

Health Service Executive
KPI Guidelines 2013
**Health and Wellbeing &
Governance**

Version History

Version 1: (26 March 2013)



Féidhmeannacht na Seirbhíse Sláinte
Health Service Executive

| Health and Wellbeing: Immunisations and Vaccines | | |
|--|------------------------------------|---|
| 1 | KPI Title | Percentage of children 12 months of age who have received three doses of vaccine against diphtheria (D3), pertussis (P3), tetanus (T3) Haemophilus influenza type b (Hib3), polio (Polio3), hepatitis B (HepB3) (6 in 1 vaccine). |
| 2 | KPI Description | Total number and percentage of children on the HSE Area databases at 12 months of age who have received three doses of vaccine against diphtheria (D3), pertussis (P3), tetanus (T3) Haemophilus influenza type b (Hib3), polio (Polio3), hepatitis B (HepB3) (6 in 1 vaccine). |
| 3 | KPI Rationale | Immunisation is a proven, safe and effective public health measure to protect against serious diseases such as measles, diphtheria and polio. The WHO recommends that immunisation uptake rates should reach at least 95% to prevent outbreaks of these diseases. Designed to monitor immunisation uptake rate against the target |
| | Indicator Classification | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/> |
| | | |
| 4 | KPI Target | NSP 2013 target: 95% |
| 5 | KPI Calculation | The figure is produced by dividing the number children at 12 months of age who are recorded on the HSE Area database as having received three doses of vaccine for each vaccine type diphtheria (D3), pertussis (P3), tetanus (T3) Haemophilus influenza type b (Hib3), polio (Polio3) and hepatitis B (HepB3), by the total number of children at 12 months of age on the HSE Area database. (e.g. in Qtr 2, 2009. LHO had 368 children at 12 months of age, 290 children aged 12 months of age received three doses of vaccine against polio (Polio3), 290/368x100) Calculation: $\frac{\text{No. of children aged 12 months who rec 3 doses of Polio Vaccine}}{\text{Number of children aged 12 months of age}} \times 100 = 79\%$ |
| 6 | Data Source | |
| | Data Completeness | Sourced from HSE Areas via Health Protection Surveillance Centre (HPSC) |
| | Data Quality Issues | |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: <u>This data is reported quarterly in arrears</u> |
| 8 | Tracer Conditions | |
| 9 | Minimum Data Set | The number of children in cohort and aggregate number of children at 12 months of age in quarter who have received the full vaccine series appropriate for that age; data from each LHO and HSE Area |
| 10 | International Comparison | Similar to other countries eg UK |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually Other – give details: Please indicate who is responsible for monitoring this KPI: |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) - reported in compstat monthly <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period) |
| 14 | KPI Reporting Aggregation | <input type="checkbox"/> National <input type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports ? | <input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: |
| 16 | Web link to data | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html |
| 17 | Additional Information | Health Protection Surveillance Centre http://www.hpsc.ie/hpsc/AZ/VaccinePreventable/Vaccination/ImmunisationUptakeStatistics |
| Contact details for Data Manager / Specialist Lead | | hpsc@hse.ie (01) 8765300/ John Nolan Information Analyst Children & Families Non-Acute BIU (046) 9280519 (01) 6352252 email: john.nolan3@hse.ie |
| National Lead and Directorate | | Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347; Dora Hennessy, Principal Officer, Department of Health, Tel: 01 6354332 |

| Health and Wellbeing: Immunisations and Vaccines | | |
|--|------------------------------------|---|
| 1 | KPI Title | Percentage of children at 12 months of age who have received two doses of the Puenomccocal Conjugate Vaccine (PCV2). |
| 2 | KPI Description | Total number and percentage of children on the HSE Area databases at 12 months of age who have received two doses of the Puenomccocal Conjugate Vaccine (PCV2). |
| 3 | KPI Rationale | Immunisation is a proven, safe and effective public health measure to protect against serious diseases such as measles, diphtheria and polio. The WHO recommends that immunisation uptake rates should reach at least 95% to prevent outbreaks of these diseases. Designed to monitor immunisation uptake rate against the target |
| | Indicator Classification | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/> |
| | KPI Target | NSP 2013 target: 95% |
| 5 | KPI Calculation | The figure is produced by dividing the number children at 12 months of age who are recorded on the HSE Area database as having received two doses of vaccine against Puenomccocal Conjugate (PCV2) by the total number of children at 12 months of age on the HSE Area database (e.g. in Qtr 2, 2009. LHO area had 368 children at 12 months of age, 290 children aged 12 months of age received two doses of vaccine against Puenomccocal Conjugate (PCV2), 290/368x100) Calculation: $\frac{\text{No. of children aged 12 months who rec 2 doses of Puenomccocal Conjugate (PCV2)}}{\text{Number of children aged 12 months of age}} \times 100 = 79\%$ |
| 6 | Data Source | Sourced from Health Protection Surveillance Centre (HPSC) |
| | Data Completeness | Via Regional Vaccination System/ Public Health Departments |
| | Data Quality Issues | |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: <u>This data is reported quarterly in arrears</u> |
| 8 | Tracer Conditions | |
| 9 | Minimum Data Set | The number of children in cohort and the number of children receiving the age appropriate number of vaccine doses |
| 10 | International Comparison | Similar to other countries eg UK |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually Other – give details: Please indicate who is responsible for monitoring this KPI: |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) - reported in compstat monthly <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period) |
| 14 | KPI Reporting Aggregation | <input type="checkbox"/> National <input type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports ? | <input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: |
| 16 | Web link to data | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html |
| 17 | Additional Information | Health Protection Surveillance Centre http://www.hpsc.ie/hpsc/AZ/VaccinePreventable/Vaccination/ImmunisationUptakeStatistics |
| Contact details for Data Manager / Specialist Lead | | hpsc@hse.ie (01) 8765300/ John Nolan Information Analyst Children & Families Non-Acute BIU (046) 9280519 (01) 6352252 email: john.nolan3@hse.ie |
| National Lead and Directorate | | Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347; Dora Hennessy, Principal Officer, Department of Health, Tel: 01 6354332 |

| Health and Wellbeing: Immunisations and Vaccines | | |
|--|------------------------------------|---|
| 1 | KPI Title | Percentage of children at 12 months of age who have received two doses of the Meningococcal group C vaccine (MenC2). |
| 2 | KPI Description | Total number and percentage of children on the HSE Area databases at 12 months of age who have received two doses of the Meningococcal group C vaccine (MenC2) |
| 3 | KPI Rationale | Immunisation is a proven, safe and effective public health measure to protect against serious diseases such as measles, diphtheria and polio. The WHO recommends that immunisation uptake rates should reach at least 95% to prevent outbreaks of these diseases. Designed to monitor immunisation uptake rate against the target |
| | Indicator Classification | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/> |
| | | |
| 4 | KPI Target | NSP 2013 target: 95% |
| 5 | KPI Calculation | The figure is produced by dividing the number children at 12 months of age who are recorded on the HSE Area database as having received two doses of vaccine against Meningococcal group C (MenC2) by the total number of children at 12 months of age on the HSE Area database. (e.g. in Qtr 2, 2009. LHO area had 368 children at 12 months of age, 290 children aged 12 months of age received two doses of vaccine against Meningococcal group C (MenC2), $290/368 \times 100$) Calculation: $\frac{\text{No. of children aged 12 months who received 2 doses of Meningococcal group C (MenC2)}}{\text{Number of children aged 12 months of age}} \times 100 = 79\%$ |
| 6 | Data Source | |
| | Data Completeness | Sourced from Health Protection Surveillance Centre (HPSC) |
| | Data Quality Issues | |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: <u>This data is reported quarterly in arrears</u> |
| 8 | Tracer Conditions | |
| 9 | Minimum Data Set | The number of children in cohort and the number of children receiving the age appropriate number of vaccine doses |
| 10 | International Comparison | The World Health Organisation and National Policy recommend an uptake rate of at least 95% to ensure that community and population immunity is achieved and to provide individual protection. |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually Other – give details: Please indicate who is responsible for monitoring this KPI: |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) - reported in compstat monthly <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period) |
| 14 | KPI Reporting Aggregation | <input type="checkbox"/> National <input type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports ? | <input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: |
| 16 | Web link to data | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html |
| 17 | Additional Information | Health Protection Surveillance Centre http://www.hpsc.ie/hpsc/AZ/VaccinePreventable/Vaccination/ImmunisationUptakeStatistics |
| Contact details for Data Manager / Specialist Lead | | Health Protection Surveillance Centre hpssc@hse.ie (01) 8765300/ John Nolan Information Analyst Children & Families Non-Acute BIU (046) 9280519 (01) 6352252 email: john.nolan3@hse.ie |
| National Lead and Directorate | | Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347; Dora Hennessy, Principal Officer, Department of Health, Tel: 01 6354332 |

| Health and Wellbeing: Immunisations and Vaccines | | |
|--|------------------------------------|---|
| 1 | KPI Title | Percentage of children 24 months of age who have received three doses of vaccine against diphtheria (D3), pertussis (P3), tetanus (T3) Haemophilus influenza type b (Hib3), polio (Polio3), hepatitis B (HepB3) (6 in 1 vaccine). |
| 2 | KPI Description | Total number and percentage of children on the HSE Area databases at 24 months of age who have received three doses of vaccine against diphtheria (D3), pertussis (P3), tetanus (T3) Haemophilus influenza type b (Hib3), polio (Polio3), hepatitis B (HepB3) (6 in 1 vaccine). |
| 3 | KPI Rationale | Immunisation is a proven, safe and effective public health measure to protect against serious diseases such as measles, diphtheria and polio. The WHO recommends that immunisation uptake rates should reach at least 95% to prevent outbreaks of these diseases Designed to monitor immunisation uptake rate against the target. |
| | Indicator Classification | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/> |
| | | |
| 4 | KPI Target | NSP 2013 target: 95% |
| 5 | KPI Calculation | The figure is produced by dividing the number children at 24 months of age who are recorded on the HSE Area database as having received three doses of vaccine for each vaccine type diphtheria (D ₃), pertussis (P ₃), tetanus (T ₃) <i>Haemophilus influenza</i> type b (Hib ₃), polio (Polio ₃) and hepatitis B (HepB ₃), by the total number of children at 24 months of age on the HSE Area database. (e.g. in Qtr 2, 2009. LHO had 368 children at 24 months of age, 290 children aged 24 months of age received three doses of vaccine against polio (Polio3), Calculation: $\frac{\text{No. of children aged 24 months who rec 3 doses of Polio Vaccine (290)}}{\text{Number of children aged 24 months of age (368)}} \times 100 = 79\%$ |
| 6 | Data Source | |
| | Data Completeness | Sourced from Health Protection Surveillance Centre (HPSC) |
| | Data Quality Issues | |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: <u>This data is reported quarterly in arrears</u> |
| 8 | Tracer Conditions | |
| 9 | Minimum Data Set | The number of children in cohort and the number of children receiving the age appropriate number of vaccine doses |
| 10 | International Comparison | The World Health Organisation and National Policy recommend an uptake rate of at least 95% to ensure that community and population immunity is achieved and to provide individual protection. |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually Other – give details: Please indicate who is responsible for monitoring this KPI: |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) - reported in compstat monthly <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period) |
| 14 | KPI Reporting Aggregation | <input type="checkbox"/> National <input type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports ? | <input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: |
| 16 | Web link to data | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html |
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| Contact details for Data Manager / Specialist Lead | | Health Protection Surveillance Centre hpsc@hse.ie (01) 8765300/ John Nolan Information Analyst Children & Families Non-Acute BIU (046) 9280519 (01) 6352252 email: john.nolan3@hse.ie |
| National Lead and Directorate | | Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347; Dora Hennessy, Principal Officer, Department of Health, Tel: 01 6354332 |

