issues are addressed as they
	Data Quality Issues Data Collection Frequency	arise □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually ☑Other – give details: The data is captured daily, weekly monthly etc., locally recorded and then reported monthly to the BIU.
	Tracer Conditions	A person who requires respite, control of symptoms and end of life care (not nescessarily Cancer) and who is deemed suitable for admission to a palliative care support bed.
9	Minimum Data Set	Set of clearly defined data that is considered to provide important information on a service. The required minuimum dataset for admission to a palliative care support bed is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason.
10	International Comparison	
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: Daily Weekly Monthly Quarterly Bi-annually Annually Other – give details: The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 13th of the month for collation and submission to the National BIU by the 15th (or nearest Friday) of the month for publication in the national Performance Report (PR).
12	KPI Reporting Frequency	□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)
	KPI Reporting Aggregation	 ☑ National ☑ Regional ☑ LHO Area ☑ Hospital ☑ County ☑ Institution ☑ Other – give details:
	KPI is reported in which reports?	□ Corporate Plan Report ☑ Performance Report (NSP/CBP) □ CompStat ☑ Other – give details: Care group reports as requested by the system and possible CompStat in 2013
	Web link to data Additional Information	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
Conta	act details for Data nal Lead and Division	Stephen Toft Information Analyst Non Acute BIU. Tel 01 6352270. Email: Stephen.Toft1@hse.ie Mr Ian Carter, National Lead Palliative Care Services, Tel: 01 635 2000
Pall	liative Care: Comm	unity Hospitals
1	KPI Title	Number new patients in receipt of care in designated Palliative care support beds

2	KPI Description	The number of new patients in receipt of care in a designated palliative care support bed. Each patient is counted
		once only. A palliative care support bed is a bed/ service providing an intermediate level of inpatient care for patients
		in a local environment typically in a designated centre for older people.
3	KPI Rationale	To determine the total number of new patients who received care in designated palliative care support beds during
		the month.
	Indicator Classification	
	indicator olassification	☑ Person Centred Care, ☑Effective Care ☐Safe Care, ☐ Better Health and Wellbeing, ☐ Use of Information, ☐
		Workforce, □ Use of Resources, □ Governance, □ Leadership and Management
		Involvinge, in one of Resources, in Governance, in Leavership and Management
4	KPI Target	NSP 2013 Target - 149
		DML 46 , DNE 7 , South 61 , West 35
5	KPI Calculation	The total number of patients in receipt of a palliative care support bed in designated centre for older people.
6	Data Source	Information is sourced by Specialist palliative care units who forward to BIU office Business Intelligence Unit and
	Data Completeness	copy to RDO Business Unit. Data Completeness is expected at 100%. Data quality issues are addressed as they
	Data Quality Issues	arise
7	Data Collection	□ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually ☑ Other – give details: The data is
/		
	Frequency	captured daily, weekly monthly etc., locally recorded and then reported monthly to the BIU.
8	Tracer Conditions	A person who requires respite, control of symptoms and end of life care (not nescessarily Cancer) and who is
		deemed suitable for admission to a palliative care support bed.
9	Minimum Data Set	Set of clearly defined data that is considered to provide important information on a service. The required minuimum
		dataset for admission to a palliative care support bed is the Referral form with standard demographic information,
		Diagnosis, Treatment record, referral reason.
10	International Comparison	
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
l ''	Kiriwomtoring	□ Daily □ Weekly □ Monthly □ Quarterly □ Bi-annually □ Annually □ Other – give details:
		The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a monthly basis
		for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated
		KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for
		oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance
		is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the
		Area Manager will then forward the approved KPI return to their RDO Business Unit by the 13th of the month for
		collation and submission to the National BIU by the 15th (or nearest Friday) of the month for publication in the
		national Performance Report (PR).
12	KPI Reporting Frequency	Indicinal Ferromance Report (FR).
12	Ker Reporting Frequency	Dodle Difference Manifelia Documents Discussion DAMARIA DAMARIA
40	I/DI	□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	☑ National ☑ Regional ☑ LHO Area ☐Hospital
	Aggregation	□ County □ Institution □Other – give details:
15	KPI is reported in which	□ Corporate Plan Report ☑ Performance Report (NSP/CBP) □ CompStat ☑ Other – give details: Care group
13	reports?	reports as requested by the system and possible CompStat in 2013
1/		
	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
	Additional Information	0. 1. 7.016 4. 4. 1.11 4. 1.211.7.104.4050070.5. 11.01.1. 7.01.1.
	act details for Data	Stephen Toft Information Analyst Non Acute BIU. Tel 01 6352270. Email: Stephen.Toft1@hse.ie
Natio	onal Lead and Division	Mr Ian Carter, National Lead Palliative Care Services, Tel: 01 635 2000

