



Performance Profile

April – June 2024



Contents

Building Trust and Confidence across Staff and our Service Users	3
Quality and Safety	4
Safeguarding	6
Emergency Management	7
Improving Access to Care and Performance	8
Health and Wellbeing	9
Public Health	12
Environmental Health	15
COVID-19 Vaccination Programme	17
National Screening Service	18
Community Services Scorecard/Heatmap	21
Primary Care Services	26
Social Inclusion	32
Palliative Care Services	33
Older Persons' Services	34
Mental Health Services	37
Disability Services	39
Community Services Update	42
Acute Hospital Services Scorecard/Heatmap	55
Acute Hospital Services	58
Cancer Services	65
Acute Care Update	67
National Ambulance Service	69
Resource Optimisation Delivering Accountable Implementation	73
Primary Care Reimbursement Services	74
EU and North South Unit	75
Capital and Estates	78
Internal Audit	79
Finance	81
Human Resources	90
Appendices	136
Appendix 1: Report Design	137
Appendix 2: Data Coverage Issues	138
Appendix 3: Hospital Groups	144
Appendix 4: Community Health Organisations	145

Data used in this report refers to the latest performance information available at time of publication

Building Trust and Confidence across Staff and our Service Users

Quality and Safety

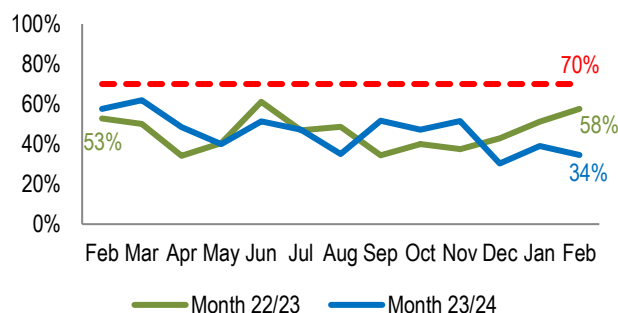
Performance area	Reporting Level	Target/ Expected Activity	Freq	Current Period12M/ 4Q	SPLY YTD 12M/4Q	SPLY Change	Current (-2)	Current (-1)	Current
Serious Incidents Number of incidents reported as occurring (included: Category 1, who was involved=service user)	National		M	835	933	-98	69	60	55
	Acute Hospital Services		M	523	562	-39	37	42	38
	Community Services		M	312	371	-59	32	18	17
% of reviews completed within 125 days of category 1 incidents from the date the service was notified of the incident*	National	70%	M	● 45%	39%	6%	30%	39%	34%
	Acute Hospital Services	70%	M	● 51%	42%	9%	32%	48%	38%
	Community Services	70%	M	● 15%	28%	-13%	20%	0%	0%
Incident Reporting % of reported incidents entered onto NIMS within 30 days of notification of the incident***	National	70%	Q	● 78%	74%	4%	77%	78%	83%
	Acute Hospital Services	70%	Q	● 78%	75%	3%	76%	78%	85%
	Community Services	70%	Q	● 79%	74%	5%	79%	78%	81%
Extreme and major incidents as a % of all incidents reported as occurring**	National	<1%	Q	● 0.5%	0.5%	-	0.5%	0.5%	0.5%
	Acute Hospital Services	<1%	Q	● 0.6%	0.6%	-	0.6%	0.5%	0.6%
	Community Services	<1%	Q	● 0.4%	0.5%	-0.1%	0.4%	0.3%	0.4%

* Current - reflecting compliance for incidents notified in February 2024. Current 12M rolling period reflecting compliance March 2023 - February 2024.

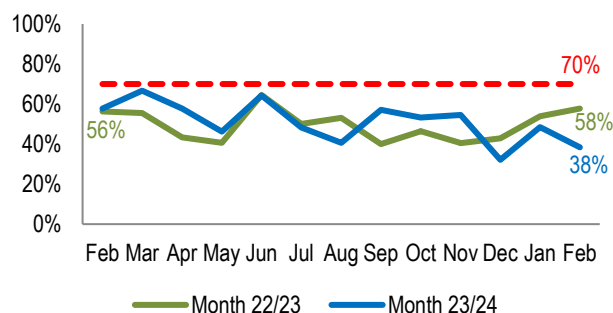
** Current - reflecting compliance for incidents occurring in Q2 2024. Current 4Q rolling period reflecting compliance Q3 2023-Q2 2024

*** Current - reflecting compliance for incidents occurring in Q1 2024. Current 4Q rolling period reflecting compliance Q2 2023-Q1 2024

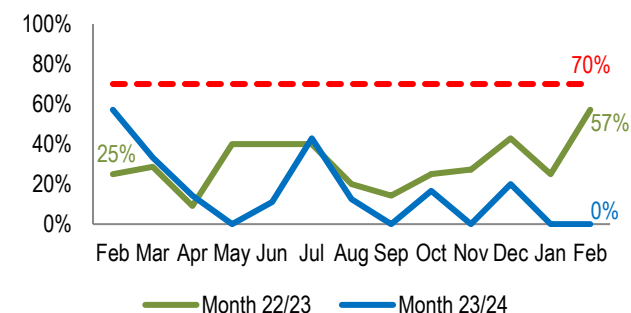
% of serious incidents requiring review completed within 125 days of notification of the incident - National



% of serious incidents requiring review completed within 125 days of notification of the incident - Acute



% of serious incidents requiring review completed within 125 days of notification of the incident - Community



Serious Reportable Events

Service Area	Total SRE occurrence (in-month)	May 2024	Apr 2024	Mar 2024	Feb 2024	Jan 2024	Dec 2023	Nov 2023	Oct 2023	Sep 2023	Aug 2023	Jul 2023
Acute Hospitals [inc. National Ambulance Service]	37	52	56	63	63	83	63	56	56	54	55	57
Community Services	13	27	44	25	28	25	27	33	22	20	29	24
Total*	50	79	100	88	91	108	90	89	78	74	84	81

*Note: For previous 12 months values changed from time of last reporting. NIMS is a dynamic system and SRE details may be updated at any time.

50 SREs were reported as occurring in June 2024 and registered in NIMS up to 8th July 2024. 23 SREs were reported as patient falls, 12 were reported as Stage 3 or 4 pressure ulcers and the remaining 15 SREs reported comprised 6 SRE categories.

Your Service Your Say' Policy

Performance area	Reporting Level	Target/ Expected Activity	Freq	Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current
% of complaints investigated within 30 working days of being acknowledged by the complaints officer (Q1 at 05.07.2024)*	National	75%	Q	● 74.9%	66.4%	+8.5%	70.9%	74.7%	74.9%
	Acute Hospital Services	75%	Q	● 75.4%	65.4%	+9.9%	72.7%	76.3%	75.4%
	Community Services	75%	Q	● 72.9%	74.4%	-1.4%	63.8%	61.5%	72.9%

*Part of the HSE centre restructure process, % of complaints investigated within 30 working days of being acknowledged by the complaints officer is now under Your Service Your Say' Policy heading

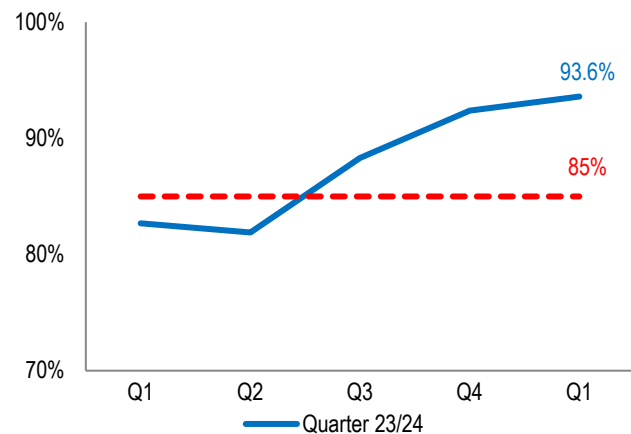
Your Service Your Say' Policy

Performance area	Reporting Level	Target/ Expected Activity	Freq	Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current
% of complaints where an Action Plan is identified as necessary, is in place and progressing (Q1 at 05.07.2024)	National	65%	Q	● 86.8%	90.4%	-3.6%	87.3%	64.6%	86.8%
	Acute Hospital Services	65%	Q	● 90.2%	90.2%	0%	87.8%	82.0%	90.2%
	Community Services	65%	Q	● 60.5%	95.2%	-34.7%	80.4%	33.0%	60.5%

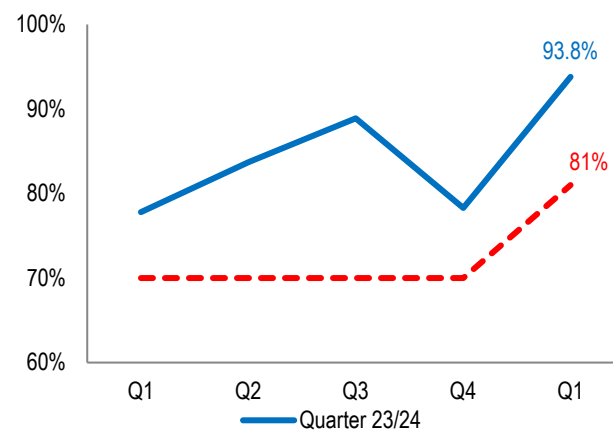
Safeguarding

Performance area	Target/ Expected Activity	Freq	Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current	Best performance	Outliers
% of community concerns that have been reviewed by a social worker on the Community Healthcare Organisation (CHO) Safeguarding and Protection Team and an initial response has been generated by a social worker on the Safeguarding and Protection Team within 3 working days – SC10	85%	Q-1M	● 93.6%	82.7%	+10.9%	88.3%	92.4%	93.6%	All CHOs reached target	
% of service concerns that have been reviewed by a social worker on the CHO Safeguarding and Protection Team where a response has been sent to the notifying service within 10 working days – SC11	81%	Q-1M	● 93.8%	77.8%	+16%	88.9%	78.3%	93.8%	All CHOs reached target	

% of community concerns reviewed and initial response generated within 3 working days



% of service concerns reviewed with response sent to the notifying service within 10 working days



Emergency Management

The HSE Emergency Management (EM) function supports HSE leaders and managers throughout the health service in planning, preparing for, responding to, and recovering from major emergencies. These efforts build resilience and develop service contingencies for identified hazards that could disrupt health service delivery. EM meets the HSE's statutory obligations as a Local Competent Authority for Seveso sites and serves as a prescribed body under the Planning Act for any licensed crowd events.

Pandemic Planning Group: EM directed the creation of a new HSE operational Pandemic Plan, which has been finalized and is awaiting approval from the EMT.

Regional Inter-Agency Response: EM is actively involved in the Interagency Major Emergency Management (MEM) structures through participation in the Regional Steering Groups (RSGs) and Regional Working Groups (RWGs). HSE EM consistently supports senior management teams with briefings and planning response arrangements.

SEVESO: Work is ongoing in cooperation with the two other Principal Response Agencies to review external emergency plans for Seveso sites in accordance with "Chemical Act (Control of Major Accident Hazards involving dangerous substances) Regulations 2015".

HSE Severe Weather: HSE Severe Weather Guidance is undergoing its annual review, and the updated document will be available from September 2024.

Crowd Events: Q2 is a busy period for events subject to planning regulations, such as concerts and festivals with over 5,000 attendees. It is also busy for events not governed by any statute, such as sporting events and country shows.

High Consequence Infectious Disease (HCID) Planning: High Consequence Infectious Disease (HCID) planning continues between Emergency Management and the HPSC Health Threats Preparedness program. Planning with international partners is ongoing.

Hospital Major Emergency Plans: EM continues to work with hospital colleagues in exercise planning using the EMERGO training system. EM West Office are collaborating with HMEP leads in the development of Emergency Department MCI Emergo exercises and exercises focused on Hospital Security Department roles, responsibilities and response during activation of HMEP. Some of these exercises are complete, further exercises are planned for Q3/Q4.

Mass Casualty Incident (MCI) Framework: EM is supporting Acute Operations as they lead on the development of an integrated MCI Framework for the HSE.

Government Task Force (GTF) on Emergency Planning: EM continues to support the work of the GTF and updates are provided on key health related areas.

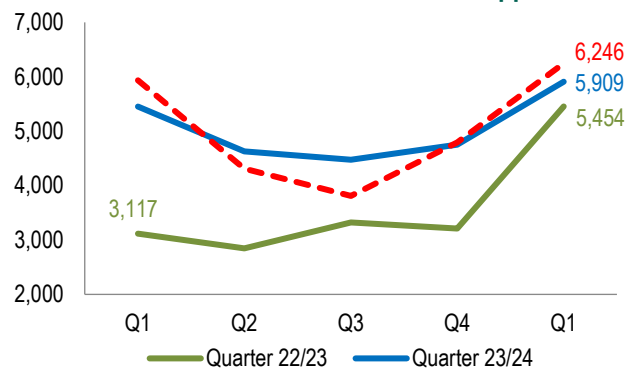
Business Continuity Management: EM completed the development of a BCM policy and guidance and documents will be submitted to EMT for approval.

Improving Access to Care and Performance

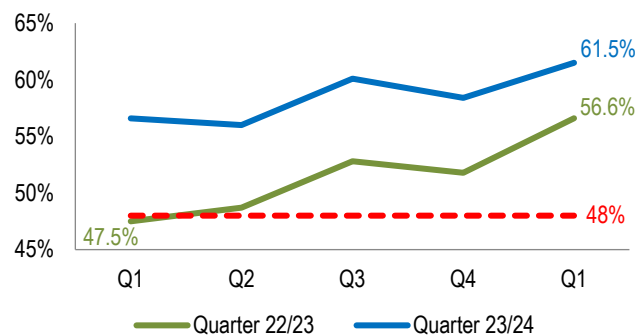
Health and Wellbeing

Performance area	Target/ Expected Activity	Freq	Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current	Best performance	Outliers
No. of smokers who received face to face or telephone intensive cessation support from a cessation counsellor – HWB27	6,246 YTD/ 20,648 FYT	Q-1Q	● 5,909	5,454	+455	4,475	4,754	5,909	DM HG (169.7%), IE HG (94.7%), UL HG (50.7%)	SAOLTA HG (-80.3%), CHO2 (-53.7%), CHO4 (-41.2%)
% of smokers on cessation programmes who were quit at four weeks – HWB26	48%	Q-1Q	● 61.5%	56.6%	+4.9%	60.1%	58.4%	61.5%		

Tobacco smokers – intensive cessation support



% of smokers quit at four weeks



Health and Wellbeing Update

MECC

Healthcare staff continue to complete the MECC Training Programme consisting of an eLearning component and an Enhancing Your Skills Workshop. The target for eLearning is under achieved nationally, due to pressures in the healthcare system. 1,267 staff completed the eLearning at the end of Q2 of 2024, which is 21% of the annual profiled target of 5,935 (HWB94) while 785 staff completed the Enhancing Your Skills Workshop, 43% annual profiled target of 1,826 (HWB95).

Under performance can be linked to reduced engagement in both CHO / Hospitals due to system pressures, and lack of managerial support for staff release due to time constraints. To reduce time barriers, the MECC eLearning training programme certification has been modified and a further updating of the eLearning is planned. The core eLearning now takes a total time of 3 hours (reduced from 4 hours) covering the six core modules. The two new modules on 'Talking about Overweight & Obesity' and 'Promoting Mental Health & Wellbeing' are available on completion of the core modules. Completion of the additional modules is encouraged and will now provide additional certification.

Nine dedicated posts to support MECC implementation were recruited as part of the Sláintecare Healthy Communities initiative and are actively engaging with services to support implementation.

The HRB Applied Partnership Award entitled "Implementation of Making Every Contact Count (MECC): Developing a collaborative strategy to optimise and scale-up MECC" has produced a policy brief with nine key recommendations to successfully roll-out the programme in Ireland. An implementation plan to address these recommendations was published in Q2 2024. The MECC Programme in collaboration with representatives from CHO / Hospital Groups hosted a Webinar in May entitled "Chronic Disease Prevention Works". The event aimed, to showcase the evidence base for MECC and to highlight examples of good practice nationally. The event successfully drew considerable interest, with 629 registrations, 299 live attendees, and 353 post-event YouTube views.

Communications to further promote the webinar recording will be circulated, in addition to other communications activities such as inclusion of articles in Health Matters later in the year.

***Data return 100%**

Tobacco smokers – intensive cessation support

Nationally, 5,909 smokers received intensive cessation support from a cessation counsellor at end of Q1 2024 (this metric is reported quarterly in arrears), which is -5.4% below the target of 6,246 and +8.3% ahead of the same period in 2023 (HWB27).

CHOs 1 and 3 have exceeded their targets to end of Q1.

Underperformance is noted within CHOs 2 (-53.7%), 4 (-41.2%), 5 (-13.2%), 6 (-7.7%), 7 (-30.9%), 8 (-18.3%) & 9 (-30.3%) as well as within the Saolta (-80.3%) and South/South West (-6.3%) Hospital Groups. Underperformance in the CHOs and Hospital Groups is directly related to unplanned leave and inability to recruit staff to backfill vacant posts. A new service was established in UL in 2023, with gaps in service remaining in Saolta in Q1 2024. A stop smoking service recommenced (following a gap in service due to staffing) at University Hospital Galway in May 2024.

***Data return 100%**

Online Cessation Support Services

The National Quitline continued to perform well in Q2 2024 with 4,728 smokers receiving online cessation support services (+29.4%) of the profiled target (HWB101) i.e. signed up for and subsequently activated a QUIT Plan on www.quit.ie. There was strong performance in online activity and traffic to www.quit.ie throughout Q1 2024 as a result of targeted QUIT campaign activity in January and March.

***Data return 100%**

% of smokers quit at four weeks

This metric measures the percentage of smokers who have signed up to the standardised HSE tobacco cessation support programme, who have set a quit

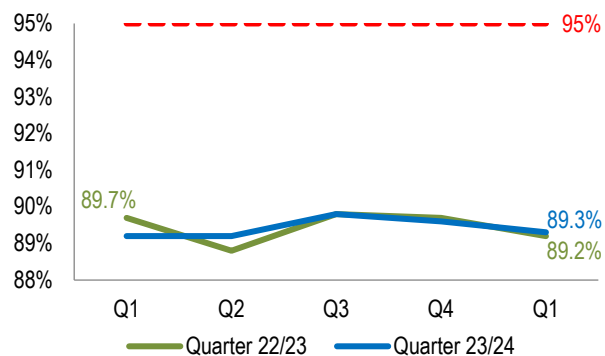
date and who are quit at four weeks and is reported quarterly, one quarter in arrears. Nationally, 61.5% of smokers remained quit at four weeks YTD March 2024, which is above target (+28% HWB26). This metric is a key quality metric and shows strong performance for the stop smoking service; this is contributed to by the introduction of free NRT for those engaging in a quit attempt with the support of the HSE. As a result, more people are quitting smoking using evidence-based treatments, which is resulting in more people quitting successfully, as reflected in this high 4-week quit rate.

***Data return 100%**

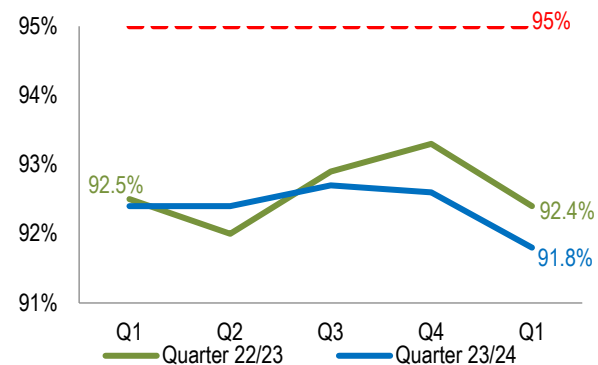
Public Health

Performance area	Target/ Expected Activity	Freq	Current Period YTD		SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current	Best performance	Outliers
% of children aged 24 months who have received (MMR) vaccine – HWB8	95%	Q-1Q	●	89.3%	89.2%	+0.1%	89.8%	89.6%	89.3%	No CHO reached target	CHO1 (84.4%), CHO9 (86.5%), CHO8 (88.9%)
% of children aged 24 months who have received three doses of the 6 in 1 vaccine – HWB4	95%	Q-1Q	●	91.8%	92.4%	-0.6%	92.7%	92.6%	91.8%	No CHO reached target	CHO1 (89%), CHO9 (89.4%), CHO5 (91%)

% of children 24 months – (MMR) vaccine



% of children 24 months – 3 doses of 6 in 1 vaccine



Public Health Update

Population Health Protection – Immunisation and Vaccinations

The World Health Organisation (WHO) has listed vaccine hesitancy among a number of global health threats. The WHO said that vaccination currently prevents up to three million deaths a year, and a further 1.5 million could be avoided if global coverage of vaccinations improved. The Vaccine Alliance established by the DoH is aimed at boosting the uptake of childhood vaccines and reducing vaccine hesitancy. This alliance is comprised of healthcare professionals, policymakers, patient advocates, students and representatives from groups most affected by vaccine hesitancy.

Vaccination uptake below targeted levels presents a public health risk in terms of the spread of infectious disease and outbreaks as herd immunity declines. Herd immunity is a form of immunity that occurs when the vaccination of a significant portion of a population (or herd) provides a measure of protection for individuals who have not developed immunity.

Public Health and the National Immunisation Office engage with Community Healthcare Operations supporting them to maximise the uptake of all publicly funded immunisation programmes through (1) the provision of advice regarding best practice and standardised delivery of immunisation programmes and (2) the development of national communication campaigns designed to promote immunisation uptake rates and provide accurate and trusted information to the public, healthcare professionals and staff, including working with the Vaccine Alliance. This approach is similar to the successful approach taken to increase the uptake of the HPV vaccine in girls over recent years.

Levels of coverage of primary childhood immunisation programmes (including 6 in 1 and MMR vaccines) have been lower than target for seven successive quarters. The impact of the pandemic accounts for some of the challenges over this time, including disruptions to vaccine programmes delivered through primary care. Wider concerns about vaccine safety emerged as a key factor across the population here and in many countries during the pandemic, consequent to issues of multiple COVID-19 vaccine requirements (resulting in vaccine fatigue), associated 'anti-vax' campaigns, which may impact on willingness to accept all

vaccines not just those linked to COVID-19. Populations may have different perceptions of risk consequent to lack of visibility or awareness of some (VPDs) Vaccine Preventable Diseases (due to overwhelming impact in media coverage of COVID-19 up until recently).

A Vaccine Task Force was established in December 2023 under the direction of the National Director of Public Health to coordinate activities to understand key drivers for low coverage of primary childhood immunisations (including examining data sources for coverage) and to inform strategies to increase coverage especially among higher risk populations. This work identified specific areas e.g. border counties, which had lowest vaccine coverage as well as specific populations and settings which required targeted intervention e.g. vulnerable migrants especially those in congregate settings. Work is in train to promote vaccinations among target populations and settings and to increase access. However, since January 2024, there has been concern about a rising risk from measles, due to outbreaks in several European countries, including UK which coupled with low MMR vaccine increased in the risk of importation of cases and sustained community transmission of measles. On January 31, under the direction of the Director of National Health Protection, a National Incident Management Team was convened to coordinate action to increase coverage of MMR in target populations especially children (according to national vaccine schedule), young adults (identified as vulnerable consequent to serological survey), health & care workers, vulnerable migrants (especially those in congregate settings), and specific areas, especially the border counties. The IMT developed a vaccine strategy and associate business case which is going before Cabinet on March 5th for approval. Depending on outcome of this proposal, it is anticipated that a communication strategy will be launched in early March to drive target population to vaccinators in primary care, occupational health services (for health and care workers), student health services (for university and college students) and HSE vaccine clinics (to be delivered by COVID-19 vaccinators). This programme will run for 12 weeks in the first instance.

To be determined but hopeful of positive increase in coverage secondary to coordinated efforts under the Measles IMT and in collaboration with the Vaccine

Task Force. Focus will initially be on MMR but it is hoped that a 'rising tide lifting all boats' effect will be seen with parents of young children re-engaging in primary childhood immunisation programmes and other groups engaging in catch-up programmes appropriately. This will be reviewed with collection of data.

The new regional structures coming into effect in 2024 also present an opportunity for stronger accountability and performance improvement for vaccine uptake at regional level.

% of children aged 24 months who have received the 6 in 1 vaccine

The 6 in 1 vaccine protects children against six diseases: Diphtheria, Hepatitis B, Haemophilus influenza type b (Hib), pertussis (whooping cough), polio and tetanus, all of which are very serious illnesses that can lead to death.

Nationally, the uptake rate for the 6-in-1 vaccine YTD (Q1 2024) (this metric is reported quarterly in arrears), is 91.8% against a target of 95% (-3.4%) (HWB4).

***Data return 88.9%**

% of children aged 24 months who have received the Measles, Mumps and Rubella (MMR)

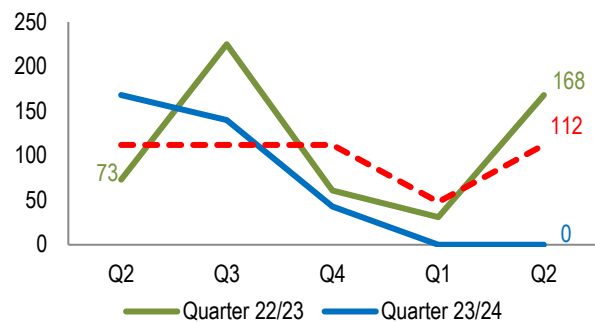
Nationally, the uptake rate for the Measles, Mumps, Rubella (MMR) YTD (Q1 2024) (this metric is reported quarterly in arrears), is 89.3% against a target of 95% (-6%) (HWB8).

***Data return 88.9%**

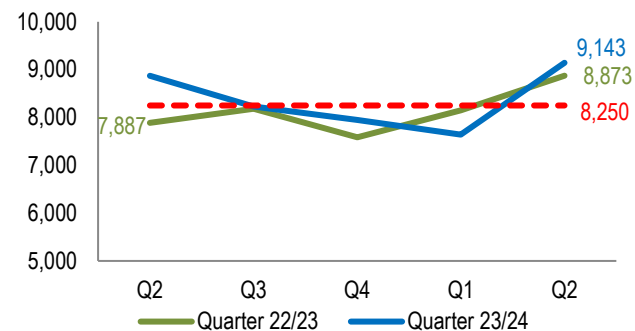
Environmental Health

Performance area	Target/ Expected Activity	Freq	Current Period YTD		SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current
No. of initial tobacco sales and / or nicotine inhaling product sales to minors test purchase inspections carried out – HWB29	160 YTD/ 384 FYT	Q	●	0	199	-199	43	0	0
Number of official food control planned, and planned surveillance, inspections of food businesses – HWB31	16,500 YTD/ 33,000 FYT	Q	●	16,784	17,022	-238	7,950	7,641	9,143

Number of initial tobacco sales to minors



Number of inspections of food businesses



Environmental Health Update

Food business establishments are routinely inspected to assess compliance with Official Food Control requirements. A total of 16,784 Planned and Planned Surveillance Inspections were carried out by the end of Q2. This meets the end of Q2 target.

Of those Planned and Planned Surveillance inspections that were carried out, 19% had either an unsatisfactory, unsatisfactory significant, unsatisfactory serious outcome. (Target <25% unsatisfactory).

Under the Planning and Development Acts, Planning Authorities are required to consult with the HSE for developments accompanied by an environmental impact statement. For these types of developments the HSE can make submissions that inform the planning process with regard to the protection of public health and the maximising of health gain from these developments. 100% of relevant consultation requests from planning authorities received a response from the Environmental Health Service by the end of Q2. Complexity of responses and the timing of requests from planning authorities can influence the completion of consultations.

Target is 95%.

Complaints are received from members of the public regarding matters that a complainant considers to be a risk to public health for example an unsafe foodstuff, an unhygienic food premises, tobacco being sold to minors, pests not being controlled and substandard cosmetic products. 98% of all complaints received by the NEHS by the end of Q2 were risk assessed within 1 working day. (Target is 95%). Complaints must be risk assessed to determine what course of action (if any) should be taken within one working day of receipt of the complaint. Responding to complaints remains a key priority.

The Environmental Health Service carries out monthly sampling under Regulation 9 of the Fluoridation of Water Supplies Regulations 2007 to ensure compliance with the statutory range of concentration of fluoride in fluoridated public drinking water supplies. By the end of Q2, 1,143 drinking water samples were taken to assess compliance which is a 7% shortfall of the target.

21 Inspections of E Cigarette Manufactures, Importers, Distributers and Retailers under E.U. (Manufacturer, Presentation and Sale of Tobacco and related Products) Regulations was completed which meets the Q2 target.

85 Sunbed Premises received a Planned inspection in Q2. This meets the target for Q2.

4 Mystery Shopping inspections were completed in Q2. 15 Test Purchases were completed in Q2 to assess compliance with the Sunbeds Act.

No initial tobacco sales and/or nicotine inhaling product sales to minors were completed in Q2. National Environmental Health Service is presently awaiting recruitment of additional resources and formal authorisation under new nicotine inhaling product legislation before enforcement can commence.

COVID-19 Vaccination Programme

The COVID-19 Spring Vaccination Programme concluded on June 30th, 2024, therefore there is no report for July - September. The COVID-19 Winter Vaccination Programme will commence on October 2nd, 2024.

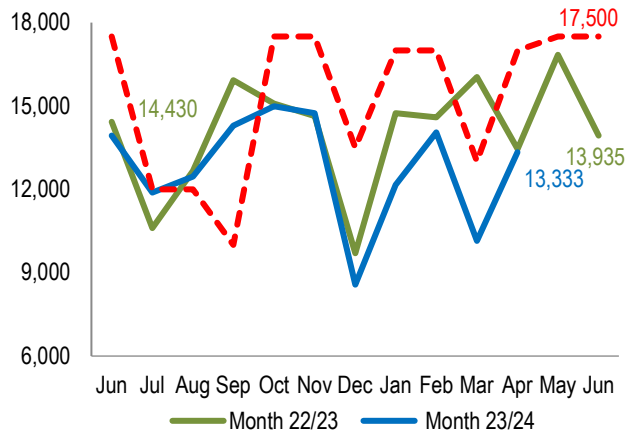
National Screening Service

National Screening Service Scorecard/Heatmap

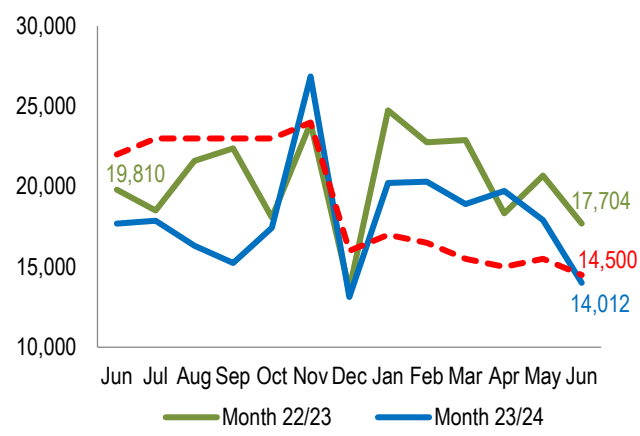
	KPI No.	Metric Title	Reporting Frequency	Expected Activity / Target	National YTD	% Var YTD	Current (-2)	Current (-1)	Current
Quality & Safety		BreastCheck							
	HWB35	% BreastCheck screening uptake rate	Q-1Q	70%			62%	62.7%	
Access and Integration		CervicalCheck							
	NSS2	No. of unique women who have had one or more satisfactory cervical screening tests in a primary care setting	M	94,000	111,124	18.2%	19,727	17,928	14,012

Performance area	Target/ Expected Activity	Freq	Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current
BreastCheck No. of women in the eligible population who have had a complete mammogram – HWB77	99,000 YTD/ 195,000 FYT	M	●	49,693	89,605	-39,912	13,333	
% BreastCheck screening uptake rate – HWB35	70%	Q-1Q				62%	62.7%	
CervicalCheck No. of unique women who have had one or more satisfactory cervical screening tests in a primary care setting – NSS2	94,000YTD/ 178,000 FYT	M	●	111,124	127,158	-16,034	19,727	17,928
% eligible women with at least one satisfactory cervical screening test in a five year period – NSS3	80%	Q-1Q	●	74%	73.7%	+0.3%	73.4%	72.9%
BowelScreen No. of clients who have completed a satisfactory BowelScreen FIT test -HWB82	82,500 YTD/ 148,000 FYT	M	●	72,843	82,023	-9,180	13,480	13,088
% BowelScreen screening uptake rate – HWB46	45%	Q-1Q	●	41.1%	49.4%	-8.3%	44.2%	42.5%
Diabetic RetinaScreen No. of Diabetic RetinaScreen clients screened with final grading result – HWB23	51,500 YTD/ 112,000 FYT	M	●	54,058	56,929	-2,871	9,274	11,054
% Diabetic RetinaScreen uptake rate – HWB47	69%	Q-1Q	●	58%	55.9%	+2.1%	58.6%	56.9%

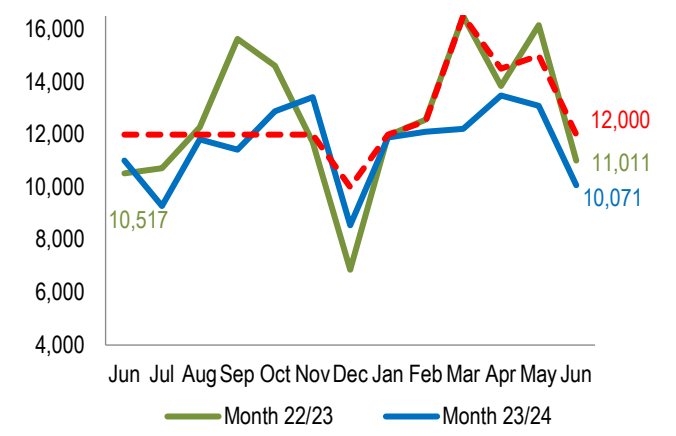
BreastCheck-number who had a mammogram



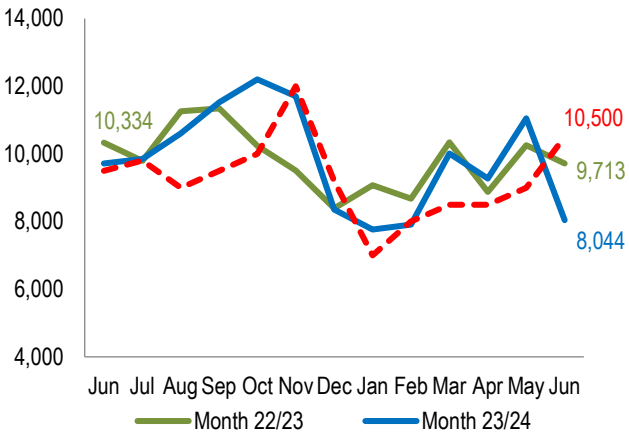
CervicalCheck-number screened



BowelScreen-number screened



RetinaScreen-number screened



National Screening Service Update

BreastCheck

No BreastCheck data for June 2024 due to AIRE deployment.

CervicalCheck

- The number of unique women who had one or more screening tests in a primary care setting in the period June 2024 notified to report date was 14,012 which was below the published target of 14,500 by 488 (3.4%).
- The number of unique women who had one or screening tests in a primary care setting year to date (Jan-Jun 2024) was 111,124 which is above the target of 94,000 by 17,124 (18.2%).
- Coverage for women aged 25-65 at the end of Q1 2024 was 74.0%
- Coverage for women aged 25-60 at the end of Q1 2024 was 79.4%
- Over 99% of women were issued a screening result within 4 weeks of their screening test.

The programme is operating within standard performance measures. The majority of women are receiving their results within 4 weeks from screening test and in many cases as early as 2 weeks (depending on HPV detected or not). CervicalCheck continues to promote screening uptake across multiple platforms and to target specific populations where uptake is lower.

BowelScreen

- The number of men and women who have completed a satisfactory BowelScreen FIT test in the period (June 2024) was 10,071 which is below the target of 12,000 by 1,929 (16.1%).
- The number of men and women who have completed a satisfactory BowelScreen FIT test year to date (Jan-Jun 2024) was 72,843 which is below the target of 82,500 by 9,657 (11.7%).
- Uptake for Q1 2024 was 41.1%

Waiting times for a colonoscopy for those that have a FIT positive test was recorded and was above the $\geq 90\%$ target at 91.9% within 20 working days in June 2024. Thirteen of the fifteen contracted colonoscopy centres which were

offering colonoscopies in June 2024 met the expected KPI of 90% within 20 days.

BowelScreen monitors colonoscopy capacity; invitations to participate are issued based on maximising available capacity.

Diabetic RetinaScreen

- The number of diabetics screened with a final grading result in the period June 2024 was 8,044 which is below the target of 10,500 by 2,456 clients (23.4%).
- The number of diabetics screened with a final grading result year to date (Jan-Jun 2024) was 54,058 which was above the target of 51,500 by 2,558 (5%).
- Uptake for Q1 2024 was 58%
- In Q2 92.6% of clients were issued a screening result within 3 weeks (target $>90\%$)

Further measures have been put in place to address the challenge in reducing the number of delayed screening appointments that have arisen following the move to one national screening provider. These measures are being actively monitored by the DRS Programme.

Community Services Scorecard/Heatmap

	KPI No.	Metric	Reporting Frequency	Expected Activity / Target	National YTD	% Var YTD	CHO1	CHO2	CHO3	CHO4	CHO5	CHO6	CHO7	CHO8	CHO9	Current (-2)	Current (-1)	Current	
Quality and Safety	Serious Incidents																		
			% of reviews completed within 125 days of category 1 incidents from the date the service was notified of the incident	M	70%	15% [R]	-78.6%										20%	0%	0%
			% of reported incidents entered onto NIMS within 30 days of notification of the incident (at 30.04.24)	Q	70%	79% [G]	12.9%										79%	78%	81%
			Extreme and major incidents as a % of all incidents reported as occurring	Q	<1%	0.4% [G]	-60%										0.4%	0.3%	0.4%
		Service User Experience (Q1 @ 21.05.24)																	
			% of complaints investigated within 30 working days of being acknowledged by the complaints officer	Q	75%	73% [G]	-2.7%	69% [A]	75% [G]	59% [R]	73% [G]	88% [G]	88% [G]	85% [G]	69% [A]	82% [G]			
		Child Health																	
		PC153	% of children reaching 12 months within the reporting period who have had their 9-11 month PHN child health and development assessment on time or before reaching 12 months of age	M-1M	95%	87% [A]	-8.4%	85.6% [A]	86.8% [A]	90.1% [A]	90% [A]	79.7% [R]	89.4% [A]	77.3% [R]	94.7% [G]	89% [A]	85.9%	87.7%	85.9%
		PC133	% of infants visited by a PHN within 72 hours of discharge from maternity services	Q	99%	98.9% [G]	-0.1%	97.8% [G]	98.4% [G]	100% [G]	98.8% [G]	99.9% [G]	97.7% [G]	100% [G]	97.7% [G]	99.3% [G]	98.8%	98.9%	98.9%
		PC144	% of infants breastfed exclusively at the PHN 3 month child health and development assessment visit	Q-1Q	36%	33.7% [A]	-6.3%	25.3% [R]	27.2% [R]	26.4% [R]	41% [G]	30.3% [R]	42.3% [G]	38% [G]	35.7% [G]	34.5% [G]	31.3%	31.8%	33.7%
	HWB8	% of children aged 24 months who have received MMR vaccine	Q-1Q	95%	89.3% [A]	-6%	84.4% [R]	92.6% [G]		91.5% [G]	89.4% [A]	91.6% [G]	89.9% [A]	88.9% [A]	86.5% [A]	89.8%	89.6%	89.3%	

	KPI No.	Metric	Reporting Frequency	Expected Activity / Target	National YTD	% Var YTD	CHO1	CHO2	CHO3	CHO4	CHO5	CHO6	CHO7	CHO8	CHO9	Current (-2)	Current (-1)	Current	
Quality and Safety	CAMHs Bed Days Used																		
	MH57	% of bed days used in HSE Child and Adolescent Acute Inpatient Units	M	>95%	99.9% [G]	5.2%	100% [G]	100% [G]	100% [G]	100% [G]	99.8% [G]	98.9% [G]	100% [G]	99.7% [G]	100% [G]	100%	100%	99.5%	
	Disability Services																		
	DIS55	Facilitate the movement of people from congregated to community settings	M	38	15 [R]	-60.5%	0 [R]	0 [R]	1 [R]	4 [R]	0 [R]	1 [R]	7 [R]	0 [G]	2 [R]	0	2	2	
	Smoking																		
	HWB26	% of smokers on cessation programme who were quit at four weeks	Q-1Q	48%	61.5% [G]	28%										60.1%	58.4%	61.5%	
Access and Integration	Therapy Waiting Lists																		
	PC100G	Physiotherapy - % on waiting list for assessment ≤52 weeks	M	94%	78% [R]	-17%	93.1% [G]	70.8% [R]	84.8% [A]	86.6% [A]	61.7% [R]	98.7% [G]	89.4% [G]	69.8% [R]	78.9% [R]	78.8%	77.9%	78%	
	PC101G	Occupational Therapy - % on waiting list for assessment ≤52 weeks	M	95%	68.8% [R]	-27.6%	68.8% [R]	61.2% [R]	87.6% [A]	84.9% [R]	76.4% [R]	94.4% [G]	59.2% [R]	63.2% [R]	57.5% [R]	69.2%	68.6%	68.8%	
	PC116B	SLT - % on waiting list for assessment ≤52 weeks	M	100%	78.9% [R]	-21.1%	65.6% [R]	99.8% [G]	85.2% [R]	99.9% [G]	76.8% [R]	97.2% [G]	76.3% [R]	77.2% [R]	68.8% [R]	82%	80.7%	78.9%	
	PC104G	Podiatry - % on waiting list for treatment ≤52 weeks	M	77%	53.2% [R]	-30.9%	35% [R]	72.2% [A]	69.2% [R]	47.6% [R]	30.1% [R]	100% [G]	No Service	34% [R]		60.9%	55.2%	53.2%	
	PC107G	Ophthalmology - % on waiting list for treatment ≤52 weeks	M	64%	63% [G]	-1.5%	84.6% [G]	95.3% [G]	58.5% [A]	41.5% [R]	54% [R]	96.5% [G]	99.8% [G]	75.8% [G]	100% [G]	58.1%	62.5%	63%	
	PC108G	Audiology- % on waiting list for treatment ≤52 weeks	M	75%	71% [A]	-5.3%	88.1% [G]	70% [A]	66.5% [R]	67.7% [A]	86.4% [G]	57.8% [R]	54.5% [R]	74.6% [G]	81.1% [G]	73.8%	73.1%	71%	
	PC109G	Dietetics - % on waiting list for treatment ≤52 weeks	M	80%	75.7% [A]	-5.4%	74.8% [A]	68.1% [R]	82% [G]	71.4% [R]	76.9% [G]	83.3% [G]	98.9% [G]	65.1% [R]	90.5% [G]	71.2%	73.6%	75.7%	
	PC103G	Psychology - % on waiting list for treatment ≤52 weeks	M	81%	57.8% [R]	-28.7%	52.7% [R]	51.1% [R]	83.9% [G]	41.4% [R]	76.7% [A]	85.3% [G]	40.4% [R]	79.7% [G]	61.1% [R]	58.1%	57.2%	57.8%	
	Nursing																		
	PC110A	% of new patients accepted onto the nursing caseload and seen within 12 weeks	M-1M	100%	95.7% [G]	-4.3%	97.2% [G]	98.1% [G]	97.7% [G]	95.2% [G]	97% [G]	87.4% [R]	89.5% [R]	98% [G]	98.4% [G]	95.6%	95.2%	95.7%	

			Reporting Frequency	Expected Activity / Target	National YTD	% Var YTD	CHO1	CHO2	CHO3	CHO4	CHO5	CHO6	CHO7	CHO8	CHO9	Current (-2)	Current (-1)	Current	
	KPI No.	Metric																	
Access and Integration	Mental Health																		
	MH73	% of urgent referrals to CAMHS responded to within 3 working days	M	≥90%	94.7% [G]	5.2%	98.1% [G]	97.2% [G]	100% [G]	96.3% [G]	79.6% [R]	100% [G]	100% [G]	97.2% [G]	100% [G]	97.1%	93.9%	94.4%	
	MH2	% of accepted referrals / re-referrals offered first appointment and seen within 12 weeks by GAMHT	M	≥75%	66.9% [R]	-10.8%	82.8% [G]	85.6% [G]	65.7% [R]	67.9% [A]	64.6% [R]	69.1% [A]	64.2% [R]	56.6% [R]	45.8% [R]	67.3%	66.3%	68.3%	
	MH4	% of accepted referrals / re-referrals offered first appointment and seen within 12 weeks by POLLMHT	M	≥95%	89.2% [A]	-6.1%	98.4% [G]	99.5% [G]	91.4% [G]	80.4% [R]	95.4% [G]	94.9% [G]	66.9% [R]	80.1% [R]	77.2% [R]	89.4%	87.2%	91.1%	
	Disability Services																		
	DIS3	% of child assessments completed within the timelines as provided for in the regulations	Q	100%	10.3% [R]	-89.7%	25.2% [R]	3.4% [R]	18.5% [R]	12.5% [R]	29.7% [R]	0.9% [R]	0% [R]	8% [R]	4.2% [R]	11%	11.1%	9.6%	
	DIS102	No. of new Priority 1 Residential places provided to people with a disability	M	36	76 [G]	111.1%										12	9	14	
	DIS109	No. of intensive support packages for priority 1 cases	M	453	498 [G]	9.9%										8	14	11	
	DIS59	No. of day only respite sessions accessed by people with a disability	Q-1M	10,102	14,162 [G]	40.2%	2,352 [G]	3,181 [G]	654 [G]	438 [G]	1,000 [R]	1,572 [G]	188 [G]	872 [A]	3,905 [G]	10,959	12,337	14,162	
	DIS71	No. of people with a disability in receipt of respite services (ID / autism and physical and sensory disability)	Q-1M	6,200	5,758 [A]	-7.1%	445 [G]	644 [R]	474 [G]	623 [R]	700 [A]	437 [G]	776 [A]	701 [R]	958 [G]	6,137	5,615	5,758	
	DIS57	No. of overnights (with or without day respite) accessed by people with a disability	Q-1M	40,005	37,280 [A]	-6.8%	1,942 [G]	8,258 [A]	3,661 [G]	4,371 [G]	2,400 [R]	2,839 [R]	4,916 [G]	4,914 [R]	3,979 [A]	39,843	34,441	37,280	
	Older Persons																		
	OP53	No. of home support hours provided (excluding provision of hours from IHCPs)	M	10,894,638	11,279,502 [G]	3.5%	1,348,927 [G]	893,583 [R]	913,717 [G]	1,527,641 [G]	996,985 [G]	966,103 [G]	1,408,719 [G]	1,335,263 [G]	1,888,565 [G]	1,887,633	1,872,266	1,869,116	
OP54	No. of people in receipt of home support	M	54,100	53,681 [G]	-0.8%	5,038 [G]	2,807 [R]	5,168 [G]	7,751 [G]	5,633 [G]	4,520 [G]	6,882 [G]	8,341 [G]	7,541 [G]	56,610	53,371	53,681		