| Health and Wellbeing: Immunisations and Vaccines | | |
|--|------------------------------------|---|
| 1 | KPI Title | Percentage of children at 24 months of age who have received three doses of the Meningococcal C vaccine (MenC3) |
| 2 | KPI Description | Total number and percentage of children on the HSE Area databases at 24 months of age who have received three doses of the Meningococcal C vaccine (MenC3). |
| 3 | KPI Rationale | Immunisation is a proven, safe and effective public health measure to protect against serious diseases such as measles, diphtheria and polio. The WHO recommends that immunisation uptake rates should reach at least 95% to prevent outbreaks of these diseases. Designed to monitor immunisation uptake rate against the target |
| | Indicator Classification | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/> |
| | | |
| 4 | KPI Target | NSP 2013 target: 95% |
| 5 | KPI Calculation | The figure is produced by dividing the number children at 24 months of age who are recorded on the HSE Area database as having received three doses of vaccine against Meningococcal group C (MenC3) by the total number of children at 24 months of age on the HSE Area database. (e.g. in Qtr 2, 2009. LHO area had 368 children at 24 months of age, 290 children aged 24 months of age received three doses of vaccine against Meningococcal group C (MenC3), $290/368 \times 100$) Calculation: <u>No. of children aged 24 months who rec 3 doses of Meningococcal group C (MenC3), (290)</u> Number of children aged 24 months of age $(368) \times 100 = 79\%$ |
| 6 | Data Source | |
| | Data Completeness | Sourced from Health Protection Surveillance Centre (HPSC) |
| | Data Quality Issues | |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: <u>This data is reported quarterly in arrears</u> |
| 8 | Tracer Conditions | |
| 9 | Minimum Data Set | The number of children in cohort and the number of children receiving the age appropriate number of vaccine doses |
| 10 | International Comparison | The World Health Organisation and National Policy recommend an uptake rate of at least 95% to ensure that community and population immunity is achieved and to provide individual protection. |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually Other – give details: Please indicate who is responsible for monitoring this KPI: |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) - reported in compstat monthly <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period) |
| 14 | KPI Reporting Aggregation | <input type="checkbox"/> National <input type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports ? | <input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: |
| 16 | Web link to data | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html |
| 17 | Additional Information | Health Protection Surveillance Centre http://www.hpsc.ie/hpsc/AZ/VaccinePreventable/Vaccination/ImmunisationUptakeStatistics |
| Contact details for Data Manager / Specialist Lead | | Health Protection Surveillance Centre hpsc@hse.ie (01) 8765300/ John Nolan Information Analyst Children & Families Non-Acute BIU (046) 9280519 (01) 6352252 email: john.nolan3@hse.ie |
| National Lead and Directorate | | Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347; Dora Hennessy, Principal Officer, Department of Health, Tel: 01 6354332 |

| Health and Wellbeing: Immunisations and Vaccines | | |
|--|------------------------------------|--|
| 1 | KPI Title | Percentage of children at 24 months of age who have received one dose of Haemophilus influenzae type B (Hib) vaccine on or after 12 months of age |
| 2 | KPI Description | Total number and percentage of children on the HSE Area databases at 24 months of age who have received one dose of Haemophilus influenzae type B (Hib) vaccine on or after 12 months of age |
| 3 | KPI Rationale | Immunisation is a proven, safe and effective public health measure to protect against serious diseases such as measles, diphtheria and polio. The WHO recommends that immunisation uptake rates should reach at least 95% to prevent outbreaks of these diseases. Designed to monitor immunisation uptake rate against the target |
| | Indicator Classification | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/> |
| | | |
| | | |
| 4 | KPI Target | NSP 2013 target: 95% |
| 5 | KPI Calculation | The figure is produced by dividing the number children at 24 months of age who are recorded on the HSE Area database as having one dose of Haemophilus influenzae type B (Hib) vaccine by the total number of children at 24 months of age on the HSE Area database. (e.g. in Qtr 2, 2009. LHO area had 368 children at 24 months of age, 290 children aged 24 months of age received one dose of vaccine against Haemophilus influenzae type B (Hib), $290/368 \times 100$) Calculation: $\frac{\text{No. of children aged 24 months who rec 1 dose of Haemophilus influenzae type B (Hib)}}{\text{Number of children aged 24 months of age}} \times 100 = 79\%$ |
| 6 | Data Source | |
| | Data Completeness | Sourced from HSE Areas via Health Protection Surveillance Centre (HPSC) |
| | Data Quality Issues | |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: <u>This data is reported quarterly in arrears</u> |
| 8 | Tracer Conditions | |
| 9 | Minimum Data Set | The number of children in cohort and the number of children receiving the age appropriate number of vaccine doses |
| 10 | International Comparison | The World Health Organisation and National Policy recommend an uptake rate of at least 95% to ensure that community and population immunity is achieved and to provide individual protection. |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually Other – give details: Please indicate who is responsible for monitoring this KPI: |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) - reported in compstat monthly <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period) |
| 14 | KPI Reporting Aggregation | <input type="checkbox"/> National <input type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports ? | <input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: |
| 16 | Web link to data | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html |
| 17 | Additional Information | Health Protection Surveillance Centre http://www.hpsc.ie/hpsc/AZ/VaccinePreventable/Vaccination/ImmunisationUptakeStatistics |
| Contact details for Data Manager / Specialist Lead | | Health Protection Surveillance Centre hpsc@hse.ie (01) 8765300/ John Nolan Information Analyst Children & Families Non-Acute BIU (046) 9280519 (01) 6352252 email: john.nolan3@hse.ie |
| National Lead and Directorate | | Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347; Dora Hennessy, Principal Officer, Department of Health, Tel: 01 6354332 |

| Health and Wellbeing: Immunisations and Vaccines | | |
|--|------------------------------------|---|
| 1 | KPI Title | Percentage of children at 24 months of age who have received three doses of the Pneumococcal Conjugate Vaccine (PCV ₃). |
| 2 | KPI Description | Total number and percentage of children on the HSE Area databases at 24 months of age who have received two doses of the Pneumococcal Conjugate Vaccine (PCV ₃). |
| 3 | KPI Rationale | Immunisation is a proven, safe and effective public health measure to protect against serious diseases such as measles, diphtheria and polio. The WHO recommends that immunisation uptake rates should reach at least 95% to prevent outbreaks of these diseases. Designed to monitor immunisation uptake rate against the target. |
| | Indicator Classification | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/> |
| | | |
| 4 | KPI Target | NSP 2013 target: 95% |
| 5 | KPI Calculation | The figure is produced by dividing the number children at 24 months of age who are recorded on the HSE Area database as having received two doses of vaccine against Pneumococcal Conjugate (PCV ₂) by the total number of children at 24 months of age on the HSE Area database (e.g. in Qtr 2, 2009. LHO area had 368 children at 24 months of age, 290 children aged 24 months of age received two doses of vaccine against Pneumococcal Conjugate (PCV ₃), 290/368x100). Calculation: <u>No. of children aged 24 months who rec 3 doses of Pneumococcal Conjugate (PCV₃) (290)</u> Number of children aged 24 months of age (368)x100 = 79% |
| 6 | Data Source | Sourced from HSE Areas via Health Protection Surveillance Centre (HPSC) |
| | Data Completeness | Via Regional Vaccination System/ Public Health Departments |
| | Data Quality Issues | |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: <u>This data is reported quarterly in arrears</u> |
| 8 | Tracer Conditions | |
| 9 | Minimum Data Set | The number of children in cohort and the number of children receiving the age appropriate number of vaccine doses |
| 10 | International Comparison | The World Health Organisation and National Policy recommend an uptake rate of at least 95% to ensure that community and population immunity is achieved and to provide individual protection. |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually Other – give details: Please indicate who is responsible for monitoring this KPI: |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) - reported in compstat monthly <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period) |
| 14 | KPI Reporting Aggregation | <input type="checkbox"/> National <input type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports ? | <input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: |
| 16 | Web link to data | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html |
| 17 | Additional Information | Health Protection Surveillance Centre http://www.hpsc.ie/hpsc/AZ/VaccinePreventable/Vaccination/ImmunisationUptakeStatistics |
| Contact details for Data Manager / Specialist Lead | | Health Protection Surveillance Centre hpsc@hse.ie (01) 8765300/ John Nolan Information Analyst Children & Families Non-Acute BIU (046) 9280519 (01) 6352252 email: john.nolan3@hse.ie |
| National Lead and Directorate | | Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347; Dora Hennessy, Principal Officer, Department of Health, Tel: 01 6354332 |

| Health and Wellbeing: Immunisations and Vaccines | | |
|--|------------------------------------|--|
| 1 | KPI Title | Percentage of children at 24 months of age who have received the Measles, Mumps and Rubella (MMR) vaccine. |
| 2 | KPI Description | Total number and percentage of children on the HSE Area databases at 24 months of age who have received the Measles, Mumps and Rubella Vaccine (MMR). |
| 3 | KPI Rationale | Immunisation is a proven, safe and effective public health measure to protect against serious diseases such as measles, diphtheria and polio. The WHO recommends that immunisation uptake rates should reach at least 95% to prevent outbreaks of these diseases. Designed to monitor immunisation uptake rate against the target. |
| | Indicator Classification | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/> |
| | | |
| 4 | KPI Target | NSP 2013 target: 95% |
| 5 | KPI Calculation | The figure is produced by dividing the number children at 24 months of age who are recorded on the HSE Area database as having received the vaccine against Measles, Mumps and Rubella Vaccine (MMR) by the total number of children at 24 months of age on the HSE Area database. (e.g. in Q2, 2010 LHO area had 368 children at 24 months of age, 290 children aged 24 months of age received the MMR vaccine 290/368x100%) <u>No. of children aged 24 months who received the MMR Vaccine (290</u> Number of children aged 24 months of age (368)x100% = 79% |
| 6 | Data Source | |
| | Data Completeness | Sourced from HSE Areas via Health Protection Surveillance Centre (HPSC) |
| | Data Quality Issues | |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: <u>This data is reported quarterly in arrears</u> |
| 8 | Tracer Conditions | |
| 9 | Minimum Data Set | The number of children in cohort and the number of children receiving the age appropriate number of vaccine doses |
| 10 | International Comparison | The World Health Organisation and National Policy recommend an uptake rate of at least 95% to ensure that community and population immunity is achieved and to provide individual protection. |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually Other – give details: Please indicate who is responsible for monitoring this KPI: |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) - reported in compstat monthly <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period) |
| 14 | KPI Reporting Aggregation | <input type="checkbox"/> National <input type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports ? | <input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: |
| 16 | Web link to data | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html |
| 17 | Additional Information | Health Protection Surveillance Centre http://www.hpsc.ie/hpsc/AZ/VaccinePreventable/Vaccination/ImmunisationUptakeStatistics |
| Contact details for Data Manager / Specialist Lead | | Health Protection Surveillance Centre hpsc@hse.ie (01) 8765300/ John Nolan Information Analyst Children & Families Non-Acute BIU (046) 9280519 (01) 6352252 email: john.nolan3@hse.ie |
| National Lead and Directorate | | Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347; Dora Hennessy, Principal Officer, Department of Health, Tel: 01 6354332 |