Pal	liative Care: Inpatien	t Units
1	KPI Title	Total number of children in the care of the childrens outreach Nursing team/Specialist Palliative care team
2	KPI Description	This is the total number of children who received the care of the Children's Outreach Nurse and/or Specialist Paediatric Palliative Care Team on the first day of the month and the new children and transfers in during the month. The Children's Outreach Nurse and/or Specialist Paediatric Palliative Care Team care is provided to children in the home, acute general hospital and tertiary hospital. The total number of children recorded at Our Lady's Children's Hospital, Crumlin includes all the children under the care of the Consultant Paediatrician in Palliative Medicine and may be resident elsewhere in the country.
3	KPI Rationale	The Children's Outreach Nurse and/or Specialist Paediatric Palliative Care Team Service is the care provided to children and their family in the home, tertiary hospital and acute general hospital. In most instances this care is provided by the Children's Outreach Nurse (Clinical Nurse Specialist for Children with Life Limiting Conditions) but can also be delivered by the Specialist Paediatric Palliative Care Team. The aim of the Children's Outreach Nurse and Specialist Paediatric Palliative Care Team is: * To co-ordinate a service that provides continuity of care and quality of life for children with life limiting conditions and their families. * Plan, implement, deliver, and evaluate care for a caseload of children in collaboration with local healthcare professional/carer especially those with specific palliative care needs. This role will apply to acute and community care setting. * Act as an informed resource for health and social care professionals involved in the care of children with life limiting conditions. * Facilitate education and training for health and social care professionals in collaboration with relevant stakeholders * Support collection of data in relation to children with life limiting conditions to support national programme developm
	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 targets:New metric , no target
	KPI Calculation	Total number of children in the care of the childrens outreach Nursing team/Specialist Palliative care team in an acute setting and in the home LHO address of the child. The two figures are added together to givean overall total. Calculation is performed by the BIU by collating two seperate returns.
	Data Source Data Completeness Data Quality Issues	Information is sourced by the childrens Specialist palliative care outreach nurses who forward to BIU office Business Intelligence Unit and copy to RDO Business Unit. Data Completeness is expected at 100%. Data quality issues are addressed as they arise
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually ☑Other – give details: The data is captured daily, weekly monthly etc., locally recorded and then reported monthly to the BIU.
8	Tracer Conditions	The numbers of children diagnosed with problems associated with a Life threatening illness (not nescessarily Cancer) and waiting for admission to a Specialist Palliative care unit
9	Minimum Data Set	The required minuimum dataset for total number of children is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason.
10	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: The Specialist palliative childrens outreach nurse will, collate, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to the BIU by the 15th of the month or nearest Friday and CC their local Manager.
12	KPI Reporting Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:
	KPI report period	 □ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) □ Monthly in arrears (June data reported in July) □ Quarterly in arrears (quarter 1 data reported in quarter 2) □ Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	 ☑ National ☑ Regional ☑ LHO Area ☑ Hospital ☑ County ☑ Institution ☑ Other – give details:

15	KPI is reported in which	□ Corporate Plan Report ☑ Performance Report (NSP/CBP) □ CompStat ☑ Other – give details: Care group
	reports?	reports as requested by the system and possible CompStat in 2013
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
Cont	act details for Data Manager	Stephen Toft Information Analyst Non Acute BIU. Tel 01 6352270. Email: Stephen.Toft1@hse.ie
National Lead and Division		Mr Ian Carter, National Lead Palliative Care Services, Tel: 01 635 2000

Pal	liative Care: Inpatien	t Units
1	KPI Title	Total number of new children in the care of the childrens outreach Nursing team/Specialist Palliative care team
2	KPI Description	This is the total number of new children seen by the Children's Outreach Nurse and/or Specialist Paediatric Palliative Care Team for the first time ever during the month. Each new child is captured once only and where initially seen on a first face to face contact.
3	KPI Rationale	The Children's Outreach Nurse and/or Specialist Paediatric Palliative Care Team Service is the care provided to children and their family in the home, tertiary hospital and acute general hospital. In most instances this care is provided by the Children's Outreach Nurse (Clinical Nurse Specialist for Children with Life Limiting Conditions) but can also be delivered by the Specialist Paediatric Palliative Care Team. The aim of the Children's Outreach Nurse and Specialist Paediatric Palliative Care Team is: To co-ordinate a service that provides continuity of care and quality of life for children with life limiting conditions and their families. Plan, implement, deliver, and evaluate care for a caseload of children in collaboration with local healthcare professional/carer especially those with specific palliative care needs. This role will apply to acute and community care setting. Act as an informed resource for health and social care professionals involved in the care of children with life limiting conditions.
	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 2014 targets:New metric , no target
	KPI Calculation	Total number of children in the care of the childrens outreach Nursing team/Specialist Palliative care team in an acute setting and in the home LHO address of the child. The two figures are added together to givean overall total. Calculation is performed by the BIU by collating two seperate returns.
6	Data Source	Information is sourced by the childrens Specialist palliative care outreach nurses who forward to BIU office Business
	Data Completeness Data Quality Issues	Intelligence Unit and copy to RDO Business Unit. Data Completeness is expected at 100%. Data quality issues are addressed as they arise
7	Data Collection Frequency	□Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually ☑Other – give details: The data is captured daily, weekly monthly etc., locally recorded and then reported monthly to the BIU.
8	Tracer Conditions	The numbers of children diagnosed with problems associated with a Life threatening illness (not nescessarily Cancer) and waiting for admission to a Specialist Palliative care unit
9	Minimum Data Set	The required minuimum dataset for total number of new children is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason.
10	International Comparison	
	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details: The Specialist palliative childrens outreach nurse will, collate, analyse and quality assure KPI outturns on a monthly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to the BIU by the 15th of the month or nearest Friday and CC their local Manager.
	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)
	KPI Reporting Aggregation	 ☑ National ☑ Regional ☑ LHO Area ☑ Hospital ☑ County ☑ Institution ☑ Other – give details:
15	KPI is reported in which	□ Corporate Plan Report ☑ Performance Report (NSP/CBP) □ CompStat ☑ Other – give details: Care group
	reports?	reports as requested by the system and possible CompStat in 2013
	Web link to data	
	Additional Information	
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