	KPI No.	Metric	Reporting Frequency	Expected Activity / Target	National YTD	% Var YTD	CHO1	CHO2	CHO3	CHO4	CHO5	CHO6	CHO7	CHO8	CHO9	Current (-2)	Current (-1)	Current	
Access and Integration	Delayed Transfers of Care																		
	A49	Number of beds subject to Delayed Transfers of Care	M	≤350	402 [R]	14.9%										385	414	402	
	Homeless																		
	SI52	% of new individual homeless service users admitted to Supported Temporary Accommodations (STA), Private Emergency Accommodations (PEA), and / or Temporary Emergency Accommodations (TEA) during the quarter whose health needs have been assessed within two weeks of admission	Q	86%	84.1% [G]	-2.2%	82.4% [G]	98.6% [G]	62.8% [R]	82.9% [G]	100% [G]	54.5% [R]	95.2% [G]	100% [G]	83.7% [G]	87.4%	89.7%	84.1%	
	Substance Use																		
	SI25	% of substance users (under 18 years) for whom treatment has commenced within one week following assessment	Q-1Q	100%	97.7% [G]	-2.3%	100% [G]	100% [G]		60% [R]	100% [G]	100% [G]	100% [G]	100% [G]	97.6% [G]	98%	91.3%	97.7%	
SI22	% of substance users (over 18 years) for whom treatment has commenced within one calendar month following assessment	Q-1Q	100%	96.8% [G]	-3.2%	91.4% [A]	100% [G]	97% [G]	86.3% [R]	99.8% [G]	100% [G]	99.2% [G]	96% [G]	93.5% [A]	96.8%	97.4%	96.8%		
Finance, Governance & Compliance	Financial Management																		
		Net expenditure variance from plan (pay + non-pay - income)	M	≤0.1%	4,472,683	4.97% [R]	14.59% [R]	10.36% [R]	7.91% [R]	9.34% [R]	14.44% [R]	7.81% [R]	9.21% [R]	13.82% [R]	7.59% [R]	5.70%	4.36%	4.97%	
		Pay expenditure variance from plan	M	≤0.1%	2,158,433	2.86% [R]	9.64% [R]	9.79% [R]	4.84% [R]	5.76% [R]	11.41% [R]	7.74% [R]	4.82% [R]	7.99% [R]	3.66% [R]	4.70%	2.23%	2.86%	
		Non-pay expenditure variance from plan	M	≤0.1%	2,594,471	6.59% [R]	21.18% [R]	9.04% [R]	9.43% [R]	12.29% [R]	16.38% [R]	6.00% [R]	14.65% [R]	19.82% [R]	11.70% [R]	6.18%	5.98%	6.59%	
	Gross expenditure variance from plan (pay + non-pay)	M	≤0.1%	4,752,903	4.86% [R]	13.12% [R]	9.39% [R]	7.58% [R]	8.62% [R]	13.67% [R]	6.89% [R]	8.81% [R]	12.70% [R]	7.21% [R]	5.50%	4.25%	4.86%		

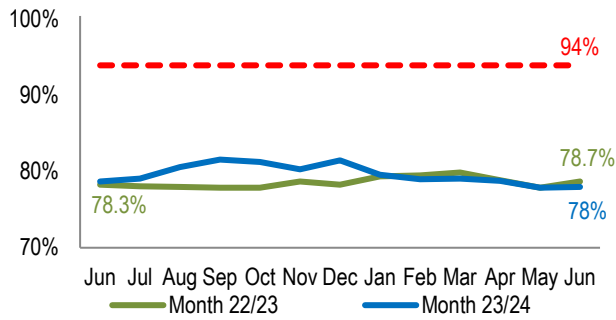
	KPI No.	Metric	Reporting Frequency	Expected Activity / Target	National YTD	% Var YTD	CHO1	CHO2	CHO3	CHO4	CHO5	CHO6	CHO7	CHO8	CHO9	Current (-2)	Current (-1)	Current
	Service Arrangements (at 26/06/24)																	
		% of the monetary value of service arrangements signed	M	100%	12.73%	-87.27%										7.89%	11.35%	12.73%
	Internal Audit																	
		% of internal audit recommendations implemented by agreed due date (New KPI)	Q	90%	39% [R]	-56.7%	50% [R]	40% [R]	67% [R]	31% [R]	13% [R]	29% [R]	36% [R]	67% [R]	33% [R]		31%	39%
Workforce	Attendance Management																	
		% absence rates by staff category (non Covid)	M	≤4%	6.61% [R]	65.25%	8.19% [R]	5.70% [R]	6.42% [R]	6.07% [R]	6.87% [R]	5.18% [R]	5.72% [R]	6.69% [R]	5.24% [R]	6.05%	6.12%	6.26%
		% absence rates by staff category (Covid)	M	NA	6.61%		0.44%	0.41%	0.36%	0.46%	0.60%	0.41%	0.45%	0.55%	0.29%	0.24%	0.31%	0.74%

Primary Care Services

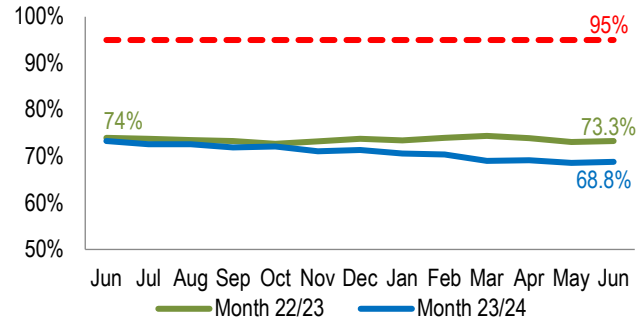
Primary Care Therapies

Performance area	Target/ Expected Activity	Freq	Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current	Best performance	Outliers
Physiotherapy - % on waiting list for assessment ≤52 weeks – PC100G	94%	M	78%	78.7%	-0.7%	78.8%	77.9%	78%	CHO6 (98.7%), CHO1 (93.1%), CHO7 (89.4%)	CHO5 (61.7%), CHO8 (69.8%), CHO2 (70.8%)
Occupational Therapy - % on waiting list for assessment ≤52 weeks – PC101G	95%	M	68.8%	73.3%	-4.5%	69.2%	68.6%	68.8%	CHO6 (94.4%), CHO3 (87.6%), CHO4 (84.9%)	CHO9 (57.5%), CHO7 (59.2%), CHO2 (61.2%)
Speech and Language Therapy - % on waiting list for assessment ≤52 weeks – PC116B	100%	M	78.9%	87.3%	-8.4%	82%	80.7%	78.9%	CHO4 (99.9%), CHO2 (99.8%), CHO6 (97.2%)	CHO1 (65.6%), CHO9 (68.8%), CHO7 (76.3%)
Podiatry - % on waiting list for treatment ≤52 weeks – PC104G	77%	M	53.2%	62.7%	-9.5%	60.9%	55.2%	53.2%	CHO6 (100%), CHO2 (72.2%), CHO3 (69.2%)	CHO5 (30.1%), CHO8 (34%), CHO1 (35%)
Ophthalmology % on waiting list for treatment ≤52 weeks – PC107G	64%	M	63%	53.7%	+9.3%	58.1%	62.5%	63%	CHO9 (100%), CHO7 (99.8%), CHO6 (96.5%)	CHO4 (41.5%), CHO5 (54%), CHO3 (58.5%)
Audiology- % on waiting list for treatment ≤52 weeks – PC108G	75%	M	71%	77%	-6%	73.8%	73.1%	71%	CHO1 (88.1%), CHO5 (86.4%), CHO9 (81.1%)	CHO7 (54.5%), CHO6 (57.8%), CHO3 (66.5%)
Dietetics - % on waiting list for treatment ≤52 weeks – PC109G	80%	M	75.7%	65.6%	+10.1%	71.2%	73.6%	75.7%	CHO7 (98.9%), CHO9 (90.5%), CHO6 (83.8%)	CHO8 (65.1%), CHO2 (68.1%), CHO4 (71.4%)
Psychology - % on waiting list for treatment ≤52 weeks – PC103G	81%	M	57.8%	63.3%	-5.5%	58.1%	57.2%	57.8%	CHO6 (85.3%), CHO3 (83.9%), CHO8 (79.7%)	CHO7 (40.4%), CHO4 (41.4%), CHO2 (51.1%)

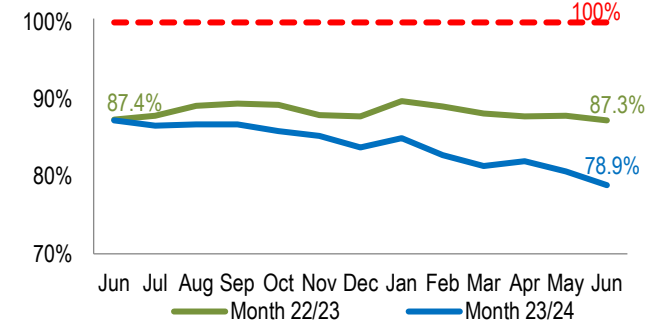
Physiotherapy - % on waiting list for assessment ≤52 weeks



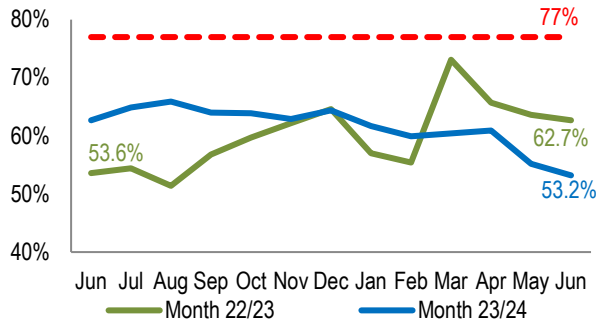
Occupational Therapy - % on waiting list for assessment ≤52 weeks



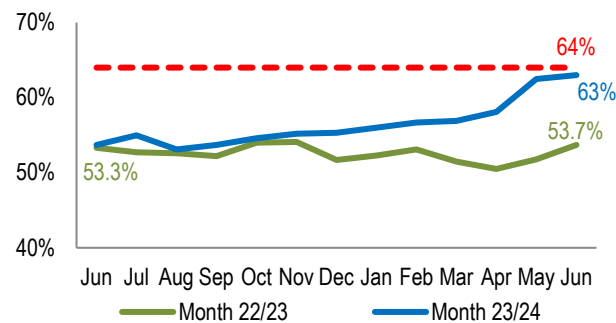
Speech and Language Therapy - % on waiting list for assessment ≤52 weeks



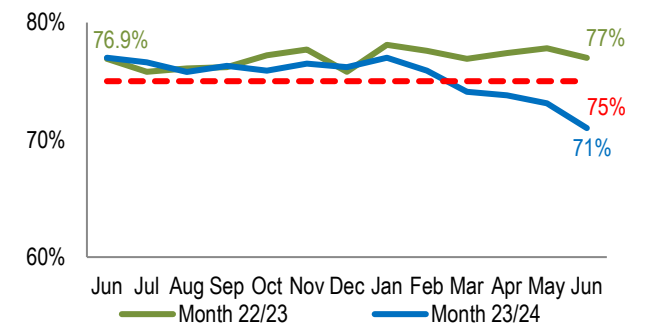
Podiatry - % on waiting list for treatment ≤52 weeks



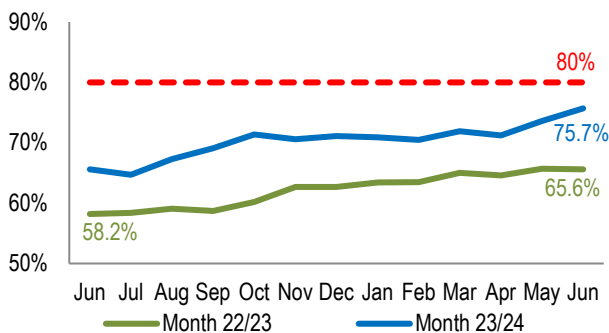
Ophthalmology - % on waiting list for treatment ≤52 weeks



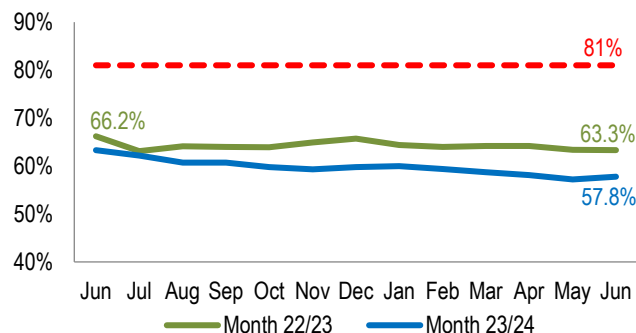
Audiology - % on waiting list for treatment ≤52 weeks



Dietetics - % on waiting list for treatment ≤52 weeks



Psychology - % on waiting list for treatment ≤52 weeks



Therapy Waiting Lists

Assessment Waiting List	Target/ Expected Activity YTD	Current Period YTD	% Var YTD	SPLY	SPLY change
Physiotherapy					
Number seen	293,802	254,334	-13.4%	264,283	-9,949
Total number waiting	42,173	78,212	85.5%	71,852	6,360
% of new seen waiting < 12 weeks	81%	72.9%	-10%	73.3%	-0.4%
Number waiting > 52 weeks		17,213		15,279	1,934
Occupational Therapy					
Number seen	194,628	179,521	-7.8%	178,641	880
Total number waiting	34,093	42,645	25.1%	39,965	2,680
% of new seen waiting < 12 weeks	71%	63.5%	-10.5%	64.8%	-1.3%
Number waiting > 52 weeks		13,319		10,662	2,657
*Speech & Language Therapy					
Number seen	141,156	89,560	-36.6%	101,938	-12,378
Total number waiting	17,645	22,853	29.5%	19,857	2,996
Number waiting > 52 weeks		4,818		2,525	2,293

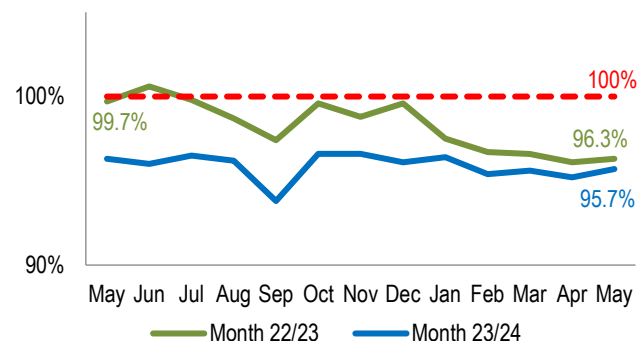
Treatment Waiting List	Target/ Expected Activity YTD	Current Period YTD	% Var YTD	SPLY	SPLY change
*Speech & Language Therapy					
Total number waiting	9,868	7,466	-24.3%	8,619	-1,153
Number waiting > 52 weeks		1,902		1,789	113
Podiatry					
Number seen	42,936	30,208	-29.6%	34,371	-4,163
Total number waiting	4,619	8,238	78.4%	9,347	-1,109
% waiting < 12 weeks	33%	16.1%	-51.3%	21.9%	-5.8%
Number waiting > 52 weeks		3,857		3,483	374
Ophthalmology					
Number seen	39,918	51,368	28.7%	48,381	2,987
Total number waiting	20,204	13,956	-30.9%	21,712	-7,756
% waiting < 12 weeks	20%	33.5%	67.7%	21.7%	11.8%
Number waiting > 52 weeks		5,158		10,048	-4,890
Audiology					
Number seen	27,108	27,965	3.2%	28,345	-380
Total number waiting	18,810	29,171	55.1%	23,233	5,938
% waiting < 12 weeks	30%	23.8%	-20.8%	26.4%	-2.6%
Number waiting > 52 weeks		8,452		5,343	3,109
Dietetics					
Number seen	34,320	39,475	15%	36,134	3,341
Total number waiting	17,417	19,203	10.3%	29,976	-10,773
% waiting < 12 weeks	40%	35%	-12.4%	24.8%	10.2%
Number waiting > 52 weeks		4,668		10,324	-5,656
Psychology					
Number seen	24,900	22,138	-11.1%	22,615	-477
Total number waiting	10,532	22,102	109.9%	18,116	3,986
% waiting < 12 weeks	36%	16.5%	-54.3%	18.2%	-1.7%
Number waiting > 52 weeks		9,331		6,647	2,684

*SLT reports on both assessment and treatment waiting list

Nursing

Performance area	Target/ Expected Activity	Freq	Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current	Best performance	Outliers
% of new patients accepted onto caseload and seen within 12 weeks – PC110A	100%	M-1M	● 95.7%	96.3%	-0.6%	95.6%	95.2%	95.7%	CHO9 (98.4%), CHO2 (98.1%), CHO8 (98%)	CHO6 (87.4%), CHO7 (89.5%), CHO4 (95.2%)

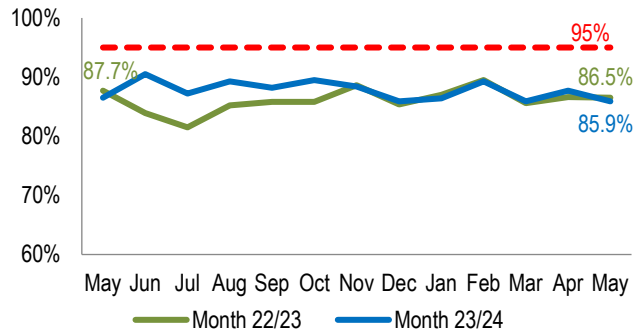
Nursing – % accepted and seen within 12 weeks



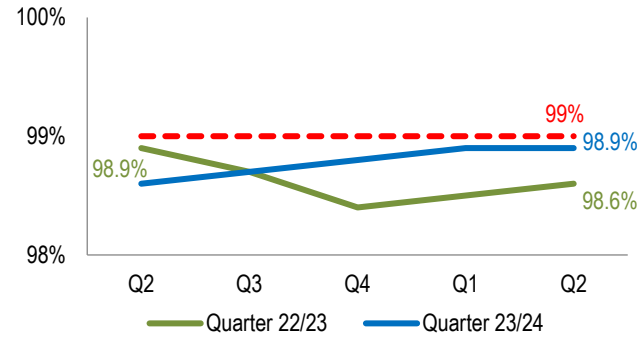
Child Health

Performance area	Target/ Expected Activity	Freq	Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current	Best performance	Outliers
% of children reaching 12 months within the reporting period who have had their 9-11 month PHN child health and development assessment on time or before reaching 12 months of age – PC153	95%	M-1M	● 87%	87%	0%	85.9%	87.7%	85.9%	CHO8 (96.3%), CHO4 (92.4%), CHO2 (90.9%)	CHO7 (65.3%), CHO5 (77.5%), CHO9 (87.2%)
% of infants visited by a PHN within 72 hours of discharge from maternity services – PC133	99%	Q	● 98.9%	98.5%	+0.4%	98.8%	98.9%	98.9%	CHO3 & 7 (100%), CHO9 (99.9%), CHO5 (99.8%)	CHO1 (97.1%), CHO8 & 2 (98%), CHO6 (98.3%)
% of infants breastfed exclusively at the PHN 3 month child health and development assessment visit – PC144	36%	Q-1Q	● 33.7%	32.1%	+1.6%	31.3%	31.8%	33.7%	CHO6 (42.3%), CHO4 (41%), CHO7 (38%)	CHO1 (25.3%), CHO3 (26.4%), CHO2 (27.2%)

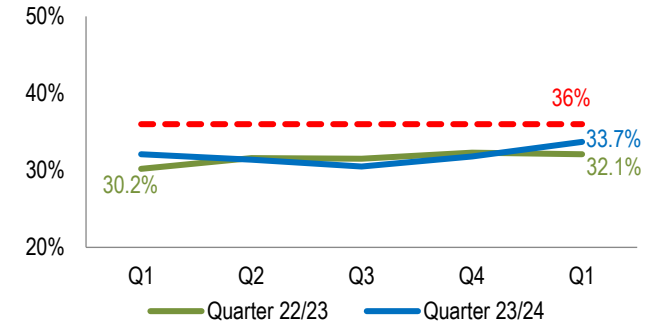
Child Health - Developmental assessment within 12 months



Child Health - % of Infants visited by a PHN within 72 hours of discharge



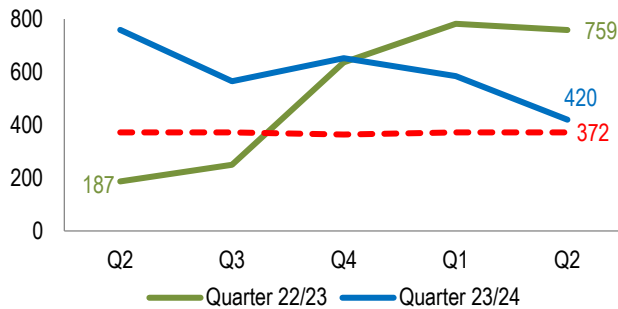
Child Health - % of Infants breastfed exclusively at 3 month PHN visit



Dietetics and Chronic Disease Management

Performance area	Target/ Expected Activity	Freq	Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current	Best performance	Outliers
No. of people who have completed a structured patient education programme for type 2 diabetes – PC151	744 YTD/ 1,480 FYT	Q	1,004	1,541	-537	652	584	420	%Var CHO2 (233.3%), CHO3 (169%), CHO5 (138.9%)	% Var CHO7 & 4 (-100%), CHO1 (-48.9%), CHO8 (-7.3%)

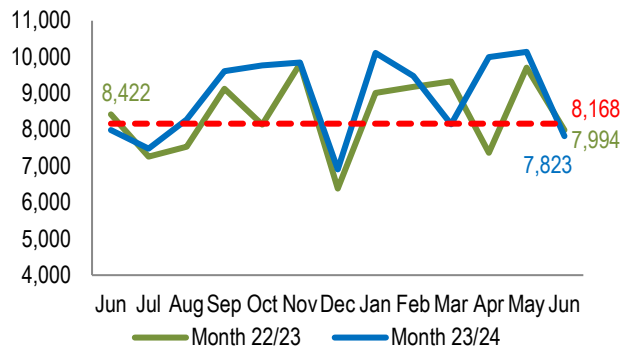
Dietetics - Number who have completed type 2 diabetes education programme



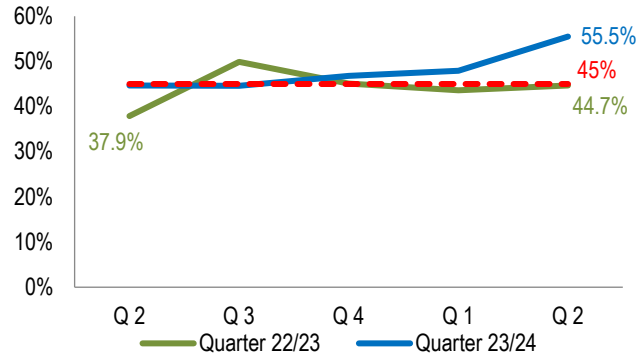
Oral Health and Orthodontics

Performance area	Target/ Expected Activity	Freq	Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current	Best performance	Outliers
No. of new Oral Health patients in target groups attending for scheduled assessment—(New KPI) PC32	49,008 YTD 98,016 FYT	M	● 55,704	52,593	+3,111	9,999	10,143	7,823	(%Var): CHO8 (38.3%), CHO9 (33%), CHO2 (25.6%)	(%Var): CHO1 (-4.9%), CHO5 (-1.8%)
Orthodontics - % of patients seen for assessment within six months – PC24	45%	Q	● 55.5%	44.7%	+10.8%	46.8%	47.9%	55.5%	DML (91.4%), West (58.5%), DNE (49%)	South (29%)
Orthodontics - % of patients (grade 4 and 5) on the treatment waiting list longer than four years – PC31A	<6%	Q	● 17.1%	23.4%	-6.3%	20.5%	20.1%	17.1%	DML (3.6%)	South (26.6%), DNE (12.7%), West (10.3%)

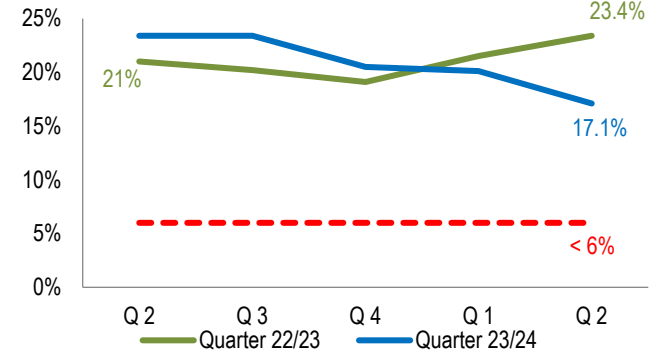
Oral Health - New patients in target groups attending for scheduled assessment



Orthodontics - % of patients seen for assessment within six months



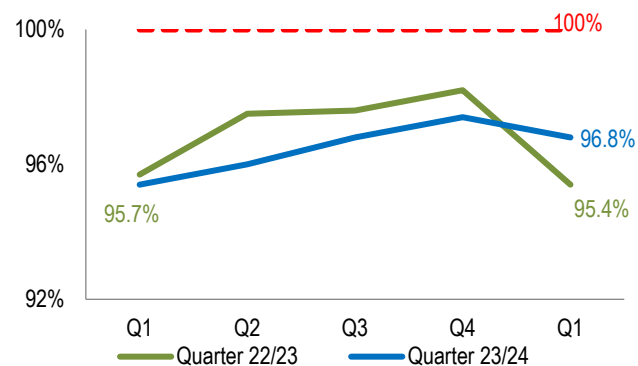
Orthodontics - % of patients on treatment waiting list > four years



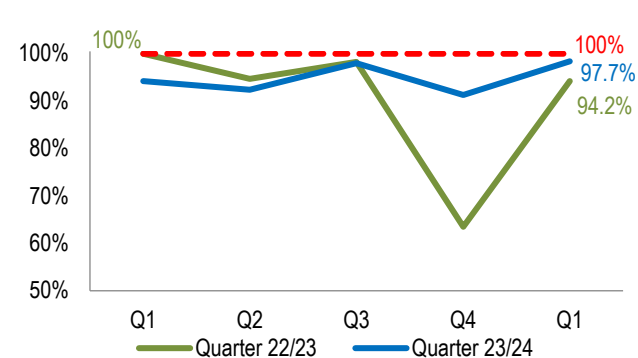
Social Inclusion

Performance area	Target/ Expected Activity	Freq	Current Period YTD	SPLY YTD	SPLY change	Current (-2)	Current (-1)	Current	Best performance	Outliers
% of substance users (over 18 years) for whom treatment has commenced within one calendar month following assessment – SI22	100%	Q-1Q	● 96.8%	95.4%	+1.4 %	96.8%	97.4%	96.8%	CHO2 & 6 (100%), CHO5 (99.8%), CHO7 (99.2%)	CHO4 (86.3%), CHO1 (91.4%), CHO9 (93.5%)
% of substance users (under 18 years) for whom treatment has commenced within one week following assessment – SI25	100%	Q-1Q	● 97.7%	94.2%	+3.5%	98%	91.3%	97.7%	CHO1, 2, 5, 6, 7 & 8 reached target	CHO4 (60%), CHO9 (97.6%)
% of new individual homeless service users admitted to Supported Temporary Accommodations (STA), Private Emergency Accommodations (PEA), and / or Temporary Emergency Accommodations (TEA) during the quarter whose health needs have been assessed within two weeks of admission – SI52	86%	Q	● 84.1%	87.2%	-3.1%	87.4%	89.7%	84.1%	CHO5 & 8 (100%), CHO2 (98.6%)	CHO6 (54.5%), CHO3 (62.8%), CHO1 (82.4%)

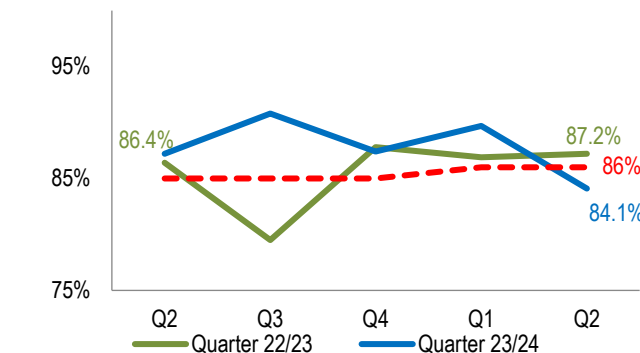
% access to substance use treatment (>18 years)



% access to substance use treatment (< 18 years)



% Homeless health needs assessed within two weeks



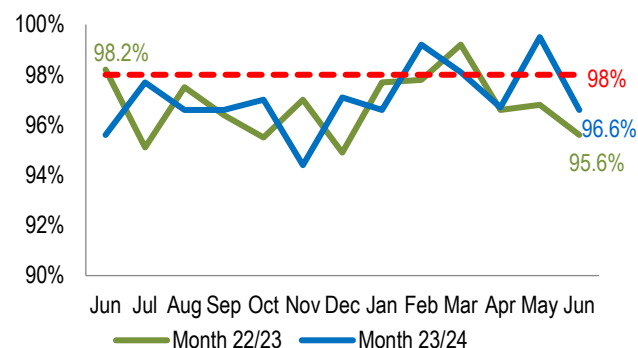
Palliative Care Services

Performance area	Target/ Expected Activity	Freq	Current Period YTD	SPLY YTD	SPLY change	Current (-2)	Current (-1)	Current	Best performance	Outliers
Access to specialist inpatient bed within 7 days – PAC1A	98%	M	● 97.8%	97.3%	+0.5%	96.7%	99.5%	96.6%	CHO1, 2, 3 & 5(100%)	CHO9 (89.7%), CHO7 (90%), CHO6 (97.2%)
*% of all Category 1 triaged patients who received specialist palliative care within 2 days in the community –(New KPI) PAC58	90%	M	● 92.8%	88.7%	+4.1%	96.9%	95.1%	93.2%	CHO2, 3, 5, 6, 7, 8 & 9 (100%)	CHO4 (77.8%), CHO1 (78.6%)
**% of all Category 2 triaged patients who received specialist palliative care within 7 days in the community – (New KPI) PAC59	90%	M	● 90.5%	87.4%	+3.1%	91.5%	90.5%	93%	CHO9 (100%), CHO2 (95.8%), CHO5 (95.6%)	CHO8 (87.3%), CHO1 (88.6%), CHO4 (91.7%)
Number accessing specialist inpatient beds within seven days – PAC33	2,063YTD/ 4,128 FYT	M	● 2,419	2,177	+242	412	426	345	(%VAR) CHO5 (43.5%), CHO2 (43.2%), CHO7 (20.4%)	(%VAR) CHO6 (-0.9%)
Number of patients who received specialist palliative care treatment in their normal place of residence in the month – PAC14	3,612YTD/ 3,612 FYT	M	● 4,251	3,845	+406	4,214	4,379	4,251	(%VAR) CHO5 (41.4%), CHO1 (23.6%), CHO4 (23.3%)	All CHOs reached target

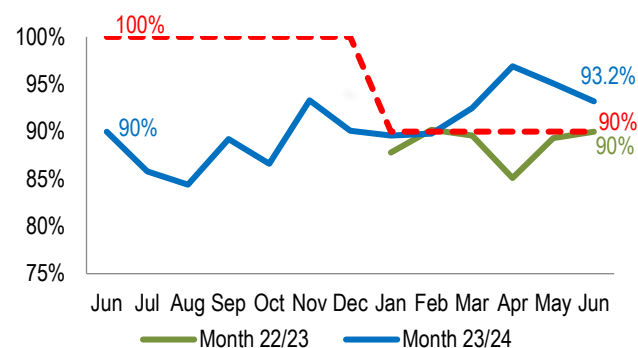
*Category 1 patients are deemed to need immediate intervention by the specialist palliative care team and should be seen within 2 calendar days.

**Category 2 patients are deemed to need timely intervention by the specialist palliative care team and should be seen within 7 calendar days

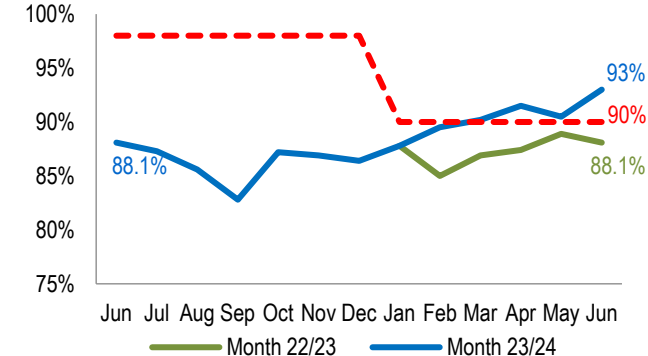
Access to specialist inpatient bed within 7 days



Access to palliative community services – Category 1



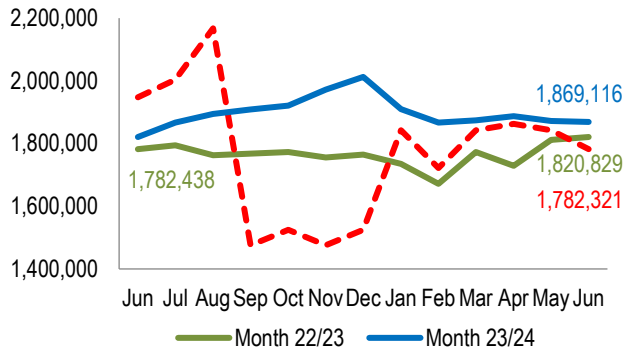
Access to palliative community services – Category 2



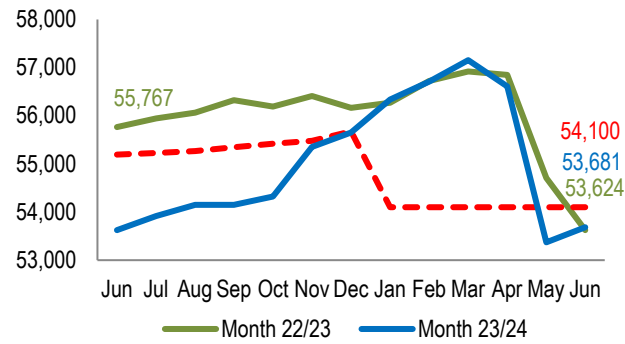
Older Persons' Services

Performance area	Target/ Expected Activity	Freq		Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current	Best performance	Outliers
No. of home support hours provided (excluding provision of hours from IHCPs) – OP53	10,894,638 YTD/ 22m FYT	M	●	11,279,502	10,541,076	+738,426	1,887,633	1,872,266	1,869,116	CHO7 (14.9%), CHO6 (10.4%), CHO4 (8%)	CHO2 (-18.2%), CHO8 (-1.2%)
No. of people in receipt of Home Support (excluding provision from IHCPs) –OP54	54,100 YTD/ 54,100 FYT	M	●	53,681	53,624	+57	56,610	53,371	53,681	CHO8 (16.1%), CHO6 (15.2%), CHO9 (7.9%)	CHO2 (-56.2%)
No. of persons in receipt of Intensive Home Care Package (IHCP) – OP4	235 YTD/ 235 YTD	M	●	64	77	-13	69	65	64		
No. of persons funded under NHSS in long term residential care – OP8	23,309 YTD/ 23,280 FYT	M	●	23,285	22,772	+513	23,043	23,194	23,285		
No. of NHSS beds in public long stay units – OP12	4,501 YTD/ 4,501 FYT	M	●	4,625	4,466	+159	4,581	4,627	4,625	CHO3 (29.4%), CHO9 (18.2%), CHO4 (7.8%)	CHO7 (-14.6%), CHO2 (-3.6%), CHO6 (-2.5%)
No. of short stay beds in public units – OP13	1,870 YTD/ 2,182 FYT	M	●	1,609	1,712	-103	1,622	1,617	1,609		CHO7 (-67.3%), CHO8 (-16.3%), CHO1 (-12.9%)
No. of beds subject to Delayed Transfers of Care	≤350	M	●	402	484	-82	385	414	402	Mullingar, SLRON (0), 4 hospitals (1)	CUH (44), GUH (39), LUH (35)
No. of persons in receipt of payment for transitional care in alternative care settings - OP44	916 YTD/ 916 FYT	M-1M	●	1,596	1,513	+83	1,618	1,525	1,596		

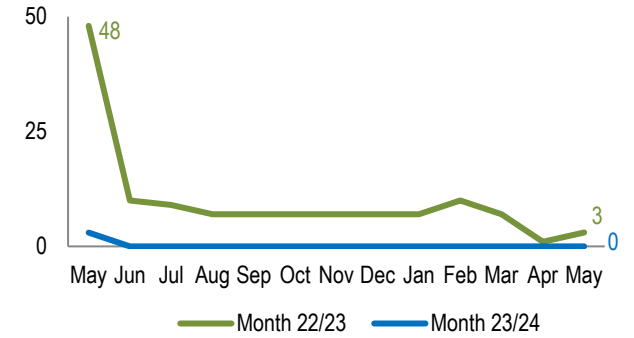
Number of Home Support Hours Provided



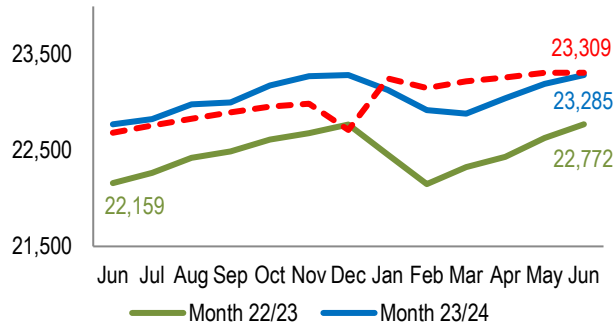
Number of people in receipt of Home Support



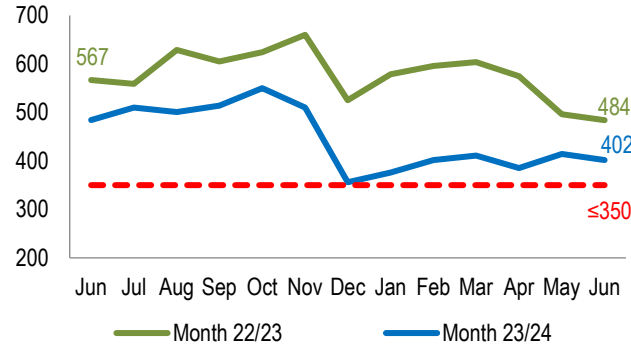
Number waiting on funding for Home Support



Number of persons funded under NHSS in long term residential care



Delayed Transfers of Care



Delayed Transfers of Care by Category

	Over 65	Under 65	Total	Total %
Home	22	5	27	6.7%
Residential Care	120	23	143	35.6%
Rehab	40	25	65	16.2%
Complex Needs	26	28	54	13.4%
Housing/Homeless	12	14	26	6.5%
Legal complexity	48	4	52	12.9%
Non compliance	14	9	23	5.7%
COVID-19	11	1	12	3.0%
Total	293	109	402	100%

NHSS Overview

		Current YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current	SPLY	SPLY Change
	No. of new applicants	5,680	5,670	+10	960	970	805	736	+69
	National placement list for funding approval	636	627	+9	732	730	636	627	+9
	Waiting time for funding approval	4 weeks	4 weeks	0 weeks	4 weeks	4 weeks	4 weeks	4 weeks	0 weeks
	Total no. people funded under NHSS in LTRC	23,285	22,772	+513	23,043	23,194	23,285	22,772	+513
Private Units	No. of new patients entering scheme	3,757	3,790	-33	706	676	606	677	-71
	No. of patients Leaving NHSS	3,831	3,811	+20	601	545	513	548	-35
	Increase	-74	-21	-53	+105	+131	+93	+129	-36
Public Units	No. of new patients entering scheme	895	790	105	161	143	121	122	-1
	No. of patients Leaving NHSS	822	766	56	106	123	124	109	+15
	Net Increase	+73	+24	+49	+55	+20	-3	+13	-16

Mental Health Services

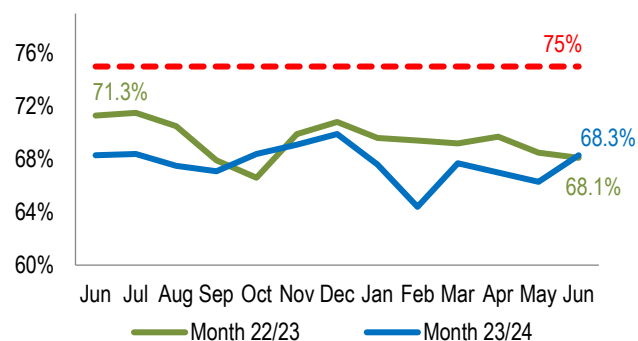
General Adult Mental Health

Performance Area	Target/ Expected Activity	Freq		Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current	Best Performance	Outliers
Number of referrals received – MH19	25,098 YTD/ 50,136 FYT	M	●	23,475	24,922	-1,447	4,001	3,920	3,543		
Number of adult referrals seen – MH22	15,612 YTD/ 31,164 FYT	M	●	12,267	13,654	-1,387	2,151	2,078	1,704		
% of accepted referrals / re-referrals offered first appointment and seen within 12 weeks – MH2	≥75%	M	●	66.9%	69.1%	-2.2%	67.3%	66.3%	68.3%	CHO2 (85%), CHO1 (82.2%), CHO5 (80.8%)	CHO9 (48.7%), CHO8 (59.4%), CHO3 (64%)

Psychiatry of Later Life

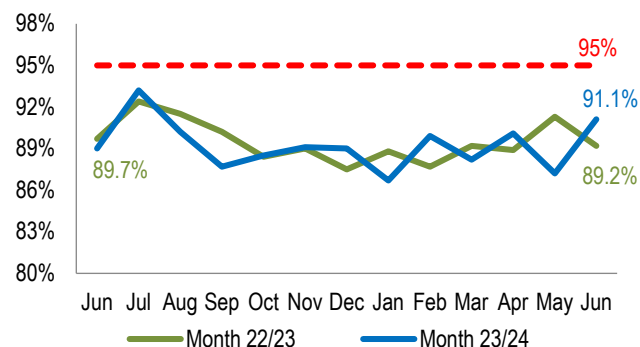
Performance Area	Target/ Expected Activity	Freq		Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current	Best Performance	Outliers
Number of referrals received – MH27	6,466 YTD/ 12,912 FYT	M	●	6,132	6,355	-223	1,049	1,097	896		
Number of referrals seen – MH30	4,948 YTD/ 9,882 FYT	M	●	3,844	3,996	-152	679	699	516		
% of accepted referrals / re-referrals offered first appointment and seen within 12 weeks – MH4	≥95%	M	●	89.2%	89.2%	0%	89.4%	87.2%	91.1%	CHO1, 2, 5 & 6 reached target	CHO7 (57.1%), CHO4 (71.4%), CHO9 (79.2%)

Adult Mental Health: % offered an appointment and seen within 12 weeks



Performance Profile April - June 2024

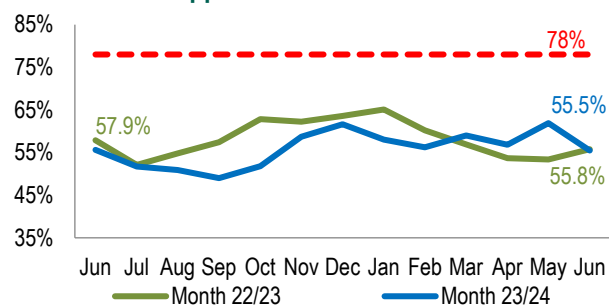
Psychiatry of Later Life: % offered an appointment and seen within 12 weeks



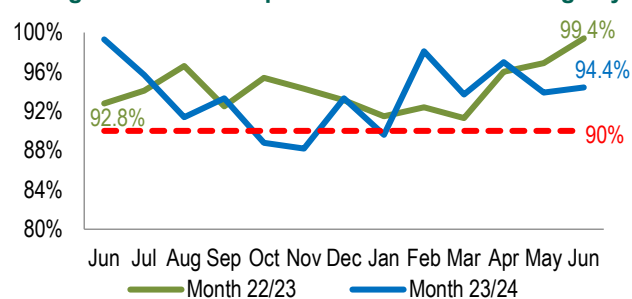
Child and Adolescent Community Mental Health Teams

Performance Area	Target/ Expected Activity	Freq	Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current	Best Performance	Outliers
Admission of Children to CAMHs Acute Inpatient Units – MH5	>85%	M	● 97.2%	95.1%	+2.1%	100%	100%	89.5%		
% of bed days used in HSE Child and Adolescent Acute Inpatient Units – MH57	>95%	M	● 99.9%	98.9%	+1%	100%	100%	99.5%	CHO1, 2, 3, 4, 5, 7, 8 & 9 reached target	CHO6 (90.6%)
% of accepted referrals / re-referrals offered first appointment and seen within 12 weeks – MH7	≥78%	M	● 58%	57.3%	+0.7%	57.1%	61.9%	55.5%	No CHO reached target	CHO4 (40%), CHO8 (42.1%), CHO9 (53%)
% of accepted referrals / re-referrals seen within 12 months – MH72	≥95%	M	● 89.7%	91.8%	-2.1%	87.2%	93.8%	89.8%	CHO2, 3, 6 & 9 reached target	CHO4 (54.6%), CHO8 (87.5%), CHO1 (88.2%)
% of urgent referrals to CAMHs Teams responded to within three working days - MH73	≥90%	M	● 94.7%	94.2%	+0.5%	97.1%	93.9%	94.4%	CHO1, 2, 3, 4, 6, 7, 8 & 9 reached target	CHO5 (72%)
No. on CAMHS waiting list for first appointment – MH50	4,387	M	● 3,759	4,374	-615	3,696	3,842	3,759	CHO5 (180), CHO6 (230), CHO3 (232)	CHO4 (963), CHO8 (864), CHO7 (442)
No. on CAMHS waiting list for first appointment > 12 months – MH55	0	M	● 478	701	-223	485	491	478	CHO1, 2 & 6 reached target	CHO4 (305), CHO8 (121), CHO7 (27)
No of referrals received – MH43	11,516 YTD/ 22,999 FYT	M	● 13,162	12,228	+934	2,179	2,349	1,943		
Number of referrals seen – MH46	6,865 YTD/ 13,687 FYT	M	● 6,202	6,471	-269	1,144	1,028	859		

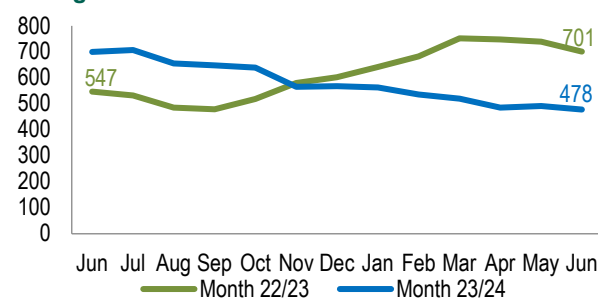
% offered and appointment and seen within 12 weeks



% of urgent referrals responded to within 3 working days



Waiting List > 12 months

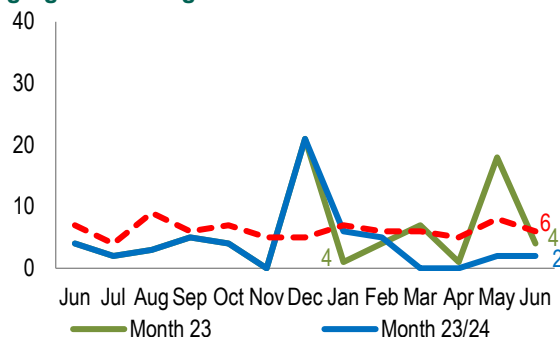


Performance Profile April - June 2024

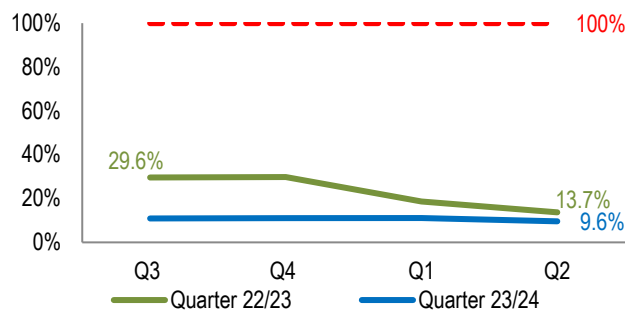
Disability Services

Performance area	Target/ Expected Activity	Freq	Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current	Best performance	Outliers
Facilitate the movement of people from congregated to community settings – DIS55	38 YTD/ 73 FYT	M	● 15	35	-20	0	2	2	(% Var): No CHO reached target	(% Var): CHO1 (-100%), CHO2 (-100%), CHO5 (-100%)
% of child assessments completed within the timelines as provided for in the regulations - DIS3	100%	Q	● 10.3%	15.6%	-5.3%	11%	11.1%	9.6%	(% Var): No CHO reached target	(% Var): CHO7 (-100%), CHO6 (-99.1%), CHO2 (-96.6%)
Number of requests for assessment of need received for children – DIS1	4,032 YTD/ 8,050 FYT	Q	● 5,345	4,258	+1,087	2,260	2,603	2,742	(% Var): CHO4 (99.4%), CHO6 (88.6%), CHO2 (73.6%)	(% Var): CHO3 (-13.5%)

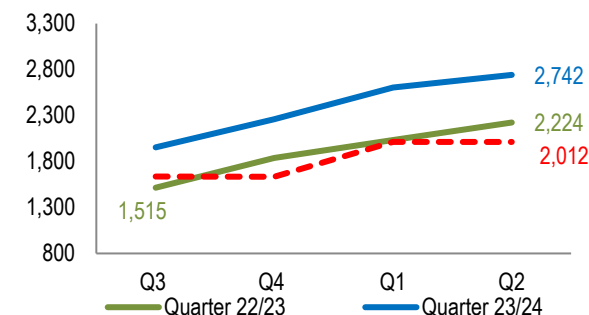
Congregated Settings



Disability Act Compliance



Assessment of Need Requests

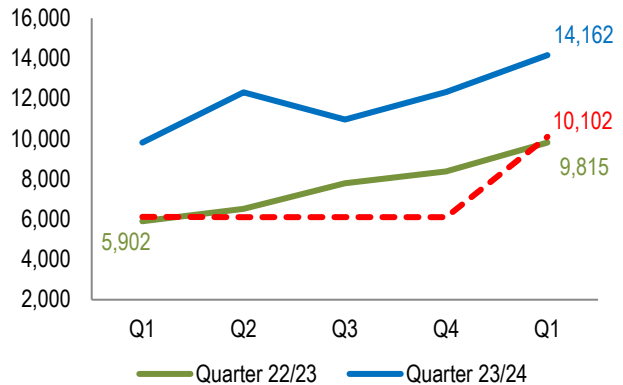


Residential and Emergency Places and Support Provided to People with a Disability

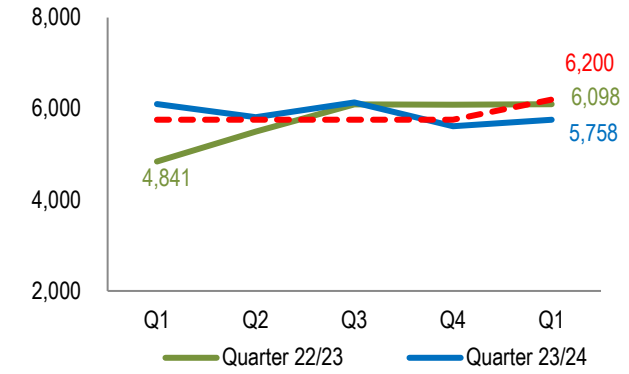
Performance area	Freq	Expected Activity Full Year	Expected Activity YTD	Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current
No. of new Priority 1 Residential places provided to people with a disability – DIS102	M	96	36	● 76	65	+11	12	9	14
No. of intensive support packages for priority 1 cases – DIS109	M	469	453	● 498	426	+72	8	14	11
Number of residential places for people with a disability (including new planned places) – DIS108	M	8,431	8,431	● 8,557	8,314	+243	8,484	8,494	8,557

Performance area	Target/ Expected Activity	Freq		Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current	Best performance	Outliers
Respite – Number of day only respite sessions accessed by people with a disability – DIS59	10,102 YTD/ 40,400 FYT	Q-1M	●	14,162	9,815	+4,347	10,959	12,337	14,162	(% Var): CHO6 (204.7%), CHO9 (80.6%), CHO2 (79.2%)	(% Var): CHO5 (-21.1%), CHO8 (-6.7%)
Number of people with a disability in receipt of respite services (ID / autism and physical and sensory disability)– DIS71	6,200 YTD/ 6,200 FYT	Q-1M	●	5,758	6,098	-340	6,137	5,615	5,758	(% Var): CHO6 (25.4%), CHO1 (24.8%), CHO9 (10.5%)	(% Var): CHO8 (-33.9%), CHO2 (-14.8%), CHO4 (-14.1%)
Respite – Number of overnights (with or without day respite) accessed by people with a disability – DIS57	40,005 YTD/ 160,000 FYT	Q-1M	●	37,280	37,181	+99	39,843	34,441	37,280	(% Var): CHO1 (38.2%), CHO4 (6.1%), CHO7 (1.5%)	(% Var): CHO6 (-20.9%), CHO8 (-19.7%), CHO5 (-12.6%)
Number of Home Support Hours delivered to persons with a disability – DIS58	869,998 YTD/ 3.48m FYT	Q-1M	●	951,427	826,986	+124,441	906,693	907,576	951,427	(% Var): CHO1 (37.6%), CHO9 (37%), CHO5 (27.7%)	(% Var): CHO8 (-26%), CHO4 (-11.2%),
Number of Personal Assistance service hours delivered to adults with a physical and /or sensory disability – DIS39	462,501 YTD/ 1.85m FYT	Q-1M	●	459,413	434,368	+25,045	433,966	407,246	459,413	(% Var): CHO4 (39.3%), CHO1 (19.4%), CHO2 (9%)	(% Var): CHO9 (-20%), CHO5 (-12.8%), CHO7 (-11.7%)

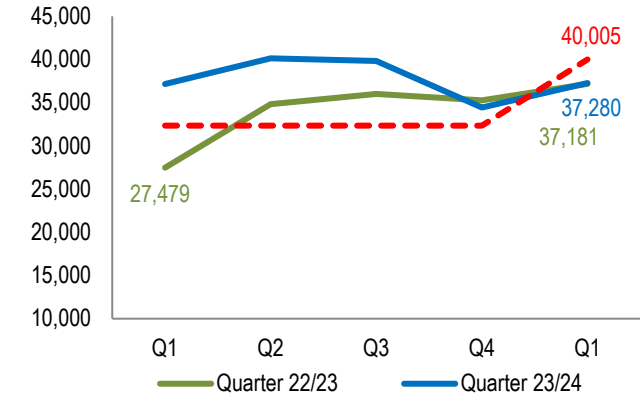
Respite: Day Only



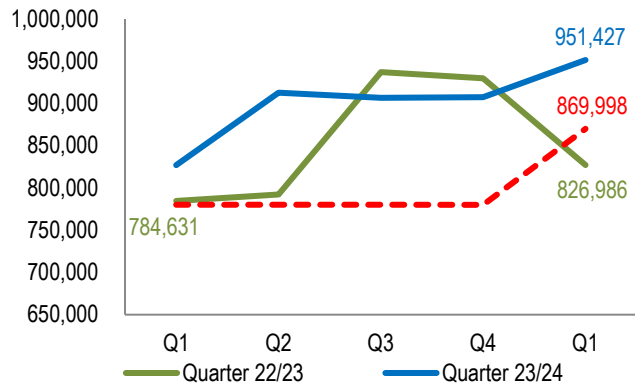
Number of people with a disability in receipt of respite services



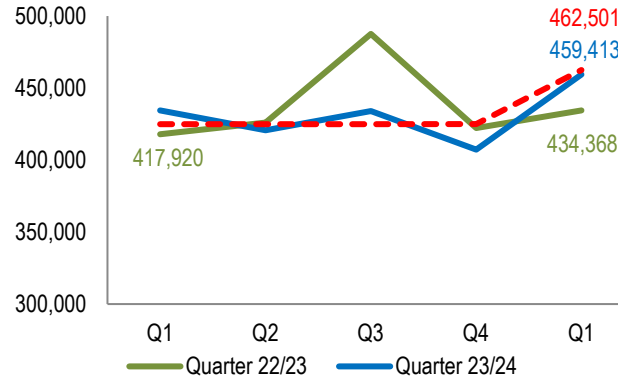
Respite: Overnights



Home Support Hours



Personal Assistance Hours



Community Services Update

Community based care is currently undergoing substantial reform in line with Sláintecare. This includes strategies such as Enhanced Community Care, Progressing Disability Services and Sharing the Vision for mental health services. The move to the new regional structure over the coming months will present more opportunities to design services around the needs of individuals, their families and local communities and also to bring about greater integration with acute services.

