**Health Service** 

## Primary Care KPI Metadata 2014 based on

Division Operational Plan NSP 2014

Version History Version: 14.08.14



|                   | ary Care Teams  Primary Care Teams - In Operation |
|-------------------|---|
| 1                 | KPI Title   |
| 2 KPI Description |   |
| 3                 | KPI Rationale                                     |
|                   | Indicator Classification                          |
| 4                 | KPI Target 2014                                   |
| 5                 | KPI Calculation                                   |
| 6                 | Data Source                                       |
|                   | Data Completeness                                 |
|                   | Data Quality Issues                               |
| 7                 | Data Collection Frequency                         |
| 8                 | Tracer Conditions                                 |
| 9                 | Minimum Data Set                                  |
| 10                | International Comparison                          |
| 11                | KPI Monitoring                                    |
| 12                | KPI Reporting Frequency                           |
| 13                | KPI report period                                 |
| 14                | KPI Reporting Aggregation                         |
| 15                | KPI is reported in which reports?                 |
| 16                | Web link to data                                  |
| 17                | Additional Information                            |
| ntac              | t details for Data Manager/Specialist Lead        |

| No. of PCTs  |
|--|
| This refers to the number of PCTs with HSE staff and GPs participating   |
| To capture the number of PCTs operating nationally in order to monitor activity  |
| 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 □  |
| National: 485  |
| DML - 140; DNE - 96; South - 134; West - 115   |
| Count. Total Number of PCTs.   |
| From 17 ISAs grouped into four Regions – BIU Non- acute team   |
| 100 % data Completeness  |
| No known data quality issues at this point   |
| □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:                                       |
| Available to the general population  |
| Yes  |
| No   |
| KPI will be monitored on a (please indicate below) basis:  |
| □ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually □ Other – give details:                                |
| This is to be monitored by the Primary Care Division and by RDPIs  |
| □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 (pr   |
| ☑ National ☑ Regional Coops ☐ Hospital   |
| ☑ County ☐ Institution ☐Other – give details:  |
| ☑Performance Assurance Report (NSP) ☐CompStat ☐Other – give details:   |
| http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html                                 |
|  |
| Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657  |
| Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division                 |
| John Hennessy, National Director, Primary Care Division, Health Service Executive.                                     |

| Community Intervention Teams |                                   |  |
|------------------------------|-----------------------------------|--|
|                              |                                   |  |
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| 2                            | KPI Description                   |  |
| 3                            | KPI Rationale                     |  |
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|                              | details for Data Manager /        |  |
| Specialist Lead              |                                   |  |
|                              | I Lead and Division               |  |
|                              |                                   |  |

| ommunity Intervention Team Activity (i.e. patients seen) by source D Avoidance (A&E) arty Discharge from Acute P Referrals ommunity Referrals hese referrals accepted must be recorded per patient, and should be allocated to one category only. (i.e. altients can not be reflected in more then one category) o capture the number of referrals to CITs lease tick which Indicator Classification this indicator applies to, ideally choose one classification (in some asses you may need to choose two).  3Person Centred Care  |  |
|--|--|
| D Avoidance (A&E) arty Discharge from Acute in Preferrals community Referrals hase referrals accepted must be recorded per patient, and should be allocated to one category only. (i.e. attents can not be reflected in more then one category) o capture the number of referrals to CITS lease tick which indicator Classification this indicator applies to, ideally choose one classification (in some asses you may need to choose two).  ### Preson Centred Care  | Community Intervention Team Activity (i.e. Patients seen) by source                                    |
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| ## Better Health and Wellbeing □Use of Information   ## Jorkforce □Use of Resources□Governance, Leadership and Management □   ## Jational: ED Avoidance - 5,976, Early Discharge - 6,104, GP Referrals - 2,140, Community Referrals - 600   ## Davoidance: DML - 1,496, DNE - 2,008, South - 456, West - 2016. Early Discharge: DML - 3624, DNE - 2252, South - 264, West - 964. GP Referrals: DML - 320, DNE - 1200, South - 76, West - 184. Community   ## Jore  | *  |
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| Indivity)  Indivity in arrears (June data reported in July)  Quarterly in arrears (quarter 1 data reported in quarter 2)  Rolling 12 months (pr  Individual Regional Coops Industrial Hospital  County Institution Other – give details: Reported by each CIT  Performance Assurance Report (NSP/CBP) CompStat Other – give details: ttp://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html  Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657  Individual Hospital Hos |  |
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| pecialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division  | nttp://www.nse.ie/eng/services/Publications/corporate/Performance_Reports_Worlding.html                |
| pecialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division  | Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657                        |
| ohn Hennessy, National Director, Primary Care Division, Health Service Executive.  | Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division |
| j  | John Hennessy, National Director, Primary Care Division, Health Service Executive.                     |

| Ch    | Chronic Disease - Diabetes         |   |  |  |
|-------|------------------------------------|---|--|--|
|       |                                    |   |  |  |
| 1     | KPI Title                          | No. of existing primary care diabetes initiatives aligned to the nationally agreed model of care                |  |  |
| 2     | KPI Description                    | Aligning the Diabetes Clinical Care Programme Model of care to the exising 10 primary care diabetes initiatives |  |  |
| 3     | KPI Rationale                      | Roll out of Diabetes Clinical Care Programme model of care  |  |  |
|       | 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 Duse of Information   |  |  |
|       |                                    | Workforce □Use of Resources□Governance, Leadership and Management □   |  |  |
| 4     | KPI Target 2014                    | National Target: 10. DML - 3 (Midlands Diabetes Structured Care Programme, South Inner                          |  |  |
| 7     | KF1 Talget 2014                    | City Partnership Dublin and East Coast Area Diabetes Shared Care Programme) DNE - 2                             |  |  |
|       |                                    |   |  |  |
|       |                                    | (Diabetes Watch and Dublin PCCC Area 8) South - 1 (Cork) West - 4 (Sligo/Leitrim, Donegal,                      |  |  |
| _     | KDI Calandatian                    | Galway and Limerick/North Tipperary/Clare)  |  |  |
| 5     | KPI Calculation                    | Count. Total Number of existing primary care diabetes initiatives   |  |  |
| 6     | Data Source                        | From 7 CITs and any new CITs established in 2014 – BIU Non- acute team  |  |  |
|       | Data Completeness                  | 100 % data Completeness   |  |  |
|       | Data Quality Issues                | Aligning the Diabetes Clinical Care Programme Model of care to the exising 10 primary care                      |  |  |
| 7     | Data Collection Frequency          | □Daily □Weekly Monthly ☑Quarterly □Bi-annually □Annually □Other – give  |  |  |
|       | . ,                                | details:  |  |  |
| 8     | Tracer Conditions                  |   |  |  |
| 9     | Minimum Data Set                   | No  |  |  |
| 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:  |  |  |
|       |                                    | This is to be monitored by the Primary Care Division, RDPIs and Diabetes Clinical Care                          |  |  |
|       |                                    | Programme   |  |  |
| 12    | KPI Reporting Frequency            | □Daily □Weekly Monthly ☑Quarterly □Bi-annually □Annually □Other – give  |  |  |
|       | The Porting Proquency              | details:  |  |  |
| 13    | KPI report period                  | ☑Current (e.g. daily data reported on that same day of activity, monthly data reported within                   |  |  |
| .0    | The Port Portou                    | 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 (pr  |  |  |
| 1/    | KPI Reporting Aggregation          | ✓ National Regional Coops ☐ Hospital  |  |  |
| 14    | RPI Reporting Aggregation          | County  Institution  Other – give details: Reported by each Initiative  |  |  |
| 16    | KDI is reported in which reports 2 |   |  |  |
| 15    | KPI is reported in which reports?  | ☑Performance Assurance 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             |   |  |  |
|       | Additional Information             | Information Analyst, Clairs Cheeky amail, plains the style Ober 1: Tel 04 (2007)                                |  |  |
|       | act details for Data Manager /     | Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657                                 |  |  |
| _     | cialist Lead                       | Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary                        |  |  |
| Natio | onal Lead and Division             | John Hennessy, National Director, Primary Care Division, Health Service Executive.                              |  |  |

| Primary Care G.P Out of Hours |                                   |  |
|-------------------------------|-----------------------------------|--|
| 1                             | KPI Title                         |  |
| 2                             | KPI Description                   |  |
| 3                             | KPI Rationale                     |  |
|                               | Indicator Classification          |  |
| 4                             | KPI Target 2014                   |  |
| 5                             | KPI Calculation                   |  |
| 6                             | Data Source                       |  |
|                               | Data Completeness                 |  |
|                               | Data Quality Issues               |  |
| 7                             | Data Collection Frequency         |  |
| 8                             | Tracer Conditions                 |  |
| 9                             | Minimum Data Set                  |  |
| 10                            | International Comparison          |  |
| 11                            | KPI Monitoring                    |  |
| 12                            | KPI Reporting Frequency           |  |
| 13                            | KPI report period                 |  |
| 14                            | KPI Reporting Aggregation         |  |
| 15                            | KPI is reported in which reports? |  |
| 16                            | Web link to data                  |  |
| 17                            | Additional Information            |  |
| Con                           | tact details for Data Manager /   |  |
|                               | cialist Lead                      |  |
|                               | onal Lead and Division            |  |
|                               |                                   |  |

| Service   |  |  |
|---|--|--|
| N   |  |  |
| No. of contacts with GP Out of Hours co-ops   |  |  |
| This refers to the total number of patients who made contact with GP Out of Hours Service through Treatment   |  |  |
| Centres, Home Services, Triage and Other. Other refers to calls which are not triaged by a clinician, they refer to                                 |  |  |
| callers looking for information.  |  |  |
| To capture the number of patients who contacted GP Out of Hours Service nationally in order to monitor activity and                                 |  |  |
| service pressures.  |  |  |
| 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 □   |  |  |
| National: 994,936   |  |  |
| DML - 140,576; DNE - 180,883; South - 421,221; West - 252,256   |  |  |
| Count. Total Number of Contacts by Treatment Centre, Home Service, Triage Only and Other. This should match   |  |  |
| the number of contacts by age breakdown i.e. 0 - 16 years, 16 - 65 years, 65 years or over  |  |  |
| from 9 GP co-ops grouped into four Regions – BIU Non- acute team  |  |  |
| 100 % data Completeness   |  |  |
| No known data quality issues at this point  |  |  |
| □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:  |  |  |
| Available to the patients of GP's linked with an Out of hours service   |  |  |
|   |  |  |
| No  |  |  |
| KPI will be monitored on a (please indicate below) basis:   |  |  |
| □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:   |  |  |
| This is to be monitored by the RDOs. Where LHO has not sumbitted a complete return or where there are   |  |  |
| anomalies, physiotherapy Manager(s) must submit bullet point commentary to the RDO to explain this to BIU   |  |  |
| anonanos, prijosano apj managor (o) maor casmir samor pom commentarji to mo rise o to onpiam tino to site   |  |  |
| □ 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 ☑ Coops ☐ Hospital  |  |  |
| ✓ County ☐ Institution ☐ Other – give details:  |  |  |
| <ul> <li>☑ County ☐ Institution ☐ Other – give details.</li> <li>☑ Performance Assurance Report (NSP) ☐ CompStat ☐ Other – give details:</li> </ul> |  |  |
| Erenormance Assurance Report (NSF) Electripotat Electrical – give details.  |  |  |
| http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html  |  |  |
|   |  |  |
| Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657   |  |  |
| Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division  |  |  |
| John Hennessy, National Director, Primary Care Division, Health Service Executive.  |  |  |

| KPI Title                         | Number of Patient Referrals   |
|-----------------------------------|---|
| KPI Description                   | Total Number of patients for whom a Primary Care Physiotherapy referral was accepted in treporting period (All referrals into Community Services-everything outside acute referrals). Total Captured by Age Category (Age Brackets: 0-17yrs; 18-64 yrs; 65+ years) and by Referral Science (Acute Hospital Referrals, GP Referrals and Other Referrals-i.e. PHN, other HSCP, Volunta Organisations, self and others (including non-acute beds). Referrals include New patients, (not known to the service) and Re-Referrals, (ie. previously discharged). |
| KPI Rationale                     | This KPI allows for planning and managment of the monthly throughput of referrals in relation staffing and resource allocation in relation to demand. Review of the throughput also facilitat recognition of emerging trends in referrals and thus a management response to same.   |
| 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 2014                   | National: 171,774<br>DML - 39,462; DNE - 31,790; South - 50,622; West - 49,900  |
| KPI Calculation                   | Count of the number of clients for whom a referral was accepted in the reporting month. To referrals by source should equal total number of referrals received by Age Category  |
| Data Source                       | LHO – Region – BIU Non- acute team  |
| Data Completeness                 | 100 % data Completeness   |
| Data Quality Issues               | No known data quality issues at this point  |
| Data Collection Frequency         | □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – giv details:  |
| Tracer Conditions                 | Community Services Physiotherapy Clients Referrals are accepted from Health professionals within the HSE, other services/agencies a from clients/families themselves (self referrals). Any person can be referred to Physiotherap services.   |
| Minimum Data Set                  | Referral note/form which includes details of clients and relevant information relating to the re-<br>Referrals forms include details of basic demographic information (Name, address, DOB, no-<br>kin, contact tel numbers, eligibility details etc. It also includes sections for details on<br>physiotherapy needs, medical conditions/diagnosis, and social /living/supports etc.  |
| International Comparison          | No  |
| KPI Monitoring                    | KPI will be monitored on a (please indicate below) basis:  □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – (details:  This is to be monitored by the RDOs. Where LHO has not sumbitted a complete return or w   |
| KPI Reporting Frequency           | □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – details:  |
| KPI report period                 | □Current (e.g. daily data reported on that same day of activity, monthly data reported with 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? | ☑Performance Assurance Report (NSP) □CompStat □Other – give details:  |
| Web link to data                  | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html  |
| Additional Information            |   |
| act details for Data Manager /    | Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657   |

National Lead and Division

John Hennessy, National Director, Primary Care Division, Health Service Executive.

| 1 KPI Title                                     | Number of patients seen for a first time assessment   |
|---|---|
| 2 KPI Description                               | The total number of primary care physiotherapy patients seen for a first time Assessment in t                                     |
|   | reporting period. This includes both new referrals and re-referrals   |
| 3 KPI Rationale                                 | The purpose of this metric is to monitor the number of patients seen for a first time assessme                                    |
| Indicator Classification                        | Please tick which Indicator Classification this indicator applies to, ideally choose one  |
|   | classification (in some cases you may need to choose two).  |
|   | □Person Centred Care □Effective Care  |
|   | Safe Care ☐ Better Health and Wellbeing ☐Use of Information   |
|   | Workforce ☑ Use of Resources ☐ Governance, Leadership and Management ☐  |
| 4 KPI Target 2014                               | National: 141,331   |
| gg  | DML - 33,981: DNE - 26,175; South - 41,281; West - 39,894   |
| 5 KPI Calculation                               | Count of the number of patients seen for a first time assessment in the reporting month   |
| 6 Data Source                                   | LHO – Region – BIU Non- acute team  |
| Data Completeness                               | 100 % data Completeness   |
| Data Quality Issues                             | No known data quality issues at this point  |
| 7 Data Collection Frequency                     | □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give  |
| 8 Tracer Conditions                             | Community Services Physiotherapy Clients  |
|   | Referrals are accepted from Health professionals within the HSE, other services/agencies an                                       |
|   | from clients/families themselves (self referrals). Any person can be referred to Physiotherapy                                    |
|   | services.   |
| 9 Minimum Data Set                              | Referral note/form which includes details of clients and relevant information relating to the ref                                 |
|   | Referrals forms include details of basic demographic information (Name, address, DOB, nex   |
|   | kin, contact tel numbers, eligibility details etc. It also includes sections for details on                                       |
|   | physiotherapy needs, medical conditions/diagnosis, and social /living/supports etc.   |
|   |   |
| O International Comparison                      | No  |
| 1 I/Di Manitarina                               | I/DI will be manifered an a /alegae indicate below) begin   |
| 1 KPI Monitoring                                | KPI will be monitored on a (please indicate below) basis:  □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – gi |
|   | details:  |
|   | This is to be monitored by the RDOs. Where LHO has not sumbitted a complete return or wh  |
| 0 1/0 1/0 1/0 1/0                               | there are anomalies, physiotherapy Manager(s) must submit bullet point commentary to the  |
| 2 KPI Reporting Frequency                       | □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – g   |
| 3 KPI report period                             | ☑Current (e.g. daily data reported on that same day of activity, monthly data reported within                                     |
|   | same month of activity)   |
|   | ☐Monthly in arrears (June data reported in July)  |
|   | Quarterly in arrears (quarter 1 data reported in quarter 2)   |
| A I/DI Deporting Accessed as                    | □Rolling 12 months (previous 12 month period)   |
| 4 KPI Reporting Aggregation                     | ☑ National ☑ Regional ☑ LHO Area ☐ Hospital ☐ County ☐ Institution ☐ Other – give details:  |
| 5 KPI is reported in which reports?             | ✓ Performance Assurance Report (NSP) ☐ CompStat ☐ Other – give details:   |
| ona instruported in willentreports :            | En enormance Assurance Report (NSF) — Debripsial Definer — give details.  |
| 6 Web link to data                              | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html  |
| 7 Additional Informati                          |   |
| 7 Additional Information                        | Information Analysts Clairs Chapty amail, plains shoots 20thes in Tal. 01 (2007)  |
| tact details for Data Manager /<br>cialist Lead | Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657   |
| Cialist Leau                                    | Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary (  |