| Health and Wellbeing: Immunisations and Vaccines | | |
|--|--|--|
| 1 | KPI Title | Percentage of children aged 4 to 5 years who have received 1 dose 4-in-1 vaccine (Diphtheria; tetanus; Polio; Pertussis) |
| 2 | KPI Description | Total number and percentage of children on the HSE Area databases at 5 years of age who have received one dose of 4-in-1 vaccine (Diphtheria; tetanus; Polio; Pertussis) |
| 3 | KPI Rationale | Immunisation is a proven, safe and effective public health measure to protect against serious diseases such as measles, diphtheria and polio. The WHO recommends that immunisation uptake rates should reach at least 95% to prevent outbreaks of these diseases. Designed to monitor immunisation uptake rate against the target |
| | Indicator Classification | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/> |
| 4 | KPI Target | NSP 2013 target: 95% |
| 5 | KPI Calculation | The figure is produced by dividing the number children at 4 to 5 years of age who are recorded on the HSE Area database as having received the 4 in 1 vaccine by the total number of children at 4 to 5 years of age on the HSE Area database. e.g. in Q2, 2010 LHO area had 368 children at 4 to 5 years of age, 290 children aged 4 to 5 years of age received the 4-in-1 vaccine $290/368 \times 100\%$ No. of children aged 4 to 5 years of age who received the 4-in-1 vaccine (290) _____ Number of children aged 4 to 5 years of age (368) $\times 100\% = 79\%$ |
| 6 | Data Source | |
| | Data Completeness | Sourced from HSE Areas via Health Protection Surveillance Centre (HPSC) |
| | Data Quality Issues | |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Note: <u>This data is reported annually Q4</u> |
| 8 | Tracer Conditions | |
| 9 | Minimum Data Set | The number of children in cohort and the number of children receiving the age appropriate number of vaccine doses |
| 10 | International Comparison | The World Health Organisation and National Policy recommend an uptake rate of at least 95% to ensure that community and population immunity is achieved and to provide individual protection. |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input checked="" type="checkbox"/> Rolling 12 months (previous 12 month period) |
| 14 | KPI Reporting Aggregation | <input type="checkbox"/> National <input type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports ? | <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: |
| 16 | Web link to data | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html |
| 17 | Additional Information | As reported in the HSE Performance Report |
| | Contact details for Data Manager / Specialist Lead | Health Protection Surveillance Centre hpsc@hse.ie (01) 8765300/ John Nolan Information Analyst Children & Families Non-Acute BIU (046) 9280519 (01) 6352252 email: john.nolan3@hse.ie |
| | National Lead and Directorate | Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347; Dora Hennessy, Principal Officer, Department of Health, Tel: 01 6354332 |

| Health and Wellbeing: Immunisations and Vaccines | | |
|--|--|--|
| 1 | KPI Title | Percentage of children aged 4 to 5 years who have received one dose Measles, Mumps, Rubella (MMR) vaccine |
| 2 | KPI Description | Total number and percentage of children on the HSE Area databases at 5 years of age who have received one dose Measles, Mumps, Rubella (MMR) vaccine |
| 3 | KPI Rationale | Immunisation is a proven, safe and effective public health measure to protect against serious diseases such as measles, diphtheria and polio. The WHO recommends that immunisation uptake rates should reach at least 95% to prevent outbreaks of these diseases. Designed to monitor immunisation uptake rate against the target |
| | Indicator Classification | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input checked="" type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/> |
| 4 | KPI Target | NSP 2013 target: 95% |
| 5 | KPI Calculation | The figure is produced by dividing the number children at 4 to 5 years of age who are recorded on the HSE Area database as having received the vaccine against Measles, Mumps and Rubella Vaccine (MMR) by the total number of children at 4 to 5 years of age on the HSE Area database. (e.g. in Q2, 2010 LHO area had 368 children at 4 to 5 years of age, 290 children aged 4 to 5 years of age received the MMR vaccine 290/368x100%) <u>No. of children aged 4 to 5 years of age who received the MMR Vaccine (290)</u> Number of children aged 4 to 5 years of age (368)x100% = 79% |
| 6 | Data Source | |
| | Data Completeness | Sourced from HSE Areas via Health Protection Surveillance Centre (HPSC) |
| | Data Quality Issues | |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 8 | Tracer Conditions | |
| 9 | Minimum Data Set | The number of children in cohort and the number of children receiving the age appropriate number of vaccine doses |
| 10 | International Comparison | The World Health Organisation and National Policy recommend an uptake rate of at least 95% to ensure that community and population immunity is achieved and to provide individual protection. |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input checked="" type="checkbox"/> Rolling 12 months (previous 12 month period) |
| 14 | KPI Reporting Aggregation | <input type="checkbox"/> National <input type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports ? | <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: |
| 16 | Web link to data | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html |
| 17 | Additional Information | As reported in the HSE Performance Report |
| | Contact details for Data Manager / Specialist Lead | Health Protection Surveillance Centre hpsc@hse.ie (01) 8765300/ John Nolan Information Analyst Children & Families Non-Acute BIU (046) 9280519 (01) 6352252 email: john.nolan3@hse.ie |
| | National Lead and Directorate | Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347; Dora Hennessy, Principal Officer, Department of Health, Tel: 01 6354332 |

| Health and Wellbeing: Immunisations and Vaccines | | |
|--|------------------------------------|--|
| 1 | KPI Title | Percentage of children aged 11 to 14 years who have received one dose Tetanus; low dose Diphtheria; Acclular Pertussis (Tdap) vaccine |
| 2 | KPI Description | Total number and percentage of children on the HSE Area databases at 11 to 14 years of age who have received one dose Tetanus; low dose Diphtheria; Acclular Pertussis (Tdap) vaccine |
| 3 | KPI Rationale | Immunisation is a proven, safe and effective public health measure to protect against serious diseases such as measles, diphtheria and polio. The WHO recommends that immunisation uptake rates should reach at least 95% to prevent outbreaks of these diseases. Designed to monitor immunisation uptake rate against the target. |
| | Indicator Classification | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care Safe Care <input type="checkbox"/> Better Health and Wellbeing <input checked="" type="checkbox"/> Use of Information Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/> |
| 4 | KPI Target | NSP 2013 target: 95% |
| 5 | KPI Calculation | The figure is produced by dividing the number children at 11 to 14 years of age who are recorded on the HSE Area database as having received one dose Tetanus; low dose Diphtheria; Acclular Pertussis (Tdap) vaccine by the total number of children at 11 to 14 years of age on the HSE Area database. (e.g. in Q2, 2010 LHO area had 368 children at 11 to 14 years of age, 290 children aged 11 to 14 years of age received one dose Tetanus; low dose Diphtheria; Acclular Pertussis (Tdap) vaccine $290/368 \times 100\%$) <u>No. of children aged 11 to 14 years of age who received one dose Tetanus; low dose Diphtheria; Acclular Pertussis (Tdap) vaccine (290)</u> Number of children aged 11 to 14 years of age (368) $\times 100\% = 79\%$ |
| 6 | Data Source | Sourced from HSE Areas via Health Protection Surveillance Centre (HPSC) Via Regional Vaccination System/Public Health Departments |
| | Data Completeness | |
| | Data Quality Issues | |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details: <u>This data is reported annually in Q4</u> |
| 8 | Tracer Conditions | |
| 9 | Minimum Data Set | The number of children in cohort and the number of children receiving the age appropriate number of vaccine doses |
| 10 | International Comparison | The World Health Organisation and National Policy recommend an uptake rate of at least 95% to ensure that community and population immunity is achieved and to provide individual protection. |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input checked="" type="checkbox"/> Rolling 12 months (previous 12 month period) |
| 14 | KPI Reporting Aggregation | <input type="checkbox"/> National <input type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports ? | <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: |
| 16 | Web link to data | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html |
| 17 | Additional Information | As reported in the HSE Performance Report |
| Contact details for Data Manager / Specialist Lead | | Health Protection Surveillance Centre hpsc@hse.ie (01) 8765300/ John Nolan Information Analyst Children & Families Non-Acute BIU (046) 9280519 (01) 6352252 email: john.nolan3@hse.ie |
| National Lead and Directorate | | Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347; Dora Hennessy, Principal Officer, Department of Health, Tel: 01 6354332 |

| Health and Wellbeing: Immunisations and Vaccines | | |
|--|------------------------------------|--|
| 1 | KPI Title | HPV – number and percentage of first year girls to have received the third dose of HPV vaccine by August 2013. |
| 2 | KPI Description | HPV – estimated number and percentage of girls in first year of second level schools (and those aged 12 or 13 years that are in special schools or home schooled) to have completed a three dose HPV vaccine course in the academic year 2012/2013. |
| 3 | KPI Rationale | Immunisation is a proven, safe and effective public health measure. Designed to monitor immunisation uptake rate against the target. |
| | Indicator Classification | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care <input type="checkbox"/> Better Health and Wellbeing <input checked="" type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management |
| 4 | KPI Target | NSP 2013 target: 80% |
| 5 | KPI Calculation | No. of first year girls to have received third dose of HPV vaccine Total number of first year girls x 100 = |
| 6 | Data Source | Sourced from HSE Areas via National Immunisation Office |
| | Data Completeness | |
| | Data Quality Issues | |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Note: <u>This data is reported annually in Q4</u> |
| 8 | Tracer Conditions | |
| 9 | Minimum Data Set | The number of children in cohort and the number of children receiving the age appropriate number of vaccine doses |
| 10 | International Comparison | WHO target of 80% and this target was also given in the HIQA Health Technology Assessment |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input checked="" type="checkbox"/> Rolling 12 months (previous 12 month period) |
| 14 | KPI Reporting Aggregation | <input type="checkbox"/> National <input type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports ? | <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: |
| 16 | Web link to data | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html |
| 17 | Additional Information | as reported in the HSE Performance Report |
| Contact details for Data Manager / Specialist Lead | | Health Protection Surveillance Centre hpsc@hse.ie (01) 8765300/ John Nolan Information Analyst Children & Families Non-Acute BIU (046) 9280519 (01) 6352252 email: john.nolan3@hse.ie |
| National Lead and Directorate | | Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347; Dora Hennessy, Principal Officer, Department of Health, Tel: 01 6354332 |

| Health and Wellbeing: Immunisations and Vaccines | | |
|--|--|--|
| 1 | KPI Title | HPV – number and percentage of Sixth year girls to have received the third dose of HPV vaccine by August 2013. |
| 2 | KPI Description | HPV – estimated number and percentage of girls in Sixth year of second level schools (and those that are in special schools or home schooled) to have completed a three dose HPV vaccine course in the academic year 2012/2013. |
| 3 | KPI Rationale | Immunisation is a proven, safe and effective public health measure. Designed to monitor immunisation uptake rate against the target. |
| | Indicator Classification | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care <input type="checkbox"/> Better Health and Wellbeing <input checked="" type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management |
| 4 | KPI Target | NSP 2013 target: 80% |
| 5 | KPI Calculation | No. of Sixth year girls to have received third dose of HPV vaccine Total number of Sixth year girls x 100 = |
| 6 | Data Source | |
| | Data Completeness | Sourced from HSE Areas via National Immunisation Office |
| | Data Quality Issues | |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Note: This data is reported annually Q4 |
| 8 | Tracer Conditions | |
| 9 | Minimum Data Set | The number of children in cohort and the number of children receiving the age appropriate number of vaccine doses |
| 10 | International Comparison | There is no target for HPV catch-up set by WHO or HIQA. Therefore the same target as for first years is used but lower uptake expected based upon international experience in UK and Australia. |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input checked="" type="checkbox"/> Rolling 12 months (previous 12 month period) |
| 14 | KPI Reporting Aggregation | <input type="checkbox"/> National <input type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports ? | <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: |
| 16 | Web link to data | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html |
| 17 | Additional Information | |
| | Contact details for Data Manager / Specialist Lead | Health Protection Surveillance Centre hpsc@hse.ie (01) 8765300/ John Nolan Information Analyst Children & Families Non-Acute BIU (046) 9280519 (01) 6352252 email: john.nolan3@hse.ie |
| | National Lead and Directorate | Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347; Dora Hennessy, Principal Officer, Department of Health, Tel: 01 6354332 |