June Reporting Cycle

In the month of June 2024, 96.9% of Community Service data has been returned and an active process has been put in place to collect any outstanding data, for the next reporting period.

June data indicates that some services are delivering ahead of National Service Plan targets for 2024.

Examples of positive national performance against target are:

- CIT Referrals - In June there were 54,398 CIT referrals year to date which is +33.7% ahead of the expected year to date target of 40,686. CIT teams have been consistently performing ahead of targets and the CIT model is one that could be considered for expansion.
- Ophthalmology – Number of patients seen year to date is 51,368 which is +28.7% above expected year to date target of 39,918
- Child & Adolescent Mental Health Service – 94.7% of urgent referrals to CAMHS were responded to within three working days, above the ≥90% target.
- Child & Adolescent Mental Health Inpatient – 99.9% of bed days used by children/adolescents were in Child and Adolescent Acute Inpatient Units YTD in 2024, which is above >95% target
- Older Persons Home Support Services delivered 11,279,502 hours, +3.5% above target and +7% ahead of the same period last year

However, as set out in the report, there are also performance challenges including in a number primary care therapy services.

Performance Profile April - June 2024

Waiting List Initiatives

It is a key priority of Community Services to help people to access the care and support that they need as soon as possible. There are a number of challenges and constraints facing Community Operations in designing and implementing waiting list initiatives including the ongoing new demand for services, internal workforce availability, limited information systems, the once-off nature of the funding and the minimal experience of private procurement for community-based services where appropriate.

Waiting List initiatives in community services as part of the 2024 Waiting List Action Plan are agreed for Primary Care (Psychology & Orthodontics) and Mental Health (CAMHS) with the Department of Health. This builds on the success of Waiting List Initiatives undertaken over the previous two years. Each of these initiatives were delivering on target for end of June 2024.

Initiative	Initiative YTD Target Removals	Initiative YTD Actual Removals	Initiative YTD Activity against Target
Orthodontics	240	271* *(29 Orthognathic Surgery cases completed In June)	31 (+13%)
Primary Care Child Psychology (Children waiting over 12 months)	1,578	2,234	656 (+41.5%)
CAMHS	522	821	195(+31%)

Serious Incidents

There were 17 Category 1 incidents reported by date of incident in June 2024 across the 9 Community Healthcare Organisations. This is below the monthly average of 26 incidents reported per month over the last 12 months.

The % of Category 1 reviews for incidents notified in February 2024 (3 incidents notified) completed within 125 days of notification was 0%. This is a lower than usual monthly completion percentage rate in the last 12 months where monthly

completion rates have ranged between 0% - 33%. The twelve month rolling % for this KPI is 15%.

Extreme and Major incidents as a % of all incidents was 0.4% for Quarter 2, 2024, achieving the target of < 1%. The 12 month rolling % for this KPI is 0.4%, also achieving the target. All 9 CHOs and National Social Care have achieved compliance in this KPI over the 12 month rolling period.

Primary Care

At June 2024 the total number of patients seen is -2.8% lower than the same period in 2023. There are ongoing performance challenges in some therapy services. In light of level of vacancies that Primary Care are carrying across all their services the following months may show a down turn in activity

One of the factors impacting on the numbers of patients seen is the complexity of people's needs.

Many patients require a multi-disciplinary approach and in a number of cases ongoing treatment is required for an extended period of time. Another significant factor impacting access performance is the increase in numbers of referrals across all therapy services which will also impact on numbers waiting. This increase in the number of referrals results in longer waiting times as patients are clinically prioritised.

Overall, there was 96% return rate for data across Primary Care Services in June 2024.

Community Intervention Teams (CIT)

In June there were 54,398 CIT referrals year to date which is +33.7% ahead of the expected year to date target of 40,686 (PC122).

* **Data return rate 100%.**

Child Health Developmental Assessment 12 Months

The national performance at May YTD (Data one month in arrears) is 87% compared to a target of 95% (PC153). Performance in May of 85.9% compared to a monthly performance of 87.7% in April.

Performance is being addressed with relevant CHOs who are advising that performance is expected to show continued improvement in 2024, in most areas, due to a combination of factors including;

- Measures being taken to address non-return of data
- Overall reduction in backlogs
- It must be noted that challenges remain in relation to the recruitment and retention of Public Health Nurses. A national community nursing oversight group has been established to develop proposals and recommendations in order to increase recruitment and retention of Public Health Nurses (PHNs) and Community RGNs (CRGNs) in Community Services.

Performance will continue to be monitored in 2024 with relevant REOs/CHOs including in the monthly engagement meetings

* **Data return rate 96.9%**

KPI No.	Child Health Performance Activity / KPI	Reporting Frequency	Target/EA YTD	Activity YTD	Mar	Apr	May	June
PC133	% new born babies visited by a PHN within 72 hours of discharge from maternity services	Q	99%	98.9% (Q2 2024)	98.9%			98.9%
PC135	% of babies breastfed (exclusively and not exclusively) at first PHN visit	Q-1Q	64%	60.3% (Q1 2024)	60.3%			
PC136	% of babies breastfed (exclusively and not exclusively) at 3 month PHN visit	Q-1Q	46%	43.7% (Q1 2024)	43.7%			
PC143	% of babies breastfed exclusively at first PHN visit	Q-1Q	50%	41.6% (Q1 2024)	41.6%			
PC144	% of babies breastfed exclusively at three month PHN visit	Q-1Q	36%	33.7% (Q1 2024)	33.7%			
PC153	% of children reaching 12 months within the reporting period who have had their 9-11 month PHN child health and development assessment on time or before reaching 12 months of age	M-1M	95%	87% (YTD May 2024)	85.9%	87.7%	85.9%	

Oral Health

Year to date nationally 55,704 new Oral Health patients in target groups attended for scheduled assessment (PC32). This is +13.7% ahead of target and is also +5.9% higher than the same period last year (52,593)

***Data return rate 100%**

Orthodontics

Nationally 2,200 of Orthodontic patients were seen for assessment within six months of their scheduled oral health assessment, which is +160.4% ahead of the target of 845 (PC24A). This is +21.5% ahead of the same period in 2023 (1,810).

***Data return rate 88.9%**

Paediatric Home Care Packages

At end of June 2024, there were 352 Paediatric Home Care Packages in place which is -40.6% below the expected year to date activity of 593 (PC147).

*** Data return rate 100%.**

Physiotherapy

78% are waiting for assessment ≤ 52 weeks at the end of June 2024, compared to the target of 94% (PC100G).

The number of Physiotherapy patients on waiting list for assessment ≤ 52 weeks will require an additional 12,520 people to be seen to reach the target of 94%
The number of people waiting longer than 52 weeks has increased by +1.8% from 16,901 in May to 17,213 in June (PC100E).

In 2024, performance for Physiotherapy continues to be monitored including in the monthly Primary Care engagements. The focus is on increasing numbers seen to drive improvements in waiting lists. The Heat map access trend continues to be monitored at CHO level. A performance tool was developed in 2023 which shows numbers seen per WTE for each CHO for all therapy services – the rolling data for a 12 month period is updated on a monthly basis and is provided to each CHO.

Numbers of referrals to date is 103,734 which represents an increase of +41.9% in expected activity (73,086) and +1.4% above the same period last year (102,352) (PC14)

The number of new patients seen for first time assessment at the end of June 2024 is 76,126 which is +1.5% above same period last year position of 74,992 (PC15)

CHOs 5, 7 and 9 are more than 10% away from achieving this year's target for access.

*** Data return rate 100%**

Occupational Therapy (OT)

68.8% are waiting for assessment ≤ 52 weeks at the end of June 2024, compared to the target of 95% (PC101G).

The number of Occupational Therapy patients on waiting list for assessment ≤ 52 weeks will require an additional 11,187 people to be seen to reach the target of 95%

The number of people waiting longer than 52 weeks decreased by -0.2% from 13,345 in May to 13,319 in June (PC101E).

In 2024, performance for OT continues to be monitored including in the monthly Primary Care engagements. The focus is on increasing numbers seen to drive improvements in waiting lists. The Heat map access trend continues to be monitored at CHO level. A performance tool was developed in 2023 which shows numbers seen per WTE for each CHO for all therapy services – the rolling data for a 12 month period is updated on a monthly basis and is provided to each CHO.

Numbers of referrals to date is 48,688 which represents an increase of +25.3% in expected activity (38,868) and -1.7% below the same period last year (49,527) (PC19)

The number of new patients seen for first time assessment at the end of June 2024 is 44,293 which is -2.9% below same period last year position of 45,616 (PC20)

CHOs 1, 2, 5, 7 and 8 are over 10% away from achieving this year's target for access.

Performance data for Occupational Therapy is impacted by 10 non-returns of data in 2024.

*** Data return rate 93.8%**

Speech and Language Therapy (SLT)

78.9% are waiting for assessment ≤ 52 weeks at the end of June 2024, compared to the target of 100% (PC116B).

Performance Profile April - June 2024

The number of Speech & Language Therapy patients on waiting list for assessment ≤ 52 weeks will require an additional 4,818 people to be seen to reach the target of 100%

The number of people waiting for an initial assessment for longer than 52 weeks has increased by +13.2% from 4,257 in May to 4,818 in June (PC116C).

In 2024, performance for SLT continues to be monitored including in the monthly Primary Care engagement. The focus is on increasing numbers seen to drive improvements in waiting lists. The Heat map access trend continues to be monitored at CHO level. A performance tool was developed in 2023 which shows numbers seen per WTE for each CHO for all therapy services – the rolling data for a 12 month period is updated on a monthly basis and is provided to each CHO.

Numbers of referrals to date is 20,032 which represents an increase of +20.5% in expected activity (16,620) and -6.8% below the same period last year (21,494) (PC113)

The number of new patients seen for first time assessment at the end of June 2024 is 14,002 which is -17.3% behind same period last year position of 16,928 (PC115)

CHOs 1, 3, 4, 5, 7, 8 and 9 are more than 10% away from achieving this year's target for access.

Performance data for Speech and Language Therapy is impacted by 3 non-returns of data in 2024.

***Data return rate 96.9%**

Podiatry

53.2% are waiting for treatment ≤ 52 weeks at the end of June 2024, compared to the target of 77% (PC104G).

The number of Podiatry patients on waiting list for treatment ≤ 52 weeks will require an additional 1,962 people to be seen to reach the target of 77%

The number of clients waiting longer than 52 weeks has increased by +8.1% from 3,569 in May to 3,857 in June (PC104E).

It is noted that the majority of the recently established integrated care programmes, data has not been included to date in BIU data reporting for podiatry. Engagement with ECC and BIU has commenced to discuss this.

In 2024, performance for Podiatry continues to be monitored including in the monthly Primary Care engagement. The focus is on increasing numbers seen to drive improvements in waiting lists. The Heat map access trend continues to be monitored at CHO level. A performance tool was developed in 2023 which shows numbers seen per WTE for each CHO for all therapy services – the rolling data for a 12 month period is updated on a monthly basis and is provided to each CHO.

Numbers of referrals to date is 5,675 which represents an increase of +80.5% in expected activity (3,144) and -20.9% behind the same period last year (7,178) (PC45)

The number of new patients seen for first time assessment at the end of June 2024 is 3,435 which is -20.2% below the same period last year position of 4,302 (PC47)

CHOs 1, 4, 5, and 9 are over 10% away from achieving this year's target for access

NB: no Podiatry service recorded in CHO 7

Performance data for Podiatry is impacted by 10 non-returns of data in 2024.

***Data return rate 87%**

Ophthalmology

63% are waiting for treatment ≤ 52 weeks at the end of June 2024, compared to the target of 64% (PC107G).

The number of Ophthalmology patients on waiting list for treatment ≤ 52 weeks will require an additional 134 people to be seen to reach the target of 64%

The number of people waiting longer than 52 weeks has increased by +1.7% from 5,071 in May to 5,158 in June (PC107E).

In 2024, performance for Ophthalmology continues to be monitored including in the monthly Primary Care engagement. The focus is on increasing numbers seen

Performance Profile April - June 2024

to drive improvements in waiting lists. The Heat map access trend continues to be monitored at CHO level are required to submit performance improvement plans where necessary. A performance tool was developed in 2023 which shows numbers seen per WTE for each CHO for all therapy services – the rolling data for a 12 month period is updated on a monthly basis and is provided to each CHO.

Numbers of referrals to date is 14,656 which represents an increase of +20.1% in expected activity (12,204) and +0.9% above the same period last year (14,529) (PC52)

The number of new patients seen for first time assessment at the end of June 2024 is 14,002 which is +0.9% ahead of same period last year position of 13,879 (PC54)

CHOs 3, 6 and 9 are over 10% of achieving this year's target for access.

Performance data for Ophthalmology is impacted by 11 non-returns of data in 2024.

***Data return rate 95.7%**

Audiology

71% are waiting for treatment ≤ 52 weeks at the end of June 2024, compared to the target of 75% (PC108G).

The number of Audiology patients on waiting list for treatment ≤ 52 weeks will require an additional 1,159 people to be seen to reach the target of 75%

The number of people waiting longer than 52 weeks has increased by +8.6% from 7,781 in May to 8,452 in June (PC108E).

In 2024, performance for Audiology continues to be monitored including in the monthly Primary Care engagement. The focus is on increasing numbers seen to drive improvements in waiting lists. The Heat map access trend continues to be monitored at CHO level which are required to submit performance improvement plans where necessary. A performance tool was developed in 2023 which shows numbers seen per WTE for each CHO for all therapy services – the rolling data for a 12 month period is updated on a monthly basis and is provided to each CHO.

Numbers of referrals to date is 13,347 which represents an increase of +27.7% in expected activity (10,452) and +16.7% ahead of the same period last year (11,440) (PC59)

The number of new patients seen for first time assessment at the end of June 2024 is 6,517 which is -16.1% behind same period last year position of 7,772 (PC61)

CHOs 3, 6, 7, 8 and 9 are over 10% from achieving this year's target for access
***Data return rate 100%**

Dietetics

75.7% are waiting for treatment ≤ 52 weeks at the end of June 2024, compared to the target of 80% (PC109G).

The number of Dietetic patients on waiting list for treatment ≤ 52 weeks will require an additional 827 people to be seen to reach the target of 80%

The number of people waiting longer than 52 weeks has decreased by -16.6% from 5,599 in May to 4,668 in June (PC109E).

In 2024, performance for Dietetics continues to be monitored including in the monthly Primary Care engagement. The focus is on increasing numbers seen to drive improvements in waiting lists. The Heat map access trend continues to be monitored at CHO level. A performance tool was developed in 2023 which shows numbers seen per WTE for each CHO for all therapy services – the rolling data for a 12 month period is updated on a monthly basis and is provided to each CHO.

Numbers of referrals to date is 21,847 which represents an increase of +53.2% in expected activity (14,262) and +3.6% ahead of the same period last year (21,079) (PC66)

The number of new patients seen for first time assessment at the end of June 2024 is 16,179 which is +17.6% ahead of same period last year position of 13,762 (PC68)

CHOs 4 and 6 are over 10% from achieving this year's target for access

Performance data for Dietetics is impacted by 4 non-returns of data in 2024.

***Data return rate 93.8%**

Performance Profile April - June 2024

Psychology

57.8% are waiting for treatment ≤ 52 weeks at the end of June 2024, compared to the target of 81% (PC103G).

The number of Psychology patients on waiting list for treatment ≤ 52 weeks will require an additional 5,132 people to be seen to reach the target of 81%

The number of people waiting longer than 52 weeks has decreased by -2.9% from 9,611 in May to 9,331 in June (PC103E).

In 2024, performance for Psychology continues to be monitored including in the monthly Primary Care engagement. The focus is on increasing numbers seen to drive improvements in waiting lists. The Heat map access trend continues to be monitored at CHO level. A performance tool was developed in 2023 which shows numbers seen per WTE for each CHO for all therapy services – the rolling data for a 12 month period is updated on a monthly basis and is provided to each CHO.

Numbers of referrals to date is 10,143 which represents an increase of +92.8% in expected activity (5,262) and +8.7% ahead of the same period last year (9,329) (PC38)

The number of new patients seen for first time at the end of June 2024 is 5,764 which is -20.2% below same period last year position of 7,227 (PC40)
CHOs 1, 2, 4, 6 and 7 are over 10% of achieving this year's target for access

Performance data for Psychology is impacted by 1 non-return of data in 2024.

***Data return rate 96.9%**

Numbers of Patients Seen

The following is an analysis of the number of patients seen year to date within the therapy disciplines;

Number of Patients Seen YTD March 2024 (please note data return rates referred to above)				
Discipline	Target YTD (NSP 2024)	Actual YTD	Actual vs. Target* YTD	Actual vs. SPLY YTD
Physiotherapy (PC125)	293,802	254,334	-13.4%	-3.8%
Occupational Therapy (PC124)	194,628	179,521	-7.8%	+0.5%
SLT (PC126)	141,156	89,560	-36.6%	-12.1%
Podiatry (PC127)	42,936	30,208	-29.6%	-12.1%
Ophthalmology (PC128)	39,918	51,368	+28.7%	+6.2%
Audiology (PC129)	27,108	27,965	+3.2%	-1.3%
Dietetics (PC130)	34,320	39,475	+15%	+9.2%
Psychology (PC131)	24,900	22,138	-11.1%	-2.1%

Social Inclusion

Opioid substitution

Social inclusion continues to operate at similar levels to 2023. The total number of clients in receipt of opioid substitution treatment (outside prisons) as of the end of May was 10,277 and is -4.7% below the expected activity level of 10,784 (SI1)

* **Data return rate 100%**

Needle Exchange

The number of unique individuals attending the Pharmacy Needle Exchange Programme at the end of March 2024 (data quarterly in arrears) was 1,341 which represents a decrease of -10.6% in expected activity (1,500) and -18.6% below the same period last year position of 1,647.(SI46)

* **Data return rate 100%.**

Palliative Care

Access to Palliative Inpatient Beds

The national year to date position is 97.8% accessing a Specialist Palliative care inpatient unit bed within 7 days, compared to the performance target of 98% and is +0.5% above same period last year position of 97.3% (PAC1A).

* **Data return rate 95.7%**

Access to Palliative Community Service

The national year to date position is 89.7% (98% in June) of patients triaged for Specialist Palliative care services in a community setting within one day of referral, compared to the performance target of 96% and it is -5.8% below of same period last year position of 95.2%. (PAC36).

92.8% (93.2% in June) of all Category 1 triaged patients received specialist palliative care within 2 days in a community setting, compared to the performance target of 90% and is +4.6% above the same period last year position of 88.7%. (PAC58).

90.5% (93% in June) of all Category 2 triaged patients who received specialist palliative care within 7 days in a community setting, compared to the performance target of 90% and is +3.6% ahead of same period last year position of 87.4%. (PAC59).

4,251 patients received specialist palliative care treatment in their normal place of residence in June which represents an increase of +17.7% in expected activity (3,612) and +10.6% ahead of the same period last year (3,845) (PAC14)

* **Data return rate 100%**

Children's Palliative Care

The number of children in the care of the Children's Nurse Co-Ordinators was 328 in June 2024. Compared to the expected activity of 320. (PAC37).

* *Data return rate 100%.*

The number of children in the care of the acute specialist paediatric palliative care team in June 2024 is 53 compared to the expected activity of 65 (PAC39).

* **Data return rate 50%.**

Mental Health

CAMHS Inpatient Units

Nationally, 103 children had been admitted to CAMHS inpatient units by the end of June 2024, compared with 98 in same period last year (MH37). Close weekly monitoring at the national level of the activity and waitlist for inpatient services takes place with on-going engagement with the in-patient units and CHO areas

as appropriate. The provision of CAMHS inpatient services depends on a combination of HSE and agency staff in the context of maintaining safe levels of staffing including meeting the needs of complex cases requiring special arrangements.

97.2% of child and adolescent mental health admissions were to child and adolescent acute inpatient units in 2024 YTD which is above the target (>85%) (MH5).

Meanwhile, 99.9% of bed days used by children/adolescents were in Child and Adolescent Acute Inpatient Units YTD in 2024, which is above >95% target (MH57).

The number of children admitted to adult mental health units at the end of June 2024 indicates there was three child admissions. This is compared to five child admissions to adult units in same period last year. Local protocols around ensuring that children are only placed in adult inpatient units when all alternative options have been exhausted are currently in place in all CHOs and are monitored and discussed weekly with national management where any instances are targeted to minimise the length of stay (MH38).

*** Data return rate 100%**

Community CAMHS

Nationally there was a decrease of 83 children on the waiting list for community mental health services, from 3,759 in June to 3,842 in May 2024 (MH50).

There are 478 children waiting longer than 12 months in June 2024.

CHO1 have (0), CHO2 (0), CHO3 (21) CHO4 (305), CHO5 (2), CHO6 (0), CHO7 (27), CHO8 (121) and CHO9 (2) children waiting longer than 12 months to be seen by CAMHS (MH55).

The CAMHS waiting list will require an additional 943 children to be seen to reach the pre pandemic wait list levels of 2,816 (March 2020).

In 2024, there was 7,488 referrals accepted to Community CAMHS which is +5.1% more than the same period in in 2023 (MH44).

6,611 new/re-referred appointments were offered which is -3.8% less than same period last year position (MH45).

Performance Profile April - June 2024

Of these 6,202 were seen (MH46) and 409 (6.2%) did not attend their appointment (MH47) / (MH48).

As of the end of June, 58% of referrals accepted by child and adolescent community teams nationally were offered an appointment and seen within 12 weeks against a target of ≥78% (MH7). A detailed data analysis has been completed to establish contributory factors behind variances across CHOs. Engagement with CHO management teams', points to general trends, including increased demand for services, in part driven by population growth, recruitment and retention challenges, reduced seasonal capacity during summer months and the prioritisation of urgent referrals. In addition, CHOs have reported local issues, including long-term sick leave among key staff, which are proactively being addressed.

89.7% of new or re-referred cases were seen within 12 months in community CAMHS services YTD June 2024 (MH72).

The severity of presenting symptoms as well as an assessment of risk is always taken into account in terms of waiting times. Every effort is made to prioritise urgent cases so that the referrals of young people with high risk presentations are addressed as soon as possible.

Nationally, 94.7% of urgent referrals to CAMHS were responded to within three working days, above the ≥90% target (MH73).

*** Data return rate 98.7%**

Community Adult Mental Health Services

85.3% of referred patients were offered an appointment within 12 weeks in general adult mental health YTD June 2024 against a target of ≥90% (MH1). CHOs 4, 6, 7, 8 and 9 are below target and this was discussed on engagement calls with action plans put in place were appropriate. 23% of people referred to general adult services did not attend (DNA) their appointments (MH24).

*** Data return rate 98.3%**

91.7% of referred patients in Psychiatry of Later Life services were offered an appointment within 12 weeks YTD June 2024 against a target of ≥98% (MH3).

*** Data return rate 88.2%**

The data is collected by teams based on a 'count' of service users in the time periods referred to above. The data sets are disconnected from each other and no person-specified connections can be made between data sets. This is very important to keep in mind when analysing and drawing conclusions from the monthly data.

Inpatient Adult Mental Health Services (Data recorded quarterly in arrears)

At the end of Q1 2024, the number of admissions to acute adult services was 2,725, which is -5% above target (2,868) and -2.4% below same period last year position of 2,791.

*** Data return Q1 rate 100%¹**

¹Cork University Hospital - data unavailable Q4/2023 & Q1 2024 due to vacant post; Bantry - closed for refurbishment since October 2023 and expected to re-open in July 2024

Disability Services

Residential Places

There were 8,557 residential places for people with a disability in June 2024, which is +1.5% above the target for the full year of 8,431 (DIS108). A number of new emergency residential places have been added to the residential base, which results in a capacity increase. However, it should also be noted that Residential Capacity will also reduce during the year as a result of the loss of places in congregated settings due to RIPs, which could not be re-utilised. This is in keeping with Government policy, which is to move away from institutionalised settings (i.e. Time to Move On from Congregate Settings) where the state is actively implementing a policy that will have a bed reduction impact. In addition, "in-year" capacity (bed) levels will also be impacted negatively as a result of regulatory requirements; that is, where an inspection outcome leads to capacity being reduced.

Data return 100%.

Priority 1 Residential Places and Intensive Support Packages

In accordance with NSP 2024, Specialist Disability Services committed to developing 96 new Priority 1 residential placements and 469 intensive support packages for priority 1 cases; this includes 447 packages delivered in 2023 which have been maintained in 2024. At end of June 2024, 76 new Priority 1 residential

Performance Profile April - June 2024

places were developed (DIS102) and 498 intensive support packages provided for Priority 1 cases (DIS109).

Data return 100%.

RT Places

There were 1,982 people (all disabilities) in receipt of Rehabilitative Training in May 2024, which is -13.4% (308) less than the 2,290 profiled target (DIS14). The reduction in the utilisation of the RT placements has prompted the need for a review of RT services which has commenced and will continue in 2024.

Data return rate 0%

(Non-return due to unexpected leave. Data will be reported in the next period)

Congregated Settings

The HSE continues to support individuals currently residing in congregated settings, to move into more appropriate community and residential settings. At the end of June there were 15 transitions for the year; the target is to facilitate the movement of 73 people from congregated to community settings in 2024. (DIS55).

The HSE *Time To Move On policy* is supporting people to progress from campus based/ institutional settings to community based homes with support. The on-going commitment of the HSE to the vision of "Time to Move on" has been fundamental in bringing about meaningful and sustainable change for approximately 2,400 individuals since the programme began and is enabling these individuals to live ordinary lives in ordinary places in the community. The original 2012 report identified over 4,000 people living in 72 congregated settings. With the incremental progress made since 2012 to support people to transition to homes in the community, there are now less than 1,500 people remaining in the tracked congregated settings identified in the original report.

Work remains on-going to address the key challenges arising in relation to the procurement of appropriate housing in a buoyant housing market, the ongoing challenges recruiting staff across a range of disciplines and grades, and the undertaking of necessary works to ensure HIQA compliance – which must be secured before any new facility can become operational.

Disability Act Compliance

The Assessment of Need process is set out in the Disability Act, 2005. The aim of an Assessment of Need under the Disability Act is to identify whether a person has a disability, the nature and extent of the disability, any health and education needs arising from that disability, as well as what services are required to meet those needs.

The Disability Act outlines the statutory timelines under which Assessments of Need under the Act must be completed. In summary, the assessment report must be completed within 6 months of the date the application was received. While the HSE endeavours to meet its legislative obligations under the Act, it has struggled to achieve compliance with these timeframes. At end of Quarter 1, 2024, 10% of assessments were completed within the timeframes set out in the Disability Act 2005 and accompanying Regulations.

The numbers of applications for AON under the Act have risen steadily since its implementation in June 2007. 8,472 applications for AON were received in 2023. This was the highest number of applications received in any 12 month period since Part 2 of the Act was commenced in June 2007 and represents a 23% increase on the number of AON applications received in the previous 12 months. This growth has continued into 2024, with a further 5,345 received in to end Quarter 2 (1,087 up on same period last year).

The HSE has endeavoured to meet its legislative obligations under the Act. However, as a consequence of a High Court ruling of December 2009, the effect of which was to open eligibility to all persons born after 1st June 2002 who are suspected of having a disability, the number of children aged five and over, and in addition of school-going age, has risen steadily as a percentage of all applications received. At the end of 2011, the figure stood at 26%, while throughout 2023, this figure averaged 62%. In the first half of 2024, this figure has increased to 68%. This is a reflection that the AON process is an accumulative process in terms of numbers of children and young people seeking access.

The judgement of Ms Justice S Phelan in the case of CTM & JA v the HSE was delivered in March 2022. This judgment found that the Preliminary Team

Performance Profile April - June 2024

Assessment approach described in the HSE's Standard Operating Procedure for Assessment of Need does not meet the requirements of the Disability Act. This judgement in effect requires the HSE to deliver diagnostic assessments where necessary and appropriate as part of the Assessment of Need process. This ruling has a significant impact operationally and has resulted in a growth in the numbers of overdue Assessments of Need. The requirement for services to prioritise the statutory Assessment of Need process will also impact significantly on their capacity to provide necessary intervention / treatment for children with disabilities.

As a result of the Judgement, activity indicates that there has been an increase in the total number of applications 'overdue for completion', which now stands at 11,131 (including 521 applications for which an extended time-frame was negotiated with the parent on the grounds of there being exceptional circumstances as provided for in paragraph 10 of the regulations).

It is important to note that children do not require an Assessment of Need as defined by the Disability Act (2005) in order to access a Children's Disability Network Team (CDNT) or Primary Care service. They can be referred by a healthcare professional or parent/carer to the CDNT for children with complex needs as a result of their disability, or to Primary Care for children with non-complex needs. This direct access ensures more efficient and timely access for many families.

The increased numbers of applications for Assessment of Need, which is a legal entitlement under the Disability Act 2005, is a reflection of the increase in population and of families exploring all options for accessing services for their child.

A new targeted waiting list initiative is in place and the Government has allocated funding of €6.89 million to facilitate the HSE to procure up to 2,500 additional AONs, with delivery targeted over the next 6 months. This funding is in addition to existing HSE core funding of the €5m, allocated for procurement of private assessments.

This waiting list initiative will target those families waiting longest for AONs, with the HSE reimbursing clinicians directly through the procurement of capacity from approved private providers. This provides a more equitable and fair approach rather than reimbursement of parents directly.

It is envisaged that this initiative will be progressed through the existing framework of providers procured by each CHO Area, while also seeking to expand the list with any new private provision.

The situation in relation to AON is not the same in every area. The numbers of applications in some areas have historically been significantly lower than other areas. This reflects a service model used in those areas to engage with families as soon as practicable and support them to access services without them having to resort to the Assessment of Need legal route.

This will be explored by the HSE in the context of the Roadmap for Service Improvement actions relating to Services Access and Improvement, with the objective to spread this good practice across all teams nationally, and rebalancing the demand for AON with CDNT Service Provision, including workshops with families and with staff on how this can be achieved.

Data return rate 100%

PA/Home Support Hours/Respite Services

The delivery of services over the last few years has been significantly impacted by the pandemic. While services are fully operational, there is reduced capacity due to necessary infection prevention and control requirements and all decisions made regarding the provision of services to an individual must be based on individual risk assessments and in line with public health guidance.

The delivery of PA and Home Support Services has remained steady during quarter 1, 2024; PA Services (DIS39) delivered 459,413 hours in Q1, which was below the NSP target by -0.7%, although 5.8% ahead of the same period last year. This is reflective of the allocation in the NSP 2024 of additional personal assistant hours to support persons with a disability in their own communities. Home Support Services (DIS 58) delivered 951,427 hours in Q1, which was 9.4%

ahead of the NSP target and 15% ahead of the same period last year (data quarterly one month in arrears).

There has been increased investment in Respite Services over the last number of years, including additional allocation in successive National Service Plans and this has impacted positively on the level of service delivered in successive years. The number of respite overnights (37,280) is -6.8% below the target for the year of 40,005 (DIS57). This is due mainly to data non-returns for Respite/PA/Home Support metrics. However, notwithstanding the non-returns, service provision was ahead of the same period last year.

The number of day only sessions (14,162) is 40.2% ahead of the NSP target of 10,102 (DIS59) for Quarter 1, and significantly ahead (44.3%) of the same period last year.

Older Persons

Home Support

In 2018 the former Home Help Service and the Home Care Package Scheme were amalgamated to form the Home Support Service. The Home Support Service reports on the total hours delivered and numbers of clients in receipt, allowing for greater levels of visibility and transparency from a performance reporting perspective.

For 2024 it is expected that the 22m hours will be delivered to 54,100 people by year end. It is also expected that 360,000 home support hours provided from Intensive Home Care Packages will be delivered to approximately 235 people by December 2024 (total target of 22.36m hours /54,335 clients).

The June YTD data reported shows that that 11,279,502 hours were provided, a variance of +3.5% (OP53) on target and an increase of +7% on the same period last year (SPLY) activity. 53,681 people were in receipt of home support (OP54) (point in time) as at end June. 64 people were in receipt of an Intensive Home Care Package (OP4).

Demand for home support continues to increase due to population growth and the increasing dependency of the growing numbers of people aged ≥80years, within the over 65 years' cohort. Waiting lists for Home Support have become a

feature of the service, now primarily associated with an increasing capacity issue related to the availability of care staff. Each person on the waiting list has been assessed by the Home Support Service. In the context of increasing demand, priority is given to those being discharged from acute hospitals who are in a position to return home with supports and to those in the community with acute needs. Funding approval is expedited across the system to ensure minimum waiting times.

The CHO waiting list at end of June indicates that no person assessed for Home Support was waiting on funding (OP55) (Preliminary data). 4,654 people were recorded as waiting on care staff, 2,078 (44.6%) of whom were waiting on a new service to be provided, with 2,576 (55.4%) others, currently in receipt of Home Support, waiting on care staff to deliver an additional service.

Significant work is underway to address the challenges associated with capacity issues and carer availability. The Recruitment Reform and Resourcing (RRR) Programme was established in June 2022 to form a coordinated response to these challenges and the HSE Resourcing Strategy – Resourcing our Future was launched in June 2023.

This RRR Programme introduces a focused capacity to grow our workforce and support our services to meet projected increased workforce demand while ensuring that staff are enabled to work at the top of their license to maximise the delivery of healthcare services. This Programme is a multi-year, Strategic Programme of work. It aims to increase capacity within services and have positive impacts on the delivery of integrated and community based care to patients, service users and their families.

The Home Support Reform and Statutory Scheme Programme was established in August 2022 to progress planning within the HSE for the establishment of the Statutory Home Support Scheme (SHSS) and reform of Home Support Services in line with Sláintecare. The Programme developed an implementation roadmap for the reform and regulation of the Home Support Service. The key HSE Home Support reform priorities identified for 2024 include planning for future regulation of Home Support Providers and the development of a Home Support Services Scheme. Developing a future Home Support Service operating model and progressing the procurement and implementation of a Home Support Service

Performance Profile April - June 2024

Client Management and e-rostering system, (HSS-CMeRS) and the National Nursing Home Support Scheme and Statutory Home Support Scheme Information Systems are key deliverables for 2024. The impending draft Home Support Regulations and HIQA Standards will inform these planning priorities for 2024.

As part of these reform priorities and in preparation for the SHSS and Home Support Regulations, the implementation of standardised care needs assessments (interRAI) for new Home Support applications is planned.

In June 2024, the overall number of people assessed using the InterRAI Ireland Assessment System was 378 (OP56). Of these 378 InterRAI assessments, 270 were completed for the purposes of a Home Support Service Application.

*** Data return rate 96.9%**

NHSS

In June 2024 the Nursing Homes Support Scheme funded 23,285 long term public and private residential places, and when adjusted for clients not in payment, there were 24,366 places supported under the scheme. The number of people funded under the scheme is below the profile for June by 24.

There is an increase of 513 in the number of people supported under the scheme when compared to the same period last year. This is a 2.3% increase in activity year on year.

The number on the placement list at the end of June 2024 is 636 (June 2023 – 627). This is an increase of 9 (1.4%) on the same period last year.

A total of 4,406 people were approved for funding under the scheme in the first six months of 2024 compared to 4,486 people approved for the same period last year. This is a decrease of 80 approvals or 1.8% year on year.

In the first six months of 2024, 5,680 applications were received and 4,652 clients went into care and were funded under the scheme in public and private nursing homes. This is an increase of 72 or 1.6% in the number of starters supported under the scheme when compared to 2023. The scheme took on new clients

within the limits of the resources available, in accordance with the legislation and Government policy and HSE Service Plan 2024.

*** Data return rate 100%**

Transitional Care Funding

Transitional Care Funding, which is in place to assist Acute Hospitals with the discharge of patients who are finalising their Nursing Home Support Application or in need of a period of convalescence care before returning home, has continued to be in demand in 2024.

May YTD 2024, 4,286 people were approved for Transitional Care Funding to discharge from Acute Hospitals to nursing home beds (OP46) against a target of 4,904. Of the 821 approvals in May, 407 were for NHSS applicants and 414 for convalescence care.