| KPI Title<br>KPI Description      | Number of patients treated in the reporting month (monthly target)  The metric captures the number of clients that received an intervention in the reporting mont and Includes new clients, existing clients, and those from previous caseload who were treate  |
|-----------------------------------|---|
|                                   | the month.  Information is captured under the following headings and reported as an overall figure.   |
|                                   | Domiciliary/Principal Setting: To include client's home address or nursing home where the home is the client's main residence or any other setting to which the physiotherapist travels individual physiotherapy contact/visit/appointment. This includes once-off school visit for an  |
|                                   | individual.   |
|                                   | Other Individual or Clinic Setting: One to one intervention that does not occur in a client's   |
| KPI Rationale                     | To monitor the number of individual patients being treated in 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 □   |
| KPI Target 2014                   | National: 33,453  |
| KPI Calculation                   | DML - 8,273; DNE - 5,907; South - 10,474; West - 8,799  This is a count of the the number of patients that received an intervention during the month a  |
| KI i Calculation                  | Includes new clients, existing clients, and those from previous caseload who were treated in month. Each client is only included once in the count  |
| Data Source                       | LHO – Region – BIU Non- acute team  |
| Data Completeness                 | 100 % data Completeness   |
| Data Quality Issues               | No known data quality issues at this point  |
| Data Collection Frequency         | □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:   |
| Tracer Conditions                 | Community Services Physiotherapy Clients  |
|                                   | Referrals are accepted from Health professionals within the HSE, other services/agencies at   |
|                                   | from clients/families themselves (self referrals). Any person can be referred to Physiotherapy services.  |
| Minimum Data Set                  | Referral note/form which includes details of clients and relevant information relating to the re<br>Referrals forms include details of basic demographic information (Name, address, DOB, ne.<br>kin, contact tel numbers, eligibility details etc. It also includes sections for details on<br>physiotherapy needs, medical conditions/diagnosis, and social /living/supports etc.   |
| International Comparison          | No  |
| KPI Monitoring                    | KPI will be monitored on a (please indicate below) basis:   |
|                                   | □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – g details:  |
|                                   | This is to be monitored by the RDOs. Where LHO has not sumbitted a complete return or where LHO has not sumbitted accomplete return or |
|                                   | there are anomalies, physiotherapy Manager(s) must submit bullet point commentary to the RDO to explain this to BIU   |
| KPI Reporting Frequency           | □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – q details:  |
| KPI report period                 | ☑Current (e.g. daily data reported on that same day of activity, monthly data reported within 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? | ☐ County ☐ Institution ☐ Other – give details:  |
| Web link to data                  | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html  |
|                                   |   |

| Contact details for Data Manager / | Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657               |
|------------------------------------|---|
| Specialist Lead                    | Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care |
| National Lead and Division         | John Hennessy, National Director, Primary Care Division, Health Service Executive.            |

| Prir | mary Care : Physiotherapy | Contacts  |
|------|---------------------------|---|
| -1   | KPI Title                 | Number of face to face contacts/visits  |
|      | KPI Description           | Total no. of Primary Care Physiotherapy face to face contacts / visits / appointments that took place in the reporting month by setting i.e.  Domiciliary/Principal Setting-include clients's home address and private nursing home where the home is the clients's main residence or any other setting to which the physio travels for individual physiotherapy contact/visit/appointment. This includes once-off school visit for an individual. Other Individual or Clinic Setting-One to one intervention that does not occur in a patient's main residence.  Group Setting: Total Number of Contacts which took place in a group setting. Each patient contact should only be recorded by one physiotherapist. e.g. groups, joint working  This data includes those seen for a first time assessment |
| 3    | KPI Rationale             | The purpose of this metric is to capture the number of face to face contacts/visits/appointment, assess the volume of activity and provide information to support staff and resouce allocation.   |
|      | Indicator Classification  | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two).  □Person Centred Care □Effective Care  Safe Care□ Better Health and Wellbeing □Use of Information  Workforce ☑ Use of Resources□ Governance, Leadership and Management □  |
| 4    | KPI Target 2014           | National: 715,365<br>DML - 158,364; DNE - 125,432; South - 218,477; West - 213,092  |
| 5    | KPI Calculation           | This is a count of all face to face contacts/visits. In respect of the total Number of Contacts which took place in a group setting, if 2 groups of 6 patients are seen, this equals 12 contacts). If a person is receving a mixture of individual and group intervention, count in both individual and group settings.   |
| 6    | Data Source               | LHO – Region – BIU Non- acute team  |
| ľ    | Data Completeness         | 100 % data Completeness   |
|      | Data Quality Issues       | No known data quality issues at this point  |
| 7    | Data Collection Frequency | □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:   |
| 8    | Tracer Conditions         | Community Services Physiotherapy Clients Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families themselves (self referrals). Any person can be referred to Physiotherapy services.  |
| 9    | Minimum Data Set          | Referral note/form which includes details of clients and relevant information relating to the referral Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc. It also includes sections for details on physiotherapy needs, medical conditions/diagnosis, and social /living/supports etc.  |
| 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:  This is to be monitored by the RDOs. Where LHO has not sumbitted a complete return or where there are anomalies, physiotherapy Manager(s) must submit bullet point commentary to the RDO to explain this to BIU   |
| 12   | KPI Reporting Frequency   | □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 reports? | ☑Performance Assurance 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 /    | Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657                   |
| Specialist Lead |                                   | Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care     |
| Natio           | nal Lead and Division             | John Hennessy, National Director, Primary Care Division, Health Service Executive.                |

| Primary Care :Physiotherapy          | Wait List Management   |
|--------------------------------------|--|
| 1 KPI Title                          | Physiotherapy - Number of patients waiting over 12 weeks for an assessment   |
| 2 KPI Description                    | This is the number of clients waiting over 12 weeks to an assessment  Count of calendar days/weeks (not 'working days'). This metric is captured in 5 wait bands  1 - 4 weeks = 0 - 6 days  4 - 8 weeks = 28 - 55 days  8 - 12 weeks = 56 - 83 days  12 weeks = 84days +   |
| 3 KPI Rationale                      | To provide information to support staff and resouce allocation decisions in reducing wait times for  |
| Indicator Classification             | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two).  □Person Centred Care □Effective Care  Safe Care□ Better Health and Wellbeing □Use of Information  Workforce ☑ Use of Resources□ Governance, Leadership and Management □   |
| 4 KPI Target 2014                    | Reduce outturn 2013 by 10%   |
| 5 KPI Calculation                    | No. of patients waiting over 12 weeks x 100  |
|                                      | Total number of patients waiting for an assessment   |
| Data Source                          | LHO – Region – BIU Non- acute team   |
| Data Completeness                    | 100 % data Completeness  |
| Data Quality Issues                  | No known data quality issues at this point   |
| 7 Data Collection Frequency          | □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:  |
| 8 Tracer Conditions                  | Community Services Physiotherapy Clients Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families themselves (self referrals). Any person can be referred to Physiotherapy services.   |
| 9 Minimum Data Set                   | Referral note/form which includes details of clients and relevant information relating to the referral Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel numbers, eligibility details etc. It also includes sections for details on physiotherapy needs, medical conditions/diagnosis, and social /living/supports etc. |
| 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:  This is to be monitored by the RDOs. Where LHO has not sumbitted a complete return or where  |
| 12 KPI Reporting Frequency           | □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:  |
| 13 KPI report period                 | <ul> <li>☑Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</li> <li>☐Monthly in arrears (June data reported in July)</li> <li>☐Quarterly in arrears (quarter 1 data reported in quarter 2)</li> <li>☐Rolling 12 months (previous 12 month period)</li> </ul>   |
| 14 KPI Reporting Aggregation         | ☑ National ☑ Regional ☑ LHO Area □ Hospital □ County □ Institution □ Other – give details:   |
| 15 KPI is reported in which reports? | ☑ Performance Report (NSP/CBP) ☑ CompStat ☐ Other – give details:  |
| 16 Web link to data                  | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html   |
| 17 Additional Information            |  |
| Contact details for Data Manager /   | Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657  |
| Specialist Lead                      | Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care  |
| National Lead and Division           | John Hennessy, National Director, Primary Care Division, Health Service Executive.   |

| Prima      | ry Care : Occupational The   | rapy Referrals   |
|------------|--|--|
|            |  |  |
| 1          | KPI Title  | Number of patient referrals  |
| 2          | KPI Description  | Number of clients for whom a referral was accepted to your service in a particular month – includes new referrals, re-   |
|            |  | referrals and reviews.   |
|            |  | Each client is counted only once in the reporting month  |
|            |  | This covers all Occupational Therapy services provided within Primary and Community Services. This does not  |
|            |  | include clients in Mental Health, Acute Hospital care or voluntary agency settings.  |
|            |  | This metric is recorded by age band. Age Bands: 0-4yrs and 11mths; 5-17yrs & 11mths; 18-64yrs & 11mths; 65yrs+.  |
|            |  |  |
| 3          | KPI Rationale  | This KPI allows for planning and managment of the monthly throughput of referrals in relation to staffing and resource   |
|            |  | allocation in relation to demand. Review of the throughput also facilitates recognition of emerging trends in referrals  |
|            |  | and thus a management response to same.  |
|            | Indicator Classification   | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you   |
|            |  | may need to choose two).   |
|            |  | □Person Centred Care □Effective Care   |
|            |  | Safe Care ☐ Better Health and Wellbeing ☑ Use of Information   |
|            |  | Workforce ☐ Use of Resources ☐ Governance, Leadership and Management ☐   |
| 4          | KPI Target 2014  | National Expected Activity 2014 - 70,978   |
|            |  | DML - 20,157; DNE - 15,066; South - 16,306; West - 19,449  |
| 5          | KPI Calculation  | Count of the Number of clients for whom a referral was accepted in the reporting month.  |
| 6          | Data Source  | Source - OT Therapist records - OT Managers - LHO - RDO Office   |
|            | Data Completeness  | Completeness - 100% data available from all HSE Areas Nationally   |
|            | Data Quality Issues  | No known data quality issues at this point   |
| 7          | Data Collection Frequency  | □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:  |
| 8          | Tracer Conditions  | Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families   |
| _          |  | themselves (self referrals). Any person can be referred to OT. Referrals must be received in writing, using the official   |
|            |  | referral form when available. Referrals which must be completed in full, with as much detail as possible, in order to  |
|            |  | assess appropriatness of referrals and aid accurate prioritisation.  |
| 9          | Minimum Data Set   | Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel   |
|            |  | numbers, eligibility details etc. It also includes sections for details on occupational needs, medical   |
|            |  | conditions/diagnosis, and social /living/supports etc.   |
| 10         | International Comparison   | No   |
| 11         | KPI Monitoring   | KPI will be monitored on a (please indicate below) basis:  |
|            | , and the second | □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:   |
|            |  | Please indicate who is responsible for monitoring this KPI: Occupational Therapy Manager   |
| 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 reports?  | ☑Performance Assurance Report (NSP) ☐CompStat ☐Other – give details:   |
| 16         | Web link to data   | http://www.hse.ie/eng/services/Publications/corporate/performancereports   |
|            | Additional Information   |  |
| Contact    | details for Data Manager / Specialist  | Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657  |
| Lead       |  | Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division   |
| National   | Lead and Division  | John Hennessy, National Director, Primary Care Division, Health Service Executive.   |
| · vacional | Edda dila Dividion   | Some residence of the resident of the second |

| Prima    | ry Care : Occupational The                                   | rapy First Time Assessment   |
|----------|--|--|
|          |  |  |
| 1        | KPI Title  | Number of new patients seen for a first time assessment  |
| 2        | KPI Description  | Number of new clients seen for a first time assessment – refers to number of clients seen for a first time/initial         |
|          |  | assessment in this episode of care. i.e. includes re referrals to the service in the reporting month.                      |
|          |  | This covers all Occupational Therapy services provided within Primary and Community Services. This does not                |
|          |  | include clients in Mental Health, Acute Hospital care or voluntary agency settings.  |
|          |  | This metric is recorded by age band. Age Bands: 0-4yrs and 11mths; 5-17yrs & 11mths; 18-64yrs & 11mths; 65yrs+.            |
| 3        | KPI Rationale  | This KPI allows for planning and managment of first time/initial assessments in relation to staffing and resource          |
|          |  | allocation in relation to demand. Review of the throughput also facilitates recognition of emerging trends and allows for  |
|          |  | a management response to same.   |
|          | Indicator Classification                                     | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you |
|          |  | may need to choose two).   |
|          |  | □Person Centred Care □Effective Care   |
|          |  | Safe Care ☐ Better Health and Wellbeing ☑ Use of Information   |
|          |  | Workforce ☐ Use of Resources☐ Governance, Leadership and Management ☐  |
| 4        | KPI Target 2014  | National Expected Activity 2014 - 71,540   |
|          |  | DML - 21,250; DNE - 15,957; South - 16784; West - 17,549   |
| 5        | KPI Calculation  | Count of the Number of clients seen for a first time assessment in the reporting month                                     |
| 6        | Data Source  | Source - OT Therapist records - OT Managers - LHO - RDO Office   |
|          | Data Completeness  | Completeness - 100% data available from all HSE Areas Nationally   |
|          | Data Quality Issues  | No known data quality issues at this point   |
| 7        | Data Collection Frequency                                    | □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:  |
| 8        | Tracer Conditions  | Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families         |
|          |  | themselves (self referrals). Any person can be referred to OT. Referrals must be received in writing, using the official   |
|          |  | referral form when available. Referrals which must be completed in full, with as much detail as possible, in order to      |
|          |  | assess appropriatness of referrals and aid accurate prioritisation.  |
| 9        | Minimum Data Set   | Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel             |
|          |  | numbers, eligibility details etc. It also includes sections for details on occupational needs, medical                     |
|          |  | conditions/diagnosis, and social /living/supports etc.   |
|          | 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: Occupational Therapy Manager                                   |
| 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  |
| 15       | MDI is now and a discordish name of a C                      | □ County □ Institution □Other – give details:  |
|          | KPI is reported in which reports?                            | ☑Performance Assurance Report (NSP) □CompStat □Other – give details:   |
| 16       | Web link to data   | http://www.hse.ie/eng/services/Publications/corporate/performancereports_  |
|          | Additional Information details for Data Manager / Specialist | Information Analyst, Claire Cheeky amail, alaire aheaky 2@hea is Tal. 01 / 252/57  |
| Lead     | uetalis for Data Manager / Specialist                        | Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657  |
|          | L L IBILI  | Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division                     |
| National | Lead and Division  | John Hennessy, National Director, Primary Care Division, Health Service Executive.   |