Health and Wellbeing: Child Health/Developmental Screening

| | | |
|---|---|--|
| 1 | KPI Title | Percentage of New Born Babies visited by a Public Health Nurse (PHN) within 48 hours of hospital discharge. |
| 2 | KPI Description | This measure is designed to measure the total number and percentage of new born babies visited by a Public Health Nurse (PHN) within 48 hours of hospital discharge (for the first time). |
| 3 | KPI Rationale | This underpins the PHN role in supporting mother and baby and health promotion. In particular a timely PHN visit supports breastfeeding and screens for, and responds to, post natal depression. Both of these are core elements of post-natal support. |
| | Indicator Classification | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care <input type="checkbox"/> Better Health and Wellbeing <input checked="" type="checkbox"/> Use of Information <input type="checkbox"/> <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/> |
| 4 | KPI Target | NSP 2013 target: 95% |
| 5 | KPI Calculation | The figure is produced by dividing the number of new born babies visited by a PHN within 48hrs of their first discharge from hospital by the total number of newborn babies discharged from hospital following their birth during the reporting period (i.e. LHO area have 369 babies discharged, 288 received a PHN Visit within 48hrs therefore 288/369x100%) Calculation: Number of newborn babies visited by a PHN within 48hrs (288) Number of Newborn babies discharged (369)x100% = 78% |
| 6 | Data Source | LHO (PHNs) returned via HSE area Business Managers |
| | Data Completeness | |
| | Data Quality Issues | |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 8 | Tracer Conditions | N/A |
| 9 | Minimum Data Set | 1. The total number of newborn babies discharged for the first time from hospital following their birth during the reporting period 2. Number of newborn babies visited by a PHN within 48 hours of hosp discharge |
| 10 | International Comparison | Community health services to mothers and babies are not standard or comparable across countries. Most other countries have a separate dedicated service that provides maternal and child health services alone and are thus able to achieve much more intensive visits and medical check for babies, young children and their mothers/families. WHO/UNICEF advocate timely, appropriate and accessible community health service support for new mothers and babies. |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: Local Business Unit |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input checked="" type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period) |
| 14 | KPI Reporting Aggregation | <input type="checkbox"/> National <input type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports ? | <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: |
| 16 | Web link to data | CompStat Community Services Dashboards http://www.hse.ie/eng/staff/CompStat http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html |
| 17 | Additional Information | Defination of new born baby: "baby who has never been discharged before, except those babies remaining in the care of Midwifery Services following early hospital discharge (e.g. Domino and Early Transfer Home Schemes) and some home births." |
| Contact details for Data Manager / Specialist Lead | | John Nolan, Information Analyst Children & Families Non Acute BIU, Tel 046 9280519/01 6352252 email:john.nolan3@hse.ie |
| National Lead / Directorate | | Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347 Sheila O'Malley, Chief Nursing Officer, Department of Health, Tel: 01 6354366 |

Health and Wellbeing: Child Health/Developmental Screening

| | | |
|---|---|--|
| 1 | KPI Title | Percentage of New Born Babies visited by a Public Health Nurse (PHN) within 72 hours of hospital discharge. |
| 2 | KPI Description | This measure is designed to measure the total number and percentage of new born babies visited by a Public Health Nurse (PHN) within 72 hours of hospital discharge for the first time. |
| 3 | KPI Rationale | This underpins the PHN role in supporting mother and baby and health promotion. In particular a timely PHN visit supports breastfeeding and screens for, and responds to, post natal depression. Both of these are core elements of post-natal support. |
| | Indicator Classification | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care <input type="checkbox"/> Better Health and Wellbeing <input checked="" type="checkbox"/> Use of Information <input type="checkbox"/> <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/> |
| 4 | KPI Target | NSP 2013 target: 100% |
| 5 | KPI Calculation | The figure is produced by dividing the number of new born babies visited by a PHN within 72hrs of their first discharge from hospital by the total number of newborn babies discharged from hospital following their birth during the reporting period (i.e. LHO area have 369 babies discharged, 367 received a PHN Visit within 72hrs therefore 367/369x100%) Calculation: Number of newborn babies visited by a PHN within 72hrs (367) Number of Newborn babies discharged (369)x100% = 99.5% |
| 6 | Data Source | LHO (PHNs) returned via HSE area Business Managers |
| | Data Completeness | |
| | Data Quality Issues | |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 8 | Tracer Conditions | N/A |
| 9 | Minimum Data Set | 1. The total number of newborn babies discharged for the first time from hospital following their birth during the reporting period 2. Number of newborn babies visited by a PHN within 72 hours of hosp discharge |
| 10 | International Comparison | Community health services to mothers and babies are not standard or comparable across countries. Most other countries have a separate dedicated service that provides maternal and child health services alone and are thus able to achieve much more intensive visits and medical check for babies, young children and their mothers/families. WHO/UNICEF advocate timely, appropriate and accessible community health service support for new mothers and babies. |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: Local Business Unit |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input checked="" type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period) |
| 14 | KPI Reporting Aggregation | <input type="checkbox"/> National <input type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports ? | <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: |
| 16 | Web link to data | CompStat Community Services Dashboards http://www.hse.ie/eng/staff/CompStat http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html |
| 17 | Additional Information | Defination of new born baby: "baby who has never been discharged before, except those babies remaining in the care of Midwifery Services following early hospital discharge (e.g. Domino and Early Transfer Home Schemes) and some home births." |
| Contact details for Data Manager / Specialist Lead | | John Nolan, Information Analyst Children & Families Non Acute BIU, Tel 046 9280519/01 6352252 email:john.nolan3@hse.ie |
| National Lead / Directorate | | Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347 Sheila O'Malley, Chief Nursing Officer, Department of Health, Tel: 01 6354366 |

Health and Wellbeing: Child Health/Developmental Screening

| | | |
|---|---|--|
| 1 | KPI Title | Percentage of children reaching 10 months within the reporting period who have had their child development health screening on time before reaching 10 months of age |
| 2 | KPI Description | The percentage uptake of 7-9 months developmental screening by 10 months. Completed by Public Health Nurses or Area Medical Officers. |
| 3 | KPI Rationale | Developmental screening is a procedure designed to identify children who should receive more intensive assessment or diagnosis, for potential developmental delays or physical defects (e.g. Strabismus; undescended testes). It can allow for earlier detection of delays and improve child health and well-being outcomes for identified children. This metric is designed to measure the % of children reaching 10 months within the reporting period who have had their Child Development Health Screening (7 to 9 month developmental check) on time before reaching 10 months of age. |
| | Indicator Classification | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care <input type="checkbox"/> Better Health and Wellbeing <input checked="" type="checkbox"/> Use of Information <input type="checkbox"/> <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/> |
| 4 | KPI Target | NSP 2013 target: 95% |
| 5 | KPI Calculation | A baby born between 1st and 31st December 2008 will turn 10 months of age between 1st and 31st October 2009, babies born between 1st and 30th June 2008 will turn 10 months of age between 1st and 30th April 2009, etc. Of those babies how many received their Child Development Health Screening (7 to 9 month check) on time before reaching 10 months of age. (e.g. LHO has 108 babies reaching 10 months of age in the reporting period, 89 of which have received screening then the percentage is calculated as follows $89/108 \times 100\%$). Calculation: Number of babies receiving developmental screening by 10mths (89) No. of babies reaching 10 months in reporting period (108) $\times 100\% = 82\%$ |
| 6 | Data Source | |
| | Data Completeness | LHO (PHNs) returned via HSE Area business Managers to Business Intelligence Unit, CPCP |
| | Data Quality Issues | |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: <u>Currently only reported CompStat Framework monthly</u> |
| 8 | Tracer Conditions | N/A |
| 9 | Minimum Data Set | 1. The total number of babies reaching 10 months of age during the reporting period 2. Number of babies reaching 10 months of age during the reporting period who have received their 7-9 month developmental check before reaching 10 months of age. |
| 10 | International Comparison | PHN's conduct development health screening as recommended by the Child Health Screening & Surveillance Programme (CHSS) |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: Local Business Unit |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period) |
| 14 | KPI Reporting Aggregation | <input type="checkbox"/> National <input type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports ? | <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: |
| 16 | Web link to data | CompStat Community Services Dashboards http://www.hse.ie/eng/staff/CompStat http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html |
| 17 | Additional Information | This metric was the output of a number of facilitated sessions held with PHNS, Performance Management and Business Managers nationally. The purpose of the sessions was to develop and agree on definitions to be applied to this metric to ensure parity of data returned nationally. This metric was first reported on in October 2008. |
| Contact details for Data Manager / Specialist Lead | | John Nolan, Information Analyst Children & Families Non Acute BIU, Tel 046 9280519/01 6352252 email:john.nolan3@hse.ie |
| National Lead / Directorate | | Dr. Kevin Kelleher, Assistant National Director, Health Protection, Tel: 061 483347 Sheila O'Malley, Chief Nursing Officer, Department of Health, Tel: 6354366 |