*** Data return rate 100%**

Acute Hospital Services Scorecard/Heatmap

	KPI No.	Metric	Reporting Frequency	Expected Activity / Target	National YTD	% Var YTD	Children's Health Ireland	Dublin Midlands	Ireland East	RCSI	Saolta	South/ South West	UL	Current (-2)	Current (-1)	Current	
Quality and Safety	Serious Incidents																
		% of reviews completed within 125 days of category 1 incidents from the date the service was notified of the incident	M	70%	51% [R]	-19%									32%	48%	38%
		% of reported incidents entered onto NIMS within 30 days of notification of the incident (at 30.04.24)	Q	70%	78% [G]	11.4%									76%	78%	85%
		Extreme and major incidents as a % of all incidents reported as occurring	Q	<1%	0.6% [G]	-40%									0.6%	0.5%	0.6%
	Service User Experience (Q1 @ 21.05.24)																
		% of complaints investigated within 30 working days of being acknowledged by the complaints officer	Q	75%	75% [G]	0%	77% [G]	89% [G]	79% [G]	87% [G]	41% [R]	53% [R]	60% [R]				
	HCAI Rates																
	CPA51	Staph. Aureus (per 10,000 bed days)	M	<0.7	0.9 [R]	24.6%	0.7 [G]	0.9 [R]	0.7 [G]	1.0 [R]	0.6 [G]	1.2 [R]	0.9 [R]	1.0	0.7	0.8	
	CPA52	C Difficile (per 10,000 bed days)	M	<2	2.4 [R]	18.8%	0.2 [G]	2.4 [R]	2.1 [G]	2.1 [G]	2.7 [R]	2.8 [R]	2.9 [R]	2.6	2.7	2.2	
	A97	% of acute hospitals implementing the requirements for screening of patient with CPE guidelines	Q	100%	91.7% [A]	-8.3%	100% [G]	85.7% [R]	83.3% [R]	100% [G]	100% [G]	90% [R]	100% [G]	89.6%	89.6%	91.7%	
	Surgery																
	A99	Hip fracture surgery within 48 hours of initial assessment	Q-1Q	85%	79.3% [A]	-6.7%		78.8% [A]	90.7% [G]	70.3% [R]	80% [A]	79.9% [A]	81.7% [G]	71.6%	76.1%	79.3%	
	A45	Surgical re-admissions within 30 days of discharge	M-1M	≤2%	1.6% [G]	-17.6%		2.5% [R]	1.2% [G]	1.7% [G]	1.6% [G]	1.6% [G]	2.0% [G]	1.6%	1.7%	1.5%	
	CPA27	Procedure conducted on day of admission (DOSA) (site specific targets)	M-1M	82.4%	80.2% [G]	-2.7%		71.8% [A]	91.9% [G]	80.4% [G]	67% [A]	86.9% [G]	65.3% [R]	79.7%	80.4%	79.5%	
	Medical																
CPA53	emergency re-admissions within 30 days of discharge	M-1M	≤11.1%	11.8% [A]	6.7%		12.7% [R]	11.3% [G]	10.8% [G]	12.2% [A]	13.2% [R]	10.7% [G]	11.5%	11.7%	11.6%		
Ambulance to ED Handover Times – Under Review																	
A158	% of patients arriving by ambulance at ED to physical and clinical handover within 20 minutes of arrival	M-1M	80%														

	KPI No.	Metric	Reporting Frequency	Expected Activity / Target	National YTD	% Var YTD	Children's Health Ireland	Dublin Midlands	Ireland East	RCSI	Saolta	South/ South West	UL	Current (-2)	Current (-1)	Current
Access and Integration	Urgent colonoscopy															
	A80	Number waiting > 4 weeks (zero tolerance)	M	0	1,927 [R]	1,927	0 [G]	128 [R]	3 [R]	1,215 [R]	580 [R]	0 [G]	1 [R]	387	146	86
	Routine Colonoscopy															
	A25	% Waiting < 13 weeks following a referral for colonoscopy or OGD	M	65%	62% [G]	-4.7%	30.1% [R]	41.4% [R]	70% [G]	73.2% [G]	64% [G]	66.7% [G]	63.7% [G]	63.7%	63.2%	62%
	Emergency Department Patient Experience Time															
	A29	ED within 24 hours (Zero Tolerance)	M	97%	96.1% [R]	-0.9%	99.3% [G]	95.4% [R]	96.7% [R]	94.1% [R]	96.4% [R]	96.5% [R]	93.8% [R]	95.9%	96.6%	96.1%
	A96	75 years or older within 24 hours (Zero Tolerance)	M	99%	92% [R]	-7%		95.1% [R]	93.5% [R]	86.5% [R]	92.8% [R]	93.4% [R]	85.3% [R]	91.4%	93.4%	91.9%
	A26	ED within 6 hours	M	70%	56.8% [R]	-18.8%	76% [G]	51.4% [R]	63% [R]	44.6% [R]	52.6% [R]	59.3% [R]	55.6% [R]	56.4%	57.9%	58.2%
	A32	75 years or older within 6 hours	M	95%	36.6% [R]	-61.5%		35.3% [R]	47.5% [R]	25% [R]	29.1% [R]	36.9% [R]	46.7% [R]	36.5%	37.7%	37.5%
	Waiting times for Procedures															
	A152	Adult waiting < 9 months (inpatient)	M	90%	71.8% [R]	-20.2%		69.7% [R]	75.7% [R]	74% [R]	58.7% [R]	77.1% [R]	88.3% [G]	71.3%	71.7%	71.8%
	A153	Adult waiting < 9 months (day case)	M	90%	80.5% [R]	-10.6%		81% [R]	82.1% [A]	85.8% [G]	77.6% [R]	74.7% [R]	87.3% [G]	80.5%	80.7%	80.5%
	A154	Children waiting <9 months (inpatient)	M	90%	62.2% [R]	-30.9%	52.8% [R]	100% [G]	63.8% [R]	87.1% [G]	77.3% [R]	85.5% [A]	50.9% [R]	62.7%	63.4%	62.2%
	A155	Children waiting < 9 months (day case)	M	90%	67.6% [R]	-24.9%	61.6% [R]	100% [G]	90.6% [G]	88.6% [G]	74.9% [R]	81.7% [A]	71.3% [R]	67.6%	67.6%	67.6%
	A156	Outpatient waiting < 15 months	M	90%	87.7% [G]	-2.6%	81.1% [A]	91.3% [G]	85.7% [G]	98.4% [G]	84.8% [A]	83.9% [A]	92.6% [G]	87.6%	87.7%	87.7%
	Delayed Transfers of Care															
A49	Number of beds subject to Delayed Transfers of Care (site specific targets) (Zero Tolerance)	M	≤350	402 [R]	14.9%	6	67	69	17	105	114	24	385	414	402	

	KPI No.	Metric	Reporting Frequency	Expected Activity / Target	National YTD	% Var YTD	Children's Health Ireland	Dublin Midlands	Ireland East	RCSI	Saolta	South/ South West	UL	Current (-2)	Current (-1)	Current	
Access and Integration	Cancer																
	NCCP24	Rapid Access Breast (urgent), Lung and Prostate Clinics within recommended timeframe	M	95%	75.7% [R]	-20.3%		49.4% [R]	55.0% [R]	99.6% [G]	80.4% [R]	94.9% [G]	89.5% [A]	70%	73.5%	69.5%	
	NCCP4	Urgent Breast Cancer within 2 weeks	M	95%	73.6% [R]	-22.6%		29.9% [R]	42.2% [R]	99.6% [G]	92.9% [G]	97.4% [G]	93.8% [G]	66.3%	69.3%	66.8%	
	NCCP6	Non-urgent breast within 12 weeks	M	95%	73.4% [R]	-22.7%		42.2% [R]	95% [G]	100% [G]	77.2% [R]	57.6% [R]	20% [R]	70%	66.3%	67.7%	
	NCCP11	Lung Cancer within 10 working days	M	95%	89.8% [A]	-5.5%		99% [G]	99.8% [G]	98.4% [G]	72.7% [R]	91.2% [G]	80.4% [R]	88.9%	93.2%	89.4%	
	NCCP17	Prostate Cancer within 20 working days	M	90%	73.7% [R]	-18.1%		97.2% [G]	88.5% [G]	100% [G]	11.2% [R]	89.0% [G]	76.8% [R]	73.6%	76.1%	68%	
	NCCP22	Radiotherapy treatment within 15 working days	M	90%	64.7% [R]	-28.1%		51.5% [R]			77.9% [R]	79.5% [R]	73.7% [R]	66%	67.9%	64.1%	
Finance, Governance & Compliance	Financial Management																
		Net expenditure variance from plan (pay + non-pay - income)	M	≤0.1%	4,930,708	19.84% [R]	19.58% [R]	22.35% [R]	16.14% [R]	17.41% [R]	19.60% [R]	20.27% [R]	20.27% [R]	25.76%	21.20%	19.84%	
		Pay expenditure variance from plan	M	≤0.1%	3,607,679	16.94% [R]	16.10% [R]	19.91% [R]	13.85% [R]	15.92% [R]	17.82% [R]	17.94% [R]	18.04% [R]	20.36%	17.78%	16.94%	
		Non-pay expenditure variance from plan	M	≤0.1%	1,801,592	16.96% [R]	22.61% [R]	15.69% [R]	14.60% [R]	12.56% [R]	13.07% [R]	15.59% [R]	11.19% [R]	26.04%	20.10%	16.96%	
		Gross expenditure variance from plan (pay + non-pay)	M	≤0.1%	5,409,271	16.95% [R]	17.95% [R]	18.44% [R]	14.08% [R]	14.82% [R]	16.26% [R]	17.17% [R]	15.74% [R]	22.19%	18.55%	16.95%	
		Service Arrangements (at 26/06/24)															
		% of the monetary value of service arrangements signed	M	100%	0%	-100%									0%	0%	0%
	Internal Audit																
	% of internal audit recommendations implemented by agreed due date (New KPI)	Q	90%	35% [R]	-61.1%	N/A	N/A	37% [R]	67% [R]	20% [R]	44% [R]	33% [R]		49%	35%		
Workforce	Attendance Management																
		% absence rates by staff category (Non Covid)	M	≤4%	5.71% [R]	42.75%	4.72% [R]	5.33% [R]	5.07% [R]	4.76% [R]	5.38% [R]	5.50% [R]	6.37% [R]	5.11%	5.15%	5.46%	
		% absence rates by staff category (Covid)	M	NA	5.71%		0.76%	0.46%	0.34%	0.31%	0.44%	0.36%	0.59%	0.22%	0.32%	0.77%	

Acute Hospital Services

Overview of Key Acute Hospital Activity

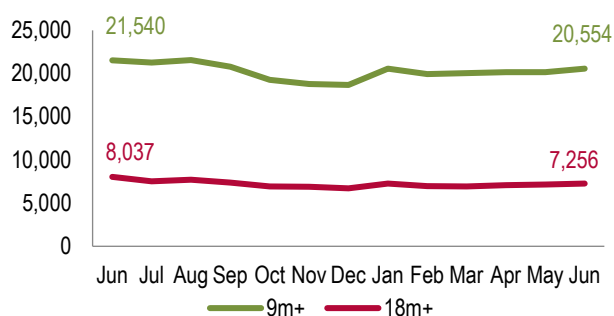
Activity Area	Expected Activity YTD	Current Period YTD	% Var YTD	SPLY YTD	SPLY % Var	Current (-2)	Current (-1)	Current
Emergency Presentations – A167	834,932	912,677	9.3%	832,819	9.6%	154,779	163,442	147,940
New ED Attendances – A164	671,607	730,142	8.7%	668,093	9.3%	122,457	129,289	117,951
OPD Attendances – A15	1,856,435	1,913,164	3.1%	1,823,571	4.9%	330,047	343,881	289,877

Activity Area (HIPE data month in arrears)	Expected Activity YTD	Current Period YTD	% Var YTD	SPLY YTD	SPLY % Var	Current (-2)	Current (-1)	Current
Inpatient discharges – A3	267,684	286,681	7.1%	265,218	8.1%	57,681	56,228	60,917
Inpatient weight units – A4	617,123	625,890	1.4%			124,889	124,770	127,824
Day case (includes dialysis) – A5	515,623	520,184	0.9%	492,104	5.7%	100,123	106,483	110,303
Day case weight units (includes dialysis) – A6	137,146	138,068	0.7%			26,580	28,030	28,955
IP & DC Discharges – A7	783,307	806,865	3%	757,322	6.5%	157,804	162,711	171,220
% IP	34.2%	35.5%	4%	35.0%	1.5%	36.6%	34.6%	35.6%
% DC	65.8%	64.5%	-2.1%	65.0%	-0.8%	63.4%	65.4%	64.4%
Emergency IP discharges – A12	190,907	209,257	9.6%	190,250	10%	41,761	40,733	44,197
Elective IP discharges – A13	36,361	37,195	2.3%	34,558	7.6%	7,658	7,720	8,625
Maternity IP discharges – A14	40,416	40,229	-0.5%	40,410	-0.4%	8,262	7,775	8,095
Inpatient discharges >75 years – A103	60,241	65,846	9.3%	59,127	11.4%	12,967	12,894	13,857
Day case discharges >75 years – A104	98,712	107,008	8.4%	98,169	9%	20,735	21,768	22,457

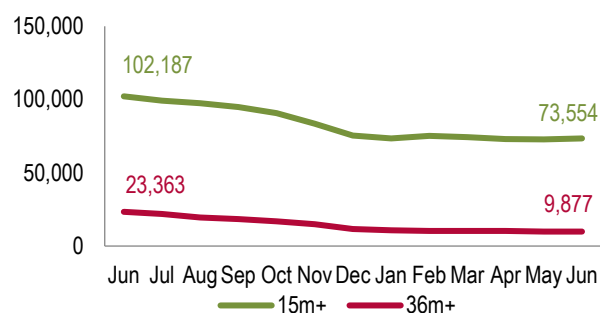
Inpatient, Day case and Outpatient Waiting Lists

Performance area	Target/ Expected Activity	Freq	Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current	Best performance	Outliers
Inpatient adult waiting list within 9 months – A152	90%	M	● 71.8%	67.8%	+4%	71.3%	71.7%	71.8%	15 out of 39 hospitals reached target	SLK (16.7%), Portlaoise (38.9%), GUH (52.9%)
Day case adult waiting list within 9 months – A153	90%	M	● 80.5%	77.2%	+3.3%	80.5%	80.7%	80.5%	20 out of 42 hospitals reached target	UHW (66.5%) SLK, Bantry (68.9%), GUH (72.8%)
Inpatient children waiting list within 9 months – A154	90%	M	● 62.2%	62.6%	-0.4%	62.7%	63.4%	62.2%	7 out of 16 hospitals reached target	UHL (50%), RVEEH (52.6%), CHI (52.8%)
Day case children waiting list within -9 months – A155	90%	M	● 67.6%	76.2%	-8.6%	67.6%	67.6%	67.6%	15 out of 26 hospitals reached target	Nenagh (50%), CHI (61.6%), CUH (67.3%)
Outpatient waiting list within 15 months – A156	90%	M	● 87.7%	82.9%	+4.8%	87.6%	87.7%	87.7%	27 out of 44 hospitals reached target	St Columille's (47.8%), Nenagh (79.2%), CHI (81.1%)

Inpatient & Day Case Waiting List



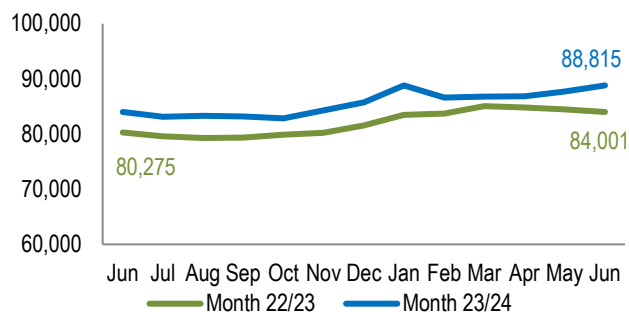
Outpatient Waiting List



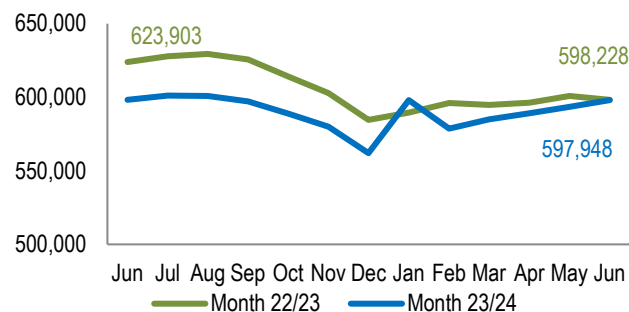
Waiting List Numbers

	Total	Total SPLY	SPLY Change	>9 Mths	>15 Mths
Adult P	20,395	18,480	1,915	5,748	3,037
Adult DC	58,666	55,716	2,950	11,457	5,136
Adult PDC	79,061	74,196	4,865	17,205	8,173
Child P	3,539	3,892	-353	1,337	708
Child DC	6,215	5,913	302	2,012	955
Child PDC	9,754	9,805	-51	3,349	1,663
OPD	597,948	598,228	-280	165,268	73,554

Total No. on Inpatient & Day Case Waiting List



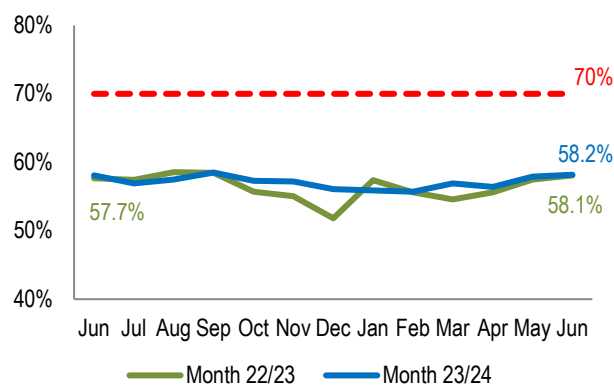
Total No. on Outpatient Waiting List



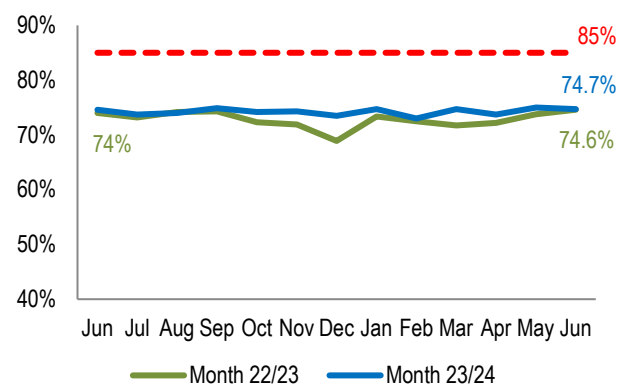
Emergency Department Performance

Performance area	Target/ Expected Activity	Freq	Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current	Best performance	Outliers
% admitted or discharged within 6 hours – A26	70%	M	● 56.8%	56.4%	+0.4%	56.4%	57.9%	58.2%	5 out of 28 hospitals	Beaumont (35.9%), Naas (39.6%), Tallaght-Adults (39.9%)
% admitted or discharged within 9 hours – A27	85%	M	● 74.1%	72.9%	+1.2%	73.7%	75%	74.7%	7 out of 28 hospitals	Naas (54.9%), Tallaght-Adults (55.5%), Beaumont (55.9%)
% in ED admitted or discharged within 24 hours – A29	97%	M	● 96.1%	95.3%	+0.8%	95.9%	96.6%	96.1%	14 out of 28 hospitals	OLOL (89.7%), GUH (91.8%), Tallaght-Adults (92.1%)
% 75 years+ admitted or discharged within 6 hours – A32	95%	M	● 36.6%	35.4%	+1.2%	36.5%	37.7%	37.5%	St Michaels (79.5%), SLK (58%), Tullamore (50.1%)	OLOL (19.7%), Beaumont (23%), Naas (25.4%)
% 75 years+ admitted or discharged within 9 hours – A30	99%	M	● 54.9%	52.9%	+2%	54.6%	56.7%	56.1%	St Michaels (96%), Tullamore (78.4%), SLK (77.3%)	OLOL (34.2%), Naas (38.3%), Beaumont (39.6%)
% 75 years+ admitted or discharged within 24 hours – A96	99%	M	● 92%	89.2%	+2.8%	91.4%	93.4%	91.9%	6 out of 27 hospitals	OLOL (72.7%), GUH (80.2%), CUH (86.4%)

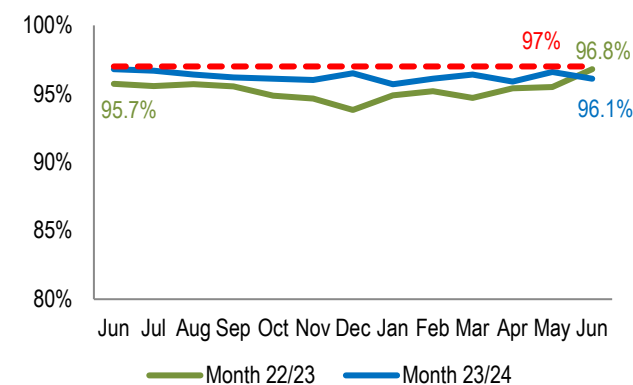
% admitted or discharged within 6 hours



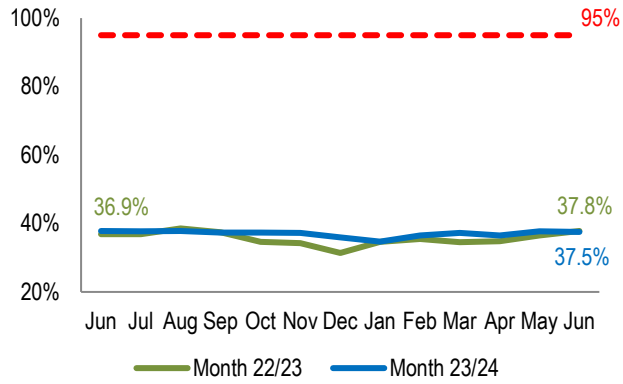
% admitted or discharged within 9 hours



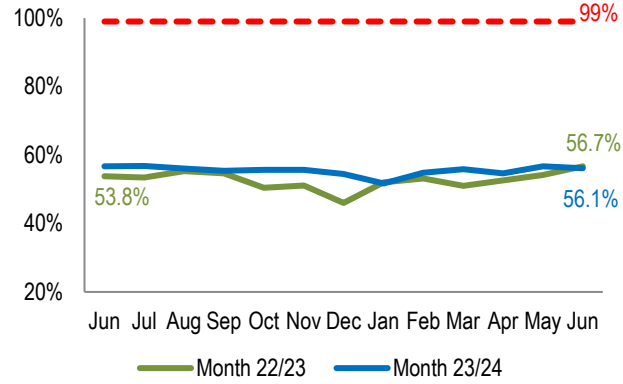
% in ED admitted or discharged within 24 hours



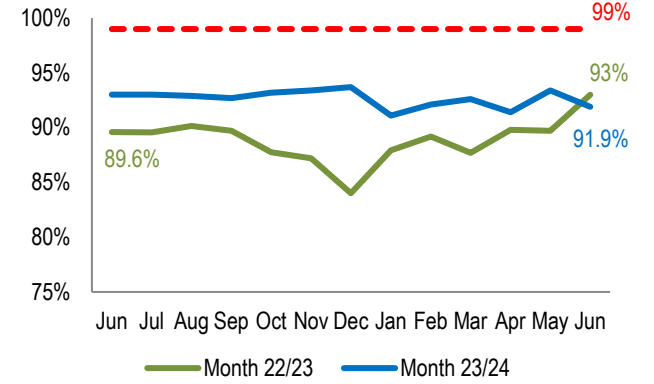
% 75 years+ admitted or discharged within 6 hours



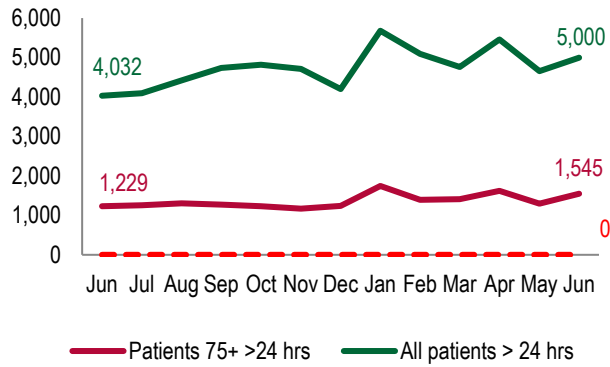
% 75years+ admitted or discharged within 9 hours



% 75 years+ admitted or discharged within 24 hours



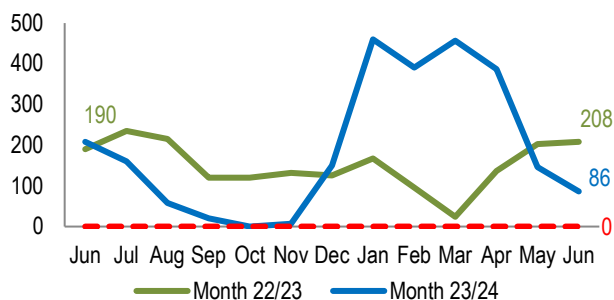
Number in ED waiting over 24 hours



Colonoscopy

Performance area	Target/ Expected Activity	Freq	Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current	Best performance	Outliers
Urgent Colonoscopy - No. of new people waiting > 4 weeks – A80	0	M	● 1,927	835	1,092	387	146	86	32 out of 38 have 0	RUH (43), Beaumont (19), MUH (14)
Bowelscreen – no. colonoscopies scheduled > 20 working days		M	● 325	482	-157	53	35	26	10 out of 15 hospitals	SJH (21), Wexford (2), Connolly, RUH, SUH (1)
% waiting < 13 weeks following a referral for colonoscopy or OGD – A25	65%	M	● 62.0%	60.7%	1.3%	63.7%	63.2%	62%	20 out of 37 hospitals	Portlaoise (26.4%), SJH (28.6%), CHI (30.1%)
% of people waiting < 9 months for an elective procedure GI scope – A157	95%	M	● 94.9%	0.3%	95.5%	95.3%	94.9%	0.3%	28 out of 37 hospitals	Portlaoise (67.2%), CHI (71.8%), SJH (76.8%)

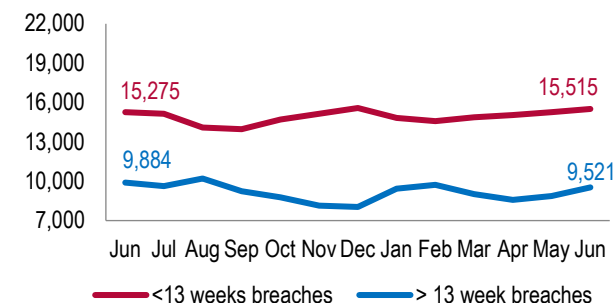
Urgent Colonoscopy – No. of new people waiting > 4 weeks



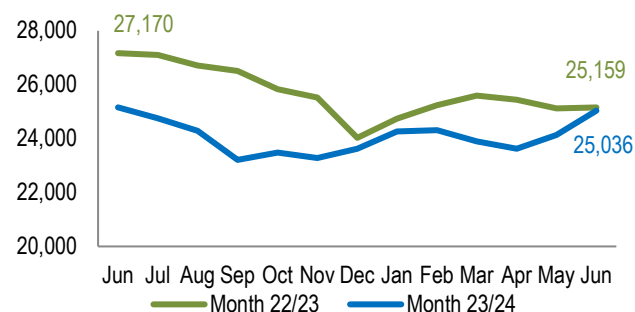
BowelScreen: Urgent Colonoscopies

	Current (-2)	Current (-1)	Current
Number deemed suitable for colonoscopy	341	336	325
Number scheduled over 20 working days	53	35	26

No. on waiting list for Colonoscopy and OGD



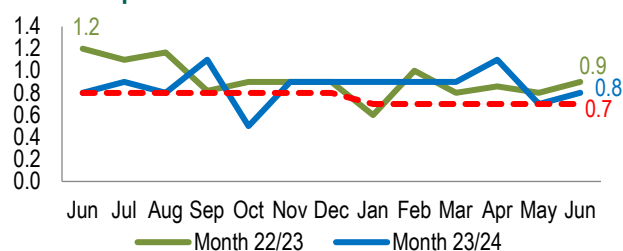
Total No. on waiting list for Colonoscopy and OGD



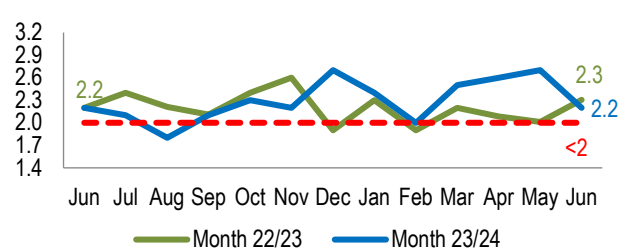
HCAI Performance

Performance area	Target/ Expected Activity	Freq	Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current	Best performance	Outliers
Rate of new cases of hospital Staph. Aureus infection – CPA51	<0.7	M	● 0.9	0.8	+0.1	1.0	0.7	0.8	35 out of 46 hospitals	St. John's (3.8), Mullingar (3.2), UHL (2.9)
Rate of new cases of hospital C Difficile infection – CPA52	<2	M	● 2.4	2.1	+0.3	2.6	2.7	2.2	31 out of 46 hospitals	Croom (18.5), LUH (6.6), TUH (6.5)
% of hospitals implementing the requirements for screening with CPE Guidelines – A97	100%	Q	● 91.7%	95.8%	-4.1%	89.6%	89.6%	91.7%	44 out of 48 hospitals	1 hospital didn't achieve the target

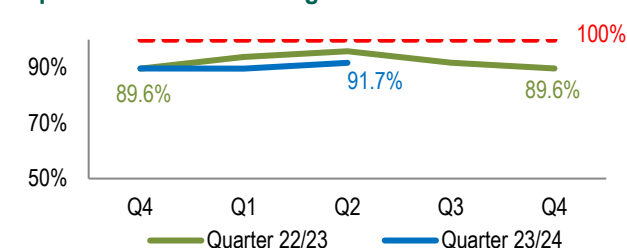
Rate of Staph. Aureus bloodstream infections



Rate of new cases of C Difficile associated diarrhoea



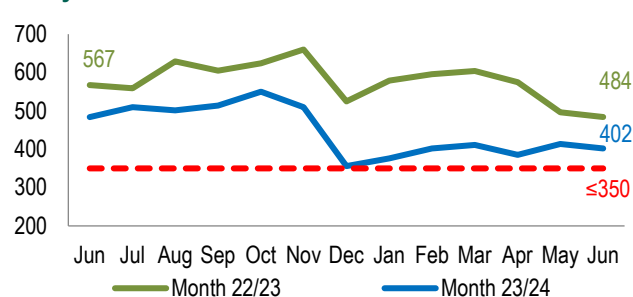
Requirements for screening with CPE Guidelines



Delayed Transfers of Care

Performance area	Target/ Expected Activity	Freq	Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current	Best performance	Outliers
Number of beds subject to delayed transfers of care – A48	≤350	M	● 402	484	-82	385	414	402	Mullingar, SLRON (0), 4 hospitals (1)	CUH (44), GUH (39), LUH (35)

Delayed Transfers of Care



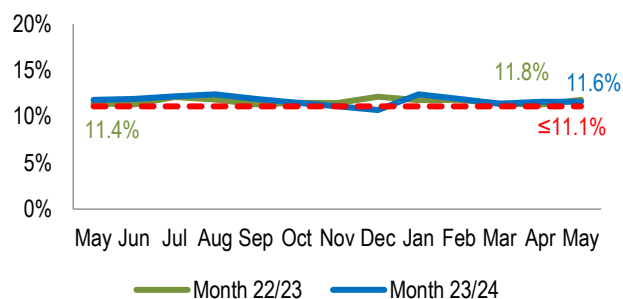
Delayed Transfers of Care by Category

	Over 65	Under 65	Total	Total %
Home	22	5	27	6.7%
Residential Care	120	23	143	35.6%
Rehab	40	25	65	16.2%
Complex Needs	26	28	54	13.4%
Housing/Homeless	12	14	26	6.5%
Legal complexity	48	4	52	12.9%
Non compliance	14	9	23	5.7%
COVID-19	11	1	12	3.0%
Total	293	109	402	100%

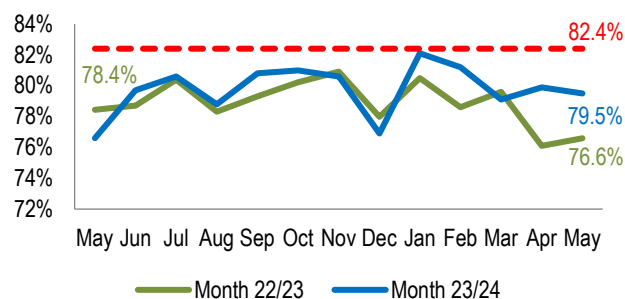
Surgery and Medical Performance

Performance area	Target/ Expected Activity	Freq	Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current	Best performance	Outliers
Emergency re-admissions within 30 days of discharge – CPA53	≤11.1%	M-1M	● 11.8%	11.8%	0%	11.5%	11.7%	11.6%	16 out of 34 hospitals	Tullamore (16.6%), UHW (15.9%), LUH (15.3%)
Procedure conducted on day of admission (DOSA) – CPA27	82.4%	M-1M	● 80.2%	80.6%	-0.4%	79.7%	80.4%	79.5%	24 out of 33 hospitals	Croom (30.4%), GUH (44.1%), SJH (46.7%)
Laparoscopic Cholecystectomy day case rate – CPA28	60%	M-1M	● 44.8%	49%	-4.2%	40.6%	46.8%	44.8%	14 out of 30 hospitals	4 hospitals (0%)
Surgical re-admissions within 30 days of discharge – A45	≤2%	M-1M	● 1.6%	1.7%	-0.1%	1.6%	1.7%	1.5%	34 out of 40 hospitals	SIVUH (1.2%), Croom (0.8%), RVEEH (0.4%)
Hip fracture surgery within 48 hours of initial assessment - A99	85%	Q-1Q	● 79.3%	76.7%	+2.6%	71.6%	76.1%	79.3%	5 out of 15 hospitals achieved target	Beaumont (66.1%), LUH (67.4%), OLOL (72.1%)

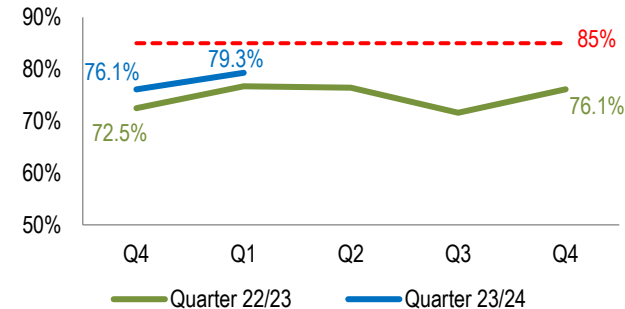
Emergency re-admissions within 30 days



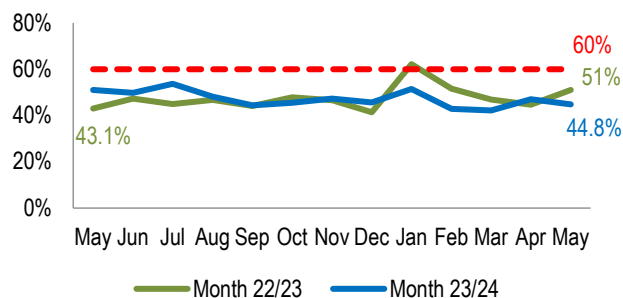
Procedure conducted on day of admissions



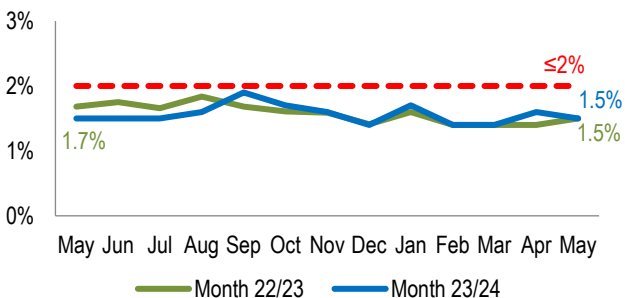
Hip fracture surgery within 48 hours



Laparoscopic Cholecystectomy day case rate



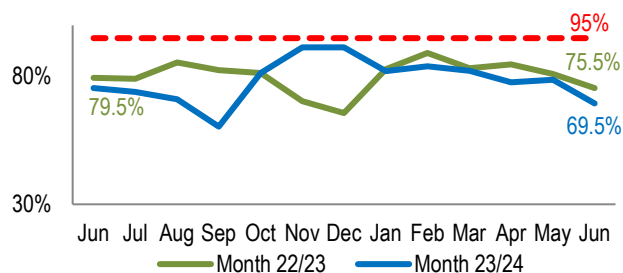
Surgical re-admissions within 30 days



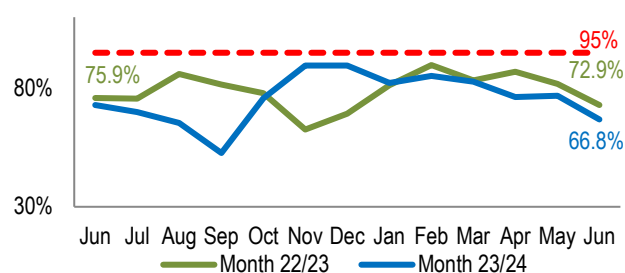
Cancer Services

Performance area	Target/ Expected Activity	Freq		Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current	Best performance	Outliers
% of new patients attending Rapid Access Breast (urgent), Lung Prostate Clinics within recommended timeframe – NCCP24	95%	M	●	75.7%	82.7%	-7%	70%	73.5%	69.5%	Beaumont (100%), LUH (98.8%), UHW (98%)	SJH (32.2%), SVUH (36.6%), MMUH (39.2%)
Urgent breast cancer within 2 weeks – NCCP4	95%	M	●	73.6%	82.6%	-9%	66.3%	69.3%	66.8%	6 out of 9 hospitals reached the target	SJH (16.4%), MMUH (24%), SVUH (30.8%)
Non-urgent breast within 12 weeks – NCCP6	95%	M	●	73.4%	69%	+4.4%	70%	66.3%	67.7%	4 out of 9 hospitals reached the target	CUH (16.6%), LUH (16.7%), UHL (25.5%)
Lung Cancer within 10 working days – NCCP11	95%	M	●	89.8%	81.5%	8.3%	88.9%	93.2%	89.4%	4 out of 8 hospitals reached the target	UHL (62.2%), GUH (80%), UHW (89.3%)
Prostate cancer within 20 working days – NCCP17	90%	M	●	73.7%	84.3%	-10.6%	73.6%	76.1%	68%	5 out of 8 hospitals reached the target	GUH (6.7%), SVUH (17.9%), UHL (79.2%)
Radiotherapy within 15 working days – NCCP22	90%	M	●	64.7%	63.3%	+1.4%	66%	67.9%	64.1%	UHW (97.1%), CUH (86.7%)	UHL (23.7%), SLRON (61.4%), GUH (77%)

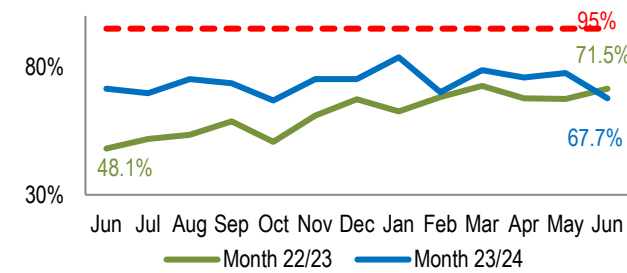
Rapid Access within recommended timeframe



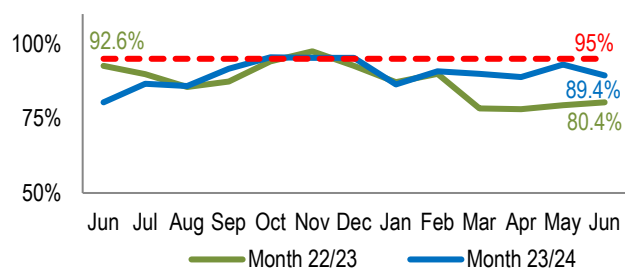
Breast Cancer within 2 weeks



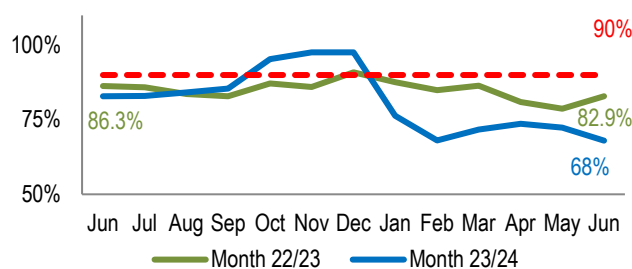
Non-urgent breast within 12 weeks



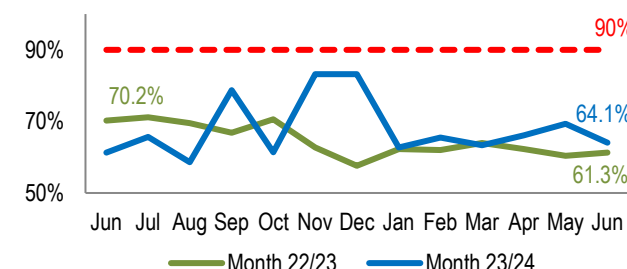
Lung Cancer within 10 working days



Prostate Cancer within 20 working days



Radiotherapy within 15 working days



Ambulance to ED Handover Times – Under Review

Performance area	Target/ Expected Activity	Freq	Current Period YTD		Current (-2)	Current (-1)	Current	Best performance	Outliers
Ambulance to ED Handover Times % of patients arriving by ambulance at ED to physical and clinical handover within 20 minutes of arrival – A158	80%	M-1M							

Acute Care Update

Emergency Care

All Emergency Presentations: The total number of Emergency presentations (including Local injury units) for June 2024 was **147,940**.

Emergency Department (ED) attendances: The total number of New ED attendances for June 2024 was **117,951**.

Outpatient Department Attendances

The number of new and returned outpatient attendances was **289,877** in June 2024.

Patient Experience Time (PET): **96.1%** of all patients attending ED were seen within 24 hours in June 2024, below the NSP target of 97%. This compares with **96.8%** in June 2023.

ED PET <24 hours for patients aged 75+: was **91.9%** in June 2024, this is below the NSP target of 99%. This compares with **93%** in June 2023.

Delayed Transfers of Care (DTC)

There were **402** Delayed Transfers of Care at the end of June 2024, a 17% decrease from the number of DTCs in June 2023 (**484**).

Elective Access

Inpatient and Day Case Waiting Lists

At the end of June 2024, the number of people waiting for an inpatient or day case appointment (IPDC) was **88,815** which represents an increase of **1,106 (1.26%)** on the previous month (May 2024) (**87,708**).

Colonoscopy/OGD Waiting lists

At the end of June 2024, the number of people on the Colonoscopy/OGD waiting list was **25,036**. This is an increase of 896 (**3.71%**) on the number waiting at the end of the previous month (May 2024) (**24,140**).

Outpatient Waiting Lists

The total number of people waiting for an Outpatient appointment was **597,948** at the end of June 2024 which is an increase of **4,560 (0.77%)** since May 2024 (**593,388**).

BowelScreen

The BowelScreen target is that 90% of patients are scheduled within 20 days. In June 2024, **322** invitations were issued of which **270 (83.85%)** were scheduled within the target time of 20 days.

Cancer Services

Symptomatic Breast Cancer Clinics

Six of the nine Symptomatic Breast Cancer Sites were compliant with the target that 95% of attendances whose referrals were triaged as urgent by the cancer centre and adhered to the national standard of 2 weeks for urgent referrals in June 2024:

- University Hospital Waterford – **100%**
- Beaumont Hospital – **100%**
- Galway University Hospital – **99.4%**
- Letterkenny University Hospital – **98.8%**
- University Hospital Limerick – **98.6%**
- Cork University Hospital – **95.2%**

Three hospitals were below target of 95% within 2 weeks:

- St. Vincent's University Hospital – **30.8%**
- Mater Misericordiae University Hospital – **24%**
- St. James's Hospital – **16.4%**

Rapid Access Clinics for Lung Cancer Services

Four of the eight hospitals were compliant with the target that 95% of patients attending lung rapid access clinics who attended or were offered an appointment within 10 working days of receipt of referral in designated cancer centres in June 2024:

- St. Vincent's University Hospital – **100%**

- Mater Misericordiae University Hospital – **100%**
- St. James's Hospital – **100%**
- Beaumont Hospital – **100%**

Four hospitals were below the target of 95% within 10 days:

- Cork University Hospital – **93.1%**
- University Hospital Waterford – **89.3%**
- Galway University Hospital – **80%**
- University Hospital Limerick – **62.2%**

Rapid Access Clinic for Prostate Cancer Services

Five of the eight hospitals were compliant with the target that 90% of patients attending prostate rapid clinics who attended or were offered an appointment within 20 working days of receipt of referral in the cancer centres target in June 2024:

- St. James's Hospital – **100%**
- Beaumont Hospital – **100%**
- Mater Misericordiae University Hospital – **100%**
- University Hospital Waterford – **100%**
- Cork University Hospital – **93.9%**

Three hospitals were below the target:

- University Hospital Limerick – **79.2%**
- St. Vincent's University Hospital – **17.9%**
- Galway University Hospital – **6.7%**

Radiotherapy

The target is that 90% of patients commence treatment within 15 working days of the patient being deemed ready to treat target. In June 2024 compliance was as follows:

- UPMC Waterford – **97.1%**
- Cork University Hospital – **86.7%**
- Galway University Hospital – **77%**
- St Luke's Radiation Oncology Network (SLRON) – **61.4%**
- Mid-Western Radiation Oncology Centre Limerick – **23.7%**

Performance Profile April - June 2024

Human Resources

WTE Data for June

The WTE for Acute Services (which includes the Hospital Groups, National Ambulance Services (NAS) and Other Acute Services) in June 2024 was 80,820, this represents an increase of +63 WTE since May and an increase of +1,242 WTE YTD. The headcount for Acute Services for June 2024 was 88,787.

Two of the six staff categories are showing growth this month – Nursing & Midwifery (+113 WTE) and General Support (+57 WTE). Management & Admin decreased by -13 WTE, Health & Social Care Professionals decreased by -26 WTE, Medical & Dental decreased by -28 WTE and Patient & Client Care showed the biggest reduction of -40 WTE.

Four of the seven Hospital Groups are showing growth this month. The largest WTE increase was reported in DMHG who increased by +90 WTE, followed by IEHG (+42 WTE), RCSIHG (+24 WTE) and CHI (+5 WTE). SSWHG decreased by -2 WTE, ULHG decreased by -10 WTE and Saolta had the largest reduction (-74 WTE). NAS reduced by -9 WTE and Other Acute Services reduced by -3 WTE.

Absence Data for June

In Acute Services the absence rate is 5.76% of which 0.48% (8.24% of the total) is COVID-19 related. Within Acute Services the highest absence rates are reported in National Ambulance Service at 7.68%, of which 0.30% is COVID -19 related and ULHG at 6.61% of which 0.38% is COVID-19 related. The lowest absence rate is reported in IEHG at 5.27% of which 0.31% is COVID-19 related. Acute Services overall are showing an increase of 0.29% on last month.

Data Sources

Acute BIU Final MDR
National Human Resources
National BowelScreen Programm

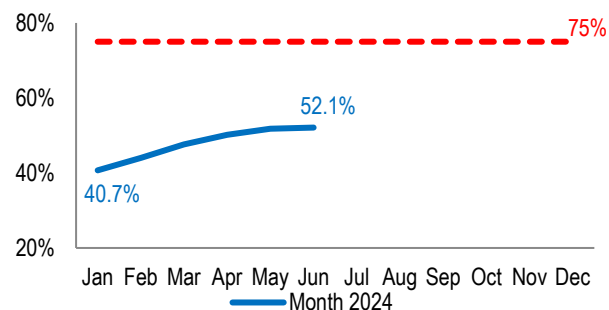
National Ambulance Service

National Ambulance Service

	KPI No.	Metric Title	Reporting Frequency	Expected Activity / Target	National YTD	% Var YTD	Current (-2)	Current (-1)	Current
Access and Integration		Patient Handover at ED to Clear							
	NAS76	% of ambulance crews who are ready and mobile to receive another 999 / 112 call within 20 minutes of clinically and physically handing over their patient at an ED or hospital	M	75%	47.6% [R]	-36.5%	50.2%	51.8%	52.1%
		Ambulance Response Times							
	NAS11	% of clinical status 1 PURPLE incidents responded to by a NAS patient-carrying vehicle in 18 minutes and 59 seconds or less	M	75%	75.7% [G]	0.9%	79.1%	72.8%	74.1%
	NAS17	% of clinical status 1 RED incidents responded to by a NAS patient-carrying vehicle in 18 minutes and 59 seconds or less	M	45%	47.3% [G]	5.2%	49.0%	47.1%	44.7%

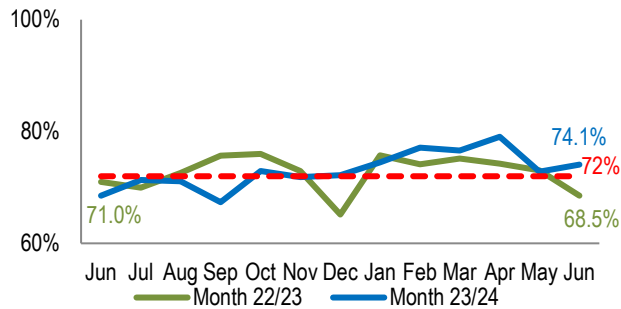
Performance area	Target/ Expected Activity	Freq	Current Period YTD	Current (-2)	Current (-1)	Current	Best performance	Outliers
Patient Handover at ED to Clear % of ambulance crews who are ready and mobile to receive another 999 / 112 call within 20 minutes of clinically and physically handing over their patient at an ED or hospital – NAS76	75%	M	● 47.6%	50.2%	51.8%	52.1%		

Patient Handover at ED to Clear

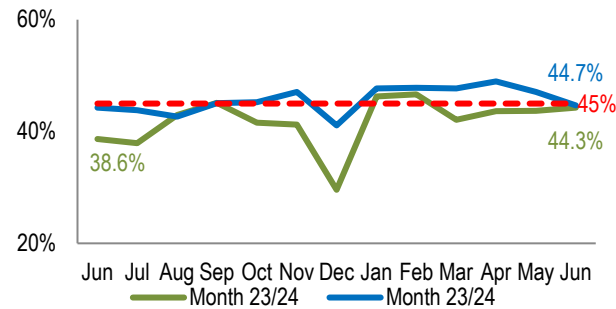


Performance area	Target/ Expected Activity	Freq	Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current	Best performance	Outliers
% of clinical status 1 PURPLE incidents responded to by a NAS patient-carrying vehicle in 18 min & 59 seconds or less - NAS11	75%	M	● 75.7%	73.7%	2.6%	79.1%	72.8%	74.1%		
% of clinical status 1 RED incidents responded to by a NAS patient-carrying vehicle in 18 min & 59 seconds or less – NAS17	45%	M	● 47.3%	44.4%	6.6%	49.0%	47.1%	44.7%		
Return of spontaneous circulation (ROSC) – NAS35	40%	Q	● 34.5%	38.7%	-10.8%	42.2%	39.0%	29.3%		

PURPLE - Incident Response Times within 18min & 59 sec



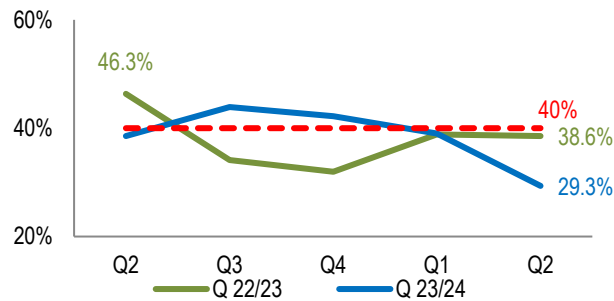
RED - Incident Response Times within 18min & 59 sec



Call Volumes (arrived at scene) (Excludes those stood down en route)

	Target/ Expected Activity	Current Period YTD	% Var YTD	SPLY YTD	SPLY change
PURPLE	3,390	3,322	-2.0%	3,000	322
RED	81,090	85,936	6.0%	74,638	11,298

ROSC



National Ambulance Service Update*

*excludes Dublin Fire Brigade

Activity volume: for AS1 and AS2 calls received this month has increased by 2,816 calls (11%) compared to the same month last year (June 2023 – 25,675). The daily average call rate for AS1 and AS2 calls received this month was 950 (30 days this month).

PURPLE (life-threatening cardiac or respiratory arrest) incidents responded to within the target timeframe of 75% in 18 minutes and 59 seconds was below the target at 74.1% this month, and up 1.3% compared to last month i.e. May 2024

PURPLE calls increased by 3.3% (14) compared to the same month last year (June 2023).

RED (life-threatening illness or injury, other than cardiac or respiratory arrest) incidents responded to within the expected activity timeframe of 45% in 18 minutes and 59 seconds was below target at 44.7% this month, down 2.4% compared to last month i.e. May 2024.

RED calls increased by 14.1% (1,540) compared to the same month last year (June 2023).