| 1 KPI Title 2 KPI Desc |                                  | No of patients treated (direct and indirect) (monthly target)  Total Number of patients who received a service (direct and indirect) in the reporting month a. No. of clients who received a direct service in the reporting month (per month)  The number of individual named clients who have received direct interventions during month.  Direct interventions refers to face to face interventions, delivered directly to, or on behalf of a named client. The  Client does not have to be present but the intervention is on their behalf and of a 'face to face' nature. Examples of  direct interventions. eg • Any face to face sessions; • Client specific parent/family training; • School/pre-school visit to  or on behalf of a client; • Domiciliary Visit to client; • Attendance at Case conference; • School visit in advance of child  attending school; • Pre-discharge visit to client's home; • Site meeting with Co Council/builder regarding housing  adaptations. Each client is counted only once in the reporting month. This covers all Occupational Therapy services  provided within Primary and Community Services. This does not include clients in Mental Health, Acute Hospital care  b. No of clients who received an indirect service in the reporting month  This is the number of clients who received indirect interventions only and nil direct contacts during the reporting month  Indirect interventions refers to meaningful interventions to, or on behalf of, a client in an indirect way. This implies it is |
|------------------------|----------------------------------|---|
| 2 KPI Desc             |                                  | Total Number of patients who received a service (direct and indirect) in the reporting month  a. No. of clients who received a direct service in the reporting month (per month)  The number of individual named clients who have received direct interventions during month.  Direct interventions refers to face to face interventions, delivered directly to, or on behalf of a named client. The  Client does not have to be present but the intervention is on their behalf and of a 'face to face' nature. Examples of  direct interventions. eg • Any face to face sessions; • Client specific parent/family training; • School/pre-school visit to  or on behalf of a client; • Domiciliary Visit to client; • Attendance at Case conference; • School visit in advance of child  attending school; • Pre-discharge visit to client's home; • Site meeting with Co Council/builder regarding housing  adaptations. Each client is counted only once in the reporting month. This covers all Occupational Therapy services  provided within Primary and Community Services. This does not include clients in Mental Health, Acute Hospital care  b. No of clients who received an indirect service in the reporting month  This is the number of clients who received indirect interventions only and nil direct contacts during the reporting month   |
|                        | сприоп                           | a. No. of clients who received a direct service in the reporting month (per month)  The number of individual named clients who have received direct interventions during month.  Direct interventions refers to face to face interventions, delivered directly to, or on behalf of a named client. The  Client does not have to be present but the intervention is on their behalf and of a 'face to face' nature. Examples of  direct interventions. eg • Any face to face sessions; • Client specific parent/family training; • School/pre-school visit to  or on behalf of a client; • Domiciliary Visit to client; • Attendance at Case conference; • School visit in advance of child  attending school; • Pre-discharge visit to client's home; • Site meeting with Co Council/builder regarding housing  adaptations. Each client is counted only once in the reporting month. This covers all Occupational Therapy services  provided within Primary and Community Services. This does not include clients in Mental Health, Acute Hospital care  b. No of clients who received an indirect service in the reporting month  This is the number of clients who received indirect interventions only and nil direct contacts during the reporting month   |
| 3 KPI Ratio            |                                  | The number of individual named clients who have received direct interventions during month.  Direct interventions refers to face to face interventions, delivered directly to, or on behalf of a named client. The Client does not have to be present but the intervention is on their behalf and of a 'face to face' nature. Examples of direct interventions. eg • Any face to face sessions; • Client specific parent/family training; • School/pre-school visit to or on behalf of a client; • Domiciliary Visit to client; • Attendance at Case conference; • School visit in advance of child attending school; • Pre-discharge visit to client's home; • Site meeting with Co Council/builder regarding housing adaptations. Each client is counted only once in the reporting month. This covers all Occupational Therapy services provided within Primary and Community Services. This does not include clients in Mental Health, Acute Hospital care b. No of clients who received an indirect service in the reporting month  This is the number of clients who received indirect interventions only and nil direct contacts during the reporting month  |
| 3 KPI Ratio            |                                  | Direct interventions refers to face to face interventions, delivered directly to, or on behalf of a named client. The Client does not have to be present but the intervention is on their behalf and of a 'face to face' nature. Examples of direct interventions. eg • Any face to face sessions; • Client specific parent/family training; • School/pre-school visit to or on behalf of a client; • Domiciliary Visit to client; • Attendance at Case conference; • School visit in advance of child attending school; • Pre-discharge visit to client's home; • Site meeting with Co Council/builder regarding housing adaptations. Each client is counted only once in the reporting month. This covers all Occupational Therapy services provided within Primary and Community Services. This does not include clients in Mental Health, Acute Hospital care b. No of clients who received an indirect service in the reporting month  |
| 3 KPI Ratio            |                                  | Client does not have to be present but the intervention is on their behalf and of a 'face to face' nature. Examples of direct interventions. eg • Any face to face sessions; • Client specific parent/family training; • School/pre-school visit to or on behalf of a client; • Domiciliary Visit to client; • Attendance at Case conference; • School visit in advance of child attending school; • Pre-discharge visit to client's home; • Site meeting with Co Council/builder regarding housing adaptations. Each client is counted only once in the reporting month. This covers all Occupational Therapy services provided within Primary and Community Services. This does not include clients in Mental Health, Acute Hospital care b. No of clients who received an indirect service in the reporting month This is the number of clients who received indirect interventions only and nil direct contacts during the reporting month  |
| 3 KPI Ratio            |                                  | direct interventions. eg • Any face to face sessions; • Client specific parent/family training; • School/pre-school visit to or on behalf of a client; • Domiciliary Visit to client; • Attendance at Case conference; • School visit in advance of child attending school; • Pre-discharge visit to client's home; • Site meeting with Co Council/builder regarding housing adaptations. Each client is counted only once in the reporting month. This covers all Occupational Therapy services provided within Primary and Community Services. This does not include clients in Mental Health, Acute Hospital care b. No of clients who received an indirect service in the reporting month  This is the number of clients who received indirect interventions only and nil direct contacts during the reporting month  |
| 3 KPI Ratio            |                                  | or on behalf of a client; • Domiciliary Visit to client; • Attendance at Case conference; • School visit in advance of child attending school; • Pre-discharge visit to client's home; • Site meeting with Co Council/builder regarding housing adaptations. Each client is counted only once in the reporting month. This covers all Occupational Therapy services provided within Primary and Community Services. This does not include clients in Mental Health, Acute Hospital care b. No of clients who received an indirect service in the reporting month  This is the number of clients who received indirect interventions only and nil direct contacts during the reporting month   |
| 3 KPI Ratio            |                                  | attending school; • Pre-discharge visit to client's home; • Site meeting with Co Council/builder regarding housing adaptations. Each client is counted only once in the reporting month. This covers all Occupational Therapy services provided within Primary and Community Services. This does not include clients in Mental Health, Acute Hospital care b. No of clients who received an indirect service in the reporting month This is the number of clients who received indirect interventions only and nil direct contacts during the reporting month   |
| 3 KPI Ratio            |                                  | adaptations. Each client is counted only once in the reporting month. This covers all Occupational Therapy services provided within Primary and Community Services. This does not include clients in Mental Health, Acute Hospital care b. No of clients who received an indirect service in the reporting month  This is the number of clients who received indirect interventions only and nil direct contacts during the reporting month   |
| 3 KPI Ratio            |                                  | provided within Primary and Community Services. This does not include clients in Mental Health, Acute Hospital care b. No of clients who received an indirect service in the reporting month This is the number of clients who received indirect interventions only and nil direct contacts during the reporting month  |
| 3 KPI Ratio            |                                  | This is the number of clients who received indirect interventions only and nil direct contacts during the reporting month   |
| 3 KPI Ratio            |                                  | ,   |
| 3 KPI Ratio            |                                  | Indirect interventions refers to meaningful interventions to, or on behalf of, a client in an indirect way. This implies it is  |
| 3 KPI Ratio            |                                  |   |
| 3 KPI Ratio            |                                  | of non face to face nature via telephone, e-mail, written, etc.   |
| 3 KPI Ratio            |                                  | (Note: if client receives direct interventions they are not counted in this question)   |
| 5 Krikati              | onale                            | Occupational therapy is a client centred health profession concerned with promoting health and well being through   |
|                        | Ullale                           | occupation. The primary goal of occupational therapy is to enable people to participate in the activities of everyday life.   |
|                        |                                  | Occupational therapists achieve this outcome by working with people and communities to enhance their ability to   |
|                        |                                  | engage in the occupations they want to, need to, or are expected to do, or by modifying the occupation or the   |
|                        |                                  | environment to better support their occupational engagement.  |
|                        |                                  | Occupational therapy is carried out in Primary Care by assessing people and providing interventions, both directly and  |
|                        |                                  | indirectly, in either home or clinic locations or other community settings e.g. community centres, day centres,   |
|                        |                                  | community hospital etc. Home based interventions are an essential component of service delivery where   |
|                        |                                  | assessing/treating the person performance within their own environment is integral to successful outcomes. Service  |
|                        |                                  | activity data (both direct and indirect) reflects the number of contacts with people but does not reflect the amount of   |
| Indicator              | r 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 Targ             | not 2014                         | Workforce ☐ Use of Resources☐ Governance, Leadership and Management ☐  National Expected Activity 2014 - 16,704   |
| 4 KPI Targ             | jet 2014                         | DML - 4,731 ; DNE - 3,564; South - 3,488 ; West - 4,921   |
| 5 KPI Calc             | culation                         | This is a count of the number of clients who have received a direct service, plus clients who have received an indirect   |
|                        |                                  | intervention only in the reporting month.   |
|                        |                                  | Each client is counted only once in the reporting month.  |
|                        |                                  | As the same clients may be recorded over a period of time, consecutative months cannot be added together to   |
|                        |                                  | provide a annual view.  |
| 6 Data Sou             |                                  | Source - OT Therapist records - OT Managers - LHO - RDO Office  |
|                        | mpleteness                       | Completeness - 100% data available from all HSE Areas Nationally  |
|                        | ality Issues                     | No known data quality issues at this point  Daily Dweckly Monthly Douarterly DBi-annually DAnnually DOther – give details:  |
|                        | llection Frequency<br>Conditions | □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:  Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families   |
| 6 Hacer C              | onullions                        | themselves (self referrals). Any person can be referred to OT. Referrals must be received in writing, using the official  |
|                        |                                  | referral form when available. Referrals which must be completed in full, with as much detail as possible, in order to   |
|                        |                                  | assess appropriatness of referrals and aid accurate prioritisation.   |
| 9 Minimum              | n Data Set                       | Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel  |
|                        |                                  | numbers, eligibility details etc. It also includes sections for details on occupational needs, medical  |
|                        |                                  | conditions/diagnosis, and social /living/supports etc.  |
|                        | onal Comparison                  | No  |
| 11 KPI Mon             | itoring                          | 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: Occupational Therapy Manager  |
|                        | orting Frequency                 | □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:  |
| 13 KPI repo            | ort period                       | Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of  |
| 1                      |                                  | activity)   |
| 1                      |                                  | 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 Repo            | orting Aggregation               | ☑ National ☑ Regional ☑ LHO Area □ Hospital   |
| 14 Kri Kept            | orang Aggregation                | □ County □ Institution □ Other – give details:  |
| 15 KPI is re           | ported in which reports?         | ☐ County ☐ Institution ☐ Other – give details.  ☐ Performance Assurance Report (NSP) ☐ CompStat ☐ Other – give details:   |
| 16 Web link            |                                  | http://www.hse.ie/eng/services/Publications/corporate/performancereports_   |
|                        | nal Information                  |   |
|                        | r Data Manager / Specialist      | Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657   |
| Lead                   |                                  | Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division  |
| National Lead and      | d Division                       | John Hennessy, National Director, Primary Care Division, Health Service Executive.  |

| 1   | KPI Title                             | No of patients waiting over 16 weeks for an assessment   |
|-----|---------------------------------------|--|
| 2   | KPI Description                       | This is the number of patients waiting for an assessment over 16 weeks on the last day of the month. This metric is        |
|     |                                       | currently collected in 4 wait bands:   |
|     |                                       | 0 – 16 weeks   |
|     |                                       | 17 weeks – 32 weeks  |
|     |                                       | 33 weeks – 52 weeks  |
|     |                                       | 52 weeks+  |
| 3   | KPI Rationale                         | To monitor waiting lists and reduce the length of time patients are waiting for an assessment                              |
|     | Indicator Classification              | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you |
|     |                                       | may need to choose two).   |
|     |                                       | □Person Centred Care □Effective Care   |
|     |                                       | Safe Care ☐ Better Health and Wellbeing ☑ Use of Information   |
|     |                                       | Workforce ☐ Use of Resources☐ Governance, Leadership and Management ☐  |
| 4   | KPI Target 2014                       | Reduce outturn 2013 by 10%   |
| 5   | KPI Calculation                       | No. of patients waiting over 16 weeks x 100  |
|     |                                       | Total number of patients waiting for an assessment   |
| 6   | Data Source                           | Source - OT Therapist records - OT Managers - LHO - RDO Office   |
|     | Data Completeness                     | Completeness - 100% data available from all HSE Areas Nationally   |
|     | Data Quality Issues                   | No known data quality issues at this point   |
| 7   | Data Collection Frequency             | □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:  |
| 8   | Tracer Conditions                     | Referrals are accepted from Health professionals within the HSE, other services/agencies and from clients/families         |
|     |                                       | themselves (self referrals). Any person can be referred to OT. Referrals must be received in writing, using the official   |
|     |                                       | referral form when available. Referrals which must be completed in full, with as much detail as possible, in order to      |
|     |                                       | assess appropriatness of referrals and aid accurate prioritisation.  |
| 9   | Minimum Data Set                      | Referrals forms include details of basic demographic information (Name, address, DOB, next of kin, contact tel             |
|     |                                       | numbers, eligibility details etc. It also includes sections for details on occupational needs, medical                     |
|     |                                       | conditions/diagnosis, and social /living/supports etc.   |
| 10  | International Comparison              | No   |
| 11  | KPI Monitoring                        | 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: Occupational Therapy Manager                                   |
| 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  |
|     | 3 33 35 3                             | □ County □ Institution □Other – give details:  |
| 15  | KPI is reported in which reports?     | ☑Performance Assurance Report (NSP) ☑CompStat ☐Other – give details:   |
| 16  | Web link to data                      | http://www.hse.ie/eng/services/Publications/corporate/performancereports   |
| 17  | Additional Information                |  |
|     | details for Data Manager / Specialist | Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657  |
| ead | 3                                     | Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division                     |
|     | I Lead and Division                   | John Hennessy, National Director, Primary Care Division, Health Service Executive.   |

| To  | bacco Control                     |   |
|-----|-----------------------------------|---|
| 1   | KPI Title                         | % of existing health centres to be tobacco free   |
| 2   | KPI Description                   | HSE Tobacco Control Framework (TCF) commits to introducing a tobacco free policy in all HSE campuses by 2015. The policy covers hospital, admin sites and primary care sites. A phased roll out of the policy is planned. All new primary care centres are to open tobacco free. This policy will apply to all staff, patients/service users, visitors, contractors and other persons on teh campus for any reason. Smoking will not be permitted in any part of the grounds, including entrances, car parks, roads, bus stops and other areas as stated in teh Corporate Policy adopted in 2012. |
| 3   | KPI Rationale                     | Smoking is the biggest single cause of preventable premature death, claimign some 5,500 deaths in Ireland every year. There is a growing recognition throughout the developed world that allowing smoking on healthcare campuses significantly undermines the health promotion message of healthcare organisations. The HSE's Tobacco Free Campus Policy will help change social norms around smoking. It will lead to better health outcomes for patients by treating tobacco addiction as a care issue. Progress is monitored quarterly by primary care.  |
|     | Indicator Classification          | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two).  ☑ Person Centred Care ☑ Effective Care ☐ Safe Care ☑ Better Health and Wellbeing   |
| 4   | KPI Target 2014                   | National - 70%<br>DML - 70%; DNE -70%; South - 70%; West - 70%  |
| 5   | KPI Calculation                   | Count   |
| 6   | Data Source                       | From 17 ISAs, via Primary Care Specialists, to National Primary Care Divison Office.  |
|     | Data Completeness                 | Data is received from all areas nationally - 100% complete.   |
|     | Data Quality Issues               | KPI definitions agreed with Health and Wellbeing - Tobacco Control Implementation Group.  |
| 7   | Data Collection Frequency         | □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually   |
| 8   | Tracer Conditions                 | All new Primary Care Centres opening in calander year.  |
| 9   | Minimum Data Set                  | No  |
|     | International Comparison          | No  |
| 11  | KPI Monitoring                    | □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually KPI is monitored by: Primary Care Division  |
|     | KPI Reporting Frequency           | □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually □Other – give details:  |
|     | KPI report period                 | □Current □Quarterly Current (e.g. data reported in each qtr up to and including the last day of that qtr) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month   |
| 14  | KPI Reporting Aggregation         | <ul> <li>☑ National</li> <li>☑ Regional</li> <li>☑ LHO Area</li> <li>☐ Hospital</li> <li>☐ County</li> <li>☐ Institution</li> <li>☐ Other – give details:</li> </ul>  |
| 15  | KPI is reported in which reports? | ☑Performance Assurance Report (NSP/CBP) ☐CompStat ☐Other – give details:  |
|     | Web link to data                  | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html  |
|     | Additional Information            |   |
|     | ntact details for Data Manager /  | Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657   |
|     | ecialist Lead                     | Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care   |
| Nat | ional Lead and Division           | Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division  |