Health and Wellbeing: Child Health/Developmental Screening

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|----|---|--|
| 1 | KPI Title | Number of Newborns who have had Newborn Bloodspot Screening (NBS). |
| 2 | KPI Description | Total number and percentage of newborn infants who are offered and have a newborn bloodspot screening sample taken within seven days of birth. |
| 3 | KPI Rationale | To provide evidence that newborn infants eligible are offered and have had newborn bloodspot screening between 72-120hrs after birth; ii) all babies born outside this jurisdiction and reside in the jurisdiction have NBS within 72 -120hrs after birth; iii) births not eligible. i.e. RIP before 72hrs; Moved out of LHO before 72 hrs; op-out; other. |
| | Indicator Classification | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care <input type="checkbox"/> Better Health and Wellbeing <input checked="" type="checkbox"/> Use of Information <input type="checkbox"/> <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/> |
| 4 | KPI Target | NSP 2013 target: 100% |
| 5 | KPI Calculation | Metric calculation based on number of births and number of infants who have NBS. |
| 6 | Data Source | |
| | Data Completeness | LHO's / ISA's – Regional Leads for Child Health National Newborn Bloodspot Screening Laboratory |
| | Data Quality Issues | Implementation of New ICT solution for the National Newborn Bloodspot Screening Laboratory in 2012 will enhance the quality and quantity of data available. |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – give details: <u>Collected quarterly in arrears</u> |
| 8 | Tracer Conditions | |
| 9 | Minimum Data Set | 1. The total number of new born infants during the reporting period 2. The total number of New Born Infants who were offered and provided a blood spot screening sample within seven days of their birth. |
| 10 | International Comparison | Similar to other countries, e.g. Northern Ireland, England, Scotland, Wales and throughout Europe who screen newborns for similar conditions. |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: Local Business Unit |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: quarterly in arrears |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period) |
| 14 | KPI Reporting Aggregation | <input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports ? | <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: |
| 16 | Web link to data | Monthly Performance Supplementary Report (Reported in PR Quarterly) http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html |
| 17 | Additional Information | |
| | Contact details for Data | To be confirmed during Q1 |
| | National Lead / Directorate | Dr Kevin Kelleher, AND, Health Protection and Child Health Ms Laverne McGuinness, Director, ISD HSE |

Health and Wellbeing: Tobacco Control

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| 1 | KPI title | Percentage of Hospital campuses with tobacco-free policy. |
| 2 | Description | HSE Tobacco Control Framework (TCF) commits to introducing a tobacco free policy in all HSE campuses by 2015. The policy covers hospitals, admin sites, primary care sites and community sites. A phased roll-out of the policy is planned. All new sites will have a tobacco free policy as standard. The policy will apply to all staff, patients/service users, visitors, contractors and other persons on the 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 the Corporate Policy adopted in 2012. |
| 3 | KPI Rationale | Smoking is the biggest single cause of preventable premature death, claiming 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 bi-monthly by TCF Implementation Group. |
| | Indicator Classification | <input type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care <input checked="" type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input checked="" type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management |
| 4 | KPI Target | NSP 2013: 100% of Hospitals |
| 5 | KPI Calculation | Count |
| 6 | Data Source | Administrative databases. Data collated by national co-ordinator for tobacco free campus project for the TCFIG Project Office |
| | Data Completeness | Complete |
| | Data Quality Issues | Manual Collection |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other |
| 8 | Tracer Conditions | All Acute hospitals including designated cancer centres tobacco free |
| 9 | Minimum Data Set | Support to smokers in place. Signage to indicate entering a tobacco free campus. Posters advertising services to support smokers to quit. |
| 10 | International Comparison | Yes, ENSH European Network for Tobacco Free Healthcare Services http://www.ensh.eu/ensh/racine/ |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: TCFIG |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period) <input type="checkbox"/> Other – give details: |
| 14 | KPI Reporting Aggregation | <input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional LHO Area <input checked="" type="checkbox"/> Hospital County Institution Other – give details: |
| 15 | KPI is reported in which reports? | <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: |
| 15 | Web link to data | http://www.hse.ie/eng/services/Publications/corporate/performance-reports/2012pr.html |
| 16 | Additional Information | All smokers are offered a range of supports to help them quit. These include local cessation clinics, Quitline 1850 201 203, www.quit.ie and www.facebook.com/HSEquit |
| Contact details for Data Manager / Specialist Lead | | Marie Killeen, National Tobacco Control Office, Email : marie.killeen3@hse.ie Tel: 045 988207 |
| National Lead and Directorate | | Gavin Maguire, Email : gavin.maguire@hse.ie Tel: 045 880400 Integrated Services Directorate |

Health and Wellbeing: Tobacco Control

| | | |
|----|---|---|
| 1 | KPI title | Number and percentage of smokers on cessation programme who were quit at one month |
| 2 | Description | Refers to smokers who had signed up to a HSE tobacco cessation support programme, who quit and who remained quit at 4 weeks. Support programme: structured support is provided to client prior to quit date and for four weeks following this date Quit date: day after the client's last cigarette Quit: as per Russell Standard. Can be self-report (< 5 cigarettes smoked since quit date) or validated (< 10ppm CO monitor). |
| 3 | KPI Rationale | Seven out of 10 smokers want to quit and four out of ten make a quit attempt every year. Support doubles a smoker's chance of quitting successfully. Smoking cessation is a highly cost effective intervention. The Tobacco Control Framework identified the need to set realistic performance targets for both the numbers using the service and the proportion who quit successfully based on demographics. This KPI will provide baseline data for this action. The Department of Health's Tobacco Policy Review due to be published in 2013 will emphasise the need to monitor and evaluate cessation services. |
| | Indicator Classification | <input type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care <input checked="" type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input checked="" type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management |
| 4 | KPI Target | New KPI; 2013 out-turn will inform 2014 target |
| 5 | KPI Calculation | Denominator: No. of smokers who participate in a HSE cessation programme and who quit. Numerator: No. of smokers who remained quit when followed up at 4 weeks. This is expressed as a count and as a percentage. |
| 6 | Data Source | Administrative databases. Data provided by cessation specialists to Health Promotion to Project Office for the TCFIG |
| | Data Completeness | Includes community and acute based cessation services; New national standard for cessation support programme introduced in March 2013; data relating to Jan and Feb may |
| | Data Quality Issues | Some services may not conform to national standard |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other |
| 8 | Tracer Conditions | Quit definition - Russell Standard UK |
| 9 | Minimum Data Set | No. of smokers who participated in a support programme No. of smokers who quit No. of smokers who remained quit at 4 weeks |
| 10 | International Comparison | NHS Stop Smoking Service reports similar data |
| 11 | KPI Monitoring | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: Health Promotion |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input checked="" type="checkbox"/> Monthly in arrears (June data reported in July) - 3 months in arrears. Jan data reported in Ap <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period) <input type="checkbox"/> Other – give details: |
| 14 | KPI Reporting Aggregation | <input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional LHO Area <input checked="" type="checkbox"/> Hospital County Institution Other – give details: |
| 15 | KPI is reported in which reports? | <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: |
| 15 | Web link to data | http://www.hse.ie/eng/services/Publications/corporate/performance-reports/2012pr.html |
| 16 | Additional Information | All smokers are offered a range of supports to help them quit. These include local cessation clinics, Quitline 1850 201 203, www.quit.ie and www.facebook.com/HSEquit |
| | Contact details for Data Manager / Specialist Lead | Marie Killeen, National Tobacco Control Office, Email : marie.killeen3@hse.ie Tel: 045 988207 |
| | National Lead and Directorate | Gavin Maguire, Email : gavin.maguire@hse.ie Tel: 045 880400 Integrated Services Directorate |

Health and Wellbeing: Tobacco Control

| | | |
|---|--|---|
| 1 | KPI title | Number of smokers who received intensive cessation support from a cessation counsellor |
| 2 | KPI Description | Intensive cessation support is a consultation of greater than 10 mins provided by a trained cessation specialist to a smoker either in acute or community setting. It can be delivered in a variety of ways - one-to-one, group, telephone. |
| 3 | KPI Rationale | Seven out of 10 smokers want to quit and four out of ten make a quit attempt every year. Support doubles a smoker's chance of quitting successfully. Smoking cessation is a highly cost effective intervention. The Department of Health's Tobacco Policy Review due to be published in 2013 will emphasise the need to monitor and evaluate cessation services. |
| | Indicator Classification | <input type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care |
| | | <input checked="" type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce |
| | | <input checked="" type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management |
| 4 | KPI Target | NSP 2013 target: 9,000 smokers |
| 5 | KPI Calculation | Count |
| 6 | Data Source | Administrative databases. Data provided by cessation specialists to Health Promotion to TCFIG Project Office |
| | Data Completeness | Includes community and acute based cessation services |
| | Data Quality Issues | Manual system |
| 7 | Data Collection | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 8 | Tracer Conditions | Smoker seeking assistance to quit |
| 9 | Minimum Data Set | No. of smokers who received support > 10 mins |
| 10 | International Comparison | NHS Stop Smoking Service reports similar data |
| 11 | KPI Monitoring | KPI will be <u>monitored</u> on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other |
| | | Please indicate who is responsible for monitoring this KPI: Health Promotion |
| | | |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | Indicate the period to which the data applies |
| | | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) |
| | | <input checked="" type="checkbox"/> Monthly in arrears (June data reported in July) |
| | | <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) |
| | | <input type="checkbox"/> Rolling 12 months (previous 12 month period) <input type="checkbox"/> Other – give details: |
| 14 | KPI Reporting Aggregation | <input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| | | |
| 15 | KPI is reported in which reports? | <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: |
| 15 | Web link to data | http://www.hse.ie/eng/services/Publications/corporate/performance-reports/2012pr.html |
| 16 | Additional Information | |
| Contact details for Data Manager / Specialist Lead | | Name: Marie Killeen, National Tobacco Control Office, Email : marie.killeen3@hse.ie Tel: 045 988207 |
| National Lead and Directorate | | Name: Gavin Maguire, Email : gavin.maguire@hse.ie Tel: 045 880400 Integrated Services Directorate |

Health and Wellbeing: Tobacco Control

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|-------------------------------|-----------------------------------|---|
| 1 | KPI title | Number of frontline healthcare staff trained in brief intervention smoking cessation |
| 2 | KPI Description | A national training programme will be rolled out to deliver brief intervention (BI) smoking cessation training to frontline healthcare staff. Frontline staff refers to those delivering services to patients/service users. BI in smoking cessation |
| 3 | KPI Rationale | HSE's Tobacco Control Framework (TCF) commits to training frontline healthcare staff in brief intervention in smoking cessation so that treating tobacco use becomes a core part of their work. All healthcare staff have a responsibility to |
| | Indicator Classification | <input type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care |
| | | <input checked="" type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce |
| | | <input checked="" type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management |
| 4 | KPI Target | NSP 2013 target: 1,350 staff |
| 5 | KPI Calculation | Count |
| 6 | Data Source | Administrative databases. Data provided by health promotion trainers to Health Promotion Office to TCFIG Project Office |
| | Data Completeness | Includes community and acute based cessation services |
| | Data Quality Issues | Manual system |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 8 | Tracer Conditions | Frontline healthcare staff providing frontline services to patients/service users in hospitals and community settings who haven't previously undertaken such a course. |
| 9 | Minimum Data Set | Number of frontline healthcare staff who have been trained by Region. Professional breakdown of staff trained by Region. Number of courses delivered in each Region. |
| 10 | International Comparison | Yes, WHO tobacco indicators |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other |
| | | Please indicate who is responsible for monitoring this KPI: Health Promotion |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | Indicate the period to which the data applies |
| | | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) |
| | | <input checked="" type="checkbox"/> Monthly in arrears (June data reported in July) |
| | | <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) |
| | | <input type="checkbox"/> Rolling 12 months (previous 12 month period) |
| | | <input type="checkbox"/> Other – give details: |
| 14 | KPI Reporting Aggregation | <input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital |
| | | <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports? | <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: |
| 15 | Web link to data | http://www.hse.ie/eng/services/Publications/corporate/performance-reports/2012pr.html |
| 16 | Additional Information | |
| Contact details for Data | | Name: Marie Killeen, National Tobacco Control Office, Email : marie.killeen3@hse.ie Tel: 045 988207 |
| National Lead and Directorate | | Name: Gavin Maguire, Email : gavin.maguire@hse.ie Tel: 045 880400 Integrated Services Directorate |