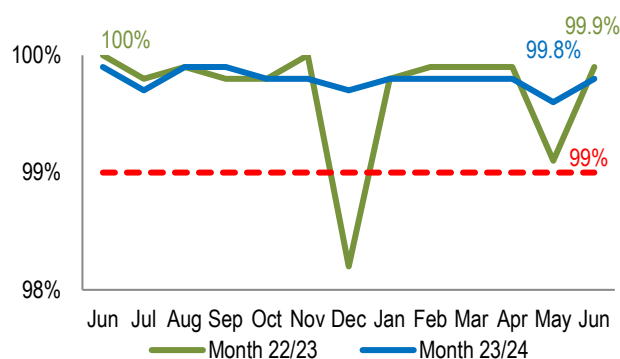
Intermediate Care Service; 78% of all inter hospital transfer requests were managed by a NAS ICV, down 3% since May 2024 (81%)

Resource Optimisation Delivering Accountable Implementation

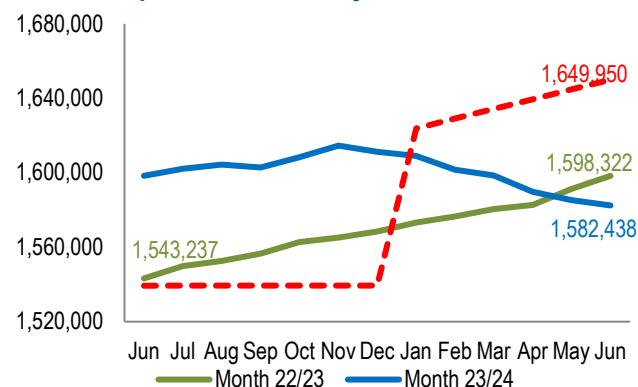
Primary Care Reimbursement Services

Performance area	Target/ Expected Activity	Freq		Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current
% of completed medical card / GP visit card applications processed within 15 days – PCRS3	99%	M	●	99.8%	99.9%	-0.1%	99.8%	99.6%	99.8%
Number of persons covered by medical cards– PCRS1	1,649,950 YTD/ 1,681,266 FYT	M	●	1,582,438	1,598,322	-15,884	1,589,673	1,585,294	1,582,438
Number of persons covered by GP visit cards - PCRS2	851,353 YTD/ 1,069,391 FYT	M	●	684,227	547,535	+136,692	669,443	677,257	684,227

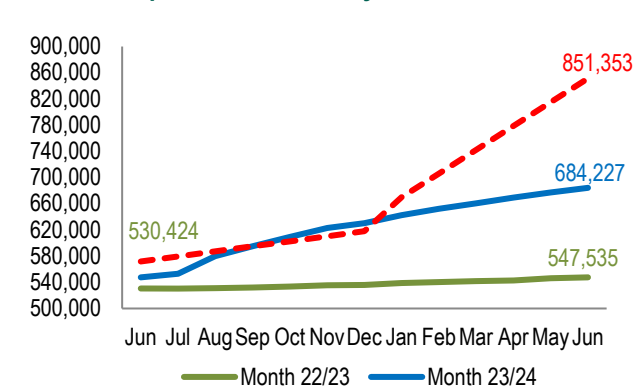
Medical card turnaround within 15 days



Number of persons covered by medical cards



Number of persons covered by GP visit cards



Primary Care Reimbursement Services Update

The number of people who held Medical Card eligibility on 30th June 2024 was 1,582,438, a decrease of 2,856 on the previous month. The total number with eligibility for a GP Visit Card on 30th June 2024 was 684,227, an increase of 6,970 on the previous month. As at 30th June 2024, 2,266,665 or 42.9% of the population had Medical Card or GP Visit Card eligibility, an overall increase of 4,114 on the previous month. (Population figures are based on the CSO 2023 census figure of 5,281,600).

In the first 6 months of 2024, Medical Card eligibility fell by 28,749 while GP Visit Card eligibility rose by 53,752.

EU and North South Unit

The HSE EU & North South Unit is a National Service and a key Health Service enabler. Working for the HSE across boundaries and borders, this Unit aims to contribute to the health and wellbeing of people living in the border region and beyond and to enable better access to health and social care services through cross-border, all-island and multi-country working. The unit fulfils the following roles:

1. As both a project Partner and Lead Partner ensure successful implementation of the various projects for HSE under the EU Interreg VA programme with partners in NI & Scotland.
2. Continue to develop practical solutions to common health challenges and develop new ways to improve health and social care services for the wellbeing of people on the island, where appropriate.
3. Positively engage Government Depts., North South Ministerial Council (NSMC), Special EU Programmes Body (SEUPB) and other relevant Agencies on future of EU Structural funds available for health & social care services along the border.
4. As HSE Brexit Co-ordinator, continue to support the HSE Brexit Lead in conducting detailed analysis of the implications of Brexit.

Cross Border/EU Work

- Participation in the EU funding programme EU4Health information webinars, attendance at EU4Health Liaison Group meetings and engagement with D/Health on this.
- Multiple engagement with relevant HSE services to create awareness of EU4Health open calls, joint actions & procurement opportunities available under the 2024 Work Programme and identify potential projects. Also, co-ordination from a HSE perspective with multiple external stakeholders on the EU4Health programme such as D/Health and HRB.
- Ongoing engagement with D/Health on the development of the 2025 EU4Health Work Programme and further consolidating of EU4Health structure in HSE

- Support successful EU4Health Projects approved under the 2021, 2022 & 2023 Work Programmes and continue to advise participant HSE Service Areas on EU Programme & Financial management matters.
- Ongoing engagement with D/Taoiseach and D/Health on Shared Island Fund
- On behalf of D/Health, undertake a HSE-wide mapping exercise of Investment areas and possible all-island projects for support under Shared Island Fund. Specialist Services list of possible investment priorities for HSE. Substantial return of 43 possible investment priorities received from Community Operations, Chief Clinical Officer, Mental Health etc. Ongoing engagement with D/Health on consideration of investment priorities. Unit continues to update and add to this specialist list of all island possibilities.
- Ongoing collaboration with HSE Research & Evidence Division (EU4H LEAR) on HSE participation in EU4Health Programme
- Lead Partner – In 2024 the HSE has received €2.6m Interreg VA funding at Q2 2024. The accumulated total received since the start of the Interreg VA Programme is €22.48m. A total of €13.6m has been paid to Project Partners. All projects have completed their activity and the final outstanding funding claims are being managed.
- Non-Lead Partner Interreg VA Projects - HSE has a total of €2.7m at Q2 2024. All projects have completed their activity and the final outstanding funding claims are being managed.
- Collaboration with Health Authorities on a cross border basis to develop proposals for support by PEACEPLUS programme 2022-2027 - €80m + in EU funding available for border counties under Collaborative Health & Social Care Investment Area 4.1.. Five proposals have been submitted to the call which closed on March 14th 2024 These 5 Projects will support the following Thematics: Childrens Mental Health Services (Autism/Mental Health), Frailty, Mental Health (Resilience), Obesity and Cardiology. A further application supporting Addiction Services and Community Detox has been submitted to the 'Addiction' specific call under Inv Area 4.1 by the May 23rd 2024 deadline. A total of €17m is available under this call. The Gross Value of all six Projects submitted to

SEUPB is in the order of €53m supporting 46,900 beneficiaries. HSE reps will ensure alignment within future EU funding programmes with Sláintecare principles such as the new Health Regions. Outcomes of the appraisal of Health & Social Care projects submitted to Investment Area 4.1 are expected in Q3/Q4 2024.

- As Lead Partner for CAWT led PEACEPLUS Projects, EUNS Unit will assume new responsibility for the Controller Function (external verification of project funding claims). Unit currently working closely with CAWT Finance Forum and CAWT Finance Manager in agreeing acceptable system within the HSE to comply with the requirements of the Programme. SEUPB has issued initial guidance for Lead Partners on the anticipated costs of FLC & Procurement arrangements. Further clarification and direction is expected from SEUPB at project stage.
- Discussions with D/Health on future EU funded programmes.
- Ongoing work with CAWT Governance sub-group.
- Other North South work including Centre for Cross Border Studies, Ulster University School of Medicine etc. on behalf of the HSE
- On-going CAWT Management Board and Secretariat meetings and associated meetings
- Ongoing Cross Border SLA and MOU meetings including North West Cancer Centre
- Ongoing meetings with SEUPB as Lead Partner for EU funded projects
- Ongoing Finance meetings between CAWT and HSE on various EU funded projects.
- Progression of mainstreaming opportunities emerging from Interreg VA 2017 – 2022 for HSE.

Brexit

- Brexit continues to pose a risk with the ongoing uncertainty related to service continuity, divergence etc.
- Dealing with on-going Brexit-related PQ's, FOI's, press queries etc. as HSE's Brexit Co-ordinator.
- Chair of the HSE Brexit Working Group and continued involvement with D/Health Brexit and UK Strategic Oversight Group meetings as HSE link person.

- Circulation and ongoing updating of Risk register for Brexit co-ordination.
- Ongoing work on mapping of the list of SLAs and MOUs
- Ongoing discussions with D/Health colleagues regarding the Memorandum of Understanding relating to the Common Travel Area and its impacts on Cross Border Healthcare provision.
- On HSE Brexit behalf, engagement with Professional Regulations Unit D/Health on new legislation to rectify the anomaly that Brexit created which is preventing medical students from NI & GB Universities from applying for IE internships post-graduation.
- On HSE Brexit behalf, engagement with D/Health on divergence on recognition of qualifications, in the first instance, Pharmacists. Co-ordinated meeting in HSE to produce paper on the topic, including Assistant National Director, Cancer Control Programme; Assistant National Director of Recruitment, Reform and Resourcing and Chief Pharmacist, Acute Hospitals Drugs Management Programme, Acute Operations. Paper submitted to D/Health in Q3 2022.
- Consider existing Cross Border Health Services in the context of changes to cross jurisdictional Healthcare delivery brought about by the Windsor Framework and act on specific issues affecting ROI patient health and social care. This includes changes to the Medicines Regulatory regime from January 1st 2025 brought about by Windsor Framework which requires medicines in the NI Market to come under the UK Regulator MHRA from this date and no longer under the EU Falsified Medicines Directive

Blended Working

- Continued Implementation of HSE Blended working policy – in place within the Unit since summer 2023 & working well. Policy to be reviewed again by end Q3 2024.

Next Steps & Key Outcomes – 3rd Quarter 2024

- Work closely with new Reporting National Directorate – National Services following restructuring of HSE Centre. Engage with REOs and new Health Regions on EU & Cross Border matters.
- Continue to implement the HSE's Blended working policy

- As both Partner and in instances, Lead Partner, continue to ensure the successful implementation of the various projects under the EU Interreg VA programme by meeting financial and beneficiary targets and complying with closure arrangements.
- Ongoing review and support for cross border and all-island projects not funded by Interreg VA and PEACEPLUS.
- Continue to support the HSE work in conducting detailed analysis of the implications of Brexit.
- Ongoing engagement with HSE Brexit Steering Group as Chair.
- Prepare Brexit briefings and updates for A/Secretary General scheduled meetings.
- As Brexit Workstream lead, prepare replies for PQs, media queries
- Ensure GDPR SCC compliance list is complete as requested by HSE DPO.
- As part of the Brexit Preparations evaluate and report on compliance with the European Commission, Brexit Readiness Notices as requested by the National Director with responsibility for Brexit.
- Continuous review of the mapping of cross border and all-island services (SLAs and MOUs) through the HSE governance structure to the D/Health. The Common Travel Area (CTA) underpins these services, allowing British and Irish citizens to access health services within each other's jurisdiction. While EU membership facilitated and overlaid the approach to healthcare right associated with the CTA, these bilateral arrangements predate either the UK's or Ireland's accession to the EU. Therefore, HSE is to seek D/Health assurance of continuity of service including Brexit-proofing of SLAs/MOUs by HSE legal services.
- In conjunction with HSE partners and the Management Board and Secretariat, work with CAWT partners to liaise with SEUPB on any queries raised on the appraisal of the 5 applications submitted to the PEACEPLUS Health and Social Care Call as well as the Addictions business case submitted to the Addictions Call under Investment Area 4.1 in May 2024. Have in place the necessary arrangements to commence the Lead Partner function of PEACEPLUS Projects in early 2025
- Participation in the University of Ulster's Medical School Stakeholder Advisory Board
- Engagement with D/Health, HRB and HSE on the EU4health funding programme
- Engagement with D/Taoiseach on Shared Island initiative. Support ongoing collaboration with D/Health and HSE colleagues in identifying appropriate strategic healthcare projects for consideration under Shared Island.
- Continue to work closely with HSE Comms/Health Matters to promote the work of the Unit, as well as EU Funded Projects and Programmes
- Participation in North South eHealth Steering Group
- Participation in EU4health Liaison Group
- Participation in monthly meetings with D/Health International Unit on the strategy for overall North South health co-operation
- Ongoing engagement with D/Health and possibly D/Taoiseach on development of a cross border Specialist Services list.
- Outside of the Health & Social Care element in PEACEPLUS there are wider opportunities for the HSE in the Programme such as the Strategic Planning and Engagement Investment Area 6.1 Engage with external stakeholders on possibilities.
- Continue to engage with D/Health & HRB supporting the development of projects under the 2024 EU4Health work programme & promote the positive impacts of approved projects supported under previous years' work programmes.
- Support line division in DoH on the development of the 2025 EU4Health Work Programme
- Ongoing monitoring of Brexit issues such as HR Recognition of Qualifications, and new legislation to allow NI and GB medical students to work in IE

Lead Partner – Submission of final Supplementary Lead Partner Consolidated quarterly report for the iRecover project has been completed

Capital and Estates

Capital – Allocation/Expenditure Analysis (Capital expenditure vs expenditure profile)

2024 Allocation / Expenditure Analysis - Capital							
	Total Allocation (Profile) for 2024	Cum Profile for Period Jan - June	Expenditure for Period Jan - June	Variance for Period Jan - June	Expenditure to June as % of June YTD Profile	Expenditure to June as % of Annual Profile	Variance to June as % of June YTD Profile
M02 - Buildings & Equipment	919.310	255.640	303.226	(47.586)	118.61%	32.98%	-18.61%
M02 – National Children's Hospital	209.470	79.000	30.044	48.956	38.03%	14.34%	61.97%
	1128.780	334.640	333.270	1.370	99.59%	29.52%	0.41%
M03 - Info Systems for Health Agencies	155.000	35.000	35.920	(0.920)	102.63%	23.17%	-2.63%
	1283.780	369.640	369.190	0.450	99.88%	28.76%	0.12%
Asset Disposals	1.459	1.459	0.000	1.459	0.00%	0.00%	100.00%
Net	1285.239	371.099	369.190	1.909	99.49%	28.73%	0.51%

CONSTRUCTION – M02 - Building & Equipment

The variance on general construction projects for the six months to June 2024 is -18.61% (or € 47.586m) ahead of profile. This substantial variance against profile is explained by the HSE's purchase of a property at Elm Park Green Office Campus in May 2024 at a cost of approximately €55m.

In the period to the end of June the total expenditure of € 303.226m represents 32.98% of the total annual profile for 2024.

CONSTRUCTION – M02 - (National Children's Hospital)

The variance on the National Children's Hospital for the six months to June 2024 is 61.97% (or € 48.956m) behind profile.

In the period to the end of June the total expenditure of € 30.044m represents 14.34% of the total annual profile for 2024.

Information Systems for Health Agencies - M03

The variance on ICT projects for the six months to June 2024 is -2.63% (or € 0.920m) ahead of profile.

In the period to the end of June the total expenditure of € 35.920m represents 23.17% of the total annual profile for 2024.

Asset Disposals:

Income from sale of assets in the six months to June 2024 amounted to € 1.459m.

Internal Audit

Implementation of Internal Audit Recommendations (CHO and Hospital Group)

KPI: % of internal audit recommendations implemented by agreed due date
 Target: 90% completion of recommendations due for implementation in the quarter

Division	Implementation of recommendations due in Q2 2024			Cumulative results YTD		
	Due	Implemented	% Achieved	Due YTD	Implemented YTD	% Achieved
HSE Total	100	36	36%	232	90	39%
CHO 1	0	0	0%	6	3	50%
CHO 2	19	7	37%	20	8	40%
CHO 3	5	4	80%	6	4	67%
CHO 4	1	1	100%	13	4	31%
CHO 5	2	0	0%	8	1	13%
CHO 6	0	0	N/A	7	2	29%
CHO 7	3	3	100%	11	4	36%
CHO 8	0	0	N/A	6	4	67%
CHO 9	0	0	N/A	6	2	33%
RCSI	1	1	100%	3	2	67%
IEHG	17	6	35%	19	7	37%
SSWHG	6	0	0%	18	8	44%
Saolta Hospital Group	8	0	0%	20	4	20%
ULHG	0	0	N/A	3	1	33%
Total CHO and HGs	62	22	35%	146	54	37%
Acute Operations	8	6	75%	17	11	65%
Community Operations	3	0	0%	5	0	0%
CEO	1	1	100%	1	1	100%
Performance and Planning	3	0	0%	9	0	0%
National Services & Schemes (National Ambulance Service)	0	0	N/A	1	0	0%
Primary Care Reimbursement Service (National Services & Schemes)	3	1	33%	3	1	33%
National Screening Service	2	1	50%	8	6	75%
People/ HR	0	0	N/A	10	8	80%
Finance	3	0	0%	3	0	0%
Chief Information Officer	8	5	63%	22	9	41%
Data Protection	7	0	0%	7	0	0%
Total Corporate	38	14	37%	86	36	42%

Implementation of Internal Audit Recommendations

KPI: % of internal audit recommendations implemented by agreed due date
Target: 90% completion of recommendations due for implementation in the quarter

Division	Implementation of recommendations due in Q2 2024			Cumulative results YTD		
	Due	Implemented	% Achieved	Due YTD	Implemented YTD	% Achieved
HSE Total	100	36	36%	232	90	39%
HSE Dublin & Midlands	3	3	100%	15	6	40%
HSE Dublin & North East	1	1	100%	11	6	55%
HSE Dublin & South East	19	6	32%	34	10	29%
HSE Mid West	5	4	80%	9	5	56%
HSE South West	7	1	14%	31	12	39%
HSE West & North West	27	7	26%	46	15	33%
Total Health Regions	62	22	35%	146	54	37%
Acute Operations	8	6	75%	17	11	65%
Community Operations	3	0	0%	5	0	0%
CEO	1	1	100%	1	1	100%
Performance and Planning	3	0	0%	9	0	0%
National Services & Schemes	3	1	33%	4	1	25%
Clinical	2	1	50%	8	6	75%
People	0	0	N/A	10	8	80%
Finance	3	0	0%	3	0	0%
Technology and Transformation	8	5	63%	22	9	41%
Data Protection	7	0	0%	7	0	0%
Total Centre	38	14	37%	86	36	42%

Finance

Introduction

The National Service Plan (NSP) 2024 has been adopted by the HSE Board, approved by the Minister for Health and the Minister for Children, Equality, Disability, Integration and Youth, and was published on the 14th of February 2024.

A key consideration underlying NSP 2024 is the implementation of new integrated healthcare structures, called Health Regions. The roll out of the Health Regions commenced on 1st March 2024 and will continue to progress throughout 2024. The six Regional Executive Officers (REOs) have been appointed. Each REO will be the accountable officer at Health Region level, responsible for the delivery of high-quality, safe, and accessible services for the population of their region.

The cost of running our existing services at current levels in 2024 is a significant challenge in the context of the total funding provided within the NSP to the health service in 2024. The additional €1.7 billion to be provided to the HSE in 2024 following the Summer Economic Statement is welcome in this regard and has facilitated further focus on improving our financial controls particularly around staffing levels, maintaining current service levels and improving productivity. This will be achieved through governance, savings targets, productivity measures, and strengthened financial and related controls.

Financial control limits have been implemented system wide across the HSE and savings will need to be achieved in order to operate within these limits. These spend limits replace previously issued budgets and performance reporting for each area is now against these limits.

The year to date Financial Control Limit at end June is €11,262.5m. Year to date expenditure for the same period is €11,249.2m resulting in a positive variance from the limit of (€13.3m).

Overall Financial Performance: YTD June 2024

Table 1a – Net Expenditure by Health Region – YTD June 2024

June 2024 Health Regions	YTD Financial Control Limit	YTD Actual Expenditure	YTD Variance from Limit	YTD Variance from Limit			
				Pay	Non Pay	Income	Total
RHA A: HSE Dublin and North East	1,488.2	1,506.0	17.8	5.0	19.8	(6.9)	17.8
RHA B: HSE Dublin and Midlands	1,614.6	1,649.7	35.2	11.7	26.9	(3.5)	35.2
RHA C: HSE Dublin and South East	1,169.8	1,189.7	19.9	5.4	15.6	(1.1)	19.9
RHA D: HSE South West	875.5	888.4	12.9	5.2	10.4	(2.7)	12.9
RHA E: HSE Mid West	509.2	517.5	8.2	6.6	1.8	(0.2)	8.2
RHA F: HSE West and North West	1,106.2	1,128.0	21.9	6.6	14.4	0.9	21.9
Subtotal Regions	6,763.4	6,879.3	115.9	40.4	89.0	(13.5)	115.9
National Schemes / National Services	2,351.1	2,339.3	(11.8)	0.1	2.3	(14.3)	(11.8)
Corporate Centre	2,148.0	2,030.6	(117.4)	10.3	(112.2)	(15.5)	(117.4)
Subtotal Other	4,499.1	4,369.9	(129.2)	10.4	(109.9)	(29.8)	(129.2)
Grand Total	11,262.5	11,249.2	(13.3)	50.9	(20.9)	(43.3)	(13.3)

The HSE's financial position against the financial control limit at the end of June 2024 shows a year-to-date positive variance of (€13.3m). This includes a negative variance of €115.9m in the Health Regions, offset by a positive variance of (€129.2m) in National and Corporate areas.

Table 1b below outlines the YTD position with the Health Region information split between Acutes & Community.

Table 1b – Acute & Community Net Expenditure by Health Region – YTD June 2024

June 2024		YTD Financial Control Limit	YTD Actual Expenditure	YTD Variance from Limit	YTD Variance from Limit			
Health Regions					Pay	Non Pay	Income	Total
RHA A: HSE Dublin and North East	Acute	1,030.5	1,044.1	13.7	3.8	16.7	(6.8)	13.7
	Community	457.7	461.9	4.2	1.2	3.0	(0.1)	4.2
Total HSE Dublin and North East Total		1,488.2	1,506.0	17.8	5.0	19.8	(6.9)	17.8
RHA B: HSE Dublin and Midlands	Acute	1,201.2	1,227.4	26.1	8.5	20.4	(2.8)	26.1
	Community	413.3	422.4	9.0	3.2	6.5	(0.7)	9.0
Total HSE Dublin and Midlands Total		1,614.6	1,649.7	35.2	11.7	26.9	(3.5)	35.2
RHA C: HSE Dublin and South East	Acute	768.6	779.7	11.1	3.0	8.4	(0.3)	11.1
	Community	401.2	410.0	8.8	2.4	7.2	(0.8)	8.8
Total HSE Dublin and South East Total		1,169.8	1,189.7	19.9	5.4	15.6	(1.1)	19.9
RHA D: HSE South West	Acute	572.8	583.3	10.5	4.8	7.9	(2.2)	10.5
	Community	302.7	305.2	2.5	0.4	2.6	(0.5)	2.5
Total HSE South West Total		875.5	888.4	12.9	5.2	10.4	(2.7)	12.9
RHA E: HSE Mid West	Acute	326.6	334.4	7.8	6.5	1.4	(0.1)	7.8
	Community	182.6	183.1	0.5	0.1	0.4	(0.1)	0.5
Total HSE Mid West Total		509.2	517.5	8.2	6.6	1.8	(0.2)	8.2
RHA F: HSE West and North West	Acute	709.6	726.9	17.3	5.6	10.8	0.9	17.3
	Community	396.5	401.1	4.6	1.0	3.7	(0.1)	4.6
Total HSE West and North West Total		1,106.2	1,128.0	21.9	6.6	14.4	0.9	21.9
Subtotal Regions		6,763.4	6,879.3	115.9	40.4	89.0	(13.5)	115.9
National Schemes / National Services		2,351.1	2,339.3	(11.8)	0.1	2.3	(14.3)	(11.8)
Corporate Centre		2,148.0	2,030.6	(117.4)	10.3	(112.2)	(15.5)	(117.4)
Subtotal Other		4,499.1	4,369.9	(129.2)	10.4	(109.9)	(29.8)	(129.2)
Grand Total		11,262.5	11,249.2	(13.3)	50.9	(20.9)	(43.3)	(13.3)

Acute Operations

Table 2 – Acute Operations – YTD June 2024

June 2024 Acute	YTD Financial Control Limit	YTD Actual Expenditure	YTD Variance from Limit	YTD Variance from Limit			
				Pay	Non Pay	Income	Total
RHA A: HSE Dublin and North East	1,030.5	1,044.1	13.7	3.8	16.7	(6.8)	13.7
RHA B: HSE Dublin and Midlands	1,201.2	1,227.4	26.1	8.5	20.4	(2.8)	26.1
RHA C: HSE Dublin and South East	768.6	779.7	11.1	3.0	8.4	(0.3)	11.1
RHA D: HSE South West	572.8	583.3	10.5	4.8	7.9	(2.2)	10.5
RHA E: HSE Mid West	326.6	334.4	7.8	6.5	1.4	(0.1)	7.8
RHA F: HSE West and North West	709.6	726.9	17.3	5.6	10.8	0.9	17.3
Subtotal Regions	4,609.3	4,695.7	86.4	32.0	65.6	(11.3)	86.4
Corporate Centre	92.9	106.4	13.5	(0.7)	15.7	(1.5)	13.5
Subtotal Other	92.9	106.4	13.5	(0.7)	15.7	(1.5)	13.5
Grand Total	4,702.2	4,802.1	99.8	31.3	81.3	(12.8)	99.8

Acute Operations has a year-to-date expenditure of €4,802.1m against a financial limit of €4,702.2m, leading to a negative variance of €99.8m against the profiled financial spend limit. The figure is broken down into €31.3m in pay, €81.3m in non-pay and (€12.8m) in income. The pay variance is further broken down into direct pay €29.5m, agency €2.8m and overtime (€1.0m).

Acute hospitals continue to face challenges, mainly across clinical areas, in recruiting front line staff which places a reliance on agency and overtime, and these attract a premium cost. Increased activity levels are driving costs across non-pay clinical categories including drugs, medical and surgical supplies and laboratory costs. Non-clinical includes the international recruitment of clinical staff as well as the decanting of services offsite.

Acute hospital services aim to improve the health of the population by providing health services ranging from scheduled care (planned care), unscheduled care (unplanned / emergency care), diagnostic services, specialist services (specific rare conditions or highly specialised areas such as critical care and organ transplant services), cancer services, trauma services, maternity and children's services, as well as the pre-hospital emergency and intermediate care provided by NAS.

Community Operations

Table 3 - Community Operations Expenditure v Financial Limit

June 2024 Community	YTD Financial Control Limit	YTD Actual Expenditure	YTD Variance from Limit	YTD Variance from Limit			
				Pay	Non Pay	Income	Total
Primary Care	683.3	687.5	4.2	6.1	(2.3)	0.4	4.2
Social Inclusion	114.5	110.9	(3.6)	(0.0)	(3.8)	0.3	(3.6)
Palliative Care	79.5	79.3	(0.2)	(0.9)	0.8	(0.0)	(0.2)
Primary Care Division Total	877.3	877.8	0.5	5.1	(5.3)	0.7	0.5
Mental Health Division	676.6	686.4	9.7	6.4	3.9	(0.5)	9.7
Older Persons	797.1	805.4	8.3	(4.1)	14.2	(1.8)	8.3
Fair Deal	569.0	567.1	(1.9)	-	(1.5)	(0.4)	(1.9)
Older Persons Services Total	1,366.0	1,372.5	6.4	(4.1)	12.8	(2.2)	6.4
Health & Wellbeing Community	23.9	22.5	(1.4)	(2.0)	0.6	(0.0)	(1.4)
Quality & Patient Safety – Community	14.8	14.0	(0.8)	(0.4)	(0.4)	0.0	(0.8)
Community Operations – regional/national	0.9	1.1	0.3	0.0	0.3	-	0.3
CHO HQs & Community Services	24.1	24.3	0.1	(0.0)	0.4	(0.3)	0.1
Grand Total	2,983.7	2,998.5	14.8	5.0	12.1	(2.3)	14.8

Community Operations has year to date expenditure of €2,998.5m against a financial limit of €2,983.7m, leading to a negative variance of €14.8m. The performance by Community Operations, excluding Disability Services, has year to date expenditure of €2,998.5m against a financial limit of €2,983.7m, leading to a negative variance of €14.8m. The performance by care area is illustrated in table 3 above.

Primary Care Services: Operational services within Primary Care, Social Inclusion and Palliative Care (excluding Demand Led Local Schemes) has year to date expenditure of €877.8m against a financial limit of €877.3m leading to almost breakeven position. Within this Primary Care has a negative variance of €4.2m, offset by positive variances within Social Inclusion and Palliative Care.

Primary Care centres aim to provide a broad range for services to enable better access to care for individuals and families within their community. The Enhanced Community Care Programme aims to increase community healthcare services and reduce the pressure on hospital services. It is part of the Sláintecare programme.

Mental Health Services: Mental Health (MH) has year to date expenditure of €686.4m against a financial control of €676.6m leading to a negative variance of €9.7m. Recruitment continues to be a key issue for Mental Health, with difficulty recruiting Consultants and Nurses leading to a continued reliance on agency and overtime which attracts a premium cost.

Older Persons' Services: Older Persons' Services, including NHSS, has year to date expenditure of €1,372.5m against a limit of €1,366.0m leading to a negative variance of €6.4m. This is comprised of a positive variance of (€4.1m) in pay and a negative variance of €12.8m in non-pay.

Older Persons provides a range of services such as home support and residential care. Home support aims to support older people to remain in their own homes for as long as possible and to support informal carers. Approximately 5% of all older people need residential care if they are no longer able to live alone.

Table 4 – Disabilities Services Expenditure vs DCEDIY Allocation

June 2024						YTD Variance			
Disability Services	Approved Allocation	YTD Actual	YTD Budget	YTD Variance	YTD Variance	Pay	Non Pay	Income	Total
Disability Services	2,865.8	1,474.2	1,404.8	69.4	4.9 %	13.8	58.3	(2.8)	69.4
Local Demand Led Schemes	19.9	9.8	9.9	(0.2)	(1.7%)	-	(0.2)	-	(0.2)
Total Disability Services	2,885.8	1,483.9	1,414.7	69.2	4.9 %	13.8	58.2	(2.8)	69.2

The Disability Services figures here are not included in the Community Operations figure in Table 3. Overall disabilities have a year-to-date expenditure of €1,483.9m against a budget of €1,414.7m, leading to a year-to-date deficit of €69.2m or 4.9%.

Disability Services are delivered through HSE services, section 38 / section 39 and not-for-profit providers. Disability Services are provided to those with physical, sensory, intellectual disability and autism in residential, home support and personal assistance services, clinical / allied therapies, neuro-rehabilitation services, respite, day and rehabilitative training. The cost in Disability Services is primarily driven by the clients' need and the complexity of each individual case presenting.

The pay deficit in Disabilities is across agency and overtime, partially offset by a surplus in direct pay while non-pay deficits main driver is the cost of emergency placements.

Other Operational Services

Table 5 – Other Operational Services Expenditure v Financial Limit

June 2024	YTD Financial Control Limit	YTD Actual Expenditure	YTD Variance from Limit	YTD Variance from Limit			
				Pay	Non Pay	Income	Total
National Ambulance Service	127.5	128.9	1.4	1.3	0.5	(0.3)	1.4
Operational Performance & Integration	31.1	29.7	(1.4)	(0.6)	(0.7)	(0.0)	(1.4)
Pensions & Local Demand Led Schemes	2,192.5	2,180.7	(11.8)	(0.5)	2.6	(13.9)	(11.8)
National Schemes / National Services Total	2,351.1	2,339.3	(11.8)	0.1	2.3	(14.3)	(11.8)
Chief Clinical Office	211.6	173.1	(38.5)	0.5	(38.6)	(0.3)	(38.5)
Operational Performance & Integration	10.5	9.9	(0.6)	(0.1)	(0.4)	(0.1)	(0.6)
Pensions & Local Demand Led Schemes	646.7	604.3	(42.4)	19.9	(49.4)	(12.9)	(42.4)
Support Services	356.7	322.0	(34.7)	(5.8)	(28.2)	(0.6)	(34.7)
Corporate Centre Total	1,225.5	1,109.4	(116.2)	14.4	(116.7)	(13.9)	(116.2)
Grand Total	3,576.6	3,448.6	(128.0)	14.6	(114.3)	(28.2)	(128.0)

Other Operational Services has a year-to-date expenditure of €3,448.6m against a financial limit €3,576.6m, leading to a positive variance over limit of (€128.0m).

National Schemes & Services

National Schemes & Services has a year-to-date expenditure of €2,339.3m against a limit of €2,351.1m, leading to a positive variance of (€11.8m), which is mainly due to a current positive variance in income for PCRS within Pensions & Demand Led Schemes. Pension and Demand Led Schemes under National Services incorporates PCRS, Treatment Abroad and Cross Border Healthcare and Local Demand Led Schemes.

Corporate Centre

The Corporate Centre has a year-to-date expenditure of €1,109.4m against a limit of €1,225.5m leading to a surplus of (€116.2m). This mainly relates to non-pay which has a positive variance of (€116.7m).

Chief Clinical Officer

Chief Clinical Office has a year-to-date expenditure of €173.1m against a limit of €211.6m leading to a surplus of (€38.5m). This is mainly due to a positive variance within non-pay of (€38.6m) with Public Health Protection Overall and National Women and Infants Programme making up the majority of this variance.

A key function of the CCO is to connect, align and integrate clinical leadership across the HSE, by supporting and further initiating programmes of work across the following 3 key pillar areas:

- Strengthen clinical leadership and expertise,
- Develop and nurture collaboration with patients and service users,
- Improve and assure safety and improve the patient and service user experience.

Operational Performance & Integration

Operational Performance and Integration has year-to-date expenditure of €9.9m against a limit of €10.5m, leading to a positive variance of (€0.6m). This relates in the main to non-pay which has a positive variance of (€0.4m).

The OPI teams drive integration across Operations, supporting and enhancing service delivery and performance, as well as generating actionable insights to enable data-driven decision making. OPI encompasses Environmental Health, which plays a key role in protecting the public from threats to health and wellbeing, with particular responsibility for statutory functions enacted to protect and promote human health, including food safety, cosmetic products control and sunbed regulation.

Pension and Demand Led Services

Pension and Demand Led Schemes under Corporate Centre incorporates Pensions as well as State Claims Agency. Pensions and Demand Led Services has year to date expenditure of €604.3m against a limit of €646.7m, leading to a positive variance of (€42.4m). The main driver of this is within State Claims Agency non pay variance of (€49.2m).

Expenditure in Demand Led areas such as Pensions, State Claims Agency, Primary Care Reimbursement Service and Treatment Abroad and Cross Border Directive is driven primarily by eligibility, legislation, policy, demographic and economic factors. Accordingly, it is not amenable to normal management controls in terms of seeking to limit costs to a specific budget limit given the statutory and policy basis for the various schemes. In some cases, it can also be difficult to predict with accuracy in any given year and can vary from plan depending on a number of factors outside of the health services direct control.

Support Services

Support Services has a year-to-date expenditure of €322.0m against a limit of €356.7m leading to a surplus of (€34.7m). Of this, (€28.2m) relates to non-pay, the majority of which is in eHealth & Disruptive Technology.

CONCLUSION

The financial challenge for 2024 was outlined in the National Service Plan and noted the likely requirement for supplementary funding support. Following the Government announcement of an additional €1.7bn from Department of Health into the base for 2024, this additional funding has provided an opportunity to strengthen financial planning and governance.

In line with the rollout of the new regional structures the control environment within the HSE has been reset. The focus for the remainder of 2024 will be on savings and controls to operate within agreed limits while delivering fully on our planned activity levels as set out in the National Service Plan 2024 and the Waiting List Action Plan and Urgency and Emergency Care Plan.

Procurement – expenditure (non-pay) under management

Service Area	Q2 2024
Acute Hospitals	€320,231,048
Community Healthcare	€837,229,980
National Services	€2,484,929,956
Total	€3,642,390,984

Human Resources

Health Sector Workforce

Introduction

This monthly report provides a detailed overview of the current health sector workforce, particularly focusing on employment levels and changes in various staff groupings and service areas. In terms of change this month & YTD, the **emphasis in this commentary** is placed on an analysis of the **adjusted figures** excluding newly added agencies (S38) and cyclical growth relating to pre-registration student nurses and midwives taking up clinical placements. As noted in previous reports, this provides a more accurate assessment and analysis of the changes in the month and YTD to inform key decisions. The tables and commentary reflect these in the main, with further tables, including those as per our published Health Service Personnel Reports provided in the Appendices of this report for ease and further reference.

Headlines

At the end of June, employment levels show there were **148,256 WTE** (equating to 166,675 personnel) directly employed in the provision of Health & Social Care Services by the HSE and Section 38 hospitals & agencies.

For this month's report as noted above, the below table has been developed to provide an overview of the monthly and YTD changes, reflecting the adjustments as noted.

By Grade Group	Change since May 2024						Change YTD 2024						
	A	B	C	D	E	F	G	H	I	J	K	L	
	Change Month	HSE Core Change Month	New S38's Change Month	DOH Change Month	DECIDY Change Month	Total ex new S38s Change Month	Change YTD	HSE Core Change YTD	New S38's Change YTD	DOH Change YTD	DECIDY Change YTD	Total ex new S38s Change YTD	
Total Monthly Change	+98	-15	-2	-17	+115	+100	1	+2,272	+887	+1,002	+1,889	+383	+1,269
Medical & Dental	-34	-37	+1	-36	+2	-35	2	+167	+148	+25	+173	-6	+142
Nursing & Midwifery	+106	+123	+0	+123	-18	+105	3	+1,572	+1,135	+406	+1,541	+30	+1,166
Health & Social Care Professionals	-40	-56	-2	-58	+18	-38	4	+193	+14	+100	+114	+79	+93
Management & Administrative	-72	-63	-1	-64	-7	-71	5	-136	-270	+149	-120	-16	-285
General Support	+62	+60	+1	+60	+1	+61	6	+55	-57	+121	+64	-9	-66
Patient & Client Care	+76	-42	-0	-42	+118	+77	7	+420	-84	+201	+117	+303	+219
Total excl. Pre-Registration Nurses & Midwives	+85	-27	-2	-28	+114	+87	8	+1,608	+271	+1,002	+1,273	+335	+606
Nursing & Midwifery excl. Pre-Registration Nurses & Midwives	+93	+112	+0	+112	-19	+93	9	+908	+520	+406	+926	-17	+502

*HSE Core = HSPC less DECIDY & new S38

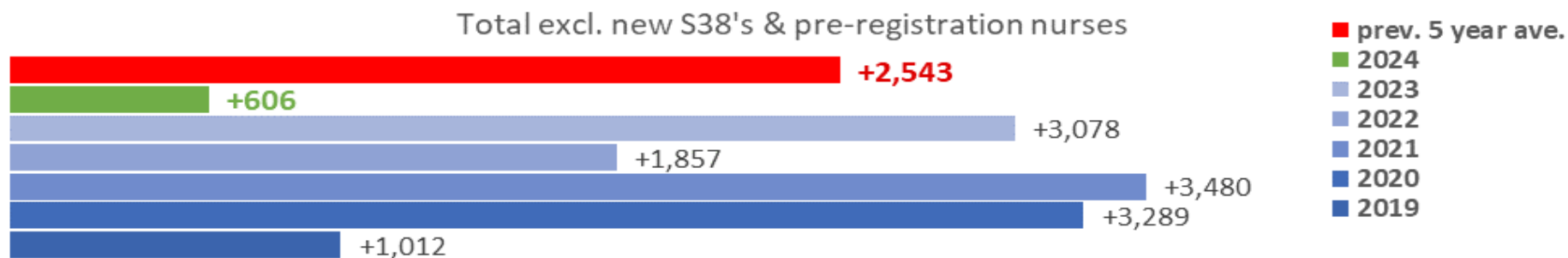
The Change since May 24:

The above table shows this month's movement at **+98 WTE (A1)** before any adjustments.

- When the new Section 38 Agencies are excluded the change is **+100 WTE (F1)** owing to a reduction in the new agencies of **-2 WTE** this month and when both these and the pre-registration nursing and midwifery students are excluded the change this month is **+87 WTE (F8)**.
- Based on the change of +87 WTE (F8), **-28 WTE** of the decrease is reported in DoH (D8), with **+114 WTE** growth reported across DCEIDY (Disabilities) (E8). Of note the increase of +114 WTE in Disabilities is contributed by the incorporation of a newly added entity '**Ability West**' former Section 39 to the HSE disabilities services equating to circa +40 WTE.
- The **staff category** showing the greatest growth this month, is **Nursing & Midwifery**, both unadjusted (+106 WTE) and adjusted at **+105 WTE (F3)** – mainly attributable to the Nurse/Midwife Manager, Nurse/Midwife Specialist & AN/MP and Public Health Nurse. Patient and Client Care is also showing growth this month (+77 WTE adjusted) mainly attributable to the Health Care Assistant staff group. This is followed by growth in General Support (+61 WTE adjusted) largely due to an increase in **Medical Laboratory Aides**.
- All other staff categories are reporting a **decrease** with **Management & Administrative** reporting the largest decrease **-72 WTE** unadjusted and **-71 WTE** adjusted (F5). **Health & Social Care Professionals** and **Medical & Dental** are reporting decreases of **-38 WTE** and **-35 WTE** respectively (adjusted – Column F)
- This growth is to be considered also in the context of the recruitment measures, alongside the New Service Developments recruitment and the recently communicated Pay and Numbers Strategy.

The Change YTD 24:

- The YTD change shows a total net WTE growth of **+2,272 WTE (G1)** before any adjustment. This however, **significantly changes** when the adjustments are made for the new S38 agencies at **+1,269 WTE (L1)** and the pre-registration nursing and midwifery students at **+606 WTE (L8)**.
- The total adjusted change for the DoH is **+271 WTE (H8)** with **+335 WTE** reported in DCEIDY funded services (K8).
- Of the YTD adjusted change, the largest net WTE growth is reported in Nursing and Midwifery at **+502 WTE (L9)** **Staff Nurse/ Staff Midwife** in the main, followed by Medical and Dental at +142 WTE (L2), largely attributable to **Consultants at +162 WTE**.
- Management and Administration is showing a significant reduction at **-285 WTE (L5)** along with General Support at **-66 WTE (L6)**.
- The 2024 YTD growth of **+606 WTE** (adjusted) is also significantly lower than the 5 year average of **+2,543 WTE** as shown below. This is illustrative of the recruitment measures impact with growth levels down compared to previous year's.



The overall increase since December 2019 now stands at **+28,444 WTE (+23.7%)** or **+26,802 WTE (22.4%)** when adjusted. The staff category reporting the greatest increase is **Nursing & Midwifery at +9,609 WTE (+25.1 %)** or **+8,563 WTE (+22.5%)** when adjusted. The staff category with the greatest **percentage increase** is Management & Administrative at **+34%** (+6,417 WTE) or **+33.3%**, (6,268 WTE) adjusted.

Staff Category / Group excl. new S38's & pre-reg nurses & midwives	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Total	119,677	145,872	146,391	146,479	+8,297	+606	+87	+26,802	+0.4%	+22.4%
Medical & Dental	10,857	13,761	13,938	13,903	+1,064	+142	-35	+3,046	+1.0%	+28.1%
Nursing & Midwifery	38,073	46,134	46,544	46,637	+2,686	+502	+93	+8,563	+1.1%	+22.5%
Health & Social Care Professionals	16,769	20,785	20,916	20,878	+1,064	+93	-38	+4,110	+0.4%	+24.5%
Management & Administrative	18,851	25,404	25,190	25,119	+2,248	-285	-71	+6,268	-1.1%	+33.3%
General Support	9,305	10,157	10,030	10,091	+23	-66	+61	+786	-0.6%	+8.4%
Patient & Client Care	25,822	29,631	29,773	29,850	+1,213	+219	+77	+4,028	+0.7%	+15.6%

Health Regions Analysis

- On an adjusted basis, three out of six regions are showing net WTE growth **this month** with all other regions showing a decrease. HSE Dublin & Midlands is showing an increase **+146 WTE** on the previous month and HSE Dublin & North East **+41 WTE**. HSE West & North West is showing the largest decrease at **-39 WTE**.

RHA excl. new S38's & pre-reg nurses & midwives	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Total	119,677	145,872	146,391	146,479	+8,297	+606	+87	+26,802	+0.4%	+22.4%
HSE Dublin & Midlands	25,322	30,340	30,503	30,649	+2,004	+308	+146	+5,327	+1.0%	+21.0%
HSE Dublin & North East	24,207	28,896	28,996	29,037	+1,010	+141	+41	+4,830	+0.5%	+20.0%
HSE Dublin & South East	19,010	23,158	23,302	23,330	+1,452	+171	+27	+4,320	+0.7%	+22.7%
HSE Midwest	8,479	11,006	11,100	11,075	+720	+69	-26	+2,595	+0.6%	+30.6%
HSE South West	15,790	18,914	18,952	18,926	+848	+12	-26	+3,136	+0.1%	+19.9%
HSE West & North West	19,014	23,409	23,343	23,304	+1,216	-105	-39	+4,290	-0.4%	+22.6%
National	7,854	10,149	10,195	10,159	+1,048	+10	-36	+2,305	+0.1%	+29.3%

Hospital Group and CHO Analysis (adjusted)

- **Four Hospital Groups** are showing **net WTE growth** this month, the largest of which is Dublin Midlands Hospital Group at **+91 WTE** followed by the IEHG **+42 WTE**.
- All other Hospital Groups are showing a decrease, Saolta **-74 WTE** is showing the largest decrease this month.
- YTD, **DMLHG** is showing the largest increase at **+380 WTE** with **Saolta** showing the largest decrease at **-162 WTE**.
- **Five out of nine CHOs** are showing a WTE increase with the largest of these in CHO 7 (+54 WTE) followed by CHO 2 +28 WTE. CHO 5 is showing the largest decrease this month (-22 WTE).
- YTD, there are **eight CHOs** showing a **WTE decrease** with CHO 8 reporting the greatest decrease at **-58 WTE**.

Service / HG & CHO excl. new S38's & pre-reg nurses & midwives	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Total	119,677	145,872	146,391	146,479	+8,297	+606	+87	+26,802	+0.4%	+22.4%
National Ambulance Service	1,933	2,321	2,361	2,352	+254	+31	-9	+419	+1.3%	+21.7%
Children's Health Ireland	3,590	4,505	4,489	4,493	+418	-12	+4	+903	-0.3%	+25.2%
Dublin Midlands Hospital Group	11,724	14,525	14,813	14,904	+1,113	+380	+91	+3,180	+2.6%	+27.1%
Ireland East Hospital Group	10,357	13,322	13,499	13,540	+972	+218	+42	+3,183	+1.6%	+30.7%
RCSI Hospitals Group	13,754	16,989	17,153	17,176	+767	+187	+23	+3,422	+1.1%	+24.9%
Saolta University Hospital Care	9,252	12,088	12,001	11,926	+772	-162	-74	+2,675	-1.3%	+28.9%
South/South West Hospital Group	7,611	9,948	10,009	10,001	+832	+53	-8	+2,390	+0.5%	+31.4%
University of Limerick Hospital Group	4,143	5,660	5,754	5,742	+439	+82	-12	+1,599	+1.4%	+38.6%
other Acute Services	91	148	147	144	+22	-4	-3	+53	-2.9%	+57.9%
Acute Services	62,456	79,507	80,225	80,279	+5,588	+773	+54	+17,824	+1.0%	+28.5%
CHO 1	5,465	6,702	6,682	6,688	+312	-14	+6	+1,223	-0.2%	+22.4%
CHO 2	5,545	6,167	6,206	6,234	+199	+67	+28	+689	+1.1%	+12.4%
CHO 3	4,336	5,346	5,347	5,333	+281	-13	-14	+997	-0.2%	+23.0%
CHO 4	8,180	8,966	8,943	8,925	+13	-41	-18	+746	-0.5%	+9.1%
CHO 5	5,276	6,137	6,110	6,087	+333	-50	-22	+812	-0.8%	+15.4%
CHO 6	3,378	3,789	3,781	3,788	+169	-1	+7	+410	-0.0%	+12.1%
CHO 7	6,513	7,465	7,408	7,462	+250	-3	+54	+949	-0.0%	+14.6%
CHO 8	6,135	6,789	6,714	6,731	+276	-58	+17	+597	-0.9%	+9.7%
CHO 9	6,564	7,325	7,289	7,288	+103	-38	-1	+724	-0.5%	+11.0%
other Community Services	640	839	837	834	+100	-5	-3	+194	-0.6%	+30.3%
Community Services	52,032	59,526	59,317	59,371	+2,037	-155	+54	+7,339	-0.3%	+14.1%
Health & Wellbeing	574	636	233	229	-40	-407	-5	-345	-64.0%	-60.1%
National & Central Services	4,616	6,204	6,616	6,600	+712	+396	-16	+1,984	+6.4%	-43.0%
National Services & Central Functions	5,190	6,840	6,849	6,829	+672	-11	-21	+1,639	-0.2%	+31.6%

Care Group Analysis (Adjusted)

- **Five** Care Groups are reporting a **decrease** in the month with Mental Health reporting the largest decrease.
- **YTD**, Community Services are reporting the largest decrease at **-155 WTE**. Excluding Disabilities this equates to a decrease of **-490 WTE**, the largest of which is reported in Primary Care.
- **Disabilities** are reporting an increase of **+114 WTE** in the month and **+335 WTE** YTD.
- **Acute Services** are reporting increase of **+54 WTE** this month, with an overall increase of **+773 WTE** reported YTD.
- **National Services & Central Functions** are reporting decrease of **-21 WTE** respectively in the month and **-11 WTE** YTD.