| To  | bacco Control                     |   |
|-----|-----------------------------------|---|
| 1   | KPI Title                         | % of all new primary care centres to open tobacco free  |
| 2   | KPI Description                   | HSE Tobacco Control Framework (TCF) commits to introducing a tobacco free policy in all HSE campuses by 2015. The policy covers hospital, admin sites and primary care sites. A phased roll out of the policy is planned. All new primary care centres are to open tobacco free. This policy will apply to all staff, patients/service users, visitors, contractors and other persons on teh campus for any reason. Smoking will not be permitted in any part of the grounds, including entrances, car parks, roads, bus stops and other areas as stated in teh Corporate Policy adopted in 2012. |
| 3   | KPI Rationale                     | Smoking is the biggest single cause of preventable premature death, claimign some 5,500 deaths in Ireland every year. There is a growing recognition throughout the developed world that allowing smoking on healthcare campuses significantly undermines the health promotion message of healthcare organisations. The HSE's Tobacco Free Campus Policy will help change social norms around smoking. It will lead to better health outcomes for patients by treating tobacco addiction as a care issue. Progress is monitored quarterly by primary care.  |
|     | Indicator Classification          | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two).  ☑ Person Centred Care ☑ Effective Care □ Safe Care ☑ Better Health and Wellbeing   |
| 4   | KPI Target 2014                   | National - 100%<br>DML - 100%; DNE -100%; South - 100%; West - 100%   |
| 5   | KPI Calculation                   | Count   |
| 6   | Data Source                       | From 17 ISAs, via Primary Care Specialists, to National Primary Care Divison Office.  |
|     | Data Completeness                 | Data is received from all areas nationally - 100% complete.   |
|     | Data Quality Issues               | KPI definitions agreed with Health and Wellbeing - Tobacco Control Implementation Group.  |
|     | Data Collection Frequency         | □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually   |
|     | Tracer Conditions                 | Existing Primary Care Health Centres Centres to go/to be tobacco free in calander year.   |
| 9   | Minimum Data Set                  | No  |
|     | International Comparison          | No  |
| 11  | KPI Monitoring                    | □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually KPI is monitored by: Primary Care Division  |
|     | KPI Reporting Frequency           | □ Daily □ Weekly □ Monthly ☑ Quarterly □ Bi-annually □ Annually □ Other – give details:   |
|     | KPI report period                 | □Current □Cuarterly Current (e.g. data reported in each qtr up to and including the last day of that qtr) □Monthly in arrears (June data reported in July) □Cuarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month   |
|     | KPI Reporting Aggregation         | ☑ National ☑ Regional ☑ LHO Area ☐ Hospital ☐ County ☐ Institution ☐ Other – give details:  |
|     | KPI is reported in which reports? | ☑Performance Assurance Report (NSP/CBP) ☐CompStat ☐Other – give details:  |
|     | Web link to data                  | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html  |
| 17  | Additional Information            |   |
|     | a Manager / Specialist Lead       | Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division  |
| Nat | ional Lead and Division           | John Hennessy, National Director, Primary Care Division, Health Service Executive.  |

| KPI Title  | Oı  | thodontics - Active Treati        | ment  |
|--|-----|-----------------------------------|---|
| Active Treatment. Any patient in treatment with an Orthodornist who has a comprehensive treatment plan with freed functional or removal appliance in situ. It also includes patients who are in reflection and excludes patients receiving interceptive fleatment. Count at the end of each quarter, i.e. last day of March, June, September and December.    Refl Rationale   |     |                                   |   |
| functional or removal appliance in situ. It also includes patients who are in retention and excludes patients receiving interceptive treatment. Count at the end of each quarter, i.e. last day of March, June, September and December.    To monitor the number of eligibile patients receiving orthodontic treatment in the reporting month.   | 1   | KPI Title                         | Number of Patients receiving active treatment at the end of the reporting period  |
| Indicator Classification   | 2   | KPI Description                   |   |
| may need to choose two).  □Person Centred Care □Better Health and Wellbeing □Use of Information □Workforce □Use of Resources □Governance, Leadership and Management  KPI Target 2014 National - 22,114 DML - 7,163: DNE - 2,957; South - 6,262; West - 5,732  5 KPI Calculation Count the number of patients who are in the process of receiving orthodontic treatment at the end of the reporting Data Source Data is submitted by the Orthodontic Services (in the former Health Board areas) to the National Business Intelligenc Unit. The National BU will liables with the National Oral Health Lead for validation purposes.  Data Completeness Data Completeness Data is received from all areas nationally - 100% complete from Q2 2013.  Data Collection Frequency □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually  8 Tracer Conditions All children under 16 years of age are eligible for dental care. To receive orthodontic treatment a child must satisfy the clinical guidelines for orthodontic care and be referred for treatment Referral form from primary care dental service containing demographic and clinical details.  Referral form from primary care dental service containing demographic and clinical details.  RPI Monitoring □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually  KPI kmonitoring □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually  KPI report period □Current □Quarterly □Consultant Orthodontics/Orthodontic Manager □Countly □Counterly □Counterly □Counterly □Bi-annually □Annually □Counterly in arrears (Joune data reported in each qtr up to and including the last day of that qtr) □Monthly in arrears (Joune data reported in quarter 2) □Rolling 12 months (grevious 12 month period) □Countly □Coun  | 3   | KPI Rationale                     | To monitor the number of eligibile patients receiving orthodontic treatment in the reporting month.   |
| DML - 7,163; DNE - 2,957; South - 6,262; West - 5,732  |     |                                   | ☑Person Centred Care ☑ Effective Care □Safe Care □Better Health and Wellbeing □Use of Information □Workforce  |
| Count the number of patients who are in the process of receiving orthodontic treatment at the end of the reporting  Data Source  Data is submitted by the Orthodontic Services (in the former Health Board areas) to the National Business Intelligence Unit. The National Bull will liaise with the National Oral Health Lead for validation purposes.  Data Completeness Data Oral Peater Solate Oral P | 4   | KPI Target 2014                   | · ·   |
| Data is submitted by the Orthodontic Services (in the former Health Board areas) to the National Business Intelligence Unit. The National BIU will liaise with the National Oral Health Lead for validation purposes.  Data Completeness Data Quality Issues  Expl definitions have also been further defined to ensure data integrity nationally. Work is ongoing on new IT solution to standardise data management.  Pata Collection Frequency    Data Collection Frequency   Data Collection Frequency   Data Collection Frequency   Data Collection Frequency   Data Collection Frequency   Data Collection Frequency   Data Collection Frequency   Data Collection Frequency   Data Collection Frequency   Data Collection Frequency   Data Collection Frequency   Data Collection Frequency   Data Collection Frequency   Data Collection Frequency   Data Set   Referral form from primary care dental service containing demographic and clinical details.    Data Collection Frequency   Data Set   Referral Form from primary care dental service containing demographic and clinical details.    No   International Comparison   No   Data Set   Referral Form from primary care dental service containing demographic and clinical details.    No   Data Set   Referral Form from primary care dental service containing demographic and clinical details.    No   Data Set   Referral Form from primary care dental service containing demographic and clinical details.    No   Data Set   Referral Form from primary care dental service containing demographic and clinical details.    No   Data Set   Referral Form from primary care dental service containing demographic and clinical details.    No   Data Set   Referral Form from primary care dental service containing demographic and clinical details.    No   Data Set   Referral Form from primary care dental service containing demographic and clinical details.    No   Data Set   Referral Form from primary care dental service containing demographic and clinical details.    No   Data Set   Referral Form from primary care dental ser | 5   | KPI Calculation                   |   |
| Data Quality Issues  | 6   |                                   | Data is submitted by the Orthodontic Services (in the former Health Board areas) to the National Business Intelligence  |
| to standardise data management.    Data Collection Frequency   |     | Data Completeness                 | Data is received from all areas nationally - 100% complete from Q2 2013.  |
| All children under 16 years of age are eligible for dental care. To receive orthodontic treatment a child must satisfy the clinical guidelines for orthodontic care and be referred for treatment.    Part   |     | Data Quality Issues               | KPI definitions have also been further defined to ensure data integrity nationally. Work is ongoing on new IT solution to standardise data management.  |
| clinical guidelines for orthodonlic care and be referred for treatment    Paline   Referral form from primary care dental service containing demographic and clinical details.   No  | 7   | Data Collection Frequency         | □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually   |
| International Comparison   No  | 8   | Tracer Conditions                 |   |
| County   Institution   Meb link to data   Methodol      | 9   | Minimum Data Set                  | Referral form from primary care dental service containing demographic and clinical details.   |
| KPI is monitored by: Consultant Orthodontist/Orthodontic Manager    Court  | 10  | International Comparison          | No  |
| □Other – give details:  □Current □Cuarterly Current (e.g. data reported in each qtr up to and including the last day of that qtr) □Monthly in arrears (June data reported in July) □Cuarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □Other - give details:  14 KPI Reporting Aggregation □ National □ Regional □ HO Area □ Hospital □ County □ Institution □ Other – give details: former Health Board Area □Performance Assurance Report (NSP) □CompStat □Other – give details:  15 KPI is reported in which reports? □ Performance Assurance Report (NSP) □ CompStat □Other – give details:  16 Web link to data   | 11  | KPI Monitoring                    | KPI is monitored by: Consultant Orthodontist/Orthodontic Manager  |
|  |     | , , ,                             |   |
| □ County □ Institution ☑ Other – give details: former Health Board Area  15 KPI is reported in which reports? ☑ Performance Assurance 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  Contact details for Data Manager / Specialist Lead   |     |                                   | <ul> <li>☑Quarterly Current (e.g. data reported in each qtr up to and including the last day of that qtr)</li> <li>☐Monthly in arrears (June data reported in July)</li> <li>☐Quarterly in arrears (quarter 1 data reported in quarter 2)</li> <li>☐Rolling 12 months (previous 12 month period)</li> <li>☐Other - give details:</li> </ul> |
| 16 Web link to data http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html  17 Additional Information  Contact details for Data Manager / Specialist Lead Claire Sheehy, Information Analyst, Non Acute BIU. Tel 01 6352657.claire.sheehy3@hse.ie Dympna Kavanagh, National Oral Health Office, dympna.kavanagh@hse.ie, tel: 061 461302  |     |                                   | ☐ County ☐ Institution ☑ Other – give details: former Health Board Area   |
| 17 Additional Information  Contact details for Data Manager / Specialist Lead  Claire Sheehy, Information Analyst, Non Acute BIU. Tel 01 6352657.claire.sheehy3@hse.ie Dympna Kavanagh, National Oral Health Office, dympna.kavanagh@hse.ie, tel: 061 461302   | 15  | KPI is reported in which reports? | ☑Performance Assurance Report (NSP) □CompStat □Other – give details:  |
| Contact details for Data Manager / Claire Sheehy, Information Analyst, Non Acute BIU. Tel 01 6352657.claire.sheehy3@hse.ie Dympna Kavanagh, National Oral Health Office, dympna.kavanagh@hse.ie, tel: 061 461302   | 16  | Web link to data                  | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html  |
| Specialist Lead Dympna Kavanagh, National Oral Health Office, dympna.kavanagh@hse.ie, tel: 061 461302  |     |                                   |   |
| National Lead and Division  John Hennessy, National Director, Primary Care Division, Health Service Executive.   |     |                                   |   |
|  | Nat | tional Lead and Division          | John Hennessy, National Director, Primary Care Division, Health Service Executive.  |

| 1   | KPI Title                         | Reduce Waiting times of those waiting for assessment  |
|-----|-----------------------------------|---|
| 2   | KPI Description                   | This the number of patients waiting for assessment following referral. Wait time is from the date of referral date to                           |
|     |                                   | date of assessment.   |
|     |                                   | i) no. of patients waiting 1-6 months   |
|     |                                   | ii)no. of patients waiting 7-12 months  |
|     |                                   | iii)no. of patients waiting 13-24 months  |
|     |                                   | iv)no. of patiients waiting over 2 years  |
| 3   | KPI Rationale                     | To reduce the length of time patients are waiting for an assessment following referral  |
|     | Indicator Classification          | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases yo                       |
|     |                                   | may need to choose two).  |
|     |                                   | ✓Person Centred Care ✓ Effective Care ✓ Safe Care   |
|     |                                   | □Better Health and Wellbeing □Use of Information □Workforce   |
|     |                                   | ☐Use of Resources ☐Governance, Leadership and Management  |
|     |                                   |   |
| 4   | KPI Target 2014                   | 90% assessed within one year  |
| 5   | KPI Calculation                   | The number of patients on the assessment waiting list <= 12 months x 100  |
|     |                                   | Total number of patients on the assessment waiting list   |
| 6   | Data Source                       | Data is submitted by the Orthodontic Services in former health board areas and regionally from DNE to the National                              |
|     |                                   | Business Information Unit, IPPB. The national data analyst BIU quality assures validated data with the data provide                             |
|     |                                   | and links with the National Oral Health Lead and Directorate.   |
|     | Data Completeness                 | Data is received from all areas nationally - 100% complete from Q2 2013.  |
|     | Data Quality Issues               | KPI definitions have also been further defined to ensure data integrity nationally. Work is ongoing on new IT solution                          |
|     |                                   | to standardise data management.   |
| 7   | Data Collection Frequency         | □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually   |
| 8   | Tracer Conditions                 | All children under 16 years of age are eligible for dental care. To receive orthodontic treatment a child must satisfy t                        |
|     |                                   | clinical guidelines for orthodontic care and be referred for treatment  |
| 9   | Minimum Data Set                  | Referral form from primary care dental service containing demographic and clinical details.   |
| 10  | International Comparison          | No  |
| 11  | KPI Monitoring                    | □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually   |
|     |                                   | KPI is monitored by: Consultant Orthodontist/Orthodontic Manager  |
|     |                                   |   |
|     | VIDE U. E                         |   |
| 12  | KPI Reporting Frequency           | □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually   |
| 40  | WDI I I                           | Other – give details:   |
| 13  | KPI report period                 | Current   |
|     |                                   | ☑Quarterly Current (e.g. data reported in each qtr up to and including the last day of that qtr)  |
|     |                                   | 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  | VDI Deporting Aggregation         | Other - give details:   |
| 14  | KPI Reporting Aggregation         | ☑ National ☑ Regional LHO Area □ Hospital □ County □ Institution ☑ Other – give details: former Health Board Area                               |
| 10  | KPI is reported in which reports? | □ County □ Institution ☑ Other – give details: former Health Board Area ☑ Performance Assurance Report (NSP) ☑ CompStat □ Other – give details: |
| 15  | KPT is reported in which reports? | ■Performance Assurance Report (NSP) ■Compstat □Other – give details.  |
|     | Web link to data                  | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html  |
|     | Additional Information            |   |
|     | ontact details for Data Manager / | Claire Sheehy, Information Analyst, Non Acute BIU. Tel 01 6352657.claire.sheehy3@hse.ie   |
| _   | ecialist Lead                     | Dympna Kavanagh, National Oral Health Office, dympna.kavanagh@hse.ie, tel: 061 461302   |
| NΙα | tional Lead and Division          | John Hennessy, National Director, Primary Care Division, Health Service Executive.  |

| Or   | thodontics - Percentage of                                 | on Treatment Waiting List  |
|------|--|--|
| 1    | KPI Title  | Percentage of patients on the treatment waiting list   |
|      |  | < 2 years  |
|      |  | < 4 years (grade 4 and 5)  |
| 2    | KPI Description  | Waiting times for patients on the Orthodontic Treatment - Grade 4 and Grade 5 - waiting lists. This is the number of patients waiting for treatment following assessment within the following wait bands.  |
|      |  | i) no. of patients within 1-6 months   |
|      |  | ii) no. of patients within 7-12 months   |
|      |  | iii) no. of patients within 13-24 months   |
|      |  | vi) no. of patients over 4 years   |
|      |  | v) no. of patients within 2 - 3 years  |
|      |  | <b>Grade 4</b> patients have severe degrees of irregularity that require treatment for health reasons, traumatic bites or functional problems. Patients waiting for growth to be completed are included.   |
|      |  | Grade 5 patients have very severe dental health problems, e.g. cleft lip & palate, upper front teeth that protrude more  |
|      |  | than 9mm, teeth cannot come into the mouth because of overcrowding, additional incisors or canines or any other  |
|      |  | cause. Patients waiting for growth to be completed are included.   |
| 3    | KPI Rationale  | To monitor the waiting times for patients on the Orthodontic Treatment - Grade 4 and Grade 5 - waiting lists   |
|      | Indicator Classification                                   | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you   |
|      |  | may need to choose two).  ☑Person Centred Care □Effective Care □Safe Care  |
|      |  | <ul><li>✓ Person Centred Care</li><li>✓ Better Health and Wellbeing</li><li>✓ Use of Information</li><li>✓ Workforce</li></ul>   |
|      |  | Use of Resources   |
| 1    | KPI Target 2014  | % on treatment waiting list < 2 years - 75%  |
| 7    | IXI Tranget 2014   | % on treatment waiting list < 4 years (Grade 4 and 5) - 95%  |
| 5    | KPI Calculation  | Count the number of patients within each wait band waiting to commence treatment following assessment (Wait time   |
|      |  | count begins from assessment date) Data in Orthodontic Services (in the former Health Board areas) in each HSE   |
|      |  | region will be collated to provide a Regional View. In order to get the yearly outturn the 4th Quarter is taken. This is   |
| 6    | Data Source  | Point in Time information.  Data is submitted by the Orthodontic Services (in the former Health Board areas) to the National Business Intelligence   |
| 0    | Data Source  | Unit. The National BIU will liaise with the National Oral Health Lead for validation purposes.   |
|      | Data Completeness  | Data is received from all areas nationally - 100% complete from Q2 2013.   |
|      | Data Quality Issues  | KPI definitions have also been further defined to ensure data integrity nationally. Work is ongoing on new IT solution   |
| L    |  | to standardise data management.  |
| /    | Data Collection Frequency                                  | □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually  |
| 8    | Tracer Conditions  | All children under 16 years of age are eligible for dental care. To receive orthodontic treatment a child must satisfy the   |
| 9    | Minimum Data Set   | clinical guidelines for orthodontic care and be referred for treatment  Referral form from primary care dental service containing demographic and clinical details.  |
| _    | International Comparison                                   | No   |
|      | KPI Monitoring   | □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually  |
|      |  | KPI is monitored by: Consultant Orthodontist/Orthodontic Manager   |
|      |  |  |
| 12   | KPI Reporting Frequency                                    | □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually  |
|      | in the period of the period                                | □Other – give details:   |
| 13   | KPI report period  | □Current □   |
|      |  | ☑Quarterly Current (e.g. data reported in each qtr up to and including the last day of that qtr)   |
|      |  | ☐Monthly in arrears (June data reported in July) ☐Quarterly in arrears (quarter 1 data reported in quarter 2)  |
|      |  | Rolling 12 months (previous 12 month period)   |
|      |  | Other - give details:  |
| 14   | KPI Reporting Aggregation                                  | ☑ National ☑ Regional LHO Area ☐ Hospital ☐ County ☐ Institution ☑ Other – give details: former Health Board Area  |
| 15   | KPI is reported in which reports?                          | ☐ County ☐ Institution ☐ Other – give details: former health Board Area  ☐ Performance Assurance Report (NSP) ☐ CompStat ☐ Other – give details:   |
|      | ' '  | , , , , , , , , , , , , , , , , , , ,  |
|      | Web link to data   | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html   |
|      | Additional Information<br>ntact details for Data Manager / | Claire Sheehy, Information Analyst, Non Acute BIU. Tel 01 6352657.claire.sheehy3@hse.ie  |
|      | ecialist Lead  | Dympna Kavanagh, National Oral Health Office, dympna.kavanagh@hse.ie, tel: 061 461302  |
|      | ional Lead and Division                                    | John Hennessy, National Director, Primary Care Division, Health Service Executive.   |
| ivat | 2000 una 21/13/011   | Some District Distric |