Health and Wellbeing - Food Safety

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|-----------|---|--|
| 1 | KPI Title | Percentage of risk category 1,2 and 3 food businesses receiving inspection target as per minimum inspection frequency in FSAI Guidance Note Number 1 |
| 2 | KPI Description | FSAI Guidance Note Number 1 defines the risk categorisation of food establishments and sets the targets for their inspection frequency. Categories 1, 2 and 3 are the highest risk categories. |
| 3 | KPI Rationale | The HSE carries out statutory food safety controls as part of its responsibilities under a Service Contract with the FSAI. The purpose of the metric is to assess achievement with the minimum target set in FSAI Guidance Note Number 1. |
| | Indicator Classification | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care <input type="checkbox"/> Better Health and Wellbeing <input checked="" type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management |
| 4 | KPI Target | NSP 2013 target: 100% compliance with the minimum inspection target set in FSAI Guidance Note 1 for Categories 1, 2 and 3. |
| 5 | KPI Calculation | Numerator Number of planned inspections of Category 1, 2 and 3 premises YTD. Denominator: Total number of Category 1, 2 and 3 premises (as counted at the start of the year). It is expressed as a percentage and is interpreted as YTD delivery on annual target Quarter 1 should be 25%, Quarter 2 should be 50 % of target, Quarter 3 should be 75% of target, Quarter 4 should be 100% of target achieved. |
| 6 | Data Source | Data is collected from the food control visit records which are inputted by EHOs at local PEHO area level. |
| | Data Completeness | Data is complete with 100% coverage. |
| | Data Quality Issues | There will be three IT systems and manual recording of data during 2013 as the service migrates to the national |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 8 | Tracer Conditions | All Category 1 2 and 3 food business establishments are included. Categories 4, 5 and 6 are excluded. |
| 9 | Minimum Data Set | Number of planned inspections of category 1 2 and 3 food business establishments. |
| 10 | International Comparison | All EU countries would record similar data, however the risk categorisation is not the same, therefore numbers are not comparable. |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: PEHO and RCEHO |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period) |
| 14 | KPI Reporting Aggregation | <input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports ? | <input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input checked="" type="checkbox"/> Other – give details: FSAI Service Contract Section 48 (8) Annual Report, Annual Report on MANCP |
| 16 | Web link to data | http://www.hse.ie/eng/services/Publications/corporate/HSE_Monthly_Performance_Reports_.html Data is also reported in the FSAI Annual Report and is reported to the EU in the Annual Report on the Multi Annual National Control Plan (MANCP). www.fsai.ie |
| 17 | Additional Information | |
| | Contact details for Data | Mary Keane, RCEHO South, Tel: 087 8177134, Email: mary.keane1@hse.ie |
| | National Lead / Directorate | Gavin Maguire, Assistant National Director, Environmental health and Emergency Planning, Email: gavin.maguire@hse.ie John Keegan, Principal Officer, Department of Health, Tel: 01 635 4030 |

Health and Wellbeing - Cosmetic Product Safety

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|----|---|--|
| 1 | KPI Title | Number of cosmetic products sampled for chemical analysis. |
| 2 | KPI Description | This metric measure the number of cosmetic products sampled for compliance with the EU (Cosmetic Product) Regulations 2004 as amended. |
| 3 | KPI Rationale | The HSE is responsible for the enforcement of these Regulations. Sampling is required to ensure the safety of cosmetic products on the Irish market for use by consumers. |
| | Indicator Classification | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care <input type="checkbox"/> Better Health and Wellbeing <input checked="" type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management |
| 4 | KPI Target | NSP 2013 target: 540 |
| 5 | KPI Calculation | Number of cosmetic products sampled for chemical analysis. |
| 6 | Data Source | Data is collected manually at PEHO office level. |
| | Data Completeness | It is reported in the EHO activity return and collated regionally and nationally. |
| | Data Quality Issues | The data is 100% complete |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 8 | Tracer Conditions | Cosmetic product retailers to which the the EU (Cosmetic Product) Regulations 2004 as amended apply |
| 9 | Minimum Data Set | Number of samples taken for chemical analysis to which the EU (Cosmetic Product) Regulations 2004 as amended apply |
| 10 | International Comparison | Irish Medicines Board report on activities to EU |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other Please indicate who is responsible for monitoring this KPI: PEHO and RCEHO |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period) |
| 14 | KPI Reporting Aggregation | <input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports ? | <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: |
| 16 | Web link to data | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html |
| 17 | Additional Information | During 2013 the Environmental Health Service will be migrating to a new Environmental Health Information System from the existing manually collected activity report. |
| | Contact details for Data | Mary Keane, RCEHO South, Tel: 087 8177134, Email: mary.keane1@hse.ie |
| | National Lead / Directorate | Gavin Maguire, Assistant National Director, Environmental health and Emergency Planning, Email: gavin.maguire@hse.ie John Keegan, Principal Officer, Department of Health, Tel: 01 635 4030 |

Promoting and Protecting Health - Cosmetic Product Safety

| | | |
|---|---|---|
| 1 | KPI Title | All designated ports and airports to receive an inspection to audit compliance with the International Health Regulations 2005. |
| 2 | KPI Description | All designated ports and airports receive a full programmed inspection to audit compliance with the International Health Regulations 2005. |
| 3 | KPI Rationale | To assist in international disease control, the WHO under the International Health Regulations requires country to designate Ports and Airport that will meet its requirements. The eight Sea and Airports in Ireland which have been designated for the purposes of the International Health Regulations 2005 must comply with the core capacity requirements as per this legislation. |
| | Indicator Classification | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care <input checked="" type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/> |
| 4 | KPI Target | NSP 2013 Target: 8 |
| 5 | KPI Calculation | Numerator : The number of designated Airports (3) and Seaports (5) which received an IHR audit. The data is expressed as a number of audits. |
| 6 | Data Source | The data is recorded in the local PEHO activity report which is collated regionally and nationally each quarter. The data is complete for the specific offices to which the data applies and there are no quality issues. |
| | Data Completeness | |
| | Data Quality Issues | |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 8 | Tracer Conditions | Only the designated ports and airports in Ireland under the International Health Regulations are included |
| 9 | Minimum Data Set | Audit numbers of 8 designated ports and airports |
| 10 | International Comparison | This metric is to assess compliance with a WHO legal requirement. |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other Please indicate who is responsible for monitoring this KPI: PEHO and RCEHO |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period) |
| 14 | KPI Reporting Aggregation | <input type="checkbox"/> National <input type="checkbox"/> Regional <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input checked="" type="checkbox"/> Other – give details: PEHO office level. |
| 15 | KPI is reported in which reports ? | <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: |
| 16 | Web link to data | http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html |
| 17 | Additional Information | |
| Contact details for Data Manager / Specialist Lead | | Mary Keane, Regional Chief Environmental Health Officer - South, HSE, Tel: 059 9136582, mary.keane1@hse.ie |
| National Lead / Directorate | | Gavin Maguire, Assistant National Director, Environmental health and Emergency Planning, Email: gavin.maguire@hse.ie Dora Hennessy, Principal Officer, Department of Health, Tel: 01 635 4332 |

Health and Wellbeing - Health Inequalities

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|----|------------------------------------|--|
| 1 | KPI Title | The number of PCTs who have completed, at a minimum, Step 1 of a Community Health Needs Assessment (CHNA) |
| 2 | KPI Description | CHNA is a 6 step HSE planning tool that enables services to make the decisions needed to prioritise resources towards addressing health inequalities. It is linked to planning cycles and ensures that agreed action takes place & incorporated into policy, plans and practice. The tool will explicitly incorporate a health inequalities focus. The full needs assessment is only done once all 6 stages have been completed. The National Primary Care Office Resource Pack: Community Health Needs Assessment in Primary Care. Version 4. March 2011 (HSE 2011) can be downloaded (refer to Section 17) |
| | KPI Rationale | Appropriate and timely use of primary care services can help to identify and treat disease at an early stage. In terms of Access, Treatment & Outcomes, lower income & marginalized groups or groups with greater health needs can disproportionately experience for e.g. Barriers in accessing health care; Lower rates of prevention and screening; Equal or lower rates of specialist services, surgical procedures and diagnostic procedures; Different treatment, medication, referrals The measurement of inequalities is critical in order to be able to understand the problem and assess the impact of action required (WHO, 2008). The development and implementation of national healthcare standards will be an important driver in this regard. The vision for quality and safety in Irish health care, as laid out in, for example, the HIQA National Standards for Safer Better Healthcare, the HSE Health Inequalities Framework, the Health Promotion Strategic Framework include dimensions such as patient centredness, equity, effectiveness, efficiency and promoting The health equity audit process will strengthen the HSE's ability to measure and address health inequalities in 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). <input type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care <input type="checkbox"/> Better Health and Wellbeing <input checked="" type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/> |
| 4 | KPI Target | In 2013 20 PCTs will have completed, at a minimum, Step 1 of a CHNA |
| 5 | KPI Calculation | The number of PCTs who have completed, at a minimum, Step 1 of a CHNA |
| 6 | Data Source | CSO data; HealthStat; Relevant RDO/LHO level reports/audits; PCT level data – including GP data; local health service access/utilisation figures; local health service provision data; hospital outpatient data; data from local statutory/community/voluntary bodies |
| | Data Completeness | |
| | Data Quality Issues | |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 8 | Tracer Conditions | An area assessment that will profile information to inform the PCT of the state of health and social care needs of the population - especially to address the health inequalities that are known to exist at PCT level - especially amongst lower income and marginalised groups in terms of health service access/treatment/outcomes, other services, transport, education, housing, sanitation etc Each PCT will complete: 1. A Demography Profile; 2. A Health Status Profile; 3. A Profile of Health and Social Services available in the community; 4. A Profile of other public services within the community & 5. A Profile of all other services including voluntary services within the community |
| 9 | Minimum Data Set | The completed profiles will indicate areas where health inequalities are likely to exist and will require further analysis - for example lower breastfeeding rates by lower income women and travellers; lower uptake of screening programmes by medical card holders; adults with limited literacy skills are less likely to take part in prevention programmes, know about their illness and medicines or have their chronic illness under control. Successful completion of Stage 1 of the CHNA will involve: 1. Approval from PCT management to proceed with Stage 1 of the CHNA. 2. Completion of the HSE Health Inequalities Training programme by key staff involved in the CHNA 3. Staff member appointed to co-ordinate the work 4. Put in place a community stakeholder mechanism 5. Dimension(s) of equity agreed - for example, socio-economic status, age, geographic location etc 6. Partner(s) identified to assist in conducting the profiles e.g. university/institute of IT technology/researcher |
| 10 | International Comparison | |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: Eddie Ward |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input checked="" type="checkbox"/> Rolling 12 months (previous 6 month period) |
| 14 | KPI Reporting Aggregation | <input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports ? | <input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: |
| 16 | Web link to data | www.hse.ie |
| | Additional Information | The National Primary Care Office Resource Pack: Community Health Needs Assessment in Primary Care. Version 4. March 2011 (HSE 2011) and other relevant documentation can be accessed at: http://hsenet.hse.ie/HSE_Central/IntegratedServices/PerformanceandFinancialManagement/AcutePrimaryandCommunityCare/HealthPromotion/equityaudit.htm |