By Care Group ex PRN	Change since May 2024						Change YTD 2024					
	A	B	C	D	E	F	G	H	I	J	K	L
	Change Month	HSE Core Change Month	New S38's Change Month	DOH Change Month	DECIDY Change Month	Total ex new S38s Change Month	Change YTD	HSE Core Change YTD	New S38's Change YTD	DOH Change YTD	DECIDY Change YTD	Total ex new S38s Change YTD
Total Monthly Change	+85	-27	-2	-28	+114	+87	1 +1,608	+271	+1,002	+1,273	+335	+606
Acute Services	+54	+54		+54		+54	2 +773	+773		+773		+773
Community Health & Wellbeing	-3	-3		-3		-3	-20	-20		-20		-20
Mental Health	-49	-49		-49		-49	-147	-147		-147		-147
Primary Care	-31	-31	+0	-31		-31	+644	-215	+859	+644		-215
Disabilities	+114				+114	+114	+335				+335	+335
Older People	+24	+26	-2	+24		+26	+67	-76	+143	+67		-76
CHO Operations	-3	-3		-3		-3	-32	-32		-32		-32
Community Services	+52	-60	-2	-62	+114	+54	3 +847	-490	+1,002	+512	+335	-155
National Services & Central Functions	-21	-21		-21		-21	4 -11	-11		-11		-11

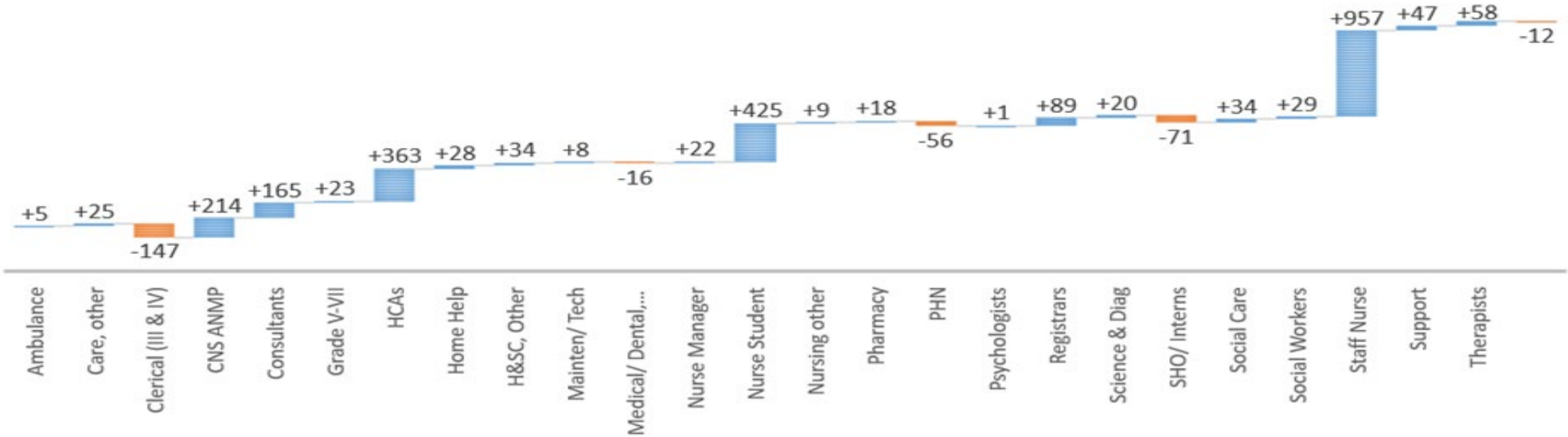
Appendix A: Total Staffing

Total Health Service by Staff Category/ Group

Staff Category / Group	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Total Health Service	119,813	145,985	148,159	148,256	+8,239	+2,272	+98	+28,444	+1.6%	+23.7%
Consultants	3,250	4,246	4,410	4,411	+377	+165	+1	+1,161	+3.9%	+35.7%
Registrars	3,681	4,640	4,736	4,729	+287	+89	-6	+1,048	+1.9%	+28.5%
SHO/ Interns	3,115	4,089	4,036	4,018	+428	-71	-18	+903	-1.7%	+29.0%
Medical/ Dental, other	811	786	781	770	-27	-16	-10	-41	-2.0%	-5.0%
Medical & Dental	10,857	13,761	13,962	13,928	+1,064	+167	-34	+3,071	+1.2%	+28.3%
Nurse/ Midwife Manager	7,986	9,910	9,869	9,932	+565	+22	+63	+1,946	+0.2%	+24.4%
Nurse/ Midwife Specialist & AN/MP	1,993	3,580	3,736	3,794	+606	+214	+58	+1,801	+6.0%	+90.3%
Staff Nurse/ Staff Midwife	25,687	30,355	31,309	31,313	+1,598	+957	+4	+5,625	+3.2%	+21.9%
Public Health Nurse	1,539	1,492	1,401	1,436	-12	-56	+35	-103	-3.7%	-6.7%
<i>Nursing/ Midwifery awaiting registration</i>	225	220	77	55	-85	-165	-22	-169.2	-74.8%	-75.3%
<i>Post-registration Nurse/ Midwife Student</i>	293	232	206	158	-5	-74	-48	-134.8	-31.7%	-46.0%
<i>Pre-registration Nurse/ Midwife Intern</i>	136	112	763	776	-58	+663	+12	+639.9	+590.3%	+471.1%
Nursing/ Midwifery Student	654	564	1,046	989	-147	+425	-57	+336	+75.3%	+51.4%
Nursing/ Midwifery other	350	345	352	354	+18	+9	+2	+4	+2.6%	+1.2%
Nursing & Midwifery	38,209	46,247	47,713	47,818	+2,628	+1,572	+106	+9,609	+3.4%	+25.1%
<i>Dietitians</i>	574	843	861	872	+87	+29	+10	+297.3	+3.4%	+51.7%
<i>Occupational Therapists</i>	1,597	2,048	2,053	2,060	+103	+12	+8	+462.7	+0.6%	+29.0%
<i>Orthoptists</i>	35	38	36	37	-1	-2	+0	+1.8	-4.1%	+5.1%
<i>Physiotherapists</i>	1,851	2,369	2,385	2,386	+142	+17	+1	+534.8	+0.7%	+28.9%
<i>Podiatrists & Chiropodists</i>	72	125	128	130	+4	+4	+1	+58.1	+3.4%	+81.2%
<i>Speech & Language Therapists</i>	1,103	1,276	1,281	1,274	+45	-3	-8	+171.1	-0.2%	+15.5%
Therapy Professions	5,232	6,700	6,745	6,758	+380	+58	+13	+1,526	+0.9%	+29.2%
Health Science/ Diagnostics	4,497	5,214	5,242	5,234	+162	+20	-8	+737	+0.4%	+16.4%
Social Care	2,710	3,221	3,254	3,256	+50	+34	+2	+546	+1.1%	+20.1%
Pharmacy	1,038	1,419	1,442	1,437	+96	+18	-5	+399	+1.3%	+38.5%
Psychologists	1,004	1,238	1,239	1,239	+118	+1	+0	+235	+0.0%	+23.4%
Social Workers	1,166	1,559	1,606	1,588	+129	+29	-18	+422	+1.8%	+36.2%
H&SC, Other	1,122	1,434	1,491	1,468	+128	+34	-24	+345	+2.3%	+30.8%
Health & Social Care Professionals	16,769	20,785	21,019	20,978	+1,064	+193	-40	+4,210	+0.9%	+25.1%

Staff Category / Group	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Management (VIII & above)	1,845	2,539	2,526	2,527	+92	-11	+1	+682	-0.5%	+36.9%
Administrative/ Supervisory (V to VII)	5,205	8,887	8,928	8,910	+1,151	+23	-18	+3,705	+0.3%	+71.2%
Clerical (III & IV)	11,801	13,978	13,886	13,831	+1,005	-147	-55	+2,031	-1.1%	+17.2%
Management & Administrative	18,851	25,404	25,340	25,268	+2,248	-136	-72	+6,417	-0.5%	+34.0%
Support	8,131	8,901	8,887	8,949	-12	+47	+61	+817	+0.5%	+10.1%
Maintenance/ Technical	1,173	1,255	1,263	1,263	+34	+8	+0	+90	+0.6%	+7.6%
General Support	9,305	10,157	10,150	10,212	+23	+55	+62	+907	+0.5%	+9.7%
Health Care Assistants	17,508	20,255	20,519	20,618	+946	+363	+99	+3,110	+1.8%	+17.8%
Home Help	3,565	3,728	3,764	3,755	-54	+28	-8	+190	+0.7%	+5.3%
Ambulance Staff	1,828	2,104	2,125	2,109	+172	+5	-16	+281	+0.2%	+15.4%
Care, other	2,922	3,545	3,567	3,569	+149	+25	+2	+648	+0.7%	+22.2%
Patient & Client Care	25,822	29,631	29,975	30,051	+1,213	+420	+76	+4,229	+1.4%	+16.4%

WTE CHANGE 2024



Total Health Service by Health Region

Health Region	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Total	119,813	145,985	148,159	148,256	+8,239	+2,272	+98	+28,444	+1.6%	+23.7%
HSE Dublin & Midlands	25,344	30,373	30,660	30,806	+2,003	+432	+146	+5,461	+1.4%	+21.5%
HSE Dublin & North East	24,234	28,925	29,395	29,433	+1,017	+508	+37	+5,198	+1.8%	+21.5%
HSE Dublin & South East	19,029	23,175	23,429	23,457	+1,424	+282	+28	+4,428	+1.2%	+23.3%
HSE Midwest	8,503	11,017	11,474	11,451	+725	+435	-23	+2,948	+3.9%	+34.7%
HSE South West	15,829	18,929	19,363	19,348	+819	+419	-15	+3,519	+2.2%	+22.2%
HSE West & North West	19,019	23,417	23,642	23,603	+1,202	+186	-39	+4,584	+0.8%	+24.1%
National	7,854	10,150	10,195	10,159	+1,049	+9	-36	+2,305	+0.1%	+29.3%

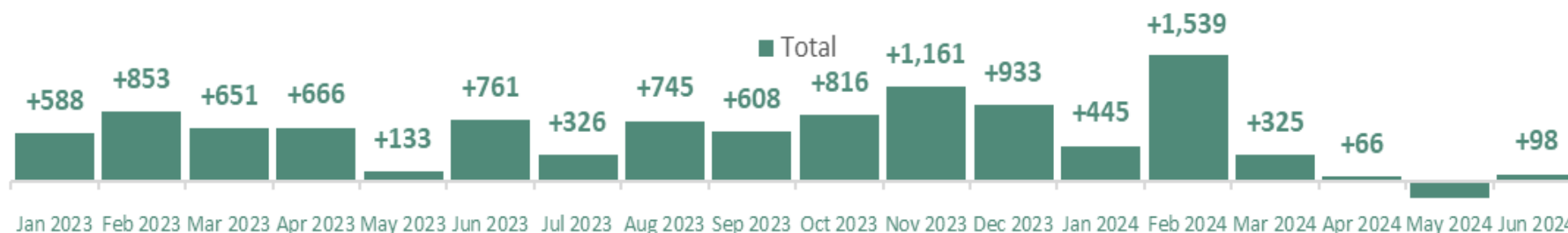
Total Health Service by Service Delivery Area

Service / HG & CHO	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Total	119,813	145,985	148,159	148,256	+8,239	+2,272	+98	+28,444	+1.6%	+23.7%
National Ambulance Service	1,933	2,321	2,361	2,352	+254	+31	-9	+419	+1.3%	+21.7%
Children's Health Ireland	3,602	4,522	4,505	4,510	+414	-11	+5	+908	-0.2%	+25.2%
Dublin Midlands Hospital Group	11,732	14,540	14,919	15,009	+1,116	+469	+90	+3,277	+3.2%	+27.9%
Ireland East Hospital Group	10,375	13,335	13,592	13,635	+941	+299	+42	+3,260	+2.2%	+31.4%
RCSI Hospitals Group	13,764	16,998	17,270	17,294	+764	+296	+24	+3,530	+1.7%	+25.6%
Saolta University Hospital Care	9,253	12,091	12,092	12,018	+765	-73	-74	+2,765	-0.6%	+29.9%
South/South West Hospital Group	7,641	9,961	10,075	10,073	+809	+112	-2	+2,432	+1.1%	+31.8%
University of Limerick Hospital Group	4,146	5,661	5,796	5,785	+439	+124	-10	+1,639	+2.2%	+39.5%
other Acute Services	91	148	147	144	+22	-4	-3	+53	-2.9%	+57.9%
Acute Services	62,538	79,578	80,757	80,820	+5,523	+1,242	+63	+18,282	+1.6%	+29.2%
CHO 1	5,468	6,707	6,710	6,717	+309	+10	+7	+1,249	+0.1%	+22.8%
CHO 2	5,545	6,167	6,385	6,413	+195	+246	+27	+868	+4.0%	+15.7%
CHO 3	4,357	5,356	5,678	5,666	+286	+310	-13	+1,309	+5.8%	+30.0%
CHO 4	8,189	8,968	9,288	9,275	+7	+307	-13	+1,087	+3.4%	+13.3%
CHO 5	5,277	6,141	6,135	6,113	+336	-27	-22	+837	-0.4%	+15.9%
CHO 6	3,378	3,789	3,788	3,795	+169	+6	+7	+417	+0.2%	+12.3%
CHO 7	6,514	7,466	7,428	7,482	+251	+16	+54	+967	+0.2%	+14.8%
CHO 8	6,135	6,792	6,749	6,767	+278	-24	+18	+632	-0.4%	+10.3%
CHO 9	6,582	7,342	7,553	7,546	+112	+204	-7	+964	+2.8%	+14.6%
other Community Services	640	840	837	834	+101	-6	-3	+194	-0.7%	+30.3%
Community Services	52,085	59,567	60,552	60,608	+2,044	+1,041	+55	+8,523	+1.7%	+16.4%
National Services & Central Functions	5,190	6,840	6,849	6,829	+672	-11	-21	+1,639	-0.2%	+31.6%

Performance Profile April - June 2024

Total Health Service by Administration

HSE / S38	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Total	119,813	145,985	148,159	148,256	+8,239	+2,272	+98	+28,444	+1.6%	+23.7%
Health Service Executive	76,898	94,696	95,015	94,824	+5,469	+128	-191	+17,926	+0.1%	+23.3%
Section 38 Hospitals	26,690	33,210	33,802	33,960	+2,336	+751	+158	+7,270	+2.3%	+27.2%
Section 38 Voluntary Agencies	16,225	18,079	19,341	19,472	+434	+1,393	+131	+3,247	+7.7%	+20.0%



Total HSE National Services by Staff Group

Staff Category / Group	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Total NCS Service	5,190	6,840	6,849	6,829	+672	-11	-21	+1,639	-0.2%	+31.6%
Medical & Dental	213	268	266	265	+24	-3	-2	+52	-1.2%	+24.1%
Nursing & Midwifery	207	300	286	281	+1	-19	-5	+74	-6.3%	+35.7%
Health & Social Care Professionals	784	924	952	958	+62	+33	+6	+174	+3.6%	+22.1%
Management (VIII & above)	710	959	952	956	+61	-3	+4	+247	-0.3%	+34.8%
Administrative/ Supervisory (V to VII)	1,372	2,276	2,304	2,292	+329	+16	-13	+920	+0.7%	+67.0%
Clerical (III & IV)	1,501	1,718	1,704	1,694	+158	-24	-10	+193	-1.4%	+12.9%
Management & Administrative	3,583	4,953	4,960	4,942	+547	-11	-18	+1,360	-0.2%	+38.0%
General Support	353	379	370	369	+43	-10	-2	+16	-2.7%	+4.4%
Patient & Client Care	50	16	14	14	-5	-1	0	-35	-7.1%	-71.0%

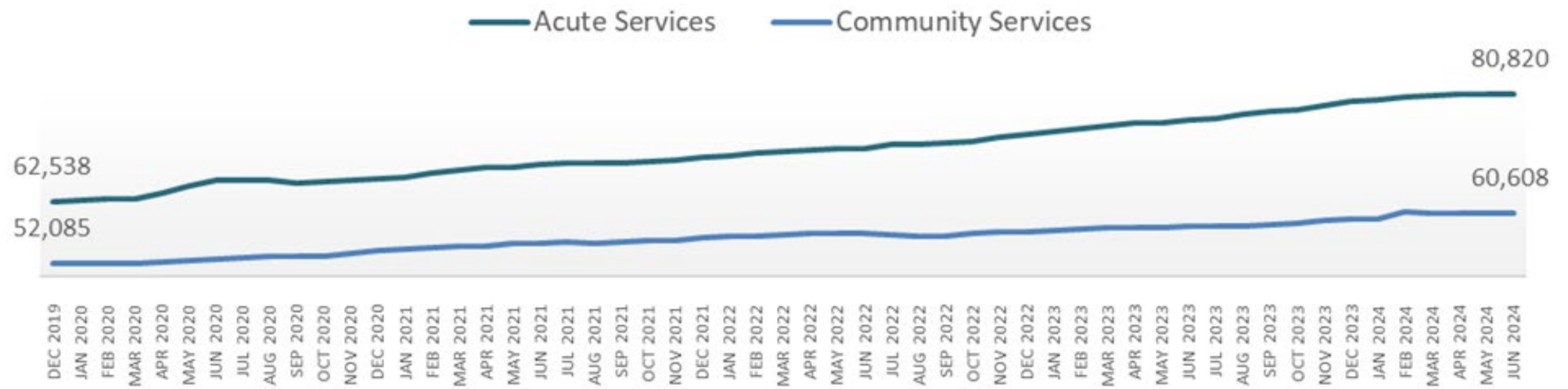
Performance Profile April - June 2024

Total Health Service Acute Services by Staff Group

Staff Category / Group	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Total Acute Service	62,538	79,578	80,757	80,820	+5,523	+1,242	+63	+18,282	+1.6%	+29.2%
Consultants	2,782	3,644	3,777	3,778	+315	+135	+1	+996	+3.7%	+35.8%
Registrars	2,943	3,711	3,818	3,808	+222	+97	-10	+866	+2.6%	+29.4%
SHO/ Interns	2,795	3,716	3,661	3,643	+383	-73	-18	+848	-2.0%	+30.3%
Medical/ Dental, other	60	74	89	87	-1	+13	-1	+28	+17.6%	+46.8%
Medical & Dental	8,579	11,145	11,344	11,317	+918	+172	-28	+2,737	+1.5%	+31.9%
Nurse/ Midwife Manager	4,705	6,166	6,111	6,185	+450	+19	+74	+1,480	+0.3%	+31.4%
Nurse/ Midwife Specialist & AN/MP	1,288	2,257	2,296	2,345	+360	+88	+48	+1,057	+3.9%	+82.1%
Staff Nurse/ Staff Midwife	16,676	20,988	21,678	21,682	+1,629	+694	+5	+5,006	+3.3%	+30.0%
Public Health Nurse	1							-1	-100.0%	-100.0%
Nursing/ Midwifery Student	431	351	711	694	-187	+343	-17	+263	+97.8%	+61.1%
Nursing/ Midwifery other	224	206	208	211	+21	+5	+3	-13	+2.4%	-5.8%
Nursing & Midwifery	23,325	29,968	31,004	31,117	+2,274	+1,148	+113	+7,791	+3.8%	+33.4%
Therapy Professions	2,008	2,741	2,758	2,776	+178	+35	+18	+768	+1.3%	+38.2%
Health Science/ Diagnostics	4,239	4,954	4,979	4,972	+161	+18	-7	+733	+0.4%	+17.3%
Social Care	3	3	3	3	-1	+0	+0	-0	+0.3%	-13.4%
Pharmacy	901	1,203	1,214	1,208	+70	+5	-6	+307	+0.4%	+34.1%
Psychologists	101	175	175	173	+39	-2	-1	+73	-1.2%	+72.1%
Social Workers	355	505	510	506	+64	+2	-4	+151	+0.3%	+42.6%
H&SC, Other	151	230	258	232	+23	+1	-26	+81	+0.6%	+53.7%
Health & Social Care Professionals	7,757	9,811	9,896	9,870	+534	+59	-26	+2,113	+0.6%	+27.2%
Management (VIII & above)	518	750	759	760	+30	+10	+1	+242	+1.3%	+46.8%
Administrative/ Supervisory (V to VII)	2,326	3,892	3,871	3,881	+502	-11	+10	+1,555	-0.3%	+66.9%
Clerical (III & IV)	6,605	7,682	7,640	7,616	+419	-66	-24	+1,011	-0.9%	+15.3%
Management & Administrative	9,449	12,325	12,270	12,257	+951	-68	-13	+2,808	-0.5%	+29.7%
Support	5,556	6,600	6,526	6,585	+66	-15	+59	+1,028	-0.2%	+18.5%
Maintenance/ Technical	529	576	569	567	+5	-9	-2	+39	-1.6%	+7.3%
General Support	6,085	7,176	7,095	7,152	+72	-24	+57	+1,067	-0.3%	+17.5%
Health Care Assistants	5,350	6,736	6,714	6,694	+518	-42	-20	+1,344	-0.6%	+25.1%
Ambulance Staff	1,825	2,103	2,124	2,108	+172	+5	-16	+283	+0.2%	+15.5%
Care, other	168	314	310	306	+84	-8	-4	+138	-2.5%	+82.3%
Patient & Client Care	7,343	9,153	9,149	9,108	+774	-45	-40	+1,765	-0.5%	+24.0%

Total Community Services by Staff Group

Staff Category / Group	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Total Community Service	52,085	59,567	60,552	60,608	+2,044	+1,041	+55	+8,523	+1.7%	+16.4%
Consultants	424	516	530	528	+44	+12	-1	+104	+2.3%	+24.6%
Registrars	687	852	849	854	+54	+1	+4	+166	+0.1%	+24.2%
SHO/ Interns	319	373	375	375	+46	+1	-1	+55	+0.3%	+17.3%
Medical/ Dental, other	634	606	598	591	-22	-16	-7	-44	-2.6%	-6.9%
Medical & Dental	2,065	2,348	2,352	2,347	+122	-1	-5	+282	-0.1%	+13.7%
Nurse/ Midwife Manager	3,162	3,562	3,587	3,579	+113	+17	-8	+417	+0.5%	+13.2%
Nurse/ Midwife Specialist & AN/MP	691	1,309	1,428	1,438	+245	+128	+10	+747	+9.8%	+108.0%
Staff Nurse/ Staff Midwife	9,008	9,339	9,601	9,602	-27	+263	+1	+594	+2.8%	+6.6%
Public Health Nurse	1,534	1,489	1,398	1,433	-13	-56	+35	-100	-3.7%	-6.5%
Nursing/ Midwifery Student	223	213	336	295	+40	+82	-40	+73	+38.4%	+32.6%
Nursing/ Midwifery other	59	65	73	74	-4	+8	+0	+15	+12.6%	+25.7%
Nursing & Midwifery	14,677	15,978	16,423	16,421	+353	+442	-2	+1,744	+2.8%	+11.9%
Therapy Professions	3,204	3,946	3,975	3,970	+206	+24	-5	+766	+0.6%	+23.9%
Health Science/ Diagnostics	108	126	131	132	+1	+5	+1	+23	+4.2%	+21.7%
Social Care	2,707	3,218	3,251	3,253	+51	+34	+2	+546	+1.1%	+20.2%
Pharmacy	98	141	145	146	+16	+5	+1	+48	+3.5%	+48.9%
Psychologists	901	1,061	1,062	1,064	+78	+3	+1	+162	+0.3%	+18.0%
Social Workers	807	1,036	1,076	1,062	+66	+26	-14	+255	+2.5%	+31.6%
H&SC, Other	403	521	530	525	+50	+4	-5	+122	+0.8%	+30.4%
Health & Social Care Professionals	8,228	10,050	10,171	10,151	+468	+101	-20	+1,923	+1.0%	+23.4%
Management (VIII & above)	618	829	815	811	+2	-18	-4	+193	-2.2%	+31.1%
Administrative/ Supervisory (V to VII)	1,507	2,719	2,753	2,737	+319	+18	-15	+1,230	+0.7%	+81.6%
Clerical (III & IV)	3,694	4,578	4,542	4,521	+428	-57	-21	+827	-1.2%	+22.4%
Management & Administrative	5,819	8,126	8,110	8,069	+749	-57	-41	+2,249	-0.7%	+38.7%
Support	2,461	2,164	2,229	2,233	-104	+68	+4	-228	+3.2%	-9.3%
Maintenance/ Technical	406	438	456	459	+13	+21	+3	+53	+4.8%	+13.0%
General Support	2,867	2,602	2,685	2,691	-92	+90	+6	-175	+3.4%	-6.1%
Health Care Assistants	12,147	13,505	13,792	13,911	+430	+406	+119	+1,764	+3.0%	+14.5%
Home Help	3,565	3,728	3,764	3,755	-54	+28	-8	+190	+0.7%	+5.3%
Care, other	2,717	3,230	3,257	3,262	+68	+33	+6	+545	+1.0%	+20.1%
Patient & Client Care	18,430	20,462	20,812	20,929	+443	+466	+117	+2,499	+2.3%	+13.6%



Appendix B: Adjusted Staffing

Adjusted Total Health Service by Staff Group

Total excl. new S38's & pre-reg nurses & midwives	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Total ex. new S38's & pre-reg nurses	119,677	145,872	146,391	146,479	+8,297	+606	+87	+26,802	+0.4%	+22.4%
Consultants	3,250	4,246	4,407	4,408	+377	+162	+1	+1,158	+3.8%	+35.6%
Registrars	3,681	4,640	4,719	4,712	+287	+72	-7	+1,031	+1.6%	+28.0%
SHO/ Interns	3,115	4,089	4,031	4,013	+428	-76	-18	+898	-1.9%	+28.8%
Medical/ Dental, other	811	786	780	770	-27	-16	-10	-41	-2.1%	-5.1%
Medical & Dental	10,857	13,761	13,938	13,903	+1,064	+142	-35	+3,046	+1.0%	+28.1%
Nurse/ Midwife Manager	7,986	9,910	9,796	9,861	+565	-48	+65	+1,875	-0.5%	+23.5%
Nurse/ Midwife Specialist & AN/MP	1,993	3,580	3,644	3,701	+606	+121	+57	+1,708	+3.4%	+85.7%
Staff Nurse/ Staff Midwife	25,687	30,355	31,073	31,076	+1,598	+721	+3	+5,389	+2.4%	+21.0%
Public Health Nurse	1,539	1,492	1,401	1,436	-12	-56	+35	-103	-3.7%	-6.7%
<i>Nursing/ Midwifery awaiting registration</i>	225	220	77	55	-85	-165	-22	-169.2	-74.8%	-75.3%
<i>Post-registration Nurse/ Midwife Student</i>	293	232	206	158	-5	-74	-48	-134.8	-31.7%	-46.0%
Nursing/ Midwifery Student	518	452	283	214	-89	-238	-69	-304	-52.7%	-58.7%
Nursing/ Midwifery other	350	345	346	349	+18	+3	+2	-1	+1.0%	-0.4%
Nursing & Midwifery	38,073	46,134	46,544	46,637	+2,686	+502	+93	+8,563	+1.1%	+22.5%
<i>Dietitians</i>	574	843	860	870	+87	+27	+10	+295.3	+3.2%	+51.4%
<i>Occupational Therapists</i>	1,597	2,048	2,025	2,032	+103	-16	+7	+434.3	-0.8%	+27.2%
<i>Orthoptists</i>	35	38	36	37	-1	-2	+0	+1.8	-4.1%	+5.1%
<i>Physiotherapists</i>	1,851	2,369	2,360	2,363	+142	-5	+3	+512.3	-0.2%	+27.7%
<i>Podiatrists & Chiropodists</i>	72	125	128	130	+4	+4	+1	+58.1	+3.4%	+81.2%
<i>Speech & Language Therapists</i>	1,103	1,276	1,280	1,272	+45	-4	-8	+169.4	-0.3%	+15.4%
Therapy Professions	5,232	6,700	6,689	6,703	+380	+3	+14	+1,471	+0.0%	+28.1%
Health Science/ Diagnostics	4,497	5,214	5,242	5,234	+162	+20	-8	+737	+0.4%	+16.4%
Social Care	2,710	3,221	3,254	3,256	+50	+34	+2	+546	+1.1%	+20.1%
Pharmacy	1,038	1,419	1,430	1,425	+96	+6	-5	+387	+0.4%	+37.3%
Psychologists	1,004	1,238	1,239	1,239	+118	+1	+0	+235	+0.0%	+23.4%
Social Workers	1,166	1,559	1,571	1,554	+129	-5	-17	+388	-0.3%	+33.3%
H&SC, Other	1,122	1,434	1,491	1,468	+128	+34	-24	+345	+2.3%	+30.8%
Health & Social Care Professionals	16,769	20,785	20,916	20,878	+1,064	+93	-38	+4,110	+0.4%	+24.5%

Total excl. new S38's & pre-reg nurses & midwives	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Management (VIII & above)	1,845	2,539	2,508	2,509	+92	-30	+1	+663	-1.2%	+35.9%
Administrative/ Supervisory (V to VII)	5,205	8,887	8,883	8,865	+1,151	-22	-18	+3,660	-0.3%	+70.3%
Clerical (III & IV)	11,801	13,978	13,800	13,746	+1,005	-233	-54	+1,945	-1.7%	+16.5%
Management & Administrative	18,851	25,404	25,190	25,119	+2,248	-285	-71	+6,268	-1.1%	+33.3%
Support	8,131	8,901	8,781	8,842	-12	-60	+61	+710	-0.7%	+8.7%
Maintenance/ Technical	1,173	1,255	1,249	1,249	+34	-6	+0	+76	-0.5%	+6.5%
General Support	9,305	10,157	10,030	10,091	+23	-66	+61	+786	-0.6%	+8.4%
Health Care Assistants	17,508	20,255	20,329	20,429	+946	+174	+99	+2,921	+0.9%	+16.7%
Home Help	3,565	3,728	3,764	3,755	-54	+28	-8	+190	+0.7%	+5.3%
Ambulance Staff	1,828	2,104	2,125	2,109	+172	+5	-16	+281	+0.2%	+15.4%
Care, other	2,922	3,545	3,555	3,557	+149	+13	+2	+636	+0.4%	+21.8%
Patient & Client Care	25,822	29,631	29,773	29,850	+1,213	+219	+77	+4,028	+0.7%	+15.6%

Adjusted Total Health Service by Administration

Administration excl. new S38's & pre-reg nurses & midwives	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Total ex. new S38's & pre-reg nurses	119,677	145,872	146,391	146,479	+8,297	+606	+87	+26,802	+0.4%	+22.4%
Health Service Executive	76,841	94,668	94,566	94,361	+5,517	-308	-205	+17,519	-0.3%	+22.8%
Section 38 Hospitals	26,643	33,157	33,547	33,706	+2,370	+549	+159	+7,063	+1.7%	+26.5%
Section 38 Voluntary Agencies	16,193	18,047	18,279	18,412	+410	+365	+133	+2,219	+2.0%	+13.7%

Adjusted Acute Services by Staff Group

Acute ex. new S38's & pre-reg nurses	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Total Acute excl. pre-reg nurses	62,456	79,507	80,225	80,279	+5,588	+773	+54	+17,824	+1.0%	+28.5%
Consultants	2,782	3,644	3,777	3,778	+315	+135	+1	+996	+3.7%	+35.8%
Registrars	2,943	3,711	3,818	3,808	+222	+97	-10	+866	+2.6%	+29.4%
SHO/ Interns	2,795	3,716	3,661	3,643	+383	-73	-18	+848	-2.0%	+30.3%
Medical/ Dental, other	60	74	89	87	-1	+13	-1	+28	+17.6%	+46.8%
Medical & Dental	8,579	11,145	11,344	11,317	+918	+172	-28	+2,737	+1.5%	+31.9%
Nurse/ Midwife Manager	4,705	6,166	6,111	6,185	+450	+19	+74	+1,480	+0.3%	+31.4%
Nurse/ Midwife Specialist & AN/MP	1,288	2,257	2,296	2,345	+360	+88	+48	+1,057	+3.9%	+82.1%
Staff Nurse/ Staff Midwife	16,676	20,988	21,678	21,682	+1,629	+694	+5	+5,006	+3.3%	+30.0%
Public Health Nurse	1							-1	-100.0%	-100.0%
Nursing/ Midwifery Student	348	280	179	153	-122	-126	-26	-195	-45.2%	-56.0%
Nursing/ Midwifery other	224	206	208	211	+21	+5	+3	-13	+2.4%	-5.8%
Nursing & Midwifery	23,243	29,897	30,472	30,576	+2,339	+679	+104	+7,333	+2.3%	+31.6%
Therapy Professions	2,008	2,741	2,758	2,776	+178	+35	+18	+768	+1.3%	+38.2%
Health Science/ Diagnostics	4,239	4,954	4,979	4,972	+161	+18	-7	+733	+0.4%	+17.3%
Social Care	3	3	3	3	-1	+0	+0	-0	+0.3%	-13.4%
Pharmacy	901	1,203	1,214	1,208	+70	+5	-6	+307	+0.4%	+34.1%
Psychologists	101	175	175	173	+39	-2	-1	+73	-1.2%	+72.1%
Social Workers	355	505	510	506	+64	+2	-4	+151	+0.3%	+42.6%
H&SC, Other	151	230	258	232	+23	+1	-26	+81	+0.6%	+53.7%
Health & Social Care Professionals	7,757	9,811	9,896	9,870	+534	+59	-26	+2,113	+0.6%	+27.2%
Management (VIII & above)	518	750	759	760	+30	+10	+1	+242	+1.3%	+46.8%
Administrative/ Supervisory (V to VII)	2,326	3,892	3,871	3,881	+502	-11	+10	+1,555	-0.3%	+66.9%
Clerical (III & IV)	6,605	7,682	7,640	7,616	+419	-66	-24	+1,011	-0.9%	+15.3%
Management & Administrative	9,449	12,325	12,270	12,257	+951	-68	-13	+2,808	-0.5%	+29.7%
Support	5,556	6,600	6,526	6,585	+66	-15	+59	+1,028	-0.2%	+18.5%
Maintenance/ Technical	529	576	569	567	+5	-9	-2	+39	-1.6%	+7.3%
General Support	6,085	7,176	7,095	7,152	+72	-24	+57	+1,067	-0.3%	+17.5%
Health Care Assistants	5,350	6,736	6,714	6,694	+518	-42	-20	+1,344	-0.6%	+25.1%
Ambulance Staff	1,825	2,103	2,124	2,108	+172	+5	-16	+283	+0.2%	+15.5%
Care, other	168	314	310	306	+84	-8	-4	+138	-2.5%	+82.3%
Patient & Client Care	7,343	9,153	9,149	9,108	+774	-45	-40	+1,765	-0.5%	+24.0%

Adjusted Community Services by Staff Group

Community ex. new S38's & pre-reg nurses	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Total Community ex. new S38's & pre-reg nurses	52,032	59,526	59,317	59,371	+2,037	-155	+54	+7,339	-0.3%	+14.1%
Consultants	424	516	527	526	+44	+10	-1	+102	+1.8%	+24.0%
Registrars	687	852	833	836	+54	-16	+4	+149	-1.9%	+21.7%
SHO/ Interns	319	373	370	370	+46	-4	-1	+50	-1.0%	+15.7%
Medical/ Dental, other	634	606	597	590	-22	-16	-7	-44	-2.7%	-7.0%
Medical & Dental	2,065	2,348	2,327	2,322	+122	-26	-5	+257	-1.1%	+12.5%
Nurse/ Midwife Manager	3,162	3,562	3,515	3,508	+113	-54	-7	+346	-1.5%	+10.9%
Nurse/ Midwife Specialist & AN/MP	691	1,309	1,335	1,345	+245	+36	+10	+654	+2.7%	+94.6%
Staff Nurse/ Staff Midwife	9,008	9,339	9,366	9,365	-27	+26	-1	+357	+0.3%	+4.0%
Public Health Nurse	1,534	1,489	1,398	1,433	-13	-56	+35	-100	-3.7%	-6.5%
Nursing/ Midwifery Student	169	172	104	60	+32	-112	-44	-109	-64.9%	-64.3%
Nursing/ Midwifery other	59	65	68	68	-4	+3	+0	+9	+4.0%	+16.1%
Nursing & Midwifery	14,623	15,937	15,786	15,780	+346	-158	-6	+1,156	-1.0%	+7.9%
Therapy Professions	3,204	3,946	3,919	3,915	+206	-30	-4	+711	-0.8%	+22.2%
Health Science/ Diagnostics	108	126	131	132	+1	+5	+1	+23	+4.2%	+21.7%
Social Care	2,707	3,218	3,251	3,253	+51	+34	+2	+546	+1.1%	+20.2%
Pharmacy	98	141	133	134	+16	-7	+1	+36	-5.0%	+36.8%
Psychologists	901	1,061	1,062	1,064	+78	+3	+1	+162	+0.3%	+18.0%
Social Workers	807	1,036	1,042	1,028	+66	-8	-14	+221	-0.8%	+27.4%
H&SC, Other	403	521	530	525	+50	+4	-5	+122	+0.8%	+30.4%
Health & Social Care Professionals	8,228	10,050	10,068	10,051	+468	+1	-17	+1,823	+0.0%	+22.2%
Management (VIII & above)	618	829	797	792	+2	-37	-4	+174	-4.4%	+28.2%
Administrative/ Supervisory (V to VII)	1,507	2,719	2,708	2,692	+319	-27	-16	+1,185	-1.0%	+78.6%
Clerical (III & IV)	3,694	4,578	4,456	4,435	+428	-143	-20	+741	-3.1%	+20.1%
Management & Administrative	5,819	8,126	7,960	7,920	+749	-206	-40	+2,100	-2.5%	+36.1%
Support	2,461	2,164	2,122	2,125	-104	-39	+3	-335	-1.8%	-13.6%
Maintenance/ Technical	406	438	442	445	+13	+7	+3	+39	+1.7%	+9.6%
General Support	2,867	2,602	2,565	2,571	-92	-31	+6	-296	-1.2%	-10.3%
Health Care Assistants	12,147	13,505	13,602	13,722	+430	+217	+120	+1,575	+1.6%	+13.0%
Home Help	3,565	3,728	3,764	3,755	-54	+28	-8	+190	+0.7%	+5.3%
Care, other	2,717	3,230	3,244	3,250	+68	+20	+6	+533	+0.6%	+19.6%
Patient & Client Care	18,430	20,462	20,610	20,728	+443	+265	+117	+2,298	+1.3%	+12.5%

**Appendix C: Department of Health only
DoH Only By Category & Staff Group**

Staff Category / Group	WTE DEC 2019	WTE DEC 2023	WTE MAY 2024	WTE JUN 2024	WTE Change 2023	WTE Change 2024	WTE change since MAY 2024	WTE Change Dec 2019 to JUN 2024	% WTE Change 2024	% WTE change since DEC 2019 to JUN 2024
Total excluding Disabilities	101,540	125,420	127,325	127,309	+7,578	+1,889	-17	+25,768	+1.5%	+25.4%
Consultants	3,226	4,224	4,391	4,392	+373	+168	+0	+1,166	+4.0%	+36.1%
Registrars	3,668	4,631	4,727	4,720	+288	+89	-7	+1,052	+1.9%	+28.7%
SHO/ Interns	3,108	4,075	4,025	4,006	+423	-69	-19	+898	-1.7%	+28.9%
Medical/ Dental, other	796	774	770	759	-26	-15	-11	-37	-2.0%	-4.7%
Medical & Dental	10,799	13,704	13,913	13,877	+1,057	+173	-36	+3,078	+1.3%	+28.5%
Nurse/ Midwife Manager	7,094	8,942	8,903	8,978	+556	+35	+74	+1,883	+0.4%	+26.5%
Nurse/ Midwife Specialist & AN/MP	1,931	3,500	3,659	3,716	+596	+215	+57	+1,784	+6.2%	+92.4%
Staff Nurse/ Staff Midwife	23,118	27,761	28,703	28,715	+1,622	+954	+12	+5,597	+3.4%	+24.2%
Public Health Nurse	1,533	1,481	1,390	1,425	-11	-56	+35	-108	-3.8%	-7.0%
<i>Nursing/ Midwifery awaiting registration</i>	211	216	77	55	-85	-161	-22	-155.3	-74.4%	-73.7%
<i>Post-registration Nurse/ Midwife Student</i>	293	232	206	158	-5	-74	-48	-134.8	-31.7%	-46.0%
<i>Pre-registration Nurse/ Midwife Intern</i>	108	85	689	700	-78	+615	+11	+592.8	+724.6%	+551.0%
Nursing/ Midwifery Student	611	533	972	914	-168	+381	-58	+303	+71.5%	+49.5%
Nursing/ Midwifery other	328	319	327	330	+19	+11	+3	+2	+3.5%	+0.6%
Nursing & Midwifery	34,616	42,537	43,954	44,078	+2,615	+1,541	+123	+9,462	+3.6%	+27.3%
<i>Dietitians</i>	556	815	832	842	+79	+28	+10	+286.5	+3.4%	+51.5%
<i>Occupational Therapists</i>	1,334	1,721	1,723	1,726	+80	+5	+3	+392.0	+0.3%	+29.4%
<i>Orthoptists</i>	35	38	36	37	-1	-2	+0	+1.8	-4.1%	+5.1%
<i>Physiotherapists</i>	1,662	2,165	2,177	2,173	+131	+8	-5	+510.8	+0.4%	+30.7%
<i>Podiatrists & Chiropodists</i>	72	125	128	130	+4	+4	+1	+58.1	+3.4%	+81.2%
<i>Speech & Language Therapists</i>	811	993	984	974	+34	-19	-11	+162.6	-1.9%	+20.1%
Therapy Professions	4,470	5,857	5,882	5,881	+328	+24	-0	+1,412	+0.4%	+31.6%
Health Science/ Diagnostics	4,477	5,192	5,220	5,211	+162	+19	-8	+735	+0.4%	+16.4%
Social Care	115	114	112	113	-2	-1	+0	-2	-0.8%	-1.9%
Pharmacy	1,031	1,410	1,435	1,429	+96	+19	-6	+398	+1.3%	+38.6%
Psychologists	802	995	995	990	+114	-5	-5	+188	-0.5%	+23.5%
Social Workers	947	1,304	1,343	1,328	+113	+24	-15	+381	+1.8%	+40.3%
H&SC, Other	1,037	1,366	1,425	1,400	+128	+34	-25	+363	+2.5%	+35.0%
Health & Social Care Professionals	12,878	16,239	16,411	16,353	+938	+114	-58	+3,474	+0.7%	+27.0%

Staff Category / Group	WTE DEC 2019	WTE DEC 2023	WTE MAY 2024	WTE JUN 2024	WTE Change 2023	WTE Change 2024	WTE change since MAY 2024	WTE Change Dec 2019 to JUN 2024	% WTE Change 2024	% WTE change since DEC 2019 to JUN 2024
Management (VIII & above)	1,666	2,301	2,296	2,296	+91	-5	+0	+630	-0.2%	+37.8%
Administrative/ Supervisory (V to VII)	4,727	8,112	8,134	8,122	+1,040	+10	-13	+3,394	+0.1%	+71.8%
Clerical (III & IV)	11,140	13,175	13,101	13,049	+945	-126	-52	+1,909	-1.0%	+17.1%
Management & Administrative	17,534	23,587	23,531	23,467	+2,076	-120	-64	+5,933	-0.5%	+33.8%
Support	7,398	8,349	8,339	8,402	+60	+53	+63	+1,004	+0.6%	+13.6%
Maintenance/ Technical	1,049	1,111	1,124	1,122	+16	+11	-2	+73	+1.0%	+6.9%
General Support	8,447	9,460	9,463	9,524	+76	+64	+60	+1,077	+0.7%	+12.7%
Health Care Assistants	10,689	12,376	12,480	12,475	+562	+99	-5	+1,786	+0.8%	+16.7%
Home Help	3,466	3,660	3,697	3,688	-42	+29	-9	+222	+0.8%	+6.4%
Ambulance Staff	1,828	2,104	2,125	2,109	+172	+5	-16	+281	+0.2%	+15.4%
Care, other	1,283	1,754	1,749	1,738	+125	-16	-12	+455	-0.9%	+35.5%
Patient & Client Care	17,266	19,893	20,052	20,010	+816	+117	-42	+2,744	+0.6%	+15.9%

Adjusted DoH Only By Staff Category

Adjusted Staff Category / Group	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
DoH ex. new S38's & pre-reg nurses	101,433	125,335	125,633	125,606	+7,656	+271	-27	+24,173	+0.2%	+23.8%
Medical & Dental	10,799	13,704	13,889	13,852	+1,057	+148	-37	+3,053	+1.1%	+28.3%
Nursing & Midwifery	34,508	42,452	42,860	42,972	+2,693	+520	+112	+8,463	+1.2%	+24.5%
Health & Social Care Professionals	12,878	16,239	16,309	16,253	+938	+14	-56	+3,374	+0.1%	+26.2%
Management & Administrative	17,534	23,587	23,381	23,318	+2,076	-270	-63	+5,784	-1.1%	+33.0%
General Support	8,447	9,460	9,343	9,403	+76	-57	+60	+956	-0.6%	+11.3%
Patient & Client Care	17,266	19,893	19,851	19,809	+816	-84	-42	+2,543	-0.4%	+14.7%

DoH Only By Care Group

Care Group Excluding Disabilities	WTE DEC 2019	WTE DEC 2023	WTE MAY 2024	WTE JUN 2024	WTE Change 2023	WTE Change 2024	WTE change since MAY 2024	WTE Change Dec 2019 to JUN 2024	% WTE Change 2024	% WTE change since DEC 2019 to JUN 2024
Total Excluding Disabilities	101,540	125,420	127,325	127,309	+7,578	+1,889	-17	+25,768	+1.5%	+25.4%
Ambulance Services	1,933	2,321	2,361	2,352	+254	+31	-9	+419	+1.3%	+21.7%
Acute Hospital Services	60,605	77,257	78,396	78,468	+5,269	+1,211	+72	+17,863	+1.6%	+29.5%
Acute Services	62,538	79,578	80,757	80,820	+5,523	+1,242	+63	+18,282	+1.6%	+29.2%
Community Health & Wellbeing		390	373	370	+69	-20	-3	+370	-5.1%	-100.0%
Mental Health	9,967	10,838	10,883	10,837	+385	-1	-47	+870	-0.0%	+8.7%
Primary Care	10,597	12,631	13,305	13,274	+573	+644	-31	+2,677	+5.1%	+25.3%
Older People	13,239	14,154	14,198	14,221	+207	+67	+24	+982	+0.5%	+7.4%
CHO Operations	9	989	960	957	+149	-32	-3	+949	-3.2%	+11,133%
Community Services	33,812	39,002	39,719	39,660	+1,383	+658	-59	+5,847	+1.7%	+17.3%
National Services & Central Functions	5,190	6,840	6,849	6,829	+672	-11	-21	+1,639	-0.2%	+31.6%