| 1 KPI Title   |                         |   |
|---------------|-------------------------|---|
|               |                         | Number of patients on the assessment waiting list at the end of the reporting period  |
| 2 KPI Descri  | iption                  | Total number of patients who are awaiting assessment for eligibility and categorisation of their orthodontic treatment requirements at the end of quarter (Grades 4 & 5).  Grade 4 patients have severe degrees of irregularity that require treatment for health reasons, traumatic bites or functional problems.  Grade 5 patients have very severe dental health problems, e.g. cleft lip & palate, upper front teeth that protrude more |
|               |                         | than 9mm, teeth cannot come into the mouth because of overcrowding, additional incisors or canines or any other cause. Count at the end of each quarter, i.e. last day of March, June, September and December.  |
| 3 KPI Ratio   | nale                    | To monitor the number of patients on the Orthodontic Assessment waiting list.   |
| Indicator     | Classification          | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases yo may need to choose two).  ☑Person Centred Care ☑ Effective Care □Safe Care □Better Health and Wellbeing □Use of Information □Workforce  |
| 4 KPI Targe   | t 2014                  | National - 7,390<br>DML - 2,244; DNE - 605; South - 1,821; West - 2,720   |
| 5 KPI Calcu   | lation                  | Count of the number of patients on the Orthodontic Assessment waiting lists in each Orthodontic Service at the end ceach quarter. Data in Orthodontic Services (in the former Health Board areas) in each HSE region will be collated to provide a Regional View. In order to get the yearly outturn the 4th Quarter is taken. This is Point in Time data.  |
| 6 Data Soul   | rce                     | Data is submitted by the Orthodontic Services in former health board areas and regionally from DNE to the National Business Information Unit, IPPB. The national data analyst BIU quality assures the validated data with the data providers and links with the National Oral Health Lead and Directorate.  |
| Data Com      | pleteness               | Data is received from all areas nationally - 100% complete from Q2 2013.  |
| Data Qua      | ity Issues              | KPI definitions have also been further defined to ensure data integrity nationally. Work is ongoing on new IT solution to standardise data management.  |
| 7 Data Colle  | ection Frequency        | □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually   |
| 8 Tracer Co   | nditions                | All children under 16 years of age are eligible for dental care. To receive orthodontic treatment a child must satisfy the clinical guidelines for orthodontic care and be referred for treatment   |
| 9 Minimum     | Data Set                | Referral form from primary care dental service containing demographic and clinical details.   |
| 10 Internatio | nal Comparison          | No  |
| 11 KPI Monit  | oring                   | □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually KPI is monitored by: Consultant Orthodontist/Orthodontic Manager  |
|               | rting Frequency         | □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually □Other – give details:  |
| 13 KPI repor  |                         | □Current □Quarterly Current (e.g. data reported in each qtr up to and including the last day of that qtr) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □Other - give details:  |
|               | rting Aggregation       | ✓ National ✓ Regional LHO Area ☐ Hospital ☐ County ☐ Institution ✓ Other – give details: former Health Board Area   |
|               | orted in which reports? | ☑Performance Assurance Report (NSP) □CompStat □Other – give details:  |
| 16 Web link   |                         | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html  |
| 17 Additiona  |                         |   |
|               | / Specialist Lead       | Claire Sheehy, Information Analyst, Non Acute BIU. Tel 01 6352657.claire.sheehy3@hse.ie<br>Dympna Kavanagh, National Oral Health Office, dympna.kavanagh@hse.ie, tel: 061 461302  |
| National Lead | and Division            | John Hennessy, National Director, Primary Care Division, Health Service Executive.  |

| Oı  | Orthodontics - Treatment Waiting List - Grade 4   |  |  |
|-----|---|--|--|
| 1   | KPI Title   | Number of nations on the treatment waiting list. Crade 4, at the end of the reporting period   |  |
| 2   | KPI Description   | Number of patients on the treatment waiting list - Grade 4 - at the end of the reporting period  Number of patients on the treatment waiting list - Grade 4 - at the end of the reporting period. Patients waiting for growth to be completed are excluded. The Modified Index of Treatment Need is used by the Orthodontic Services to establish cases that are eligibile to receive treatment by the HSE Orthodontic Services. Grade 4 patients have severe degrees of irregularity that require treatment for health reasons, traumatic bites or functional problems. |  |
| 3   | KPI Rationale   | To monitor the number of patients on the treatment waiting list - Grade 4  |  |
|     | Indicator Classification  | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two).  ☑Person Centred Care ☐Effective Care ☐Safe Care ☐Better Health and Wellbeing ☐Use of Information ☐Workforce ☐Use of Resources ☐Governance, Leadership and Management  |  |
| 4   | KPI Target 2014   | National - 7,781<br>DML - 1,867; DNE 1,849; South - 1,546; West - 2,519  |  |
| 5   | KPI Calculation   | Count of the number of patients on the Orthodontic Treatment waiting list - Grade 4 - in each Orthodontic Service.  Data in Orthodontic Services (in the former Health Board areas) in each HSE region will be collated to provide a Regional View. In order to get the yearly outturn the 4th Quarter is taken. This is Point in Time.  |  |
| 6   | Data Source   | Data is submitted by the Orthodontic Services (in the former Health Board areas) to the National Business Intelligence Unit. The National BIU will liaise with the National Oral Health Lead for validation purposes.  |  |
|     | Data Completeness   | Data is received from all areas nationally - 100% complete from Q2 2013.   |  |
|     | Data Quality Issues   | KPI definitions have also been further defined to ensure data integrity nationally. Work is ongoing on new IT solution to standardise data management.   |  |
| 7   | Data Collection Frequency   | □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually  |  |
| 8   | Tracer Conditions   | All children under 16 years of age are eligible for dental care. To receive orthodontic treatment a child must satisfy the clinical guidelines for orthodontic care and be referred for treatment  |  |
| 9   | Minimum Data Set  | Referral form from primary care dental service containing demographic and clinical details.  |  |
| _   | International Comparison  | No   |  |
|     | KPI Monitoring  | □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually KPI is monitored by: Consultant Orthodontist/Orthodontic Manager   |  |
|     | KPI Reporting Frequency   | □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually □Other – give details:   |  |
| 13  | KPI report period   | □Current □Quarterly Current (e.g. data reported in each qtr up to and including the last day of that qtr) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □Other - give details:   |  |
|     | KPI Reporting Aggregation   | ☑ National ☑ Regional LHO Area □Hospital □ County □ Institution ☑ Other – give details: former Health Board Area   |  |
| 15  | KPI is reported in which reports?   | ☑Performance Assurance Report (NSP) □CompStat □Other – give details:   |  |
|     | Web link to data  | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html   |  |
|     | Additional Information  |  |  |
|     | ntact details for Data Manager /  | Claire Sheehy, Information Analyst, Non Acute BIU. Tel 01 6352657.claire.sheehy3@hse.ie  |  |
| Ŀ   | Specialist Lead Dympna Kavanagh, National Oral Health Office, dympna.kavanagh@hse.ie, tel: 061 461302 |  |  |
| Nat | John Hennessy, National Director, Primary Care Division, Health Service Executive.                    |  |  |

| Or | thodontics - Treatment W                          | aiting List Grade 5  |
|----|---|--|
| 1  | KPI Title   | Number of patients on the treatment waiting list - Grade 5 - at the end of the reporting period  |
| 2  | KPI Description                                   | Number of patients on the treatment waiting list - Grade 5 - at the end of the reporting period.  The Modified Index of Treatment Need is used by the Orthodontic Services to establish cases that are eligibile to receive treatment by the HSE Orthodontic Services. <b>Grade 5</b> patients have very severe dental health problems, e.g. cleft lip & palate (DML patients attend St James's Hospital and are not included in the returns), upper front teeth that protrude more than 9mm, teeth cannot come into the mouth because of overcrowding, additional incisors or canines or any other cause. Patients waiting for growth to be completed are included. |
| 3  | KPI Rationale                                     | To monitor the number of patients on the treatment waiting list - Grade 5  |
|    | Indicator Classification                          | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two).  ☑Person Centred Care ☐Effective Care ☐Safe Care ☐Better Health and Wellbeing ☐Use of Information ☐Workforce ☐Use of Resources ☐Governance, Leadership and Management  |
| 4  | KPI Target 2014                                   | National - 6,481<br>DML - 1,596; DNE - 1,321; South - 1,568; West - 1,996  |
| 5  | KPI Calculation                                   | Count of the number of patients on the Orthodontic Treatment waiting lists - Grade 5 - in each Orthodontic Service. Data in Orthodontic Services (in the former Health Board areas) in each HSE region will be collated to provide a Regional View. In order to get the yearly outturn the 4th Quarter is taken. This is Point in Time data.   |
| 6  | Data Source                                       | Data is submitted by the Orthodontic Services (in the former Health Board areas) to the National Business Intelligence Unit. The National BIU will liaise with the National Oral Health Lead for validation purposes.  |
|    | Data Completeness                                 | Data is received from all areas nationally - 100% complete from Q2 2013.   |
|    | Data Quality Issues                               | KPI definitions have also been further defined to ensure data integrity nationally. Work is ongoing on new IT solution to standardise data management.   |
| 7  | Data Collection Frequency                         | □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually  |
| 8  | Tracer Conditions                                 | All children under 16 years of age are eligible for dental care. To receive orthodontic treatment a child must satisfy the clinical guidelines for orthodontic care and be referred for treatment  |
|    | Minimum Data Set                                  | Referral form from primary care dental service containing demographic and clinical details.  |
|    | International Comparison                          | No   |
| 11 | KPI Monitoring                                    | □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually KPI is monitored by: Consultant Orthodontist/Orthodontic Manager   |
|    | KPI Reporting Frequency                           | □ Daily □ Weekly □ Monthly ☑ Quarterly □ Bi-annually □ Annually □ Other – give details:  |
|    | KPI report period                                 | □Current □Quarterly Current (e.g. data reported in each qtr up to and including the last day of that qtr) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □Other - give details:   |
|    | KPI Reporting Aggregation                         | ☑ National ☑ Regional LHO Area □Hospital □ County □ Institution ☑ Other – give details: former Health Board Area   |
|    | KPI is reported in which reports?                 | ☑Performance Assurance Report (NSP) □CompStat □Other – give details:   |
| _  | Web link to data                                  | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html   |
| _  | Additional Information                            |  |
|    | ntact details for Data Manager /<br>ecialist Lead | Claire Sheehy, Information Analyst, Non Acute BIU. Tel 01 6352657.claire.sheehy3@hse.ie<br>Dympna Kavanaqh, National Oral Health Office, dympna.kavanaqh@hse.ie, tel: 061 461302   |
|    | ional Lead and Division                           | John Hennessy, National Director, Primary Care Division, Health Service Executive.   |

| Oı | Orthodontics - Reduce Treatment Waiting List |   |  |
|----|--|---|--|
|    | LOUE THE                                     |   |  |
| 1  | KPI Title                                    | Reduce the proportion of patients on the treatment waiting list longer than 4 years (Grade 4 and 5)   |  |
| 2  | KPI Description                              | To measure the proportion of patients waiting longer than 4 years for treatment   |  |
| 3  | KPI Rationale                                | To monitor the number of patients on the treatment waiting list and reduce the number waiting longer than four years  |  |
|    | Indicator Classification                     | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two).  ☑Person Centred Care ☐Effective Care ☐Safe Care ☐Better Health and Wellbeing ☐Use of Information ☐Workforce ☐Use of Resources ☐Governance, Leadership and Management |  |
| 4  | KPI Target 2014                              | <5% of patients waiting over 4 years  |  |
| 5  | KPI Calculation                              | No. of patients waiting longer than four years (Grade 4 and 5) x 100 Total number of patients waiting (Grade 4 and 5)   |  |
| 6  | Data Source                                  | Data is submitted by the Orthodontic Services (in the former Health Board areas) to the National Business Intelligence Unit. The National BIU will liaise with the National Oral Health Lead for validation purposes.   |  |
|    | Data Completeness                            | Data is received from all areas nationally - 100% complete from Q2 2013.  |  |
|    | Data Quality Issues                          | KPI definitions have also been further defined to ensure data integrity nationally. Work is ongoing on new IT solution to standardise data management.  |  |
| 7  | Data Collection Frequency                    | □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually   |  |
| 8  | Tracer Conditions                            | All children under 16 years of age are eligible for dental care. To receive orthodontic treatment a child must satisfy the clinical guidelines for orthodontic care and be referred for treatment   |  |
| 9  | Minimum Data Set                             | Referral form from primary care dental service containing demographic and clinical details.   |  |
| 10 | International Comparison                     | No  |  |
| 11 | KPI Monitoring                               | □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually KPI is monitored by: Consultant Orthodontist/Orthodontic Manager  |  |
|    | KPI Reporting Frequency                      | □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually □Other – give details:  |  |
| 13 | KPI report period                            | □Current □Quarterly Current (e.g. data reported in each qtr up to and including the last day of that qtr) □Monthly in arrears (June data reported in July) □Quarterly in arrears (quarter 1 data reported in quarter 2) □Rolling 12 months (previous 12 month period) □Other - give details:                              |  |
| 14 | KPI Reporting Aggregation                    | ☑ National ☑ Regional LHO Area □Hospital □ County □ Institution ☑ Other – give details: former Health Board Area  |  |
| 15 | KPI is reported in which reports?            | ☑Performance Assurance Report (NSP) ☑CompStat □Other – give details:  |  |
|    | Web link to data                             | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html  |  |
|    | Additional Information                       |   |  |
|    | ntact details for Data Manager /             | Claire Sheehy, Information Analyst, Non Acute BIU. Tel 01 6352657.claire.sheehy3@hse.ie   |  |
|    | ecialist Lead                                | Dympna Kavanagh, National Oral Health Office, dympna.kavanagh@hse.ie, tel: 061 461302   |  |
| Na | tional Lead and Division                     | John Hennessy, National Director, Primary Care Division, Health Service Executive.  |  |