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| Contact details for Data Manager / Specialist Lead | Eddie Ward e-mail: eddie.ward@hse.ie tel: (043) 334-2031, Brian Neeson e-mail: brian.neeson@hse.ie tel: (061) 483257 |
| National Lead and Directorate | Dr Kevin Kelliher, Health Protection, Integrated Services Directorate, 061 483347 |

Health and Wellbeing - Health Inequalities

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|---|---|---|
| 1 | KPI Title | The number of hospitals who have completed, at a minimum, Stage 1 of the 6 stage Health Equity Audit (HEA) |
| 2 | KPI Description | HEA is a 'looping' 6 stage HSE planning tool that enables services to make the decisions needed to prioritise resources towards addressing health inequalities. it is linked to planning cycles and ensures that agreed action takes place & incorporated into policy, plans and practice. The full audit is only done once all 6 stages of the HEA have been completed The HSE Health Equity Audit Guide, 2011 is available to download (refer to Section 17) |
| 3 | KPI Rationale | Appropriate and timely use of hospital services can help to identify and treat disease at an early stage. In terms of Access, Treatment & Outcomes, lower income & marginalized groups or groups with greater health needs can disproportionately experience for e.g. Barriers in accessing health care; Lower rates of prevention and screening; Equal or lower rates of specialist services, surgical procedures and diagnostic procedures; Different treatment, medication, referrals The measurement of inequalities is critical in order to be able to understand the problem and assess the impact of action required (WHO, 2008). The development and implementation of national healthcare standards will be an important driver in this regard. The vision for quality and safety in Irish health care, as laid out in, for example, the HIQA National Standards for Safer Better Healthcare, the HSE Health Inequalities Framework, the Health Promotion Strategic Framework include dimensions such as patient centredness, equity, effectiveness, efficiency and promoting The health equity audit process will strengthen the HSE's ability to measure and address health inequalities within hospitals. |
| | Indicator Classification | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care <input type="checkbox"/> Safe Care <input type="checkbox"/> Better Health and Wellbeing <input checked="" type="checkbox"/> Use of Information <input type="checkbox"/> <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/> |
| 4 | KPI Target | In 2013 5 hospitals will have completed, at a minimum, Stage 1 of a health equity audit |
| 5 | KPI Calculation | The number of hospitals who have completed, at a minimum, Stage 1 of a Health Equity Audit (HEA)+C51 |
| 6 | Data Source | Source data may include: CSO data; HealthStat; Hospital In-Patient Enquiry Scheme; National Perinatal Reporting System; Relevant regional/local reports/audits |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 8 | Tracer Conditions | Each hospital will 1. identify the factors driving health inequalities in their own hospital in regard to an issue(s) with highest impact eg cancer, CHD & ante-natal care attendance and the partners with expertise needed to work with them (e.g.migrant/traveller representative groups. 2. Identify the dimension of inequality to be audited, eg age, socio-economic group, ethnicity, gender & sexual orientation |
| 9 | Minimum Data Set | 1. Approval from hospital management to proceed with Stage 1 of the HEA. 2. Completion of the HSE Health Inequalities Training programme by key staff involved in the audit 3. Staff member appointed to co-ordinate the work 3. Problem/issue identified - for e.g. the need to address the high numbers of DNAs in outpatient clinics by groups in lower socio-economic groups, the need to address the high number of ethnic minority women not accessing ante-natal care etc |
| 10 | International Comparison | In England, health equity audit is a mandatory planning requirement to ensure that hospital plans for health and development prioritize those with greatest needs. HEA is used here to identify how fairly services or other resources are distributed in relation to the health needs of different groups and areas, and what the priority actions are to provide services relative to need For further information log on to http://www.dh.gov.uk/en/index.html |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: Eddie Ward |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input checked="" type="checkbox"/> Rolling 12 months (previous 6 month period) |
| 14 | KPI Reporting Aggregation | <input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports ? | <input checked="" type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: |
| 16 | Web link to data | www.hse.ie |
| 17 | Additional Information | The HSE Health Equity Audit Guide (2011) and other relevant documentation can be accessed at: http://hsenet.hse.ie/HSE_Central/IntegratedServices/PerformanceandFinancialManagement/AcutePrimaryandCommunityCare/HealthPromotion/equityaudit.html |
| Contact details for Data Manager / Specialist Lead | | Eddie Ward e-mail: eddie.ward@hse.ie tel: (043) 334-2031, Brian Neeson e-mail: brian.neeson@hse.ie tel: (061) 483257 |
| National Lead and Directorate | | Dr Kevin Kelliher, Health Protection, Integrated Services Directorate, 061 483347 |

Governance (QPS and Corporates): Health Care Associated Infection (HCAI)

| | | |
|-------------------------------|------------------------------------|---|
| 1 | KPI Title | Rate of MRSA bloodstream infections in acute hospitals per 1,000 bed days used |
| 2 | KPI Description | <p>Number of MRSA blood stream infections reported via EARS-Net per 1000 bed days used per quarter for each acute hospital. MRSA blood stream infections as a % of all Staphylococcus aureus (S.Aureus) infection in hospitals.</p> <p>MRSA: Meicillin-resistant Staphylococcus aureus (MRSA) is a type (strain) of staph bacteria that does not respond to some antibiotics that are commonly used to treat staph infections. The following data are included in each report:</p> <ul style="list-style-type: none"> • The number of S. aureus isolates, including the number of MRSA isolates. • The percentage MRSA • The S. aureus and MRSA rates per 1,000 bed-days used <p>Bed Days Used: This is based on the average number of available acute in-patient beds during the previous month, and not on the total bed capacity of a hospital. It does not include long-stay or day case (including dialysis) bed use, but does include acute psychiatric bed use.</p> |
| 3 | KPI Rationale | To indicate progress towards the goal of reducing MRSA in acute settings against the National target setting within the "Say No to Infection Strategy". |
| | Indicator Classification | <p>Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two).</p> <p><input type="checkbox"/> Person Centred Care <input checked="" type="checkbox"/> Effective Care</p> <p><input type="checkbox"/> Safe Care <input checked="" type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information</p> <p><input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management</p> |
| 4 | KPI Target | NSP 2013 Target: <0.060 per 1,000 bed days used. |
| 5 | KPI Calculation | <p>Under the case definition for EARSS, data are collected on the first bloodstream isolate of S. aureus per patient per quarter. The following data are included in each report:</p> <ul style="list-style-type: none"> • The number of S. aureus isolates, including the number of MRSA isolates. • The percentage MRSA • The S. aureus and MRSA rates per 1,000 bed-days used <p>Denominator: the beddays used.</p> |
| 6 | Data Source | Rate of MRSA comes from microbiology laboratories in acute hospitals and information on bed days used is provided by the HSE BIU acute Unit. |
| | Data Completeness | 100% participation by hospital laboratories |
| | Data Quality Issues | Does not distinguish between true bloodstream infections and blood culture contaminants. Does not indicate where bloodstream infections were acquired (community, reporting hospital or other healthcare setting). |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually Other |
| 8 | Tracer Conditions | Patients demographic details as well as EARS-net core data reference www.HPSC.ie |
| 9 | Minimum Data Set | Quarterly data supply from Hospital Microbiology laboratories as per EARS-Net protocol, the European Antimicrobial Resistance Surveillance Network (EARS-Net) collects information on antibiotic resistance of bacteria causing invasive infection. |
| 10 | International Comparison | Yes, European surveillance system: data can be compared with results from other participating countries |
| 11 | KPI Monitoring | <p>KPI will be monitored on a (please indicate below) basis:</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other</p> <p>Please indicate who is responsible for monitoring this KPI: Hospital Manager</p> |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <p><input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity)</p> <p><input type="checkbox"/> Monthly in arrears (June data reported in July)</p> <p><input checked="" type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2)</p> <p><input type="checkbox"/> Rolling 12 months (previous 12 month period)</p> |
| 14 | KPI Reporting Aggregation | <p><input checked="" type="checkbox"/> National <input type="checkbox"/> Regional <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital</p> <p><input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details:</p> |
| 15 | KPI is reported in which reports ? | <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: |
| 16 | Web link to data | http://www.hpsc.ie/hpsc/A-Z/MicrobiologyAntimicrobialResistance/EuropeanAntimicrobialResistanceSurveillanceSystemEARSS/EARSSurveillanceReports/ |
| 17 | Additional Information | |
| Contact details for Data | | Dr. Robert Cunney, HPSC robert.cunney@hse.ie Tel: 01 8765300 |
| National Lead and Directorate | | Dr. Philip Crowley, National Director Quality and Patient Safety Tel: 01 635 2038 Dr. Eibhlin Connolly, Deputy Chief Medical Officer, Dept. of Health, Tel: 635 4025 |

Governance (QPS and Corporates): Health Care Associated Infection (HCAI)

| | | |
|----|---|---|
| 1 | KPI Title | Rate of new cases of Clostridium difficile associated diarrhoea in acute hospitals per 10,000 bed days used |
| 2 | KPI Description | National rate of new cases of Clostridium difficile associated diarrhoea in acute hospitals. Clostridium difficile: or "C. diff", is a species of Gram-positive bacteria of the genus Clostridium that causes severe diarrhea and other intestinal disease when competing bacteria in the gut flora have been wiped out by antibiotics. Bed Days Used: This is based on the average number of available acute in-patient beds during the previous month, and not on the total bed capacity of a hospital. It does not include long-stay or day case (including dialysis) bed use, but does include acute psychiatric bed use. |
| 3 | KPI Rationale | C. difficile is a potentially preventable healthcare associated infection that causes significant morbidity and mortality. It has caused a number of significant outbreaks in hospitals and long term care facilities. Rates are linked to antibiotic prescribing patterns and adherence with infection prevention and control procedures. |
| | Indicator Classification | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care <input checked="" type="checkbox"/> Effective Care |
| | | Safe Care <input checked="" type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> |
| | | Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/> |
| 4 | KPI Target | NSP 2013 Target: <2.5 |
| 5 | KPI Calculation | Numerator data: New cases of Clostridium difficile associated diarrhoea in acute hospitals as per national case definition. Denominator data: 10,000 bed days used |
| 6 | Data Source | Data provided by acute hospitals (microbiologists, infection control nurses, surveillance & laboratory scientists) to HPSC on a quarterly basis. |
| | Data Completeness | |
| | Data Quality Issues | |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 8 | Tracer Conditions | Antibiotic consumption rates in hospitals |
| 9 | Minimum Data Set | Protocol www.hpsc.ie |
| 10 | International Comparison | National case definition identical to EU and US case definitions therefore comparable with countries that use these case definitions. |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – Please indicate who is responsible for monitoring this KPI: Hospital Managers |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input type="checkbox"/> Rolling 12 months (previous 12 month period) |
| 14 | KPI Reporting Aggregation | <input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports ? | <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: |
| 16 | Web link to data | http://www.hpsc.ie/hpsc/A-Z/Gastroenteric/Clostridiumdifficile/CdifficileSurveillance/ |
| 17 | Additional Information | As reported in the Performance Report |
| | Contact details for Data | Dr Karen Burns, karen.burns1@hse.ie & Dr Fiona Roche, fionamary.roche@hse.ie Tel: 01 8765300 |
| | National Lead and Directorate | Dr. Philip Crowley, National Director Quality and Patient Safety Tel: 01 635 2038 Dr. Eibhlin Connolly, Deputy Chief Medical Officer, Dept. of Health, Tel: 635 4025 |