DoH Only By Service Delivery Area

Service / HG & CHO excluding Disabilities	WTE DEC 2019	WTE DEC 2023	WTE MAY 2024	WTE JUN 2024	WTE Change 2023	WTE Change 2024	WTE change since MAY 2024	WTE Change Dec 2019 to JUN 2024	% WTE Change 2024	% WTE change since DEC 2019 to JUN 2024
Total Excluding Disabilities	101,540	125,420	127,325	127,309	+7,578	+1,889	-17	+25,768	+1.5%	+25.4%
National Ambulance Service	1,933	2,321	2,361	2,352	+254	+31	-9	+419	+1.3%	+21.7%
Children's Health Ireland	3,602	4,522	4,505	4,510	+414	-11	+5	+908	-0.2%	+25.2%
Dublin Midlands Hospital Group	11,732	14,540	14,919	15,009	+1,116	+469	+90	+3,277	+3.2%	+27.9%
Ireland East Hospital Group	10,375	13,335	13,592	13,635	+941	+299	+42	+3,260	+2.2%	+31.4%
RCSI Hospitals Group	13,764	16,998	17,270	17,294	+764	+296	+24	+3,530	+1.7%	+25.6%
Saolta University Hospital Care	9,253	12,091	12,092	12,018	+765	-73	-74	+2,765	-0.6%	+29.9%
South/South West Hospital Group	7,641	9,961	10,075	10,073	+809	+112	-2	+2,432	+1.1%	+31.8%
University of Limerick Hospital Group	4,146	5,661	5,796	5,785	+439	+124	-10	+1,639	+2.2%	+39.5%
other Acute Services	91	148	147	144	+22	-4	-3	+53	-2.9%	+57.9%
Acute Services	62,538	79,578	80,757	80,820	+5,523	+1,242	+63	+18,282	+1.6%	+29.2%
CHO 1	3,970	4,949	4,945	4,943	+249	-5	-1	+973	-0.1%	+24.5%
CHO 2	4,048	4,410	4,547	4,531	+45	+121	-16	+483	+2.7%	+11.9%
CHO 3	2,533	3,307	3,578	3,560	+227	+253	-18	+1,027	+7.6%	+40.5%
CHO 4	5,763	6,281	6,545	6,507	-39	+225	-39	+743	+3.6%	+12.9%
CHO 5	3,789	4,428	4,388	4,366	+279	-61	-22	+578	-1.4%	+15.2%
CHO 6	2,180	2,567	2,546	2,543	+163	-23	-3	+363	-0.9%	+16.6%
CHO 7	3,533	3,905	3,885	3,938	+100	+33	+53	+406	+0.9%	+11.5%
CHO 8	3,973	4,360	4,294	4,293	+191	-67	-1	+320	-1.5%	+8.1%
CHO 9	3,388	3,962	4,159	4,150	+69	+188	-9	+762	+4.7%	+22.5%
other Community Services	634	833	830	827	+100	-6	-3	+193	-0.7%	+30.4%
Community Services	33,812	39,002	39,719	39,660	+1,383	+658	-59	+5,847	+1.7%	+17.3%
National Services & Central Functions	5,190	6,840	6,849	6,829	+672	-11	-21	+1,639	-0.2%	+31.6%

DoH Only Community Services by Staff Group

Community excluding Disabilities	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Total Community excluding Disabilities	33,812	39,002	39,719	39,660	+1,383	+658	-59	+5,847	+1.7%	+17.3%
Consultants	400	494	511	509	+40	+15	-2	+109	+3.1%	+27.3%
Registrars	674	843	840	845	+55	+1	+4	+170	+0.1%	+25.3%
SHO/ Interns	312	359	364	363	+41	+3	-2	+50	+0.9%	+16.1%
Medical/ Dental, other	620	595	587	579	-21	-15	-8	-41	-2.5%	-6.5%
Medical & Dental	2,006	2,291	2,303	2,296	+115	+4	-7	+289	+0.2%	+14.4%
Nurse/ Midwife Manager	2,270	2,594	2,621	2,624	+105	+30	+3	+354	+1.1%	+15.6%
Nurse/ Midwife Specialist & AN/MP	629	1,230	1,350	1,359	+235	+130	+9	+730	+10.6%	+116.0%
Staff Nurse/ Staff Midwife	6,439	6,745	6,996	7,005	-3	+260	+9	+565	+3.9%	+8.8%
Public Health Nurse	1,528	1,479	1,388	1,423	-12	-56	+35	-105	-3.8%	-6.9%
Nursing/ Midwifery awaiting registration	58	63	4	4	+23	-59	+0	-54	-93.7%	-93.1%
Post-registration Nurse/ Midwife Student	98	105	100	56	+9	-49	-44	-41	-46.4%	-42.2%
Pre-registration Nurse/ Midwife Intern	25	14	157	160	-13	+146	+3	+135	+1,067.5%	+538.1%
Nursing/ Midwifery Student	181	182	261	220	+19	+38	-41	+39	+20.9%	+21.9%
Nursing/ Midwifery other	36	39	48	49	-3	+10	+1	+13	+26.9%	+35.6%
Nursing & Midwifery	11,083	12,268	12,665	12,680	+340	+412	+15	+1,597	+3.4%	+14.4%
Therapy Professions	2,441	3,103	3,111	3,093	+153	-9	-18	+652	-0.3%	+26.7%
Health Science/ Diagnostics	88	105	109	109	+1	+5	+1	+21	+4.5%	+24.2%
Social Care	112	111	110	110	-2	-1	+0	-2	-0.8%	-1.6%
Pharmacy	91	133	138	138	+16	+5	+1	+47	+3.9%	+51.3%
Psychologists	699	818	818	815	+74	-3	-3	+116	-0.4%	+16.6%
Social Workers	588	781	814	802	+50	+21	-11	+214	+2.7%	+36.4%
H&SC, Other	318	453	463	457	+50	+5	-6	+140	+1.1%	+44.0%
Health & Social Care Professionals	4,337	5,503	5,563	5,525	+342	+22	-37	+1,188	+0.4%	+27.4%
Management (VIII & above)	439	591	585	580	+0	-11	-5	+141	-1.9%	+32.2%
Administrative/ Supervisory (V to VII)	1,030	1,944	1,959	1,949	+209	+5	-10	+919	+0.3%	+89.3%
Clerical (III & IV)	3,034	3,774	3,757	3,739	+368	-36	-18	+705	-0.9%	+23.2%
Management & Administrative	4,502	6,309	6,301	6,267	+577	-42	-34	+1,765	-0.7%	+39.2%
Support	1,728	1,612	1,681	1,686	-33	+74	+5	-42	+4.6%	-2.4%
Maintenance/ Technical	282	293	317	318	-6	+24	+0	+36	+8.2%	+12.7%
General Support	2,009	1,905	1,998	2,003	-39	+98	+5	-6	+5.2%	-0.3%
Health Care Assistants	5,329	5,626	5,753	5,768	+46	+142	+15	+440	+2.5%	+8.3%
Home Help	3,466	3,660	3,697	3,688	-42	+29	-9	+222	+0.8%	+6.4%
Care, other	1,079	1,439	1,439	1,431	+43	-8	-8	+352	-0.5%	+32.6%
Patient & Client Care	9,874	10,725	10,889	10,887	+47	+163	-2	+1,014	+1.5%	+10.3%

Appendix D: DEPARTMENT OF CHILDREN EQUALITY DISABILITY INTEGRATION AND YOUTH

DCEDIY/ Disabilities Only By Staff Group

Staff Category / Group	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Total Disabilities Only	18,273	20,565	20,833	20,948	+662	+383	+115	+2,675	+1.9%	+14.6%
Medical & Dental	58	57	49	51	+7	-6	+2	-7	-9.8%	-12.1%
Nursing & Midwifery	3,593	3,710	3,758	3,741	+13	+30	-18	+147	+0.8%	+4.1%
Health & Social Care Professionals	3,890	4,547	4,608	4,626	+126	+79	+18	+735	+1.7%	+18.9%
Management & Administrative	1,317	1,817	1,809	1,801	+172	-16	-7	+484	-0.9%	+36.7%
General Support	857	697	687	688	-53	-9	+1	-169	-1.3%	-19.8%
Patient & Client Care	8,556	9,738	9,923	10,041	+397	+303	+118	+1,485	+3.1%	+17.4%

DCEDIY / Disabilities Only By Service Delivery Area

Service / HG & CHO	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Total Disabilities Only	18,273	20,565	20,833	20,948	+662	+383	+115	+2,675	+1.9%	+14.6%
CHO 1	1,498	1,758	1,766	1,774	+60	+15	+8	+275	+0.9%	+18.4%
CHO 2	1,497	1,757	1,838	1,882	+150	+125	+44	+385	+7.1%	+25.7%
CHO 3	1,823	2,048	2,100	2,106	+60	+57	+5	+282	+2.8%	+15.5%
CHO 4	2,425	2,686	2,743	2,769	+46	+82	+26	+343	+3.1%	+14.2%
CHO 5	1,488	1,713	1,747	1,747	+57	+34	+0	+259	+2.0%	+17.4%
CHO 6	1,198	1,222	1,241	1,251	+6	+29	+10	+54	+2.4%	+4.5%
CHO 7	2,982	3,561	3,543	3,543	+151	-17	+0	+561	-0.5%	+18.8%
CHO 8	2,162	2,432	2,455	2,474	+87	+42	+19	+312	+1.7%	+14.4%
CHO 9	3,194	3,380	3,393	3,395	+44	+16	+2	+202	+0.5%	+6.3%
other Community Services	6	7	7	7	+1	-0	0	+1	-1.0%	+16.5%

DCEDIY / Disabilities by Administration

HSE / S38	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Total Disabilities Only	18,273	20,565	20,833	20,948	+662	+383	+115	+2,675	+1.9%	+14.6%
Health Service Executive	3,873	4,408	4,402	4,403	+208	-6	+1	+529	-0.1%	+13.7%
Section 38 Voluntary Agencies	14,399	16,157	16,432	16,545	+453	+389	+114	+2,146	+2.4%	+14.9%

Appendix E: RHA Tables

RHA by Staff Category

HSE Dublin & Midlands

HSE Dublin & Midlands by Staff Group	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Total HSE Dublin & Midlands	25,344	30,373	30,660	30,806	+2,003	+432	+146	+5,461	+1.4%	+21.5%
Medical & Dental	2,448	3,052	3,061	3,079	+228	+27	+17	+630	+0.9%	+25.7%
<i>Pre-registration Nurse/ Midwife Intern</i>	23	33	157	157	-0	+124	-0	+134.5	+373.0%	+597.5%
Nursing & Midwifery	8,308	9,937	10,281	10,349	+618	+412	+68	+2,040	+4.1%	+24.6%
Health & Social Care Professionals	4,116	4,889	4,926	4,937	+228	+48	+11	+821	+1.0%	+20.0%
Management & Administrative	3,506	4,559	4,508	4,512	+464	-47	+4	+1,006	-1.0%	+28.7%
General Support	1,721	1,741	1,693	1,724	+13	-17	+32	+4	-1.0%	+0.2%
Patient & Client Care	5,246	6,195	6,191	6,205	+452	+10	+14	+960	+0.2%	+18.3%

HSE Dublin & North East

HSE Dublin & North East by Staff Group	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Total HSE Dublin & North East	24,234	28,925	29,395	29,433	+1,017	+508	+37	+5,198	+1.8%	+21.5%
Medical & Dental	2,449	3,054	3,104	3,085	+204	+31	-19	+636	+1.0%	+26.0%
<i>Pre-registration Nurse/ Midwife Intern</i>	27	29	178	180	+7	+151	+2	+152.5	+528%	+558%
Nursing & Midwifery	8,411	10,075	10,449	10,466	+455	+390	+17	+2,055	+3.9%	+24.4%
Health & Social Care Professionals	3,839	4,600	4,599	4,604	+87	+4	+5	+765	+0.1%	+19.9%
Management & Administrative	3,333	4,459	4,461	4,464	+253	+5	+3	+1,131	+0.1%	+33.9%
General Support	2,036	2,054	2,057	2,070	+9	+16	+12	+34	+0.8%	+1.7%
Patient & Client Care	4,166	4,682	4,725	4,744	+9	+62	+19	+578	+1.3%	+13.9%

HSE Dublin & South East

HSE Dublin & South East by Staff Group	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Total HSE Dublin & South East	19,029	23,175	23,429	23,457	+1,424	+282	+28	+4,428	+1.2%	+23.3%
Medical & Dental	1,800	2,342	2,367	2,360	+188	+18	-7	+559	+0.8%	+31.1%
<i>Pre-registration Nurse/ Midwife Intern</i>	19	17	127	127	-29	+111	+1	+108.5	+668%	+579%
Nursing & Midwifery	6,432	7,869	8,111	8,166	+561	+297	+55	+1,734	+3.8%	+27.0%
Health & Social Care Professionals	2,637	3,288	3,313	3,302	+208	+14	-11	+665	+0.4%	+25.2%
Management & Administrative	2,606	3,414	3,387	3,377	+253	-37	-11	+771	-1.1%	+29.6%
General Support	1,873	1,999	1,961	1,959	-6	-39	-2	+87	-2.0%	+4.6%
Patient & Client Care	3,680	4,263	4,289	4,293	+220	+30	+4	+613	+0.7%	+16.7%

HSE Midwest

HSE Midwest by Staff Group	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Total HSE Midwest	8,503	11,017	11,474	11,451	+725	+435	-23	+2,948	+3.9%	+34.7%
Medical & Dental	705	970	993	987	+115	+17	-6	+282	+1.8%	+40.0%
<i>Pre-registration Nurse/ Midwife Intern</i>	24	10	64	66	+6	+55	+2	+42.2	+527%	+179%
Nursing & Midwifery	2,898	3,549	3,727	3,727	+189	+178	-0	+829	+5.0%	+28.6%
Health & Social Care Professionals	1,087	1,379	1,444	1,429	+103	+50	-15	+342	+3.6%	+31.5%
Management & Administrative	1,114	1,580	1,616	1,617	+135	+36	+0	+502	+2.3%	+45.1%
General Support	565	1,003	1,067	1,068	+14	+65	+1	+503	+6.5%	+89.0%
Patient & Client Care	2,134	2,536	2,626	2,624	+170	+89	-2	+490	+3.5%	+23.0%

HSE South West

HSE South West by Staff Group	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Total HSE South West	15,829	18,929	19,363	19,348	+819	+419	-15	+3,519	+2.2%	+22.2%
Medical & Dental	1,374	1,787	1,836	1,827	+165	+40	-9	+454	+2.3%	+33.0%
<i>Pre-registration Nurse/ Midwife Intern</i>	39	15	97	104	-29	+89	+7	+64.9	+616.2%	+166.3%
Nursing & Midwifery	5,293	6,372	6,579	6,595	+402	+224	+17	+1,303	+3.5%	+24.6%
Health & Social Care Professionals	1,983	2,574	2,582	2,555	+141	-19	-27	+572	-0.8%	+28.8%
Management & Administrative	1,862	2,452	2,471	2,453	+201	+1	-18	+591	+0.0%	+31.8%
General Support	1,279	1,425	1,473	1,485	-50	+60	+12	+206	+4.2%	+16.1%
Patient & Client Care	4,039	4,319	4,423	4,433	-40	+114	+10	+394	+2.6%	+9.8%

HSE West & North West

HSE West & North West by Staff Group	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Total HSE West & North West	19,019	23,417	23,642	23,603	+1,202	+186	-39	+4,584	+0.8%	+24.1%
Medical & Dental	1,823	2,235	2,284	2,275	+139	+40	-9	+452	+1.8%	+24.8%
<i>Pre-registration Nurse/ Midwife Intern</i>	5	8	141	142	-14	+134	+1	+137.3	+1,677%	+2,921%
Nursing & Midwifery	6,395	7,844	7,971	7,927	+379	+84	-44	+1,533	+1.1%	+24.0%
Health & Social Care Professionals	2,250	3,025	3,088	3,072	+197	+47	-17	+822	+1.6%	+36.5%
Management & Administrative	2,482	3,391	3,341	3,313	+276	-78	-28	+831	-2.3%	+33.5%
General Support	1,456	1,526	1,496	1,504	+9	-22	+8	+48	-1.4%	+3.3%
Patient & Client Care	4,613	5,397	5,462	5,512	+201	+116	+50	+899	+2.1%	+19.5%

National

National by Staff Group	WTE Dec 2019	WTE Dec 2023	WTE May 2024	WTE Jun 2024	WTE Change 2023	WTE Change 2024	WTE change since May 2024	WTE Change Dec 2019 to Jun 2024	% WTE Change 2024	% WTE change Dec 2019 to Jun 2024
Total National	7,854	10,150	10,195	10,159	+1,049	+9	-36	+2,305	+0.1%	+29.3%
Medical & Dental	258	321	317	315	+25	-6	-1	+58	-1.8%	+22.3%
<i>Pre-registration Nurse/ Midwife Intern</i>		1			+1	-1				
Nursing & Midwifery	472	601	594	588	+24	-12	-6	+116	-2.1%	+24.5%
Health & Social Care Professionals	858	1,031	1,066	1,081	+100	+50	+15	+224	+4.8%	+26.1%
Management & Administrative	3,947	5,547	5,555	5,533	+667	-14	-22	+1,586	-0.3%	+40.2%
General Support	376	409	404	402	+35	-7	-1	+26	-1.7%	+7.0%
Patient & Client Care	1,944	2,241	2,259	2,239	+199	-1	-19	+296	-0.1%	+15.2%

Finally, further staffing details are published [here](#)

Health Sector Absence Rates

Headlines

This report provides the overview of the reported National Health Sector Absence Rates for June 2024.

The reported absence rate for June 2024 stands at **6.44%**.

- This month's absence rate is showing an increase of **0.68%** when compared with the **previous month** (including COVID-19).
- **Excluding COVID-19 absence**, this month's absence rate is **5.70%** which is **0.25%** higher than the rate reported last month. This month's data is higher than the rates reported in previous years i.e. 5.0% (2023) 5.0% (2022), 4.2% (2021).
- **Including COVID-19 absence**¹, this month's absence rate is showing an increase of **1.1%** when compared to the same month in 2023.
- **COVID-19 absence** rate has increased this month reporting at 0.74% compared with 0.31% last month.

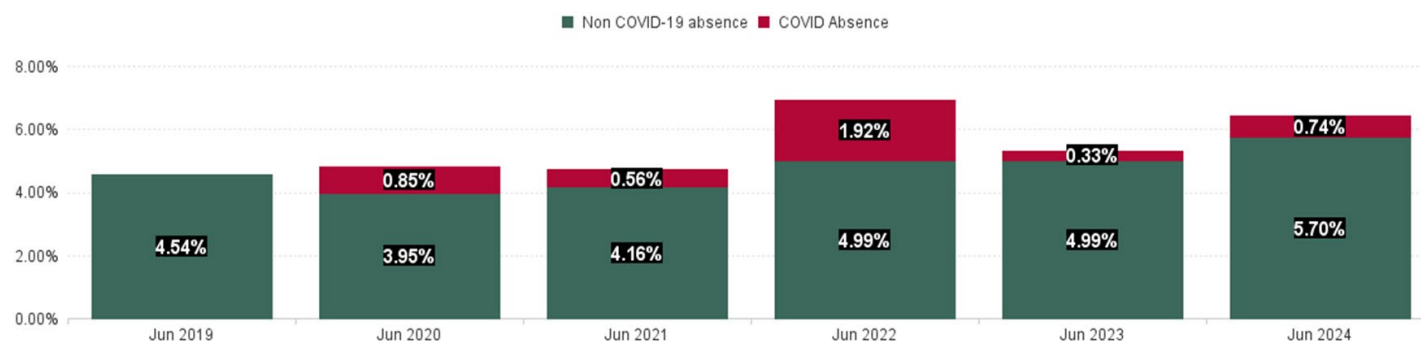
When compared with the National Service Plan KPI target of **≤4%** excluding COVID-19, this month's absence rate of **5.7%** is **1.7%** above this target.

These figures are reflected in the attached National Absence Report.

Year/Month	Certified Absence	Self-Certified Absence	Non-COVID 19 Absence	COVID-19 Absence	Total Absence Rate	KPI Target
2024 Year To Date	4.94%	0.64%	5.57%	0.41%	5.99%	≤4%
Change in Month	0.23%	0.02%	0.25%	0.43%	0.68%	
June 2024	5.08%	0.62%	5.70%	0.74%	6.44%	
May 2024	4.85%	0.60%	5.45%	0.31%	5.76%	
June 2023	4.45%	0.54%	4.99%	0.33%	5.32%	
Full Year 2023	4.51%	0.62%	5.12%	0.55%	5.68%	

¹ COVID-19 SLWP applies for the duration of the HSE recommended 'stay at home period' following a positive COVID-19 test result (whatever duration is in place at the time of the absence). The maximum limit for SLWP is currently 5 calendar days to reflect the latest public health advice as of 18 April 2023. Any periods of COVID-19 related illness which extend beyond the HSE guidance to 'stay at home', (currently five calendar days) following a positive COVID-19 test, will be treated as ordinary sick leave as set out in HR Circular 013 2023. A temporary scheme of paid leave for eligible public health service employees who ceased to be entitled to SLWP from 1st July 2022, and are currently unfit for work due to post Covid-19 infection. The eligibility criteria and conditions governing this temporary scheme are set out in HR Circular 14/2023. The eligibility criteria and conditions governing this temporary scheme are set in HR Circular 022/2022 and 014/2023. Further details in relation to the extension of this scheme until 30/06/2025 are set out in HR Circular 14/2024.

Absence Rate Trend



June Reporting Layout

This report sets out the following key elements of our reporting:

1. Separate reports for Total HSE, Department of Health Only and Disabilities Only, reflecting the requirements following the transfer of functions to DCEDIY.
2. By new Health Region – the first phase of the rollout of the six new Health Regions has commenced with further phases to follow as we transition to full Health Region Implementation. In accordance with the planned establishment of Health Regions on March 1st, national absence reporting has been updated to reflect these changes. Reflecting these changes, Health Region absence data for June 2024 is based on the interim structures now in place, inclusive of the geographic realignment of the Hospital Groups that have been implemented on HR reporting systems and in Strategic Workforce Planning & Intelligence workforce reports.

Latest monthly figures (June 2024)

Health Sector June 2024

Health Service Absence Rate - by Staff Category	Certified absence	Self-certified absence	Non Covid-19 absence	Covid-19 Absence	Total absence rate	% Change from last month	% Non Covid-19 absence	% Covid-19 absence
Total	5.08%	0.62%	● 5.70%	0.74%	6.44%	0.68%	88.54%	11.46%
Medical & Dental	1.48%	0.25%	● 1.72%	0.26%	1.98%	0.27%	86.95%	13.05%
Nursing & Midwifery	5.22%	0.84%	● 6.06%	0.87%	6.93%	0.57%	87.46%	12.54%
Health & Social Care Professionals	4.08%	0.45%	● 4.53%	0.73%	5.25%	0.66%	86.19%	13.81%
Management & Administrative	4.57%	0.39%	● 4.96%	0.56%	5.52%	0.69%	89.84%	10.16%
General Support	6.91%	0.63%	● 7.54%	0.81%	8.35%	0.77%	90.30%	9.70%
Patient & Client Care	6.98%	0.73%	● 7.71%	0.88%	8.58%	0.81%	89.81%	10.19%

*Non Covid-19 RAG Rating: Red ● >4.2% Amber ● >4 - ≤4.2 Green ● ≤4

DOH June 2024

Health Service Absence Rate - by Staff Category	Certified absence	Self-certified absence	Non Covid-19 absence	Covid-19 Absence	Total absence rate	% Change from last month	% Non Covid-19 absence	% Covid-19 absence
Total	5.06%	0.63%	● 5.69%	0.76%	6.45%	+0.73%	88.23%	11.77%
Medical & Dental	1.47%	0.25%	● 1.72%	0.26%	1.97%	+0.27%	86.92%	13.08%
Nursing & Midwifery	5.19%	0.86%	● 6.06%	0.89%	6.95%	+0.60%	87.17%	12.83%
Health & Social Care Professionals	4.08%	0.44%	● 4.52%	0.74%	5.26%	+0.74%	85.95%	14.05%
Management & Administrative	4.61%	0.40%	● 5.01%	0.57%	5.58%	+0.70%	89.76%	10.24%
General Support	7.02%	0.65%	● 7.67%	0.84%	8.51%	+0.82%	90.17%	9.83%
Patient & Client Care	7.74%	0.79%	● 8.54%	1.02%	9.56%	+1.07%	89.29%	10.71%

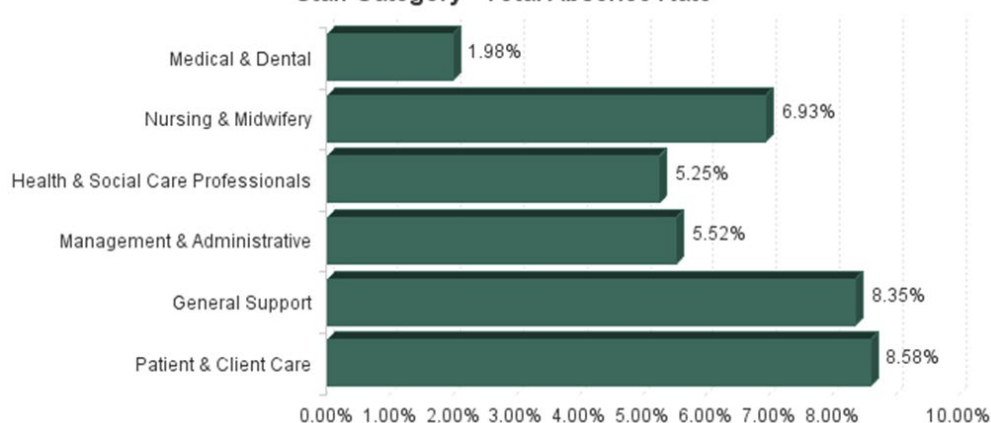
*Non Covid-19 RAG Rating: Red ● >4.2% Amber ● >4 - ≤4.2 Green ● ≤4

DCEDIY June 2024

Health Service Absence Rate - by Staff Category	Certified absence	Self-certified absence	Non Covid-19 absence	Covid-19 Absence	Total absence rate	% Change from last month	% Non Covid-19 absence	% Covid-19 absence
Total	5.20%	0.56%	● 5.75%	0.62%	6.37%	+0.41%	90.23%	9.77%
Medical & Dental	3.02%	0.29%	● 3.31%	0.32%	3.63%	+0.44%	91.06%	8.94%
Nursing & Midwifery	5.49%	0.59%	● 6.08%	0.61%	6.69%	+0.20%	90.84%	9.16%
Health & Social Care Professionals	4.09%	0.45%	● 4.55%	0.69%	5.23%	+0.43%	86.88%	13.12%
Management & Administrative	3.97%	0.32%	● 4.29%	0.42%	4.72%	+0.57%	91.00%	9.00%
General Support	5.53%	0.43%	● 5.96%	0.49%	6.45%	+0.14%	92.41%	7.59%
Patient & Client Care	5.76%	0.64%	● 6.40%	0.64%	7.04%	+0.44%	90.91%	9.09%

*Non Covid-19 RAG Rating: Red ● >4.2% Amber ● >4 - ≤4.2 Green ● ≤4

Staff Category - Total Absence Rate



Key findings by Staff Category

- **Patient & Client Care** reports the **highest** total absence rates at **8.58%** with 0.88% related to COVID-19 absence (10.19%). This is **an increase of 0.81%** when compared to last month and **an increase of 1.59%** when compared to last year.
- **General Support** reports a total absence rate of **8.35%** with 0.81% related to COVID-19 absence (9.70%). This is **an increase of 0.77%** when compared to last month and **an increase of 1.51%** compared to last year
- **Nursing & Midwifery** reports a total absence rate of **6.93%** with 0.87% related to COVID-19 absence (12.54%). This is **an increase of 0.57%** when compared to last month and **an increase of 0.89%** compared to last year
- **Health & Social Care Professionals** reports a total absence rate of **5.25%** with **0.73%** related to COVID-19 absence (13.81%). This is **an increase of 0.66%** when compared to last month and **an increase of 1.11%** compared to last year
- **Management & Administrative** reports a total absence rate of **5.52%** with 0.56% related to COVID-19 absence (10.16%). This is **an increase of 0.69%** when compared to last month and **an increase of 1.22%** compared to last year
- **Medical and Dental** is reporting the **lowest** total absence rate at **1.98%** in June, with 0.26% related to COVID-19 (13.05%) This is **an increase of 0.27%** when compared to last month and **an increase of 0.43%** compared to last year

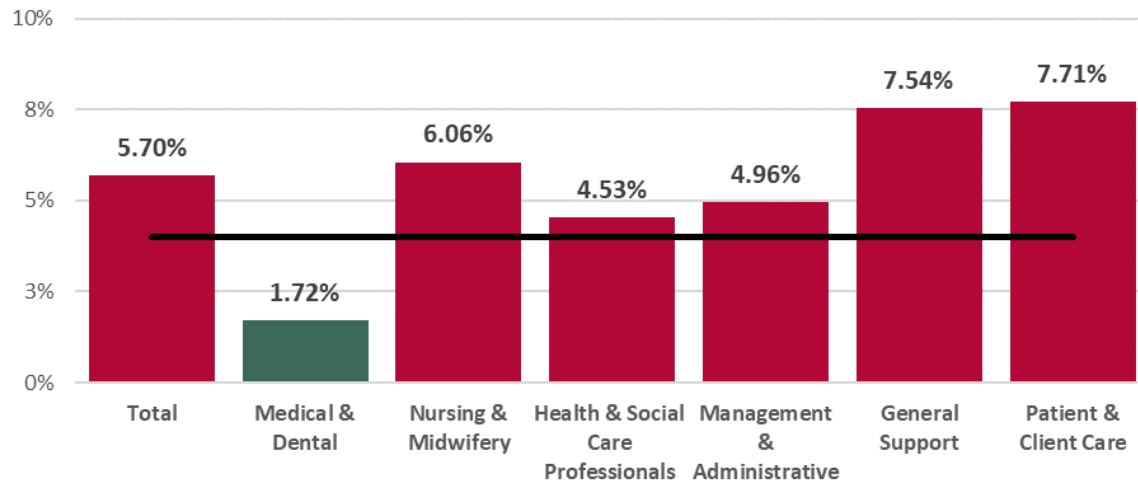
Key findings DOH

- Overall absence rate for **DOH** this month is **6.45%**, with 0.76% relating to COVID-19 (11.77%). This is an **increase of 0.73%** compared to last month. Patient & Client Care is reporting the **highest rate at 9.56%** with Medical & Dental reporting the **lowest rate at 1.97%**

Key findings DCEDIY

- Overall absence rate for **DCEDIY** this month is **6.4%**, with 0.62% relating to COVID-19 (9.77%). This is an **increase of 0.41%** compared to last month. Patient & Client Care is reporting the **highest rate at 7.04%** with Medical & Dental reporting the **lowest rate at 3.63%**.
- Based on the KPI, **one** staff category is reporting **within the target** (Medical and Dental) with the remaining five staff categories **above the target**. Details as follows:

Non Covid Absence by Staff Category



Change from last month & last year:

Total Health Sector June 2024	COVID-19 Absence	COVID-19 Absence	COVID-19 Absence	Non COVID-19 Absence	Non COVID-19 Absence	Non COVID-19 Absence	Total Absence Rate	Total Absence Rate	Total Absence Rate
	June 2023	May 2024	June 2024	June 2023	May 2024	June 2024	June 2023	May 2024	June 2024
Total	0.33%	0.31%	0.74%	4.99%	5.45%	5.70%	5.32%	5.76%	6.44%
Medical & Dental	0.11%	0.09%	0.26%	1.44%	1.62%	1.72%	1.55%	1.71%	1.98%
Nursing & Midwifery	0.40%	0.41%	0.87%	5.64%	5.95%	6.06%	6.04%	6.36%	6.93%
Health & Social Care Professionals	0.26%	0.27%	0.73%	3.88%	4.32%	4.53%	4.14%	4.59%	5.25%
Management & Administrative	0.20%	0.20%	0.56%	4.10%	4.63%	4.96%	4.30%	4.83%	5.52%
General Support	0.36%	0.32%	0.81%	6.48%	7.26%	7.54%	6.84%	7.58%	8.35%
Patient & Client Care	0.46%	0.38%	0.88%	6.54%	7.40%	7.71%	7.00%	7.78%	8.58%

DOH June 2024	COVID-19 Absence	COVID-19 Absence	COVID-19 Absence	Non COVID-19 Absence	Non COVID-19 Absence	Non COVID-19 Absence	Total Absence Rate	Total Absence Rate	Total Absence Rate
	June 2023	May 2024	June 2024	June 2023	May 2024	June 2024	June 2023	May 2024	June 2024
Total	0.33%	0.33%	0.76%	4.89%	5.40%	5.69%	5.22%	5.72%	6.45%
Medical & Dental	0.11%	0.09%	0.26%	1.43%	1.62%	1.72%	1.54%	1.70%	1.97%
Nursing & Midwifery	0.40%	0.42%	0.89%	5.59%	5.93%	6.06%	5.99%	6.35%	6.95%
Health & Social Care Professionals	0.25%	0.29%	0.74%	3.65%	4.24%	4.52%	3.90%	4.52%	5.26%
Management & Administrative	0.21%	0.20%	0.57%	4.09%	4.68%	5.01%	4.30%	4.88%	5.58%
General Support	0.38%	0.33%	0.84%	6.54%	7.35%	7.67%	6.92%	7.69%	8.51%
Patient & Client Care	0.54%	0.48%	1.02%	6.93%	8.01%	8.54%	7.47%	8.49%	9.56%

DCEDIY June 2024	COVID-19 Absence	COVID-19 Absence	COVID-19 Absence	Non COVID-19 Absence	Non COVID-19 Absence	Non COVID-19 Absence	Total Absence Rate	Total Absence Rate	Total Absence Rate
	June 2023	May 2024	June 2024	June 2023	May 2024	June 2024	June 2023	May 2024	June 2024
Total	0.30%	0.21%	0.62%	5.52%	5.76%	5.75%	5.82%	5.97%	6.37%
Medical & Dental	0.00%	0.00%	0.32%	2.28%	3.19%	3.31%	2.28%	3.19%	3.63%
Nursing & Midwifery	0.35%	0.21%	0.61%	6.14%	6.28%	6.08%	6.50%	6.49%	6.69%
Health & Social Care Professionals	0.29%	0.24%	0.69%	4.58%	4.57%	4.55%	4.87%	4.80%	5.23%
Management & Administrative	0.05%	0.19%	0.42%	4.16%	3.96%	4.29%	4.21%	4.15%	4.72%
General Support	0.19%	0.12%	0.49%	5.78%	6.19%	5.96%	5.97%	6.31%	6.45%
Patient & Client Care	0.33%	0.21%	0.64%	5.92%	6.39%	6.40%	6.25%	6.60%	7.04%

Key Findings by Health Regions:

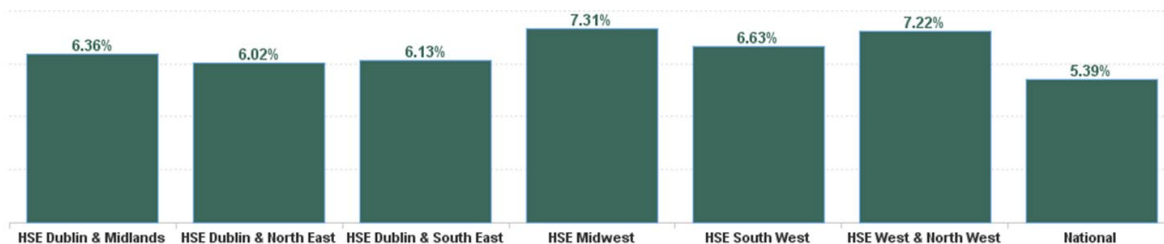
- At Health Region level, HSE Midwest is reporting the highest absence rate at 7.31% with 0.92% relating to COVID-19. (12.55%)
- National is reporting the lowest absence rate at 5.39% with 0.42% relating to COVID-19 (7.84%)

Health Regions Absence Rate

Health Service Absence Rate - by Health Region: Jun 2024	Certified absence	Self-certified absence	Non Covid-19 absence	Covid-19 absence	Total absence rate	% Non Covid-19 absence	% Covid-19 absence
Total	5.08%	0.62%	● 5.70%	0.74%	6.44%	88.54%	11.46%
HSE Dublin & Midlands	4.85%	0.67%	● 5.52%	0.84%	6.36%	86.74%	13.26%
HSE Dublin & North East	4.81%	0.58%	● 5.38%	0.64%	6.02%	89.39%	10.61%
HSE Dublin & South East	4.86%	0.59%	● 5.45%	0.68%	6.13%	88.90%	11.10%
HSE Midwest	5.85%	0.54%	● 6.39%	0.92%	7.31%	87.45%	12.55%
HSE South West	5.18%	0.74%	● 5.92%	0.71%	6.63%	89.23%	10.77%
HSE West & North West	5.72%	0.66%	● 6.38%	0.84%	7.22%	88.33%	11.67%
National	4.51%	0.46%	● 4.97%	0.42%	5.39%	92.16%	7.84%

*Non Covid-19 RAG Rating: Red ● >4.2% Amber ● >4 - ≤4.2 Green ● ≤4

Total Absence Rate by Health Region



June 2024	COVID-19 Absence	COVID-19 Absence	COVID-19 Absence	Non COVID-19 Absence	Non COVID-19 Absence	Non COVID-19 Absence	Total Absence Rate	Total Absence Rate	Total Absence Rate
	June 2023	May 2024	June 2024	June 2023	May 2024	June 2024	June 2023	May 2024	June 2024
Total	0.33%	0.31%	0.74%	4.95%	5.45%	5.70%	5.27%	5.76%	6.44%
HSE Dublin & Midlands	0.25%	0.26%	0.64%	4.66%	4.95%	5.38%	4.92%	5.21%	6.02%
HSE Dublin & North East	0.43%	0.41%	0.84%	4.98%	5.35%	5.52%	5.41%	5.76%	6.36%
HSE Dublin & South East	0.28%	0.29%	0.68%	5.00%	5.43%	5.45%	5.28%	5.72%	6.13%
HSE Midwest	0.33%	0.27%	0.71%	4.96%	5.83%	5.92%	5.29%	6.09%	6.63%
HSE South West	0.40%	0.37%	0.92%	5.75%	6.28%	6.39%	6.15%	6.65%	7.31%
HSE West & North West	0.34%	0.31%	0.84%	5.10%	5.92%	6.38%	5.44%	6.23%	7.22%
National	0.19%	0.20%	0.42%	4.18%	4.62%	4.97%	4.38%	4.82%	5.39%

Health Service Absence Rate - by Health Region : Jun 2024	Certified absence	Self - certified absence	Non Covid-19 absence	Covid-19 absence	Total absence rate	Medical & Dental	Nursing & Midwifery	Health & Social Care Professionals	Management & Administrative	General Support	Patient & Client Care
Total	5.08%	0.62%	5.70%	0.74%	6.44%	1.98%	6.93%	5.25%	5.52%	8.35%	8.58%
HSE Dublin & Midlands	4.85%	0.67%	5.52%	0.84%	6.36%	2.07%	6.69%	5.13%	6.29%	7.96%	8.35%
HSE Dublin & North East	4.81%	0.58%	5.38%	0.64%	6.02%	1.97%	6.28%	4.50%	5.96%	8.47%	8.30%
HSE Dublin & South East	4.86%	0.59%	5.45%	0.68%	6.13%	2.34%	6.49%	5.25%	5.67%	7.97%	7.63%
HSE Midwest	5.85%	0.54%	6.39%	0.92%	7.31%	1.26%	7.84%	5.25%	6.40%	10.42%	8.82%
HSE South West	5.18%	0.74%	5.92%	0.71%	6.63%	1.98%	7.28%	5.79%	5.11%	8.27%	8.54%
HSE West & North West	5.72%	0.66%	6.38%	0.84%	7.22%	1.59%	7.81%	6.52%	6.60%	8.37%	9.48%
National	4.51%	0.46%	4.97%	0.42%	5.39%	3.67%	5.88%	4.31%	3.69%	5.90%	9.40%

Health Regions by Care Group Absence Rate

Health Service Absence Rate - by Care Group : Jun 2024	Certified absence	Self - Certified absence	Non Covid-19 absence	Covid-19 absence	Total absence rate	Medical & Dental	Nursing & Midwifery	Health & Social Care Professionals	Management & Administrative	General Support	Patient & Client Care
Total	5.08%	0.62%	5.70%	0.74%	6.44%	1.98%	6.93%	5.25%	5.52%	8.35%	8.58%
Acute Hospital Services	4.41%	0.75%	5.16%	0.88%	6.04%	1.80%	6.60%	5.05%	6.23%	7.90%	9.21%
Community Health & Wellbeing	9.18%	0.26%	9.44%	0.35%	9.79%		0.00%		6.51%		11.26%
Primary Care	6.25%	0.44%	6.69%	0.74%	7.43%	4.35%	7.24%	5.48%	7.93%	11.08%	10.50%
Disabilities	4.52%	0.46%	4.98%	0.64%	5.62%	0.35%	5.61%	4.81%	4.17%	6.16%	6.17%
Mental Health	4.91%	0.65%	5.57%	1.01%	6.58%	3.98%	6.24%	7.10%	7.02%	3.58%	9.28%
Older People	8.58%	0.81%	9.39%	1.14%	10.53%	0.00%	9.23%	5.70%	8.50%	10.21%	12.21%
CHO Operations	4.76%	0.16%	4.92%	0.00%	4.92%		0.00%	5.93%	5.29%		
HSE Dublin & Midlands	4.85%	0.67%	5.52%	0.84%	6.36%	2.07%	6.69%	5.13%	6.29%	7.96%	8.35%
Acute Hospital Services	4.48%	0.61%	5.09%	0.64%	5.73%	1.66%	6.07%	4.23%	5.88%	8.39%	8.98%
Community Health & Wellbeing	5.19%	0.39%	5.58%	0.46%	6.04%			0.00%	9.70%		4.11%
Primary Care	4.82%	0.38%	5.20%	0.67%	5.87%	4.15%	7.57%	4.34%	5.91%	5.75%	6.87%
Disabilities	5.02%	0.45%	5.48%	0.66%	6.13%	0.69%	5.55%	4.93%	5.26%	8.42%	7.60%
Mental Health	5.16%	0.55%	5.71%	0.57%	6.28%	3.25%	6.76%	4.85%	6.91%	8.54%	6.89%
Older People	6.82%	0.98%	7.79%	0.63%	8.42%	2.60%	7.96%	4.21%	6.71%	10.35%	9.68%
CHO Operations	5.22%	0.27%	5.49%	0.57%	6.06%	0.00%	8.00%	1.42%	6.24%	11.02%	
HSE Dublin & North East	4.81%	0.58%	5.38%	0.64%	6.02%	1.97%	6.28%	4.50%	5.96%	8.47%	8.30%
Acute Hospital Services	4.39%	0.58%	4.97%	0.61%	5.58%	2.12%	5.83%	5.10%	5.29%	7.98%	7.97%
Community Health & Wellbeing	7.29%	0.34%	7.63%	0.37%	8.00%		2.89%	0.00%	6.03%		11.26%
Primary Care	5.55%	0.48%	6.03%	0.68%	6.71%	3.93%	8.71%	5.10%	7.50%	6.99%	5.85%
Disabilities	5.28%	0.65%	5.93%	0.70%	6.63%	25.16%	7.75%	6.10%	4.63%	4.98%	6.89%
Mental Health	5.10%	0.52%	5.62%	0.74%	6.35%	1.77%	7.39%	4.27%	6.74%	7.27%	6.60%
Older People	6.29%	0.74%	7.03%	1.13%	8.15%	6.55%	7.80%	4.30%	4.41%	10.14%	9.24%
CHO Operations	7.63%	0.42%	8.05%	0.30%	8.35%		0.00%	5.65%	9.01%	0.00%	
HSE Dublin & South East	4.86%	0.59%	5.45%	0.68%	6.13%	2.34%	6.49%	5.25%	5.67%	7.97%	7.63%

Health Service Absence Rate - by Care Group : Jun 2024	Certified absence	Self - Certified absence	Non Covid-19 absence	Covid-19 absence	Total absence rate	Medical & Dental	Nursing & Midwifery	Health & Social Care Professionals	Management & Administrative	General Support	Patient & Client Care
Acute Hospital Services	5.86%	0.65%	6.51%	1.15%	7.66%	1.14%	7.87%	5.90%	7.23%	12.00%	10.80%
Community Health & Wellbeing	5.58%	0.15%	5.73%	0.00%	5.73%		0.00%	0.00%	3.17%		9.96%
Primary Care	6.71%	0.26%	6.97%	0.62%	7.59%	2.86%	8.96%	6.08%	6.39%	7.18%	12.46%
Disabilities	4.92%	0.44%	5.36%	0.60%	5.96%	0.00%	5.36%	4.85%	4.46%	7.08%	6.62%
Mental Health	5.23%	0.52%	5.75%	0.42%	6.17%	1.21%	7.65%	2.60%	8.13%	6.46%	6.99%
Older People	8.12%	0.55%	8.66%	1.20%	9.87%	0.00%	9.44%	5.82%	6.73%	7.71%	12.05%
CHO Operations	2.12%	0.16%	2.28%	0.15%	2.43%		6.82%	8.51%	2.37%	0.94%	
HSE Midwest	5.85%	0.54%	6.39%	0.92%	7.31%	1.26%	7.84%	5.25%	6.40%	10.42%	8.82%
Acute Hospital Services	4.70%	0.75%	5.44%	0.61%	6.05%	1.61%	6.82%	5.56%	5.50%	7.66%	9.52%
Community Health & Wellbeing	5.17%	0.13%	5.29%	0.00%	5.29%		0.00%	0.00%	7.74%		4.02%
Primary Care	5.60%	0.49%	6.09%	0.85%	6.94%	3.07%	7.89%	7.62%	4.56%	22.12%	7.97%
Disabilities	4.83%	0.95%	5.78%	0.63%	6.41%	0.00%	7.97%	4.38%	3.60%	5.11%	7.06%
Mental Health	6.09%	0.56%	6.65%	0.82%	7.47%	4.40%	7.82%	6.87%	6.05%	9.56%	9.76%
Older People	7.18%	0.72%	7.90%	1.21%	9.11%	0.00%	8.59%	8.58%	4.16%	11.60%	10.40%
CHO Operations	2.59%	0.96%	3.55%	0.00%	3.55%		1.38%	1.23%	6.20%		
HSE South West	5.18%	0.74%	5.92%	0.71%	6.63%	1.98%	7.28%	5.79%	5.11%	8.27%	8.54%
Acute Hospital Services	5.12%	0.81%	5.93%	0.94%	6.87%	1.38%	7.83%	6.42%	6.62%	8.70%	10.89%
Community Health & Wellbeing	0.96%	0.18%	1.14%	1.11%	2.25%		4.04%	0.00%	1.89%		2.37%
Primary Care	5.12%	0.34%	5.46%	0.52%	5.98%	2.25%	5.75%	5.73%	7.61%	4.95%	6.75%
Disabilities	6.95%	0.50%	7.45%	0.49%	7.94%	3.17%	9.25%	6.79%	6.08%	5.62%	8.21%
Mental Health	5.99%	0.51%	6.50%	0.64%	7.14%	3.28%	7.50%	8.30%	6.11%	8.97%	7.36%
Older People	7.86%	0.59%	8.44%	1.43%	9.88%	0.00%	8.89%	7.14%	6.68%	10.12%	11.36%
CHO Operations	4.26%	0.24%	4.50%	0.54%	5.04%		11.22%	4.53%	4.37%		
HSE West & North West	5.72%	0.66%	6.38%	0.84%	7.22%	1.59%	7.81%	6.52%	6.60%	8.37%	9.48%
Ambulance Services	7.72%	0.82%	8.55%	0.59%	9.13%	0.00%	15.85%	2.39%	3.07%	27.76%	9.62%
Acute Hospital Services	1.53%	0.23%	1.77%	0.37%	2.14%	0.00%	0.00%	1.23%	2.92%		
Primary Care	6.41%	0.39%	6.80%	0.41%	7.21%	9.97%	31.03%	7.13%	2.73%	1.70%	6.40%
Disabilities	0.00%	0.00%	0.00%	0.00%	0.00%				0.00%		
Mental Health	4.17%	0.86%	5.02%	0.38%	5.40%	7.23%	5.23%	4.27%	3.55%	12.24%	6.05%
Older People	2.26%	0.25%	2.51%	0.07%	2.58%		4.17%	0.00%	2.59%		0.00%
Health & Wellbeing	4.53%	0.35%	4.87%	0.69%	5.56%		4.26%	4.59%	6.29%	0.00%	2.97%
National & Central Services	3.29%	0.29%	3.58%	0.36%	3.93%	2.83%	6.03%	4.36%	3.70%	5.34%	0.46%
National	4.51%	0.46%	4.97%	0.42%	5.39%	3.67%	5.88%	4.31%	3.69%	5.90%	9.40%

Key findings Operations:

June 2024 absence rate stands at **6.44%** of which **5.08%** is certified, **0.62%** Self-Certified with **0.74%** (or 11.46% of all absence) relating to **COVID-19**.