| 1  | KPI title   | Number of new patients attending for Scheduled Assessment  |
|----|---|--|
| 2  | KPI Description                                   | A 'New Patient' is any patient who is being seen for the first time in any particular course of treatment and therefore does not have an existing treatment plan. 'Course of treatment' in this instance may refer to an examination only and does not imply that any active treatment is required. It should be noted that where any existing course of treatment exceeds 12 months in length it must be considered to have expired/been completed and the patient should be (re)assessed as a "new patient". A 'Scheduled Assessment' is any assessment or examination of a patient which has been organised in a planned way such as for children in targeted school classes or patients accessed in a planned manner through any special needs centre/unit etc. In essence, any assessment which is not unscheduled falls into this category.                            |
| 3  | KPI Rationale                                     | To monitor the number of new patients accessing the dental service in the reporting period as a proportion of those eligible.  |
|    | Indicator Classification                          | Please tick Indicator Classification this indicator applies to:  ☑ 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  | The target will relate only to children in the three 'target classes', including home-schooled, and will be equal to 100% of an appropriate single year of age in each case as per the 2011 census.  |
| 5  | KPI Calculation                                   | The number of patients assessed will be returned separately for children and adults with the cut-off point being their 16th birthday. Children will be further sub-divided according to the age group/targeted school class to which they belong as follows-6-8 years of age / 1st or 2nd Class, 9-10 years of age / 3rd or 4th Class, 11-13 years of age / 5th or 6th Class, Any other patient less than 16 years of age. Classes should be chosen such that in general the children could be expected to be aged 11-13, 9-10, and 6-8 years of age. The term 'assessment' should be considered as encompassing any screening, inspection or examination with the person being counted and returned once even if the service arrangements include a two (or more)-stage process such as screening or inspection in school followed by an examination in the dental surgery. |
| 6  | Data Source Data Completeness Data Quality Issues | Data is submitted by each Service Area to the National Business Intelligence Unit. The BIU will liaise with the National Oral Health Lead for validation purposes. Data to be received from all areas nationally - 100% complete by end Q2 2014.   |
| 7  | Data Collection Frequency                         | Indicate how often the data to support the KPI will be collected:  □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:   |
| 8  | Tracer Conditions                                 | All children under 16 years of age and adult medical-card holders are eligible for dental care. In general the only adults who attend HSE dental clinics will have special needs.  |
| 9  | Minimum Data Set                                  | Demographic and clinical details are captured electronically or manually   |
| 10 | International Comparison                          |  |
| 11 | KPI Monitoring                                    | KPI will be monitored:  □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:  Please indicate who is responsible at a local level for monitoring this KPI: Principal Dental Surgeon   |
| 12 | KPI Reporting Frequency                           | Indicate how often the KPI will be reported:  □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:   |

| 13       | KPI report period                | Indicate the period to which the data applies   |
|----------|----------------------------------|---|
|          | i i                              | ☑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)  |
|          |                                  | ☐ Other – give details:   |
| 14       | <b>KPI Reporting Aggregation</b> | Indicate the level of aggregation – for example over a geographical location:                     |
|          |                                  | ☑National ☑ Regional ☑ LHO Area 및 Hospital  |
|          |                                  | ☐ County ☐ Institution ☐ Other – give details:  |
| 15       | KPI is reported in which         | Indicate where the KPI will be reported:  |
|          | reports?                         | ☑ Performance Assurance Report (NSP/CBP) □CompStat □Other – give details:                         |
| 16       | Web link to data                 |   |
| 4=       |                                  |   |
| 17       | Additional Information           |   |
| Contact  | details for Data Manager         | Claire Sheehy, Information Analyst, Non Acute BIU. Tel 01 6352657.claire.sheehy3@hse.ie           |
| /Special | ist Lead                         | Dympna Kavanagh, National Oral Health Office, dympna.kavanagh@hse.ie, tel: 061 461302             |
| National | Lead and Division                |   |
|          |                                  | John Hennessy, National Director, Primary Care Division, Health Service Executive.                |

| Prima     | ary Care - Oral He                                      | ealth UNScheduled Assessment   |
|-----------|---|--|
| 1         | KPI title   | Number of new patients attending for UNscheduled Assessment  |
| 2         | KPI Description   | A 'New Patient' is any patient who is being seen for the first time in any particular course of treatment and therefore does not have an existing treatment plan. 'Course of treatment' in this instance may refer to an examination only and does not imply that any active treatment is required. It should be noted that where any existing course of treatment exceeds 12 months in length it must be considered to have expired/been completed and the patient should be (re)assessed as a "new patient".  An 'Unscheduled Assessment' is any assessment or examination of a patient which has not been organised or initiated by the service. An 'Unscheduled Assessment' is one which has been initiated by the patient/parent/carer who contacts the dental service seeking care or advice. Such an attendance is often considered to be an 'emergency' or 'casual' attendance. The patient may have |
| 3         | KPI Rationale Indicator Classification                  | To improve the underlying health of the population. A low proportion of unscheduled assessments accessing the service is an indicator of better underlying health.  Please tick Indicator Classification this indicator applies to:  Person Centred Care  Effective Care  Safe Care  Better Health and Wellbeing  Governance, Leadership and Management  |
| 4         | KPI Target  | < 20% of the number seen for scheduled assessment  |
| 5         | KPI Calculation   | The number of patients assessed will be returned separately for children and adults, with the cut-off point being their 16th birthday. These will then be collated to provide the overall total.   |
| 6         | Data Source<br>Data Completeness<br>Data Quality Issues | Data is submitted by each Service Area to the National Business Intelligence Unit. The BIU will liaise with the National Oral Health Lead for validation purposes. Data to be received from all areas nationally - 100% complete by end Q2 2014.   |
| 7         | Data Collection Frequency                               | Indicate how often the data to support the KPI will be collected:  □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:   |
| 8         | Tracer Conditions                                       | All children under 16 years of age and adult medical-card holders are eligible for dental care. In general the only adults who attend HSE dental clinics will have special needs.  |
| 9         | Minimum Data Set  | Demographic and clinical details are captured electronically or manually   |
| 10        | International Comparison                                |  |
| 11        | KPI Monitoring  | KPI will be monitored: □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details: Please indicate who is responsible at a local level for monitoring this KPI: Principal Dental Surgeon   |
| 12        | KPI Reporting Frequency                                 | Indicate how often the KPI will be reported:  □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:   |
| 13        | KPI report period                                       | Indicate the period to which the data applies  ☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)  ☑ Monthly in arrears (June data reported in July)  ☑ Quarterly in arrears (quarter 1 data reported in quarter 2)  ☑ Rolling 12 months (previous 12 month period)  ☑ Other – give details:   |
| 14        | KPI Reporting Aggregation                               | Indicate the level of aggregation – for example over a geographical location:  ☑National ☑ Regional ☑ LHO Area ☐ Hospital ☐ County ☐ Institution ☐ Other – give details:   |
| 15        | KPI is reported in which reports?                       | Indicate where the KPI will be reported:  ☑ Performance Assurance Report (NSP/CBP) □ CompStat □ Other – give details:  |
| 16        | Web link to data  |  |
| 17        | Additional Information                                  |  |
|           | details for Data Manager                                | Claire Sheehy, Information Analyst, Non Acute BIU. Tel 01 6352657.claire.sheehy3@hse.ie  |
| /Special  | IST Lead<br>Lead and Division                           | Dympna Kavanagh, National Oral Health Office, dympna.kavanagh@hse.ie, tel: 061 461302  |
| IvatiOHdl | Leau and Division                                       | John Hennessy, National Director, Primary Care Division, Health Service Executive.   |

| 1                          | KPI title   | Percentage of new patients needing further care who commenced treatment within 3 months of assessment   |
|----------------------------|---|---|
| 2                          | KPI Description                                   | This metric is a subset of the those patients who attend for scheduled assessment.  As the HSE's routine dental services are delivered in a planned way based on need rather than demand, every patient who attends for "unscheduled assessment" is seeking emergency care and will require some treatment, even if that treatment consists of no more than reassurance or advice. In the majority of such cases the treatment is commenced, often completed, on the day of the unscheduled assessment, therefore unscheduled assessment is not included. |
| 3                          | KPI Rationale<br>Indicator Classification         | To monitor waiting time from assessment to commencement of treatment.  Please tick Indicator Classification this indicator applies to:  ☑ 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  | 100%  |
| 5                          | KPI Calculation                                   | No of new patients needing further care who commenced treatemnt within 3 months  Total number of patients needing further care who commenced treatment  |
| 6                          | Data Source Data Completeness Data Quality Issues | Data is submitted by each Service Area to the National Business Intelligence Unit. The BIU will liaise with the National Oral Health Lead for validation purposes. Data to be received from all areas nationally - 100% complete by end Q2 2014.  |
| 7                          | Data Collection Frequency                         | Indicate how often the data to support the KPI will be collected:  □ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually □ Other – give details:  |
| 8                          | Tracer Conditions                                 | All children under 16 years of age and adult medical-card holders are eligible for dental care. In general the only adults who attend HSE dental clinics will have special needs.   |
| 9                          | Minimum Data Set                                  | Demographic and clinical details are captured electronically or manually  |
| 10                         | International Comparison                          |   |
| 11                         | KPI Monitoring                                    | KPI will be monitored: □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details: Please indicate who is responsible at a local level for monitoring this KPI: Prinicipal Dental Surgeon   |
| 12                         | KPI Reporting Frequency                           | Indicate how often the KPI will be reported:  □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:  |
| 13                         | KPI report period                                 | Indicate the period to which the data applies  ☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)  ☑ Monthly in arrears (June data reported in July)  ☑ Quarterly in arrears (quarter 1 data reported in quarter 2)  ☑ Rolling 12 months (previous 12 month period)  ☑ Other – give details:  |
| 14                         | KPI Reporting Aggregation                         | Indicate the level of aggregation – for example over a geographical location:  ☑National ☑ Regional ☑ LHO Area ☐ Hospital ☐ County ☐ Institution ☐ Other – give details:  |
| 15                         | KPI is reported in which reports?                 | Indicate where the KPI will be reported:  ☑ Performance Report (NSP/CBP) □ CompStat □ Other – give details:   |
| 16                         | Web link to data                                  | <u> </u>  |
| 17                         | Additional Information                            |   |
|                            | details for Data Manager                          | Claire Sheehy, Information Analyst, Non Acute BIU. Tel 01 6352657.claire.sheehy3@hse.ie Dympna Kavanagh, National Oral Health Office, dympna.kavanagh@hse.ie, tel: 061 461302   |
| /Special                   |   |   |
| National Lead and Division |   | John Hennessy, National Director, Primary Care Division, Health Service Executive.  |

| 1       | KPI title   | Percentage of new patients whose treatment is completed within 9 months of assessment  |
|---------|---|--|
| 2       | KPI Description   | The percentage of new patients needing further care whose treatment is completed within 9 months of scheduled assessment.  |
| 3       | KPI Rationale<br>Indicator Classification               | To monitor length of treatment time from assessment to completion.  Please tick Indicator Classification this indicator applies to:  ☑ 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  | 95%  |
| 5       | KPI Calculation   | Treatment Completed where scheduled assessment < 9 months previously divided by sum (Treatmen Completed where scheduled assessment < 9 months previously + Treatment Completed where scheduled assessment 9 months or greater previously)  |
| 6       | Data Source<br>Data Completeness<br>Data Quality Issues | Data is submitted by each Service Area to the National Business Intelligence Unit. The BIU will liaise with the National Oral Health Lead for validation purposes. Data to be received from all areas nationally - 100% complete by end Q2 2014.   |
| 7       | Data Collection Frequency                               | Indicate how often the data to support the KPI will be collected:  □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:   |
| 8       | Tracer Conditions                                       | All children under 16 years of age and adult medical-card holders are eligible for dental care. In general the only adults who attend HSE dental clinics will have special needs.  |
| 9       | Minimum Data Set  | Demographic and clinical details are captured electronically or manually   |
| 10      | International Comparison                                |  |
| 11      | KPI Monitoring  | KPI will be monitored: □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details: Please indicate who is responsible at a local level for monitoring this KPI: Principal Dental Surgeon   |
| 12      | KPI Reporting Frequency                                 | Indicate how often the KPI will be reported:  □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:   |
| 13      | KPI report period                                       | Indicate the period to which the data applies  ☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)  ☑ Monthly in arrears (June data reported in July)  ☑ Quarterly in arrears (quarter 1 data reported in quarter 2)  ☑ Rolling 12 months (previous 12 month period)  ☑ Other – give details: |
| 14      | KPI Reporting Aggregation                               | Indicate the level of aggregation – for example over a geographical location:  ☑National ☑ Regional ☑ LHO Area 및 Hospital □ County 및 Institution 및 Other – give details:   |
| 15      | KPI is reported in which reports?                       | Indicate where the KPI will be reported:  ☑ Performance Report (NSP/CBP) □CompStat □Other – give details:  |
| 16      | Web link to data  |  |
| 17      | Additional Information                                  |  |
|         | details for Data Manager                                | Claire Sheehy, Information Analyst, Non Acute BIU. Tel 01 6352657.claire.sheehy3@hse.ie  |
|         | ist Lead  | Dympna Kavanagh, National Oral Health Office, dympna.kavanagh@hse.ie, tel: 061 461302  |
| Nationa | l Lead and Division                                     | John Hennessy, National Director, Primary Care Division, Health Service Executive.   |

| 1        | KPI title   | Number of new patients attending for unscheduled care who are prescribed an antibiotic   |
|----------|---|--|
| 2        | KPI Description   | This will be a sub-set of those recorded under 'No of new patients attending for unscheduled care'. "Prescribed an antibiotic" encompasses all instances where one or more antibiotics is/are prescribed for a (new unscheduled) patient regardless as to whether the medication is directly dispensed by the prescriber or is dispensed by a pharmacy               |
| 3        | KPI Rationale<br>Indicator Classification               | To monitor antibiotic usage  Please tick Indicator Classification this indicator applies to:  ☑ 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  | this is a count of activity  |
| 5        | KPI Calculation   | Sum (antibiotic Prescribed (UNscheduled assessment) with follow up appointment within 10 working   |
| 6        | Data Source<br>Data Completeness<br>Data Quality Issues | Data is submitted by each Service Area to the National Business Intelligence Unit. The BIU will liaise with the National Oral Health Lead for validation purposes. Data to be received from all areas nationally - 100% complete by end Q2 2014.   |
| 7        | Data Collection Frequency                               | Indicate how often the data to support the KPI will be collected:  □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:   |
| 8        | Tracer Conditions                                       | All children under 16 years of age and adult medical-card holders are eligible for dental care. In general the only adults who attend HSE dental clinics will have special needs.  |
| 9        | Minimum Data Set  | Demographic and clinical details are captured electronically or manually   |
| 10       | International Comparison                                |  |
| 11       | KPI Monitoring  | KPI will be monitored: □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details: Please indicate who is responsible at a local level for monitoring this KPI: Principal Dental Surgeon   |
| 12       | KPI Reporting Frequency                                 | Indicate how often the KPI will be reported:  □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:   |
| 13       | KPI report period                                       | Indicate the period to which the data applies  ☐ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)  ☐ Monthly in arrears (June data reported in July)  ☐ Quarterly in arrears (quarter 1 data reported in quarter 2)  ☐ Rolling 12 months (previous 12 month period)  ☐ Other – give details: |
| 14       | KPI Reporting Aggregation                               | Indicate the level of aggregation – for example over a geographical location:  ☑National ☑ Regional ☑ LHO Area ☐ Hospital ☐ County ☐ Institution ☐ Other – give details:   |
| 15       | KPI is reported in which                                | Indicate where the KPI will be reported:   |
|          | reports?  | ✓ Performance Report (NSP/CBP) □CompStat □Other – give details:  |
| 16       | Web link to data  |  |
| 17       | Additional Information                                  |  |
|          | details for Data Manager                                | Claire Sheehy, Information Analyst, Non Acute BIU. Tel 01 6352657.claire.sheehy3@hse.ie  |
| /Special |   | Dympna Kavanagh, National Oral Health Office, dympna.kavanagh@hse.ie, tel: 061 461302  |
| Nationa  | Lead and Division                                       | John Hennessy, National Director, Primary Care Division, Health Service Executive  |