Governance (QPS and Corporates): Health Care Associated Infection (HCAI)

| | | |
|-------------------------------|----------------------------------|--|
| 1 | KPI Title | Median hospital total antibiotic consumption rate (DDD per 100 bed days used) per hospital |
| 2 | KPI Description | The total antibiotic consumption rate (defined daily dose per 100 bed days) per hospital Antibiotic Consumption Rate: Bed Days Used: This is based on the average number of available acute in-patient beds during the previous month, and not on the total bed capacity of a hospital. It does not include long-stay or day case (including dialysis) bed use, but does include acute psychiatric bed use. |
| 3 | KPI Rationale | Antibiotic use in hospitals is a risk factor for antimicrobial resistance, and for MRSA and <i>C. difficile</i> infection rates. Antibiotic use also represents a major cost for hospitals |
| | Indicator Classification | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care <input checked="" type="checkbox"/> Effective Care Safe Care <input checked="" type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input checked="" type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/> |
| 4 | KPI Target | NSP 2013 Target: 83.7 |
| 5 | KPI Calculation | The principle measure of antibiotic consumption for each hospital is the inpatient antibiotic consumption rate, expressed as DDD (defined daily dose) per 100 bed days used. |
| 6 | Data Source | Hospital Pharmacies to HPSC |
| | Data Completeness | Data provided by 95% of acute hospitals |
| | Data Quality Issues | Does not represent prescription level data. Does not indicate appropriateness of antibiotic use (some hospitals may have a high level of antibiotic use that is appropriate to their patient population. Some hospital pharmacies are unable to provide data due to lack of an appropriate IT system. |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 8 | Tracer Conditions | Antibiotic consumption rate |
| 9 | Minimum Data Set | Protocol www.hpsc.ie |
| 10 | International Comparison | Hospital antibiotic consumption data collected as part of ESAC-Net: data comparable with other participating European countries |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other Please indicate who is responsible for monitoring this KPI: Hospital Managers/ Pharmacists |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Biannual <input type="checkbox"/> Rolling 12 months (previous 12 month period) |
| 14 | KPI Reporting Aggregation | <input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports | <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: |
| 16 | Web link to data | http://www.hpsc.ie/hpsc/A-Z/MicrobiologyAntimicrobialResistance/EuropeanSurveillanceofAntimicrobialConsumptionESAC/SurveillanceReports/ |
| 17 | Additional Information | Reports on hospital antibiotic consumption for participating European countries available at www.ecdc.eu |
| Contact details for Data | | Dr. Robert Cunney, HPSC robert.cunney@hse.ie Tel: 01 8765300 |
| National Lead and Directorate | | Dr. Philip Crowley, National Director Quality and Patient Safety Tel: 01 635 2038 Dr. Eibhlin Connolly, Deputy Chief Medical Officer, Dept. of Health, Tel: 635 4025 |

Governance (QPS and Corporates): Health Care Associated Infection (HCAI)

| | | |
|--------------------------------------|---|---|
| 1 | KPI Title | Alcohol Hand Rub consumption (litres per 1,000 bed days used) |
| 2 | KPI Description | This is the volume of alcohol rub used by hospitals, which is an acceptable method of assessing hand hygiene compliance. It is expressed as volume (in litres) per 1000 beddays used in the hospital. It excludes alcohol rub that is used for pre-operative surgical 'scrub'. Bed Days Used: This is based on the average number of available acute in-patient beds during the previous month, and not on the total bed capacity of a hospital. It does not include long-stay or day case (including dialysis) bed use, but does include acute psychiatric bed use. |
| 3 | KPI Rationale | Alcohol based hand rubs are recommended as a primary means of hand hygiene in the Irish national guidelines. Measurement of alcohol hand rub consumption is a process indicator for hand hygiene compliance. |
| | Indicator Classification | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care <input checked="" type="checkbox"/> Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management |
| 4 | KPI Target | NSP 2013 Target: 25 Litres per 1,000 bed days used |
| 5 | KPI Calculation | The rate of usage per hospital is calculated as per the total volume of hand rub consumed in litres per 1000 bed days used. This is measured quarterly and annually. Hospital activity data, bed days used are obtained from the Performance Management Unit of the HSE and is used to calculate the rate per hospital and expressed as litres/1000 bed days used. |
| 6 | Data Source | Hospital pharmacies and supplies departments (reporting to HPSC) |
| | Data Completeness | Reported by all acute hospitals |
| | Data Quality Issues | Does not distinguish between staff, patient and visitor use of alcohol hand gel. Hospitals reporting via supplies departments may have artificially high rates of use, due to batch delivery of supplies. |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 8 | Tracer Conditions | Alcohol Hand Rub consumption |
| 9 | Minimum Data Set | Protocol www.hpsc.ie |
| 10 | International Comparison | Internationally recognised process indicator, allowing direct comparison with data from other countries. |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: Hospital Managers |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input checked="" type="checkbox"/> Biannually <input type="checkbox"/> Rolling 12 months (previous 12 month period) |
| 14 | KPI Reporting Aggregation | <input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports ? | <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input checked="" type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: |
| 16 | Web link to data | http://www.hpsc.ie/hpsc/A-Z/Gastroenteric/Handwashing/AlcoholHandRubConsumptionSurveillance/ |
| 17 | Additional Information | |
| Contact details for Data | | Dr. Robert Cunney, HPSC robert.cunney@hse.ie Tel: 01 8765300 |
| National Lead and Directorate | | Dr. Philip Crowley, National Director Quality and Patient Safety Tel: 01 635 2038 Dr. Eibhlin Connolly, Deputy Chief Medical Officer, Dept. of Health, Tel: 635 4025 |

Governance (QPS and Corporates): Health Care Associated Infection (HCAI)

| | | |
|-------------------------------|----------------------------------|---|
| 1 | KPI Title | % compliance of hospital staff with the World Health Organisation's (WHO) 5 moments of hand hygiene using the national hand hygiene audit tool |
| 2 | KPI Description | Compliance of hospital staff with the World Health Organisations (WHO) 5 moments of hand hygiene using the national hand hygiene audit tool. % compliance by healthcare staff with WHO 5 moments of hand hygiene: 7 wards to be audited, 30 hand hygiene opportunities per ward and 210 opportunities per hospital. Procedure outlined in national protocol (http://www.hpsc.ie/hpsc/A-Z/Gastroenteric/Handwashing/AuditTools/File,12660,en.pdf) |
| 3 | KPI Rationale | Hand hygiene is one of the most effective means of reducing healthcare associated infection (HCAI). However, compliance by healthcare workers with recommended hand hygiene frequencies and techniques has been reported as suboptimal. WHO recommends direct observation (hand hygiene audit) as the gold standard of measuring adherence to hand hygiene guidelines. |
| | Indicator Classification | Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). <input type="checkbox"/> Person Centred Care <input type="checkbox"/> Effective Care <input checked="" type="checkbox"/> Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input type="checkbox"/> Governance, Leadership and Management |
| 4 | KPI Target | NSP 2013 Target: 90% |
| 5 | KPI Calculation | Count |
| 6 | Data Source | Observational audit of hand hygiene compliance by healthcare staff in hospitals. National lead auditors trained and validated at national training sessions conduct audit. |
| | Data Completeness | Complete reporting by all acute hospitals. |
| | Data Quality Issues | No external validation of observational audits: risk of observer bias and "Hawthorne" effect |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 8 | Tracer Conditions | Alcohol hand rub usage in hospitals, Clostridium Difficile and MRSA Rates |
| 9 | Minimum Data Set | Compliance with WHO 5 moments of hand hygiene |
| 10 | International Comparison | Broad comparisons can be made with other countries that use WHO methodology, however the exact method used to collect the data (sample size, auditor) varies from country to country |
| 11 | KPI Monitoring | KPI will be monitored on a (please indicate below) basis: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: Hospital Managers |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input checked="" type="checkbox"/> Biannual |
| 14 | KPI Reporting Aggregation | <input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input type="checkbox"/> LHO Area <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports | <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: |
| 16 | Web link to data | http://www.hpsc.ie/hpsc/A-Z/Gastroenteric/Handwashing/HandHygieneAudit/ |
| 17 | Additional Information | |
| Contact details for Data | | Ms Sheila Donlon, HPSC sheila.donlon1@hse.ie Tel: 01 8765300 |
| National Lead and Directorate | | Dr. Philip Crowley, National Director Quality and Patient Safety Tel: 01 635 2038 Dr. Eibhlin Connolly, Deputy Chief Medical Officer, Dept. of Health, Tel: 635 4025 |

Governance (QPS and Corporates): Health Care Associated Infection: Antibiotic Consumption

| | | |
|--|------------------------------------|---|
| 1 | KPI Title | Consumption of antibiotics in community settings (defined daily doses per 1,000 inhabitants per day) |
| 2 | KPI Description | Consumption of antibiotics in ambulatory (non-hospital) settings |
| 3 | KPI Rationale | Community antibiotic use is strongly linked to antimicrobial resistance, which is a major public 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). <input type="checkbox"/> Person Centred Care <input checked="" type="checkbox"/> Effective Care <input checked="" type="checkbox"/> Safe Care <input type="checkbox"/> Better Health and Wellbeing <input type="checkbox"/> Use of Information <input type="checkbox"/> Workforce <input type="checkbox"/> Use of Resources <input checked="" type="checkbox"/> Governance, Leadership and Management <input type="checkbox"/> |
| 4 | KPI Target | NSP 2013 target:23 |
| 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. (Accounts for at least 95% of commu |
| 6 | Data Source | Since March 2007 the Health Protection Surveillance Centre (HPSC) has been co-ordinating the publication of data relating to antimicrobial consumption for acute public hospitals in Ireland. |
| | Data Completeness | 100% complete |
| | Data Quality Issues | Does not represent prescription level data |
| 7 | Data Collection Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 8 | Tracer Conditions | 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: <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: Please indicate who is responsible for monitoring this KPI: _____ |
| 12 | KPI Reporting Frequency | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Bi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Other – give details: |
| 13 | KPI report period | <input type="checkbox"/> Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) <input type="checkbox"/> Monthly in arrears (June data reported in July) <input type="checkbox"/> Quarterly in arrears (quarter 1 data reported in quarter 2) <input checked="" type="checkbox"/> Bi-annually |
| 14 | KPI Reporting Aggregation | <input checked="" type="checkbox"/> National <input checked="" type="checkbox"/> Regional <input checked="" type="checkbox"/> LHO Area <input type="checkbox"/> Hospital <input checked="" type="checkbox"/> County <input type="checkbox"/> Institution <input type="checkbox"/> Other – give details: |
| 15 | KPI is reported in which reports ? | <input type="checkbox"/> Corporate Plan Report <input checked="" type="checkbox"/> Performance Report (NSP/CBP) <input type="checkbox"/> CompStat <input type="checkbox"/> Other – give details: |
| 16 | Web link to data | http://www.hpsc.ie/hpsc/A-Z/MicrobiologyAntimicrobialResistance/EuropeanSurveillanceofAntimicrobialConsumptionESAC/SurveillanceReports/ |
| 17 | Additional Information | Reports on community antibiotic consumption for participating European countries available at www.ecdc.eu |
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