- In **Acute Services** the absence rate is **6.23%** of which 0.77% (*12.32% of the total*) is COVID-19 related. Within Acute Services the **highest absence** rates are reported in **National Ambulance Service** at **9.13%**, of which 0.59% is COVID -19 related and **ULHG** at **7.66%** of which 1.15% is COVID-19 related. Acute Services overall are showing an **increase of 0.76%** on last month.
- **Community Services** stands at **7%** of which 0.74% (*10.53% of the total*) is also COVID-19 related. Within Community Services, **Older People** is reporting the **highest absence rate** at **9.23%**. Notably Older People are reporting the highest COVID-19 related absence at 1.13%. Community Services overall are showing an **increase of 0.67%** on last month.
- **Disabilities** absence rate is **6.37%** with 0.62% relating to COVID-19. Disabilities overall are showing an **increase of 0.41%** on last month.
- **National Services & Central Functions** rate is **3.99%** of which 0.44% (*9.27% of the total*) is COVID-19 related. National Services & Central Functions overall are showing an **increase of 0.44%** on last month

Health Sector June 2024

Health Service Absence Rate - by Care Group	Certified absence	Self-certified absence	Non Covid-19 absence	Covid-19 Absence	Total absence rate	% Change from last month	% Non Covid-19 absence	% Covid-19 absence
Total	5.08%	0.62%	5.70%	0.74%	6.44%	0.68%	88.54%	11.46%
Ambulance Services	7.72%	0.82%	8.55%	0.59%	9.13%	0.71%	93.57%	6.43%
Acute Hospital Services	4.67%	0.69%	5.37%	0.77%	6.14%	0.76%	87.40%	12.60%
Acute Services	4.77%	0.70%	5.46%	0.77%	6.23%	0.76%	87.68%	12.32%
Community Health & Wellbeing	5.60%	0.26%	5.86%	0.43%	6.29%	-1.53%	93.18%	6.82%
Primary Care	5.57%	0.40%	5.97%	0.67%	6.65%	0.53%	89.86%	10.14%
Disabilities	5.20%	0.56%	5.75%	0.62%	6.37%	0.41%	90.23%	9.77%
Mental Health	5.36%	0.57%	5.93%	0.69%	6.62%	0.70%	89.57%	10.43%
Older People	7.37%	0.73%	8.10%	1.13%	9.23%	0.75%	87.76%	12.24%
CHO Operations	4.49%	0.28%	4.77%	0.39%	5.16%	0.85%	92.40%	7.60%
Community Services	5.71%	0.55%	6.26%	0.74%	7.00%	0.56%	89.47%	10.53%
National Services & Central Functions	3.33%	0.29%	3.62%	0.37%	3.99%	0.44%	90.73%	9.27%

*Non Covid-19 RAG Rating: Red ● >4.2% Amber ● >4 - ≤4.2 Green ● ≤4

DOH June 2024

Health Service Absence Rate - by Care Group	Certified absence	Self-certified absence	Non Covid-19 absence	Covid-19 Absence	Total absence rate	% Change from last month	% Non Covid-19 absence	% Covid-19 absence
Total	5.06%	0.63%	● 5.69%	0.76%	6.45%	0.73%	88.23%	11.77%
Ambulance Services	7.72%	0.82%	● 8.55%	0.59%	9.13%	0.71%	93.57%	6.43%
Acute Hospital Services	4.67%	0.69%	● 5.37%	0.77%	6.14%	0.76%	87.40%	12.60%
Acute Services	4.77%	0.70%	● 5.46%	0.77%	6.23%	0.76%	87.68%	12.32%
Community Health & Wellbeing	5.60%	0.26%	● 5.86%	0.43%	6.29%	-1.53%	93.18%	6.82%
Primary Care	5.57%	0.40%	● 5.97%	0.67%	6.65%	0.53%	89.86%	10.14%
Mental Health	5.36%	0.57%	● 5.93%	0.69%	6.62%	0.70%	89.57%	10.43%
Older People	7.37%	0.73%	● 8.10%	1.13%	9.23%	0.75%	87.76%	12.24%
CHO Operations	4.49%	0.28%	● 4.77%	0.39%	5.16%	0.85%	92.40%	7.60%
Community Services	6.04%	0.55%	● 6.59%	0.81%	7.40%	0.67%	89.04%	10.96%
National Services & Central Functions	3.33%	0.29%	● 3.62%	0.37%	3.99%	0.44%	90.73%	9.27%

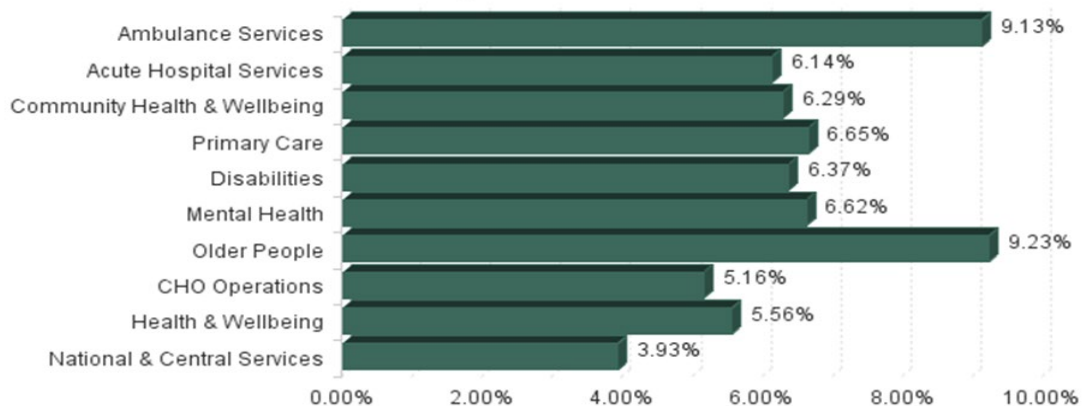
*Non Covid-19 RAG Rating: Red ● >4.2% Amber ● >4 - ≤4.2 Green ● ≤4

DCEDIY June 2024

Health Service Absence Rate - by Care Group	Certified absence	Self-certified absence	Non Covid-19 absence	Covid-19 Absence	Total absence rate	% Change from last month	% Non Covid-19 absence	% Covid-19 absence
Total	5.20%	0.56%	● 5.75%	0.62%	6.37%	0.41%	90.23%	9.77%
Disabilities	5.20%	0.56%	● 5.75%	0.62%	6.37%	0.41%	90.23%	9.77%
Community Services	5.20%	0.56%	● 5.75%	0.62%	6.37%	0.41%	90.23%	9.77%

*Non Covid-19 RAG Rating: Red ● >4.2% Amber ● >4 - ≤4.2 Green ● ≤4

Care Group - Total Absence Rate



Health Sector June 2024

Health Service Absence Rate - by Service	Certified absence	Self-certified absence	Non Covid-19 absence	Covid-19 Absence	Total absence rate	% Change from last month	% Non Covid-19 absence	% Covid-19 absence
Total	5.08%	0.62%	● 5.70%	0.74%	6.44%	0.68%	88.54%	11.46%
National Ambulance Service	7.72%	0.82%	● 8.55%	0.59%	9.13%	0.71%	93.57%	6.43%
Children's Health Ireland	3.99%	0.54%	● 4.53%	0.91%	5.44%	0.18%	83.23%	16.77%
Dublin Midlands Hospital Group	4.53%	0.81%	● 5.34%	0.87%	6.21%	0.86%	85.98%	14.02%
Ireland East Hospital Group	4.39%	0.58%	● 4.97%	0.61%	5.58%	0.44%	89.13%	10.87%
RCSI Hospitals Group	4.48%	0.61%	● 5.09%	0.64%	5.73%	1.00%	88.82%	11.18%
Saolta University Hospital Care Group	5.12%	0.81%	● 5.93%	0.94%	6.87%	1.17%	86.38%	13.62%
South/South West Hospital Group	4.70%	0.75%	● 5.44%	0.61%	6.05%	0.17%	89.96%	10.04%
University of Limerick Hospital Group	5.86%	0.65%	● 6.51%	1.15%	7.66%	0.91%	84.96%	15.04%
Other Acute Services	1.53%	0.23%	● 1.77%	0.37%	2.14%	-0.57%	82.76%	17.24%
Acute Services	4.77%	0.70%	● 5.46%	0.77%	6.23%	0.76%	87.68%	12.32%
CHO 1	7.69%	0.53%	● 8.21%	0.71%	8.93%	0.67%	92.00%	8.00%
CHO 2	5.59%	0.44%	● 6.04%	0.73%	6.77%	1.04%	89.15%	10.85%
CHO 3	5.85%	0.43%	● 6.28%	0.67%	6.95%	0.39%	90.29%	9.71%
CHO 4	5.77%	0.72%	● 6.49%	0.84%	7.33%	0.97%	88.51%	11.49%
CHO 5	6.39%	0.64%	● 7.03%	0.87%	7.89%	0.79%	89.02%	10.98%
CHO 6	4.33%	0.55%	● 4.88%	0.67%	5.55%	-0.28%	87.93%	12.07%
CHO 7	5.34%	0.53%	● 5.87%	0.78%	6.65%	0.59%	88.32%	11.68%
CHO 8	6.12%	0.55%	● 6.67%	0.84%	7.51%	0.27%	88.84%	11.16%
CHO 9	4.56%	0.51%	● 5.06%	0.55%	5.61%	0.32%	90.27%	9.73%
Other Community Services	4.14%	0.70%	● 4.84%	0.33%	5.17%	0.59%	93.57%	6.43%
Community Services	5.71%	0.55%	● 6.26%	0.74%	7.00%	0.56%	89.47%	10.53%
National Services & Central Functions	3.33%	0.29%	● 3.62%	0.37%	3.99%	0.44%	90.73%	9.27%

*Non Covid-19 RAG Rating: Red ● >4.2% Amber ● >4 - ≤4.2 Green ● ≤4

DOH June 2024

Health Service Absence Rate - by Staff Category	Certified absence	Self-certified absence	Non Covid-19 absence	Covid-19 Absence	Total absence rate	% Change from last month	% Non Covid-19 absence	% Covid-19 absence
Total	5.06%	0.63%	● 5.69%	0.76%	6.45%	0.73%	88.23%	11.77%
National Ambulance Service	7.72%	0.82%	● 8.55%	0.59%	9.13%	0.71%	93.57%	6.43%
Children's Health Ireland	3.99%	0.54%	● 4.53%	0.91%	5.44%	0.18%	83.23%	16.77%
Dublin Midlands Hospital Group	4.53%	0.81%	● 5.34%	0.87%	6.21%	0.86%	85.98%	14.02%
Ireland East Hospital Group	4.39%	0.58%	● 4.97%	0.61%	5.58%	0.44%	89.13%	10.87%
RCSI Hospitals Group	4.48%	0.61%	● 5.09%	0.64%	5.73%	1.00%	88.82%	11.18%
Saolta University Hospital Care Group	5.12%	0.81%	● 5.93%	0.94%	6.87%	1.17%	86.38%	13.62%
South/South West Hospital Group	4.70%	0.75%	● 5.44%	0.61%	6.05%	0.17%	89.96%	10.04%
University of Limerick Hospital Group	5.86%	0.65%	● 6.51%	1.15%	7.66%	0.91%	84.96%	15.04%
Other Acute Services	1.53%	0.23%	● 1.77%	0.37%	2.14%	-0.57%	82.76%	17.24%
Acute Services	4.77%	0.70%	● 5.46%	0.77%	6.23%	0.76%	87.68%	12.32%
CHO 1	6.99%	0.48%	● 7.47%	0.78%	8.25%	0.68%	90.56%	9.44%
CHO 2	5.61%	0.45%	● 6.06%	0.89%	6.95%	1.11%	87.22%	12.78%
CHO 3	6.50%	0.42%	● 6.92%	0.72%	7.64%	0.69%	90.51%	9.49%
CHO 4	6.29%	0.60%	● 6.88%	0.96%	7.84%	1.02%	87.77%	12.23%
CHO 5	6.52%	0.61%	● 7.13%	0.96%	8.09%	0.95%	88.13%	11.87%
CHO 6	4.47%	0.52%	● 4.99%	0.65%	5.65%	-0.30%	88.41%	11.59%
CHO 7	6.27%	0.60%	● 6.87%	0.88%	7.75%	1.34%	88.64%	11.36%
CHO 8	6.81%	0.58%	● 7.39%	1.00%	8.39%	0.24%	88.07%	11.93%
CHO 9	4.79%	0.62%	● 5.41%	0.44%	5.85%	0.09%	92.51%	7.49%
Other Community Services	4.18%	0.70%	● 4.88%	0.34%	5.21%	0.59%	93.57%	6.43%
Community Services	6.04%	0.55%	● 6.59%	0.81%	7.40%	0.67%	89.04%	10.96%
National Services & Central Functions	3.33%	0.29%	● 3.62%	0.37%	3.99%	0.44%	90.73%	9.27%

*Non Covid-19 RAG Rating: Red ● >4.2% Amber ● >4 - ≤4.2 Green ● ≤4

DCEDIY June 2024

Health Service Absence Rate - by Service	Certified absence	Self-certified absence	Non Covid-19 absence	Covid-19 Absence	Total absence rate	% Change from last month	% Non Covid-19 absence	% Covid-19 absence
Total	5.20%	0.56%	● 5.75%	0.62%	6.37%	0.41%	90.23%	9.77%
CHO 1	9.16%	0.62%	● 9.79%	0.58%	10.37%	0.58%	94.44%	5.56%
CHO 2	5.54%	0.44%	● 5.98%	0.41%	6.39%	0.79%	93.63%	6.37%
CHO 3	4.92%	0.44%	● 5.36%	0.60%	5.96%	-0.01%	89.88%	10.12%
CHO 4	4.83%	0.95%	● 5.78%	0.63%	6.41%	0.97%	90.15%	9.85%
CHO 5	6.15%	0.69%	● 6.84%	0.69%	7.54%	0.48%	90.78%	9.22%
CHO 6	4.08%	0.60%	● 4.68%	0.70%	5.37%	-0.25%	87.02%	12.98%
CHO 7	4.46%	0.47%	● 4.93%	0.68%	5.61%	-0.09%	87.91%	12.09%
CHO 8	5.09%	0.50%	● 5.60%	0.60%	6.19%	0.45%	90.37%	9.63%
CHO 9	4.31%	0.38%	● 4.69%	0.66%	5.35%	0.59%	87.70%	12.30%
Other Community Services	0.00%	0.00%	● 0.00%	0.00%	0.00%	0.00%		
Community Services	5.20%	0.56%	● 5.75%	0.62%	6.37%	0.41%	90.23%	9.77%

*Non Covid-19 RAG Rating: Red ● >4.2% Amber ● >4 - ≤4.2 Green ● ≤4

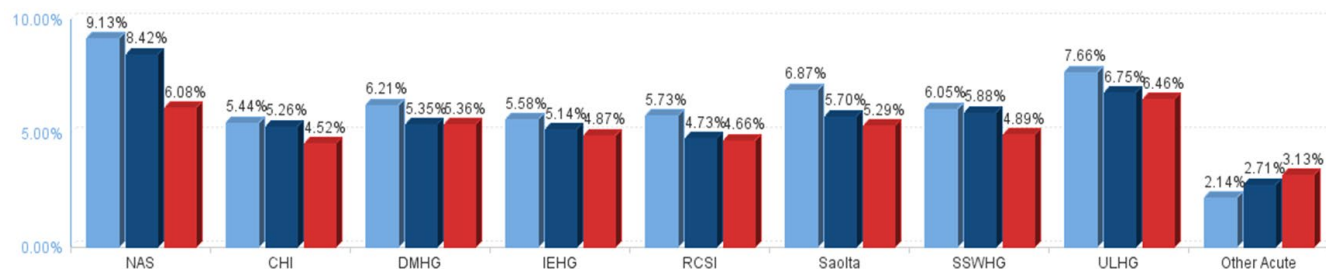
- At Hospital Group level, University of Limerick Hospital Care Group is reporting the highest absence rate at **7.66%**. CHI have the lowest absence rate reported at **5.44%**
- At CHO level, CHO 1 is reporting the highest absence rate within at **8.93%**. CHO 6 have the lowest absence rate reported at **5.55%**.

Acute Services Absence Rate Breakdown: June 2024

Acute Services	COVID-19 Absence			Non COVID-19 Absence			Total Absence Rate		
	June 2023	May 2024	June 2024	June 2023	May 2024	June 2024	June 2023	May 2024	June 2024
Total	0.34%	0.32%	0.77%	4.78%	5.15%	5.46%	5.12%	5.47%	6.23%
National Ambulance Service	0.35%	0.33%	0.59%	5.73%	8.09%	8.55%	6.08%	8.42%	9.13%
Children's Health Ireland	0.78%	0.62%	0.91%	3.74%	4.64%	4.53%	4.52%	5.26%	5.44%
Dublin Midlands Hospital Group	0.37%	0.37%	0.87%	4.99%	4.98%	5.34%	5.36%	5.35%	6.21%
Ireland East Hospital Group	0.22%	0.23%	0.61%	4.66%	4.90%	4.97%	4.87%	5.14%	5.58%
RCSI Hospitals Group	0.26%	0.28%	0.64%	4.40%	4.45%	5.09%	4.66%	4.73%	5.73%
Saolta University Hospital Care Group	0.37%	0.34%	0.94%	4.92%	5.36%	5.93%	5.29%	5.70%	6.87%
South/South West Hospital Group	0.29%	0.22%	0.61%	4.61%	5.66%	5.44%	4.89%	5.88%	6.05%
University of Limerick Hospital Group	0.50%	0.45%	1.15%	5.95%	6.30%	6.51%	6.46%	6.75%	7.66%
Other Acute Services	0.00%	0.37%	0.37%	3.13%	2.34%	1.77%	3.13%	2.71%	2.14%

Hospital Group Absence Rate

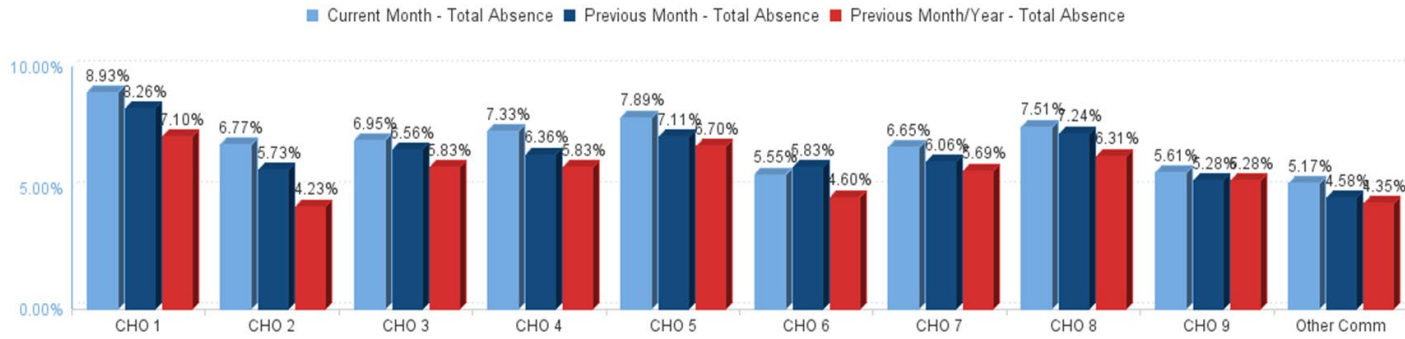
■ Current Month - Total Absence ■ Previous Month - Total Absence ■ Previous Month/Year - Total Absence



Community Services Absence Rate Breakdown: June 2024

Community Services	COVID-19 Absence			Non COVID-19 Absence			Total Absence Rate		
	June 2023	May 2024	June 2024	June 2023	May 2024	June 2024	June 2023	May 2024	June 2024
Total	0.33%	0.31%	0.74%	5.39%	6.12%	6.26%	5.72%	6.43%	7.00%
CHO 1	0.35%	0.33%	0.71%	6.75%	7.93%	8.21%	7.10%	8.26%	8.93%
CHO 2	0.21%	0.21%	0.73%	4.01%	5.52%	6.04%	4.23%	5.73%	6.77%
CHO 3	0.29%	0.28%	0.67%	5.54%	6.28%	6.28%	5.83%	6.56%	6.95%
CHO 4	0.39%	0.32%	0.84%	5.44%	6.04%	6.49%	5.83%	6.36%	7.33%
CHO 5	0.42%	0.42%	0.87%	6.29%	6.69%	7.03%	6.70%	7.11%	7.89%
CHO 6	0.29%	0.32%	0.67%	4.30%	5.51%	4.88%	4.60%	5.83%	5.55%
CHO 7	0.38%	0.32%	0.78%	5.31%	5.74%	5.87%	5.69%	6.06%	6.65%
CHO 8	0.39%	0.44%	0.84%	5.92%	6.80%	6.67%	6.31%	7.24%	7.51%
CHO 9	0.25%	0.19%	0.55%	5.03%	5.09%	5.06%	5.28%	5.28%	5.61%
Other Community Services	0.23%	0.22%	0.33%	4.11%	4.36%	4.84%	4.35%	4.58%	5.17%

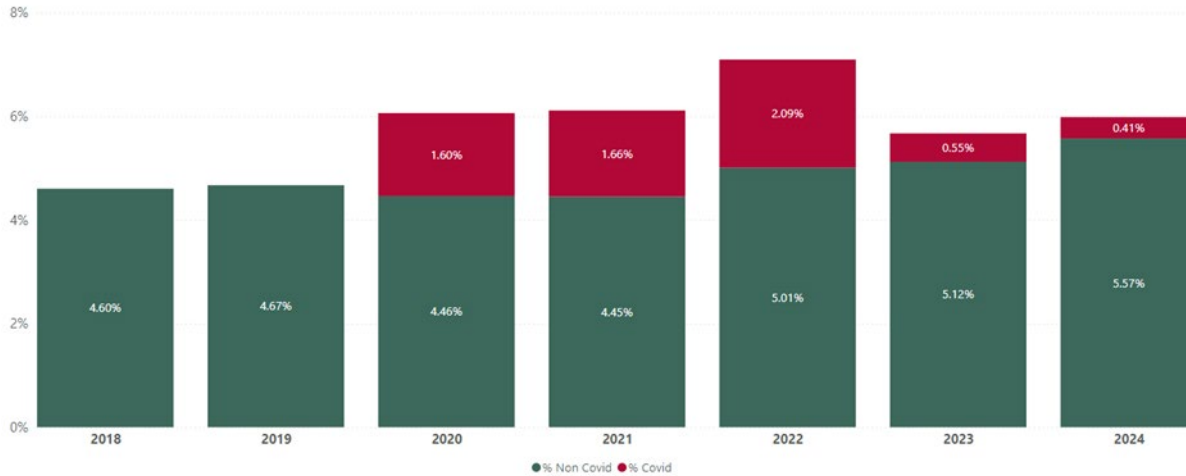
CHO Absence Rate



Year-to-date & trends 2008 – 2024

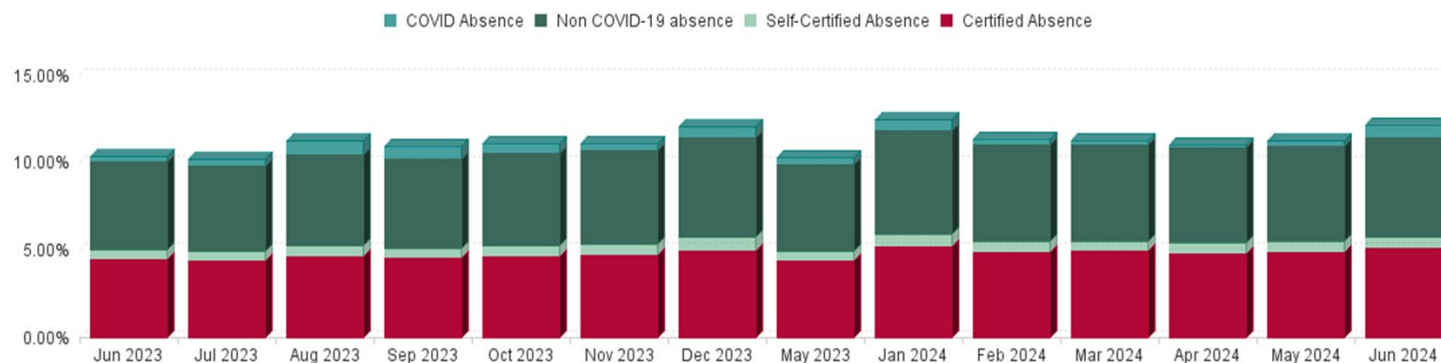
The year to date 2024 figure of **5.99%** has also been impacted by COVID-19 related absence with **0.41%** of the 2024 absence rate (or 6.88% of all 2024 absence) accounted for by COVID-19. Details for each year since absence reporting commenced are shown below, demonstrating the impact of COVID-19 related absence in 2020 -2024.

Absence Rates 2018 to 2024 YTD



- When compared with previous years, the 2024 Year to Date figure is running at **0.31%** above the previous annual rate. COVID-19 related absence accounts for **0.41%** of absence so far in 2024. This is notably lower than previous years where COVID-19 absence accounted for **2.1%** in 2022, **1.7%** in 2021 and **1.6%** in 2020. On a like for like basis, **excluding** COVID-19 absence impact, the absence rate is **5.1%** in 2023, **5%** in 2022, **4.4%** in 2021 and **4.5%** in 2020. Therefore, excluding COVID-19 related absence, the Year to Date absence in 2024 of **5.6%** is higher than that reported in previous years. Notably, 10 years prior to the outbreak of COVID-19, staff absence rate was running at an average of **4.5%**.

Breakdown of Absence Type



Notes: Absence Rate is the term generally used to refer to unscheduled employee absences from the workplace. Absence rate is defined as an absence from work other than annual leave, public holidays, maternity leave and jury duty. The HSE sets absence rates as a key result area (KRA) with the objective of reducing the impact & cost of absence and commits to a national target level

European Working Time Directive (EWTB)

	Target / Expected Activity 2024 (<24 hour shift)	% Compliance with 24 hour shift	Target / Expected Activity 2024 (<48 hour working week)	% Compliance with 48 hour working week
Acute Hospitals – NCHDs	97%	94.2%	95%	79.6%
Mental Health – NCHDs	97%	100%	95%	94.1%
Disability Services – social care workers	95%	74%	95%	80%

Performance Achievement Q2 2024 Report

Notes on Performance Achievement Report

Dataset provides a quarterly report of the number of initial Performance Achievement meetings undertaken across services.

Report collated on 10th of the month following the end of each quarter.

Percentage is weighted against the service Headcount (HC) as per previous month's census report. To note, previous quarterly reports up to and including Q4 2021 were weighted against the WTE in the previous month's census report.

Acute data caveats

2 Hospital Groups did not respond

Corporate data caveats

10 Corporate / National Services did not respond

Nursing & Midwifery PDP data caveats

Digital PDP completions reported via HSeLanD have not been included pending formal confirmation from the ONMSD and NMPDU that HSeLanD is able to deliver PDP reporting that is aligned with the reporting requirement for Performance Achievement.

Service Delivery Area	Headcount May 2024	Total completed Q1	Total Completed Q2	Total Completed Q3	Total Completed Q4	% completed YTD 2024
Total Health Service	167,034	3,375	5,695	0	0	5.4%
National Ambulance Service	2,426	0	0			0.0%
Children's Health Ireland	5,021	467	0			9.3%
Dublin Midlands Hospital Group	16,475	200	241			2.7%
Ireland East Hospital Group	14,871	423	125			3.7%
RCSI Hospital Groups	18,931	142	284			2.3%
Saolta University Hospital Group	13,412	167	221			2.9%
South/South West Hospital Group	11,371	82	281			3.2%
University of Limerick Hospital Group	6,322	319	252			9.0%
Other Acute Services	154	17	26			27.9%
Acute Services	88,983	1,817	1,430	0	0	3.6%
CHO 1	7,637	0	537			7.0%
CHO 2	7,398	42	43			1.1%
CHO 3	6,676	0	1,339			20.1%
CHO 4	11,380	300	627			8.1%
CHO 5	7,162	60	107			2.3%
CHO 6	4,361	203	389			13.6%
CHO 7	8,566	100	210			3.6%
CHO 8	8,026	80	280			4.5%
CHO 9	8,700	117	163			3.2%
Other Community Services	874	16	36			5.9%
Community Services	70,780	918	3,731	0	0	6.6%
National & Central Services	7,271	640	534			16.1%
National Services & Central Functions	7,271	640	534	0	0	16.1%

Appendices

Appendix 1: Report Design

The Performance Profile provides an update on key performance areas for Community Healthcare, Acute Hospitals, National Services and National Screening Services in addition to Quality & Patient Safety, Finance and Human Resources. It will be published quarterly together with the Management Data Report for each performance cycle.

An update on year to date (YTD) performance is provided on the heat map for each metric on the National Scorecard. The service area updates provide an update on performance in graph and table format for the metrics on the National Scorecard and also for other key metrics taken from the National Service Plan (NSP).

Heat Maps:

- Heat Map provided for Community Healthcare and Acute Hospitals
- The heat maps provide the YTD position for the metrics listed on the National Scorecard in the NSP (Performance and Accountability Framework metrics) and a small subset of metrics taken from appendix 3 in the Service Plan
- The results for last three months are provided in the final three columns Current, Current (-1) and Current (-2)
- Metrics relevant to the current performance cycle under review are only displayed on the heat map i.e. quarterly metrics will be listed on the heat map in the quarterly cycles (March, June, September, December cycles)
- [R], [A] and [G] are added after the results on the heat map to comply with visualisation requirements for colour vision deficiencies



- The table below provides details on the rulesets in place for the Red, Amber, Green (RAG) ratings being applied on the heat maps. A Green rating is added in cases where the YTD performance is on or exceeds target or is within 5% of the target

Performance RAG Rating	Finance RAG Rating
Red ● > 10% of target	Red ● ≥ 0.75% of target
Amber ● > 5% ≤ 10% of target	Amber ● ≥ 0.10% < 0.75% of target
Green ● ≤ 5% of target	Green ● < 0.10% of target
Workforce Absence RAG Rating	
Red ● > 4.2% of target	
Amber ● > 4% ≤ 4.2% of target	
Green ● ≤ 4% of target	

Performance Profile April - June 2024

Performance Table:

- The Performance Overview table provides an overview on the YTD and in month performance
- In-month results for the current and previous two cycles added are present to facilitate trends review
- Details of the three best performers and outliers are presented alongside the results of the metric
- Metrics relevant to the current performance cycle under review are only displayed on the table i.e. quarterly metrics will be listed on the heat map in the quarterly cycles (March, June, September, December cycles)

Graphs:

- The graphs provide an update on in month performance for metrics with percentage based targets over a period of 13 months
- The result labels on the graphs are colour coded to match the relevant line colour on the graph to make it clearer which results refer to which lines on the graph
- The legend below provides an update on the graph layout. Solid lines are used to represent in-month performance and dashed lines represent the target/expected activity

Graph Layout:	
Target	-----
Month 23/24	—————
Month 22/23	—————

Service Commentary:

A service update for Community Services, Acute Services, National Services and National Screening Services will be provided each cycle.

Appendix 2: Data Coverage Issues

The table below provides a list of the year to date data coverage issues

Service Area	KPI Title	Data Coverage Issues
Service User Experience	% of complaints investigated within 30 working days of being acknowledged by the complaints officer	Data gaps noted: Midland Regional Hospital, Portlaoise The Coombe Women & Infant University Hospital Midland Regional Hospital, Mullingar National Maternity Hospital Royal Victoria Eye & Ear Hospital St. Columcille's Hospital Wexford General Hospital
Breastcheck	% BreastCheck screening uptake rate - HWB35	No Breastcheck data available due to transition to a new Patient Management system (AIRE)
Breastcheck	No. of women in the eligible population who have had a complete mammogram – HWB77	No Breastcheck data available due to transition to a new Patient Management system (AIRE)
Health & Wellbeing	Immunisations and Vaccines HWB4 % children aged 24 months who have received 3 doses Diphtheria (D3), Pertussis (P3), Tetanus (T3) vaccine, Haemophilus influenzae type b (Hib3), Polio (Polio3), hepatitis B (HepB3) (6 in 1)	Non Returns (Q4 2023, Q1 2024) – CHO3 (Clare, Limerick, North Tipperary / East Limerick)
Health & Wellbeing	Immunisations and Vaccines HWB8 % children aged 24 months who have received the Measles, Mumps, Rubella (MMR) vaccine	Non Returns (Q4 2023, Q1 2024) – CHO3 (Clare, Limerick, North Tipperary / East Limerick)
Primary Care	Occupational Therapy % of new occupational therapy service users seen for assessment within 12 weeks % of occupational therapy service users on waiting list for assessment ≤ to 52 weeks No of occupational therapy service users seen	Non Return (Sep, Oct, Nov, Dec 2023 & Jan, Feb, Mar, Apr, May, Jun 2024) CHO1 (Donegal) Non Return (Mar, Apr, May 2024) CHO1 (Sligo Leitrim) Non Return (Oct, Dec 2023 & Jun 2024) CHO5 (Carlow Kilkenny)

Service Area	KPI Title	Data Coverage Issues
Primary Care	Speech and Language Therapy % of speech and language therapy patients on waiting list for assessment ≤ to 52 weeks % of speech and language therapy patients on waiting list for treatment ≤ to 52 weeks No of speech and language therapy patients seen	Non Return (Feb 2024) CHO1 (Sligo Leitrim) Non Return (Oct, Nov, Dec 2023) CHO5 (Waterford) Non Return (May, Jun 2024) CHO5 (Carlow Kilkenny)
Primary Care	Podiatry % of podiatry patients on waiting list for treatment ≤ to 52 weeks % of podiatry clients (patients) on waiting list for treatment ≤ to 12 weeks No of podiatry patients seen	No Service CHO4 (South Lee), CHO5 (Wexford, South Tipperary), CHO6 (Dun Laoghaire, Dublin South East), CHO7 (Dublin South City, Dublin South West, Dublin West, Kildare/West Wicklow), Non Return (Feb, Apr 2024) CHO1 (Donegal) Non Return (May 2024) CHO1 (Cavan Monaghan) Non Return (Apr 2024) CHO1 (Sligo Leitrim) Non Return (Nov, Dec 2023) CHO5 (Carlow Kilkenny) Non Return (May, Jun 2024) CHO9 (Dublin North, Dublin North Central & Dublin North West)
Primary Care	Ophthalmology % of Ophthalmology patients on the waiting list for treatment < 12 weeks % of Ophthalmology patients on the waiting list for treatment < 52 weeks No of Ophthalmology patients seen	No Service CHO4 (South Lee), CHO6 (Dun Laoghaire, Dublin South East), CHO7 (Dublin South City, Dublin West), CHO8 (Laois/Offaly, Longford/Westmeath), CHO9 (Dublin North, Dublin North West) Non Return (May 2024) CHO1 (Cavan Monaghan) Non Return (May, Jun 2024) CHO1 (Donegal) Non Return (Jul 2023) CHO2 (Galway) Non Return (Oct 2023) CHO4 (North Lee) Non Return (Jan 2024) CHO5 (Waterford) Non Return (Sep, Oct, Nov, Dec 2023 & Jan, Feb 2024) CHO8 (Louth) Non Return (Jan, Feb, Mar, Apr, May 2024) CHO6 (Wicklow)
Primary Care	Audiology % of Audiology patients on the waiting list for treatment < 12 weeks % of Audiology patients on the waiting list for treatment < 52 weeks No of Audiology patients seen	No Service CHO4 (North Lee, North Cork, West Cork, Kerry), CHO6 (Dun Laoghaire, Wicklow), CHO7 (Dublin South City, Kildare West Wicklow, Dublin West), CHO8 (Meath), CHO9 (Dublin North West, Dublin North)
Primary Care	Dietetics % of dietetic patients on waiting list for treatment ≤ 12 weeks % of dietetic patients on waiting list for treatment ≤ 52 weeks No. of Dietetics patients seen	Non Return (Nov 2023) CHO5 (Carlow Kilkenny) Non Return (Apr, May, Jun 2024) CHO7 (Dublin West) Non Return (Jun 2024) CHO7 (Dublin South West)

Service Area	KPI Title	Data Coverage Issues
Primary Care	Psychology % of psychology patients on waiting list for treatment ≤ to 12 weeks % of psychology patients on the waiting list for treatment ≤ to 52 weeks No of Psychology patients seen	Non Return (Jun 2024) CHO2 (Galway)
Primary Care	Nursing % of new patients accepted onto the Nursing caseload and seen within 12 weeks No of Nursing patients seen	Non Return (Aug, Sep, Oct, Nov 2023) CHO5 (Wexford) Non Return (Jan 2024) CHO8 (Meath)
Primary Care	Child Health % of children reaching 12 months within the reporting period who have had their child health and development assessment on time or before reaching 12 months of age	Non Return (May, Jun 2024) CHO1 (Cavan Monaghan)
Primary Care	Child Health Quarterly % of infants visited by a PHN within 72 hours of discharge from maternity services	Non Return (Jun 2024) CHO1 (Cavan Monaghan) Non Return (Jun 2024) CHO2 (Galway) Non Return (Jun 2024) CHO7 (Dublin West, Kildare West Wicklow)
Primary Care	Child Health Quarterly -1 Quarter % of babies breastfed (exclusively and not exclusively) at first PHN visit % of babies breastfed (exclusively and not exclusively) at 3 month PHN visit % of babies breastfed exclusively at first PHN visit % of babies breastfed exclusively at three month PHN visit	Non Return (Mar 2024) CHO1 (Cavan Monaghan) Non Return (Mar 2024) CHO2 (Galway) Non Return (Dec 2023 & Mar 2024) CHO7 (Dublin West) Non Return (Mar 2024) CHO7 (Kildare West Wicklow)
Primary Care	Oral Health No. of new Oral Health patients in target groups attending for scheduled assessment	No Service - Dublin South East, Wicklow (combined in 1 Return from Dun Laoghaire)
Primary Care	Orthodontics % of Orthodontic patients seen for assessment within 6 months No of Orthodontic patients seen for assessment within 6 months % of Orthodontics patients (grade 4 and 5) on the treatment waiting list longer than 4 years (%)	Non Return (Mar & Jun 2024) DML (Former East Coast(Loughlinstown))
Palliative Care Inpatient Service	Access to specialist inpatient bed within seven days during the reporting year- PAC1A	No Service in CHO 8 Non return (Jun) CHO1 (Donegal)
Palliative Care Inpatient Service	No. accessing specialist inpatient bed within seven days (during the reporting year)- PAC33	No Service in CHO 8 Non return (Jun) CHO1 (Donegal)
Older Persons	OP53 No. of home support hours provided (excluding provision of hours from Intensive Home Care Packages (IHCPs))	Non Returns (May, June) - CHO2, Galway
Older Persons	OP54 No. of people in receipt of Home Support (excluding provision from Intensive Home Care Packages(IHCPs)) - each person counted once only	Non Returns (May, June) - CHO2, Galway

Service Area	KPI Title	Data Coverage Issues
Older Persons	OP4 Total No. of persons in receipt of an Intensive Home Care Package (IHCP)	Non Returns (May, June) - CHO2, Galway
Older Persons	OP40 % of clients in receipt of an IHCP with a key worker assigned	Non Returns (May, June) - CHO2, Galway
Older Persons	OP51 No. of home support hours provided from Intensive Home Care Packages	Non Returns (May, June) - CHO2, Galway
Psychiatry of Later Life	% of accepted referrals / re-referrals offered first appointment within 12 weeks by Psychiatry of Later Life Community Mental Health Teams	CHO 4 West Cork - Team suspended; no Consultant Psychiatrist (No Activity Data 2023 to date) CHO 5 Waterford/Wexford (June) CHO 5 Kilkenny (June) CHO 8 Louth POA (June) CHO 8 Meath (June)
Psychiatry of Later Life	% of accepted referrals / re-referrals offered first appointment and seen within 12 weeks by Psychiatry of Later Life Community Mental Health Teams	CHO 4 West Cork - Team suspended; no Consultant Psychiatrist (No Activity Data 2023 to date) CHO 5 Waterford/Wexford (June) CHO 5 Kilkenny (June) CHO 8 Louth POA (June) CHO 8 Meath (June)
Psychiatry of Later Life	% of new (including re-referred) Psychiatry of Later Life Community Mental Health Team cases offered appointment and DNA in the current month	CHO 4 West Cork - Team suspended; no Consultant Psychiatrist (No Activity Data 2023 to date) CHO 5 Waterford/Wexford (June) CHO 5 Kilkenny (June) CHO 8 Louth POA (June) CHO 8 Meath (June)
Psychiatry of Later Life	No. of new (including re-referred) Psychiatry of Later Life Community Mental Health Team cases seen in the current month	CHO 4 West Cork - Team suspended; no Consultant Psychiatrist (No Activity Data 2023 to date) CHO 5 Waterford/Wexford (June) CHO 5 Kilkenny (June) CHO 8 Louth POA (June) CHO 8 Meath (June)
Community Adult	% of accepted referrals / re-referrals offered first appointment within 12 weeks by General Adult Community Mental Health Team	CHO 1 Donegal North West (May) CHO 1 Donegal South Central (May) CHO 3 Clare West (June) CHO 9 Mater (June)

Service Area	KPI Title	Data Coverage Issues
Community Adult	General Adult Mental Health % seen within 12 weeks	CHO 1 Donegal North West (May) CHO 1 Donegal South Central (May) CHO 3 Clare West (June) CHO 9 Mater (June)
Community Adult	General Adult Mental Health Number of Referrals received	CHO 1 Donegal North West (May) CHO 1 Donegal South Central (May) CHO 3 Clare West (June) CHO 9 Mater (June)
Community Adult	General Adult Mental Health Number of Referrals seen	CHO 1 Donegal North West (May) CHO 1 Donegal South Central (May) CHO 3 Clare West (June) CHO 9 Mater (June)
Community Adult	% of new (including re-referred) General Adult Community Mental Health Team cases offered appointment and DNA in the current month	CHO 1 Donegal North West (May) CHO 1 Donegal South Central (May) CHO 3 Clare West (June) CHO 9 Mater (June)
Mental Health CAMHS	% of accepted referrals / re-referrals offered first appointment within 12 weeks by Child and Adolescent Community Mental Health Teams	CHO 5 Waterford (June)
Mental Health CAMHS	% of accepted referrals / re-referrals offered first appointment and seen within 12 weeks by Child and Adolescent Community Mental Health Teams	CHO 5 Waterford (June)
Mental Health CAMHS	CAMHS No of referrals received	CHO 5 Waterford (June)
Mental Health CAMHS	CAMHS Number of new seen	CHO 5 Waterford (June)
Mental Health CAMHS	% of new (including re-referred) child/adolescent referrals offered appointment and DNA in the current month	CHO 5 Waterford (June)
Mental Health CAMHS	CAMHS waiting list	CHO 5 Waterford (June)
Mental Health CAMHS	CAMHS waiting list > 12 months	CHO 5 Waterford (June)
Mental Health CAMHS	CAMHS first appointment within 12 months	CHO 5 Waterford (June)
Mental Health CAMHS	CAMHS % of Urgent referrals to Child and Adolescent Mental Health Teams responded to within three working days	CHO 5 Waterford (June)
Adult Inpatient Services	No. of admissions to adult acute inpatient units	CHO 4 Cork University Hospital (Q1/2024) CHO 4 Bantry (Q1/2024)
Disability Services	No. of intensive support packages for priority 1 cases	447 intensive support packages for priority 1 cases put in place previously have been maintained in 2024 and are included in January figures
Disability Services	No. of Rehabilitative Training places provided (all disabilities)	Non Return All CHOs (June)

Service Area	KPI Title	Data Coverage Issues
Disability Services	No. of people (all disabilities) in receipt of rehabilitative training (RT)	Non Return All CHOs (June)
Disability Services	No. of people with a disability in receipt of other day services (excl. RT) (adult) (ID / Autism and Physical and sensory disability)	Non Return All CHOs (June)
Disability Services	Number of adults in receipt of HSE funded day service linked to a day service location that are also in receipt of a HSE funded residential placement (including those receiving RT)	Non Return All CHOs (June)
Acute Hospitals	% of medical patients who are discharged or admitted from AMAU within six hours AMAU registration	Cork University Hospital (June 2024) have not returned data
Acute Hospitals	Rate of new cases of hospital acquired Staphylococcus aureus bloodstream infection	Mercy University Hospital (Jun-24) HCAI data is outstanding, therefore bed days used removed due to the impact on rates.
Acute Hospitals	Rate of new cases of hospital associated C. difficile infection	Mercy University Hospital (Jun-24) HCAI data is outstanding, therefore bed days used removed due to the impact on rates.
Acute Hospitals	No. of new cases of CPE	Mercy University Hospital (Jun-24) data is outstanding
Acute Hospitals	Rate of new hospital acquired COVID-19 cases in hospital inpatients	CHI at Temple Street (Nov-23- May-24), therefore bed days used removed due to the impact on rates.
Acute Hospitals	% of acute hospitals implementing the requirements for screening of patients with Carbapenemase-producing Enterobacterales (CPE) guidelines	MRH Portlaoise Q1 & Q2 data is outstanding. Wexford General Hospital Q1 & Q2 data is outstanding Roscommon University Hospital Q1 data is outstanding Mercy University Hospital Q1 & Q2 data is outstanding
Acute Hospitals	% of acute hospitals implementing the national policy on restricted antimicrobial agents	MRH Portlaoise Q1 & Q2 data is outstanding. Wexford General Hospital Q1 & Q2 data is outstanding Roscommon University Hospital Q1 data is outstanding Mercy University Hospital Q1 & Q2 data is outstanding
Acute Hospitals	% of patients undergoing radical radiotherapy treatment who commenced treatment within 15 working days of being deemed ready to treat by the radiation oncologist (palliative care patients not included)	Altnagelvin outstanding June 2024.
Acute Hospitals	% of patients arriving by ambulance at ED to physical and clinical handover within 20 minutes of arrival	KPI Data under review

Appendix 3: Hospital Groups

	Hospital	Short Name for Reporting		Hospital	Short Name for Reporting
Children's Health Ireland	Children's Health Ireland	CHI	Saolta University Health Care Group	Galway University Hospitals	GUH
				Letterkenny University Hospital	LUH
				Mayo University Hospital	MUH
				Portiuncula University Hospital	PUH
				Roscommon University Hospital	RUH
Dublin Midlands Hospital Group	Coombe Women and Infants University Hospital	CWIUH		Sligo University Hospital	SUH
	MRH Portlaoise	Portlaoise	South/South West Hospital Group	Bantry General Hospital	Bantry
	MRH Tullamore	Tullamore		Cork University Hospital	CUH
	Naas General Hospital	Naas		Cork University Maternity Hospital	CUMH
	St. James's Hospital	SJH		Kilcreene Regional Orthopaedic Hospital	KROH
	St. Luke's Radiation Oncology Network	SLRON		Mallow General Hospital	Mallow
	Tallaght University Hospital	Tallaght - Adults		Mercy University Hospital	Mercy
		South Infirmary Victoria University Hospital		SIVUH	
Ireland East Hospital Group	Mater Misericordiae University Hospital	MMUH	University of Limerick Hospital Group	Tipperary University Hospital	TUH
	MRH Mullingar	Mullingar		University Hospital Kerry	UHK
	National Maternity Hospital	NMH		University Hospital Waterford	UHW
	National Orthopaedic Hospital Cappagh	Cappagh		Croom Orthopaedic Hospital	Croom
	National Rehabilitation Hospital	NRH		Ennis Hospital	Ennis
	Our Lady's Hospital Navan	Navan		Nenagh Hospital	Nenagh
	Royal Victoria Eye and Ear Hospital	RVEEH		St. John's Hospital Limerick	St. John's
	St. Columcille's Hospital	Columcille's		University Hospital Limerick	UHL
	St. Luke's General Hospital Kilkenny	SLK		University Maternity Hospital Limerick	LUMH
	St. Michael's Hospital	St. Michael's			
	St. Vincent's University Hospital	SVUH			
	Wexford General Hospital	Wexford			
RCSI Hospitals Group	Beaumont Hospital	Beaumont			
	Cavan General Hospital	Cavan			
	Connolly Hospital	Connolly			
	Louth County Hospital	Louth			
	Monaghan Hospital	Monaghan			
	Our Lady of Lourdes Hospital	OLOL			
	Rotunda Hospital	Rotunda			

Appendix 4: Community Health Organisations

	Areas included		Areas included
CHO 1	Donegal, Sligo Leitrim, Cavan Monaghan	CHO 6	Community Healthcare East
	Cavan		Dublin South East
	Donegal		Dun Laoghaire
	Leitrim		Wicklow
	Monaghan		Dublin South, Kildare and West Wicklow Community Healthcare
CHO 2	Community Healthcare West	CHO 7	Dublin South City
	Galway		Dublin South West
	Mayo		Dublin West
	Roscommon		Kildare
CHO 3	Mid West Community Healthcare	CHO 8	West Wicklow
	Clare		Midlands Louth Meath Community Healthcare
	Limerick		Laois
	North Tipperary		Offaly
CHO 4	Cork Kerry Community Healthcare	CHO 9	Longford
	Cork		Westmeath
	Kerry		Louth
CHO 5	South East Community Healthcare		Meath
	Carlow		Dublin North City and County Community Healthcare
	Kilkenny		Dublin North Central
	South Tipperary		Dublin North West
	Waterford		Dublin North City
	Wexford		