| Primary Care - Oral Health New patients prescribed antiobiotics who receive a |   |  |
|---|---|--|
| 1   | KPI title   | Number of new patients on antibiotics who receive a return appointment within 10 working days  |
| 2   | KPI Description                                   | This will be a subset of those recorded under 'Number of new patients attending for unscheduled care who are prescribed an antibiotic' and will thus exclude the limited circumstances where antibiotics are required during a course of scheduled care.  "Receive a return appointment within 10 working days" means that the patient is given a specific appointment to return to the prescribing dentist or a colleague on a date which is no later than 10 working days after the date on which the antibiotic is prescribed.  "Working Day" is any day other than a Saturday or Sunday unless the service is scheduled to be open on any of those days in which case they should be counted.  Some locations/clinics are only open part-time. On other occasions a location/clinic is closed due to staff leave. Every day, other than a Saturday, or Sunday, regardless as to whether a location or clinic is closed or open, is to be counted as a "working day".  For the purposes of this metric a public holiday is to be counted as a working day |
| 3   | KPI Rationale<br>Indicator Classification         | To improve patient care  Please tick Indicator Classification this indicator applies to:  ☑ 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  | 95%  |
| 5   | KPI Calculation                                   | Antibiotic Prescribed (UNscheduled assessment) with follow up appointment within 10 working days divided by Sum(Antibiotic Prescribed (UNscheduled assessment) with follow up appointment within 10 working days + Antibiotic Prescribed (UNscheduled assessment) without follow up appointment within 10 working days)  |
| 6   | Data Source Data Completeness Data Quality Issues | Data is submitted by each Service Area to the National Business Intelligence Unit. The BIU will liaise with the National Oral Health Lead for validation purposes. Data to be received from all areas nationally - 100% complete by end Q2 2014.   |
| 7   | Data Collection Frequency                         | Indicate how often the data to support the KPI will be collected:  □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details:   |
| 8   | Tracer Conditions                                 | All children under 16 years of age and adult medical-card holders are eligible for dental care. In general the only adults who attend HSE dental clinics will have special needs.  |
| 9   | Minimum Data Set                                  | Demographic and clinical details are captured electronically or manually   |
| 10  | International Comparison                          |  |
| 11  | KPI Monitoring                                    | KPI will be monitored: □Daily □Weekly ☑ Monthly □Quarterly □Bi-annually □Annually □Other – give details: Please indicate who is responsible at a local level for monitoring this KPI: Principal Dental Surgeon   |
| 12  | KPI Reporting Frequency                           | Indicate how often the KPI will be reported:  □ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually □ Other – give details:  |
| 13  | KPI report period                                 | Indicate the period to which the data applies  ☑ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)  ☑ Monthly in arrears (June data reported in July)  ☑ Quarterly in arrears (quarter 1 data reported in quarter 2)  ☑ Rolling 12 months (previous 12 month period)  ☑ Other – give details:   |
| 14  | KPI Reporting Aggregation                         | Indicate the level of aggregation − for example over a geographical location:  ☑National ☑ Regional ☑ LHO Area ☐ Hospital ☐ County ☐ Institution ☐ Other − give details:   |
| 15  | KPI is reported in which reports?                 | Indicate where the KPI will be reported:  ☑ Performance Report (NSP/CBP) □ CompStat □ Other – give details:  |
| 16  | Web link to data                                  |  |
| 17  | Additional Information                            |  |
|   | details for Data Manager                          | Claire Sheehy, Information Analyst, Non Acute BIU. Tel 01 6352657.claire.sheehy3@hse.ie Dympna Kavanagh, National Oral Health Office, dympna.kavanagh@hse.ie, tel: 061 461302  |
| /Speciali   |   |  |
| National  | Lead and Division                                 | John Hennessy, National Director, Primary Care Division, Health Service Executive.   |

| Pri  | mary Care, Comm              | unity (Demand-Led) Schemes and other Community  |  |  |  |  |  |
|--|------------------------------|---|--|--|--|--|--|
| 1  | KPI Title                    | Healthcare Associated Infections: Medication Management - Consumption of antibiotics in community settings (defined daily doses per 1,000 inhabitants per day)  |  |  |  |  |  |
| Consumption of antibiotics in ambulatory (non-hospital) setting. Monthly rate defined daily doses (DDD) per 1,000 population per day (DID)  Numerator data: Aggregate data on wholesale supply of systemic antimicrol community pharmacies, purchased from IMS Health Inc. (Accounts for at least community antibiotic sales. Prescription level data not available). Updated A DDD definitions from World Health Organisation (WHO) (Changes to ATC or definitions from WHO can impact on interpretation of results). |                              |   |  |  |  |  |  |
| 3  | KPI Rationale                | Community antibiotic use is strongly linked to antimicrobial resistance, which is a major ublic health threat.  |  |  |  |  |  |
|  | 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 2014              | <21.7   |  |  |  |  |  |
| 5  | KPI Calculation              | Monthly rate reported as defined daily doses (DDD) per 1,000 population per day (DID) Numerator data: Aggregate data on wholesale supply of systemic antimicrobials to community pharmacies, purchased from IMS Health Inc.  Denominator data: CSO census data  Other data: Updated ATC coding and DDD definitions from World Health Organisation (WHO) |  |  |  |  |  |
| 6  | Data Source                  | Since March 2007 the Health Protection Surveillance Centre (HPSC) has been co-<br>ordinating the publication of data relating to antimicrobial consumption for acute public<br>hospitals in Ireland.  |  |  |  |  |  |
|  | Data Completeness            | 100% Complete   |  |  |  |  |  |
|  | Data Quality Issues          | Changes to ATC coding and DDD definitions from WHO can impact on interpretation of results. Does not represent prescription level data.   |  |  |  |  |  |
| 7  | Data Collection<br>Frequency | Daily Weekly ☑ Monthly Quarterly Bi-annually Annually Other – give details:   |  |  |  |  |  |
| 8  | Tracer Conditions            | Rates of penicillin and macrolide resistance among invasive strains of Streptococcus pneumoniae (EARS-Net data, via HPSC)   |  |  |  |  |  |
| 9  | Minimum Data Set             | Quarterly data supply from IMS Health   |  |  |  |  |  |
| 10   | International Comparison     | Uses WHO-approved methodology. Part of Europe-wide standardised surveillance programme (European Surveillance of Antimicrobial Consumption (ESAC) network). National data from all participating European countries available for comparison.   |  |  |  |  |  |
| 11   | KPI Monitoring               | KPI will be monitored on a (please indicate below) basis:   |  |  |  |  |  |
|  | J                            | Daily Weekly Monthly Quarterly   Bi-annually Annually Other – give details:   |  |  |  |  |  |
| 12   | KPI Reporting                | Please indicate who is responsible for monitoring this KPI: LHO Managers  Polity Weekly Monthly Quarterly 77 Ri appuelly Appuelly Other give details:   |  |  |  |  |  |
| 13   | 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 activity)  Monthly in arrears (June data reported in July)  Quarterly in arrears (quarter 1 data reported in quarter 2)  ☑ Biannually                       |  |  |  |  |  |

| 14                            | KPI Reporting   | ☑ National ☑ Regional ☑ LHO Area Hospital County Institution Other – give             |  |  |  |  |
|-------------------------------|---|---|--|--|--|--|
|                               | Aggregation   | details:  |  |  |  |  |
| 15                            | KPI is reported in which  | Corporate Plan Report ☑ Performance Report (NSP/CBP) CompStat Other – give            |  |  |  |  |
|                               | reports?  | details:  |  |  |  |  |
| 16                            | Web link to data  | nttp://www.hpsc.ie/hpsc/A-  |  |  |  |  |
|                               |   | Z/MicrobiologyAntimicrobialResistance/EuropeanSurveillanceofAntimicrobialConsumptionE |  |  |  |  |
|                               |   | SAC/SurveillanceReports/  |  |  |  |  |
| 17                            | Additional Information Reports on community antibiotic consumption for participating European countries availal |   |  |  |  |  |
|                               |   | at www.ecdc.eu  |  |  |  |  |
| Contact details for Data      |   | Dr. Robert Cunney, HPSC robert.cunney@hse.ie Tel: 01 8765300                          |  |  |  |  |
| National Lead and Directorate |   | John Hennessy, National Director, Primary Care Division, Health Service Executive.    |  |  |  |  |
|                               |   |   |  |  |  |  |

| Cor      | nplaints                                  |  |  |  |  |  |
|----------|---|--|--|--|--|--|
| CUI      | IIpiairits                                |  |  |  |  |  |
| 1        | KPI Title                                 | % of complaints investigated within the legislative timeframe  |  |  |  |  |
|          | KPI Description                           | % of complaints investigated within the legislative uniename   |  |  |  |  |
|          |   |  |  |  |  |  |
| 3        | KPI Rationale                             | Discoult de la   |  |  |  |  |
|          | Indicator Classification                  | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some                   |  |  |  |  |
|          |   | cases you may need to choose two).   |  |  |  |  |
|          |   | □Person Centred Care □Effective Care   |  |  |  |  |
|          |   | Safe Care□ ☑Better Health and Wellbeing □Use of Information□   |  |  |  |  |
|          |   | Workforce□Use of Resources□Governance, Leadership and Management□  |  |  |  |  |
| 4        | KPI Target 2014                           | 75%  |  |  |  |  |
| 5        | KPI Calculation                           | Count  |  |  |  |  |
| 6        | Data Source                               |  |  |  |  |  |
|          | Data Completeness                         | Quality and Pateint Safety Division  |  |  |  |  |
|          | Data Quality Issues                       |  |  |  |  |  |
| 7        | Data Collection Frequency                 | □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually  |  |  |  |  |
|          |   |  |  |  |  |  |
| 8        | Tracer Conditions                         |  |  |  |  |  |
| 9        | Minimum Data Set                          | Yes  |  |  |  |  |
| 10       | International Comparison                  | No   |  |  |  |  |
| 11       | KPI Monitoring                            | □Daily □Weekly □Monthly ☑Quarterly □Bi-annually □Annually  |  |  |  |  |
|          | · ·                                       | KPI is monitored by: Consultant Orthodontist/Orthodontic Manager   |  |  |  |  |
| 12       | KPI Reporting Frequency                   | □ Daily □ Weekly □ Monthly ☑ Quarterly □ Bi-annually □ Annually  |  |  |  |  |
| 12       | Kri Keporting Frequency                   | Other – give details:  |  |  |  |  |
| 12       | KPI report period                         | <ul><li>☐ Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of</li></ul> |  |  |  |  |
| 13       | KPI report period                         |  |  |  |  |  |
|          |   | activity)  |  |  |  |  |
|          |   | Monthly in arrears (June data reported in July)  |  |  |  |  |
|          |   | Quarterly in arrears (quarter 1 data reported in quarter 2)  |  |  |  |  |
| <u> </u> |   | □Rolling 12 months (pr   |  |  |  |  |
| 14       | KPI Reporting Aggregation                 | ☑National □Regional □ LHO Area □ Hospital  |  |  |  |  |
|          |   | ☐ County ☐ Institution ☐ Other – give details:   |  |  |  |  |
|          | KPI is reported in which reports?         | ☑Performance assurance Report (NSP/CBP) ☐CompStat ☐Other – give details:   |  |  |  |  |
|          | Web link to data                          | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html   |  |  |  |  |
|          | Additional Information                    |  |  |  |  |  |
| Cont     | act details for Data Manager / Specialist | Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657  |  |  |  |  |
| Lead     |   | Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division                             |  |  |  |  |
| Natio    | nal Lead and Division                     |  |  |  |  |  |
|          | 2534 drid Division                        | John Hennessy, National Director, Primary Care Directorate, Health Service Executive.  |  |  |  |  |
|          |   | point Hollingssy, National Director, Filmary Care Directorate, Health Service Executive.   |  |  |  |  |

| -            | mary Care, Community (Demand Medical Cards |
|--------------|--|
| 1            | KPI Title                                  |
| 2            | KPI Description                            |
| 3            | KPI Rationale                              |
|              |  |
|              |  |
|              |  |
|              |  |
|              |  |
|              |  |
|              | Indicator Classification                   |
|              |  |
|              |  |
| 4            | KPI Target 2014                            |
| 5            | KPI Calculation                            |
| 6            | Data Source                                |
|              | Data Completeness                          |
|              | Data Quality Issues                        |
| 7            | Data Collection Frequency                  |
| 8            | Tracer Conditions                          |
| 9            | Minimum Data Set                           |
| 10           | International Comparison                   |
| 11           | KPI Monitoring                             |
| 12           | KDI Danastina Francisco                    |
|              | KPI Reporting Frequency                    |
| 13           | KPI report period                          |
|              |  |
| 14           | KPI Reporting Aggregation                  |
| 15           | KPI is reported in which reports?          |
| 16           | Web link to data                           |
| 17           | Additional Information                     |
| Cont<br>Lead | act details for Data Manager / Specialist  |
|              |  |

| 1        | GP Visit Cards                    |
|----------|-----------------------------------|
|          | KPI Title                         |
| 2        | KPI Description                   |
| 3        | KPI Rationale                     |
| 3        | RELEGIONALE                       |
|          | Indicator Classification          |
| 4        | KPI Target 2014                   |
| 5        | KPI Calculation                   |
| 6        | Data Source                       |
| ٠        | Data Completeness                 |
|          | Data Quality Issues               |
| 7        | Data Collection Frequency         |
| 8        | Tracer Conditions                 |
| 9        | Minimum Data Set                  |
| 10       | International Comparison          |
| 11       | KPI Monitoring                    |
| 12       | KPI Reporting Frequency           |
|          | in the permigroup and             |
| 13       | KPI report period                 |
| 14       | KPI Reporting Aggregation         |
| 15       | KPI is reported in which reports? |
| 10       | Web link to data                  |
| 16       |                                   |
| 16<br>17 | Additional Information            |

| m    | mary Care, Community (Dem<br>Medical Card/GP Visit Card - 15 day turnaroun |
|------|--|
| 1    | KPI Title  |
|      |  |
| 2    | KPI Description  |
|      |  |
| 3    | KPI Rationale  |
|      | Indicator Classification   |
|      |  |
|      |  |
| 4    | KPI Target 2014  |
| 5    | KPI Calculation  |
| 6    | Data Source  |
|      | Data Completeness  |
|      | Data Quality Issues  |
| 7    | Data Collection Frequency  |
| 8    | Tracer Conditions  |
| 9    | Minimum Data Set   |
| 10   | International Comparison   |
| 11   | KPI Monitoring   |
| 12   | KPI Reporting Frequency  |
| 13   | KPI report period  |
|      |  |
| 14   | KPI Reporting Aggregation  |
| 15   | KPI is reported in which reports?  |
| 16   | Web link to data   |
| 17   | Additional Information   |
| ont  | act details for Data Manager / Specialist                                  |
|      |  |
| ead  |  |
| atic | onal Lead and Division   |

## -Led) Schemes and other Community Services

Medical Cards - Number of persons covered

Based on an extract from Card & Patient Tables as at 1st of each month, records are retrieved where the type card is a medical card, with type being medical card. The card expiry date must be null or greater than 1st of the month chosen and the card or some details on the card must be active.

Medical Cards allow people to access Family Doctor or GP services, community health services, dental services, hospital care and a range of other benefits free of charge. On the 1st of October the government introduced a charge of fifty cent per item dispensed by pharmacists under the Medical Card Scheme. Most people who get a Medical Card do so because their income is below a certain level. It is also possible to get a Medical Card if the costs of meeting your medical needs cause you undue financial hardship, or if you have entiltement under EU regulations. Drugs, medicines and appliances supplied under the Scheme are provided through Community Pharmacies. In most cases a Doctor completes a prescription for his/her client and the client takes this prescription to any pharmacy that has an agreement with the HSE to dispense GMS prescription forms. In rural areas a Doctor may dispense for those persons who opt to have their medicines dispensed by him/her. All GMS claims are processed and paid by the Primary Care Reimbursement Service.

| areas a Doctor may dispense for those persons who opt to have their medicines dispensed by him/her. All GMS      |
|--|
| claims are processed and paid by the Primary Care Reimbursement Service.   |
|  |
|  |
|  |
| 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 □  |
| National - 1,875,707   |
| Count  |
| Source PCRS  |
| Completeness 100%  |
| Subject to ongoing validation of HSE's GPVC database   |
| □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:                                 |
| Completed application form for Medical Card. Eligibility determined by current guidelines                        |
| Application form contains basic demographic information and financial information                                |
| No   |
| 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:PCRS  |
|  |
| □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:   |
| ☑Performance Assurance Report (NSP/CBP) ☐CompStat ☐Other – give details:   |
| http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html                           |
|  |
| Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657                                  |
| Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division           |
| John Hennessy, National Director, Primary Care Division, Health Service Executive.                               |
| <u> </u>   |

## -Led) Schemes and other Community Services GP Visit Cards - Number of persons covered This refers to the net number of GP Visit Cards, after new GP Visit Cards have been issued and other GPVC, as appropriate have been deleted from the Executive's database. Based on an extract from Card & Patient Tables as at 1st of each month, records are retrieved where the type card is a medical card, with subtype being Doctor Visit. The card expiry date must be null or greater than 1st of the month chosen and the card or some details on the card must be active To capture the number of persons with a GPVC on a given date. General Practitioner Visit Cards allow eligible clients and their families in Ireland to visit their family doctor for free. Only the costs of visits to the family doctor are free; prescribed drugs must be paid for. Clients with GP Visit Card can also apply for a Drugs Payment Scheme Card. All GP claims are processed and paid by the Primary Care Reimbursement Service. 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 Better Health and Wellbeing □Use of Information□ Safe Care□ Workforce ☐ Use of Resources ☑ Governance, Leadership and Management ☐ National - 402,138 includes provision for GP services for children Count Source PCRS Completeness 100% Subject to ongoing validation of HSE's GPVC database □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details: Completed application form for Medical Card. Eligibility determined by current guidelines Applicattion form contains basic demographic information and financial information 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:\_\_\_\_PCRS\_ □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 ☐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

Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657

☑Performance Assurance Report (NSP/CBP) □CompStat □Other – give details: http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html

□ County □ Institution □Other – give details:

Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division

John Hennessy, National Director, Primary Care Division, Health Service Executive.

| -Led) Schemes and other Community Services  |
|---|
|   |
| Percentage of completed Medical/GP visit card applications processed within the 15 day turnaround                   |
| This refers to the percentage of Medical Cards applications received by the HSE where Medical Cards are issued      |
| within 15 working days of receipt of a complete application in order to ascertain the efficiency of the application |
| system.   |
| To capture the percentage of Medical Cards issued within 15 working days of receipt by the HSE of a complete        |
| application.  |
| 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 □   |
| 95%   |
| No. of medical cards issued within 15 days x 100 =  |
| No. of complete applications received Source PCRS   |
| Completeness 100%   |
| Subject to ongoing validation of HSE's GPVC database  |
| □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:                                    |
| Completed application form for Medical Card. Eligibility determined by current guidelines                           |
| Yes   |
| No  |
| 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:PCRS   |
|   |
| □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:  |
| ✓ Performance Assurance Report (NSP/CBP) □CompStat □Other – give details:   |
| http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html                              |
|   |
| Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657                                     |
| Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division              |
| Specialist Lead. Sharrwarphy, rhead of Figuring, Lat Dailine, Flead of Operations - Filling Gale Division           |
|   |
| John Hennessy, National Director, Primary Care Division, Health Service Executive.                                  |

| Prir   | nary Care, Community (Demand-Le   | ed) Schemes and other Community Services   |  |  |  |
|--|---|--|--|--|--|
|  | LTI - Claims  |  |  |  |  |
| 1  | KPI Title   | Long Term Illness - Number of claims   |  |  |  |
| 2  | KPI Description   | Based on LTI database of paid claims and month/year specified, count all unique claim numbers (unique claim  |  |  |  |
|  | •   | identifier) on the database for the particular month.  |  |  |  |
| 3  | KPI Rationale   | Clients with certain long-term illnesses or disabilities (Acute Leukaemia, Mental handicap, Cerebral Palsy, Mental Illness in a persons under 16, Cystic Fibrosis, Multiple Sclerosis, Diabetes Insipidus, Muscular Dystrophies, Diabetes Mellitus, Parkinsonism, Epilepsy, Phenylketonuria, Haemophilia, Spina Bifida, Hydrocephalus and conditions arising from the use of Thalidomide) may apply to join the Long Term Illness Scheme. Once approved by the HSE clients are supplied with a Long Term Illness book. This book allows the client to get drugs, medicines, and medical and surgical appliances directly related to the treatment of the illness, free of charge. It does not depend on a person's income or other circumstances and is separate from the Medical Card Scheme and the GP Visit Card Scheme. Clients with Medical Cards do not need to apply for a Long Term Illness book unless they become ineligible for a Medical Card at any stage and have one of the medical conditions listed above then they should apply to join the Long Term Illness scheme to cover the cost of their medication. All LTI claims are processed and paid by PCRS. |  |  |  |
|  |   |  |  |  |  |
|  | 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 2014   | National - 944,288   |  |  |  |
| 5  | KPI Calculation   | Count  |  |  |  |
|  | Data Source   | Source PCRS  |  |  |  |
|  | Data Completeness   | Completeness 100%  |  |  |  |
|  | Data Quality Issues   | Subject to ongoing validation of HSE's GPVC database   |  |  |  |
|  | Data Collection Frequency   | □ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually □ Other – give details:  |  |  |  |
|  | Tracer Conditions   | Completed application form available from local health office  |  |  |  |
|  | Minimum Data Set  | Completed application form which includes demographic information and details of illness   |  |  |  |
|  | International Comparison  | No 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:PCRS   |  |  |  |
| 12   | KPI Reporting Frequency   | □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:   |  |  |  |
|  | KPI report period   | <ul> <li>☑Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</li> <li>☐Monthly in arrears (June data reported in July)</li> <li>☐Quarterly in arrears (quarter 1 data reported in quarter 2)</li> <li>☐Rolling 12 months (previous 12 month period)</li> </ul>   |  |  |  |
| 14   | KPI Reporting Aggregation   | ☑ National □ Regional □ LHO Area □ Hospital □ County □ Institution □ Other – give details:   |  |  |  |
| 15   | KPI is reported in which reports?   | ☑Performance Assurance Report (NSP/CBP) ☐CompStat ☐Other – give details:   |  |  |  |
| 16   | Web link to data  | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html   |  |  |  |
|  | Additional Information  |  |  |  |  |
| Contact details for Data Manager / Specialist Lead |   | Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657<br>Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division  |  |  |  |
| Natio  | Valional Lead and Division         John Hennessy, National Director, Primary Care Division, Health Service Executive. |  |  |  |  |

| Prir  | mary Care, Community (Demand-Lo                | ed) Schemes and other Community Services   |  |  |
|-------|--|--|--|--|
| 1     | KPI Title                                      | Long Term Illness - Number of items  |  |  |
|       | KPI Description                                | Based on LTI database of paid claims and month/year specified, count all drug codes on the database for the particular month.  |  |  |
| 3     | KPI Rationale                                  | The number of items will facilitate monitoring of demand for prescription items by Long Term Illness Cardholders. The average ingredient cost will enable both the HSE and the Department to monitor the impact of initiatives to reduce the prices of medicines and non-drug items. Clients with certain long-term illnesses or disabilities (Acute Leukaemia, Mental handicap, Cerebral Palsy, Mental Illness in a persons under 16, Cystic Fibrosis, Multiple Sclerosis, Diabetes Insipidus, Muscular Dystrophies, Diabetes Mellitus, Parkinsonism, Epilepsy, Phenylketonuria, Haemophilia, Spina Bifida, Hydrocephalus and conditions arising from the use of Thalidomide) may apply to join the Long Term Illness Scheme. Once approved by the HSE clients are supplied with a Long Term Illness book.  |  |  |
|       |  | This book allows the client to get drugs, medicines, and medical and surgical appliances directly related to the treatment of the illness, free of charge. It does not depend on a person's income or other circumstances and is separate from the Medical Card Scheme and the GP Visit Card Scheme. Clients with Medical Cards do not need to apply for a Long Term Illness book unless they become ineligible for a Medical Card at any stage and have one of the medical conditions listed above then they should apply to join the Long Term Illness scheme to cover the cost of their medication. All LTI claims are processed and paid by PCRS.  |  |  |
|       | 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 ☐   |  |  |
|       | V21.7  | Workforce□Use of Resources☑ Governance, Leadership and Management □  |  |  |
| 4     | KPI Target 2014                                | 3,059,492  |  |  |
| 5     | KPI Calculation  Data Source                   | Count  |  |  |
|       | Data Source  Data Completeness                 | Source PCRS Completeness 100%  |  |  |
|       | Data Quality Issues                            | Subject to ongoing validation of HSE's GPVC database   |  |  |
| 7     | Data Collection Frequency                      | □ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually □ Other – give details:  |  |  |
| 8     | Tracer Conditions                              | Completed application form available from local health office  |  |  |
| 9     | Minimum Data Set                               | Completed application form which includes demographic information and details of illness   |  |  |
| 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:PCRS  |  |  |
| 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 reports?              | ☑Performance Assurance Report (NSP/CBP) ☐CompStat ☐Other – give details:   |  |  |
| 16    | Web link to data                               | http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html   |  |  |
|       | Additional Information                         | , and a second s |  |  |
|       | act details for Data Manager / Specialist Lead | Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657<br>Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division  |  |  |
| Natio | onal Lead and Division                         | John Hennessy, National Director, Primary Care Division, Health Service Executive.   |  |  |

| Pri    | mary Care, Community (Demand-Led   | ) Schemes and other Community Services   |
|--------|--|--|
|        | Drug Payment Scheme - Claims   |  |
| 1      | KPI Title  | Drug Payment Scheme: No of claims  |
| 2      | KPI Description  | Based on DPS database of paid claims and month/year specified, count all unique claim numbers (unique claim  |
|        |  | identifier) on the database for the particular month.  |
| 3      | KPI Rationale  | Under the Drugs Payment Scheme, an individual or family in Ireland only has to pay €132 each month for approved prescribed drugs, medicines and certain appliances for use by that person or his or her family in that month. The amount is determined from time to time by the Minister for Health and Children. This scheme is aimed at those who don't have a Medical Card and normally have to pay the full cost of their medication. It also applies to those who have a GP Visit Card. Anyone ordinarily resident in Ireland can apply to join the scheme, regardless of family, financial circumstances or nationality. Eligible persons can avail of this Scheme by registering themselves and their dependants with their Local Health Office. Where people need to use two or more pharmacies in one month, they can claim back the amount paid over the threshold centrally from PCRS. Plans are being progressed to centralise the DPS registration process to PCRS with effect from April this year. All DPS claims will be processed and paid by PCRS. |
|        | 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□   |
| _      | VDLT LOOK  | Workforce□Use of Resources☑ Governance, Leadership and Management □  |
| -      | KPI Target 2014  | National - 2,512,529   |
| 5      | KPI Calculation  | Count of number of claims  |
| 6      | Data Source  | Source PCRS  |
|        | Data Completeness  | Completeness 100%  |
|        | Data Quality Issues  | Subject to ongoing validation of HSE's GPVC database   |
| 7      | Data Collection Frequency  | □ Daily □ Weekly ☑ Monthly □ Quarterly □ Bi-annually □ Annually □ Other – give details:  |
| 8      | Tracer Conditions  | Completed application form available online or from local health office  |
| 9      | Minimum Data Set   | Basic demographic information provided in application form   |
| 10     | International Comparison   | No   |
|        | KPI Monitoring   | KPI will be monitored on a (please indicate below) basis:  |
|        | , and the second | □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:  Please indicate who is responsible for monitoring this KPI: PCRS   |
| -      | KPI Reporting Frequency  | □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:   |
| 13     | KPI report period  | <ul> <li>☑Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</li> <li>☐Monthly in arrears (June data reported in July)</li> <li>☐Quarterly in arrears (quarter 1 data reported in quarter 2)</li> <li>☐Rolling 12 months (previous 12 month period)</li> </ul>   |
| 14     | KPI Reporting Aggregation  | ☑ National □ Regional □ LHO Area □ Hospital  |
|        | 1 3 33 3 3 3   | □ County □ Institution □Other – give details:  |
| 15     | KPI is reported in which reports ?   | ✓ Performance Assurance Report (NSP/CBP) □CompStat □Other – give details:  |
|        | Web link to data   | http://www.hse.ie/eng/services/Publications/corporate/Performance Reports Monthly.html   |
|        | Additional Information   | Toporto_monthly.ntfff  |
|        | act details for Data Manager / Specialist Lead   | Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657 Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division   |
| Natio  | nal Lead and Division  | John Hennessy, National Director, Primary Care Division, Health Service Executive.   |
| ivatic | ilai Lead alid Division  | point Hennessy, National Director, Filmary Care Division, Health Service Executive.  |

| Pri   | mary Care, Community (Demand-Lec               | ) Schemes and other Community Services   |  |  |
|-------|--|--|--|--|
|       | Drug Payment Scheme - Items                    |  |  |  |
| 1     | KPI Title                                      | Drug Payment Scheme: No of items   |  |  |
| 2     | KPI Description                                | Based on DPS database of paid claims and month/year specified, count all drug codes on the database for the  |  |  |
|       |  | particular month.  |  |  |
| 3     | KPI Rationale                                  | Under the Drugs Payment Scheme, an individual or family in Ireland only has to pay €132 each month for approved prescribed drugs, medicines and certain appliances for use by that person or his or her family in that month. The amount is determined from time to time by the Minister for Health and Children. This scheme is aimed at those who don't have a Medical Card and normally have to pay the full cost of their medication. It also applies to those who have a GP Visit Card. Anyone ordinarily resident in Ireland can apply to join the scheme, regardless of family, financial circumstances or nationality. Eligible persons can avail of this Scheme by registering themselves and their dependants with their Local Health Office. Where people need to use two or more pharmacies in one month, they can claim back the amount paid over the threshold centrally from PCRS. Plans are being progressed to centralise the DPS registration process to PCRS with effect from April this year. All DPS claims will be processed and paid by PCRS. |  |  |
|       | Indicator Classification                       | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two).  □Person Centred Care □Effective Care Safe Care□ ■ Better Health and Wellbeing □Use of Information□  Workforce□Use of Resources☑ Governance, Leadership and Management □   |  |  |
| 4     | KPI Target 2014                                | National - 8,551,742   |  |  |
|       | KPI Calculation                                | Count of number of items   |  |  |
| _     | Data Source                                    | Source PCRS  |  |  |
| "     | Data Completeness                              | Completeness 100%  |  |  |
|       | Data Quality Issues                            | Subject to ongoing validation of HSE's GPVC database   |  |  |
| 7     | Data Collection Frequency                      | □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:   |  |  |
|       | ' '  |  |  |  |
| 8     | Tracer Conditions                              | Completed application form available online or from local health office  |  |  |
| 9     | Minimum Data Set                               | Basic demographic information provided in application form   |  |  |
|       | 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:PCRS   |  |  |
| 12    | KPI Reporting Frequency                        | □Daily □Weekly ☑Monthly □Quarterly □Bi-annually □Annually □Other – give details:   |  |  |
| 13    | KPI report period                              | <ul> <li>☑Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</li> <li>☑Monthly in arrears (June data reported in July)</li> <li>☑Quarterly in arrears (quarter 1 data reported in quarter 2)</li> <li>☑Rolling 12 months (previous 12 month period)</li> </ul>   |  |  |
| 14    | KPI Reporting Aggregation                      | ☑ National □ Regional □ LHO Area □ Hospital  |  |  |
|       | . 3 33 3                                       | ☐ County ☐ Institution ☐ Other – give details:   |  |  |
| 15    | KPI is reported in which reports?              | ☑Performance Assurance Report (NSP/CBP) □CompStat □Other – give details:   |  |  |
| 16    | Web link to data                               | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html   |  |  |
| _     | Additional Information                         |  |  |  |
|       | act details for Data Manager / Specialist Lead | Information Analyst: Claire Sheehy email: claire.sheehy3@hse.ie Tel: 01 6352657<br>Specialist Lead: Brian Murphy, Head of Planning, Pat Dunne, Head of Operations - Primary Care Division  |  |  |
| Motic | onal Lead and Division                         | John Hennessy, National Director, Primary Care Division, Health Service Executive.   |  |  |

| Prii  | mary Care, Community (Demand-L                 |
|-------|--|
| Ţ     | VOLTU  |
| 1     | KPI Title                                      |
| 2     | KPI Description                                |
| 3     | KPI Rationale                                  |
|       |  |
|       | Indicator Classification                       |
| 4     | KPI Target 2014                                |
| 5     | KPI Calculation                                |
| 6     | Data Source                                    |
| Ü     | Data Completeness                              |
|       | Data Quality Issues                            |
| 7     |  |
| 7     | Data Collection Frequency Tracer Conditions    |
| 8     |  |
| 9     | Minimum Data Set                               |
| 10    | International Comparison                       |
| 11    | KPI Monitoring                                 |
| 12    | KPI Reporting Frequency                        |
| 13    | KPI report period                              |
|       |  |
| 14    | KPI Reporting Aggregation                      |
| 15    | KPI is reported in which reports?              |
| 16    | Web link to data                               |
| 17    | Additional Information                         |
| ont   | act details for Data Manager / Specialist Lead |
| latio | onal Lead and Division                         |
| uul   | mai Edad and DIVISION                          |

| Pri   | mary Care, Community (Demand-Led               |
|-------|--|
|       |  |
| 1     | KPI Title                                      |
| 2     | KPI Description                                |
| 3     | KPI Rationale                                  |
|       | Indicator Classification                       |
| 4     | KPI Target 2014                                |
| 5     | KPI Calculation                                |
| 6     | Data Source                                    |
| Ŭ     | Data Completeness                              |
|       | Data Quality Issues                            |
| 7     | Data Collection Frequency                      |
| 8     | Tracer Conditions                              |
| 9     | Minimum Data Set                               |
| 10    | International Comparison                       |
| 11    |  |
| =     | KPI Monitoring                                 |
| 12    | KPI Reporting Frequency                        |
| 13    | KPI report period                              |
| 14    | KPI Reporting Aggregation                      |
| 15    | KPI is reported in which reports?              |
| 16    | Web link to data                               |
| 17    | Additional Information                         |
| Cont  | act details for Data Manager / Specialist Lead |
| Natio | onal Lead and Division                         |
|       |  |

| Pri   | mary Care, Community (Demand-Le                |
|-------|--|
|       |  |
| 1     | KPI Title                                      |
| 2     | KPI Description                                |
| 3     | KPI Rationale                                  |
|       | Indicator Classification                       |
|       |  |
| 4     | KPI Target 2014                                |
| 5     | KPI Calculation                                |
| 6     | Data Source                                    |
| Ü     | Data Completeness                              |
|       | Data Quality Issues                            |
| 7     | Data Collection Frequency                      |
|       | Tracer Conditions                              |
| 9     | Minimum Data Set                               |
| •     |  |
| 10    | International Comparison                       |
| 11    | KPI Monitoring                                 |
| 12    | KPI Reporting Frequency                        |
| 13    | KPI report period                              |
|       |  |
| 14    | KPI Reporting Aggregation                      |
| 15    | KPI is reported in which reports?              |
| 16    | Web link to data                               |
| 17    | Additional Information                         |
|       | act details for Data Manager / Specialist Lead |
| lot:  | onal Lead and Division                         |
| vali( | mai Leau anu division                          |