Health Service

Social Inclusion
KPI Metadata 2014 based on
Division Operational Plan NSP 2014

Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Social Inclusion: Opioid Treatment

1	KPI Title	No. of clients in Opioid substitute treatment (outside prisons)
2	KPI Description	Number of clients in Opioid Substitute Treatment at the end of the calendar month.
3	KPI Rationale	Opioid Substitute Treatment is the best evidence based alternative treatment for those who are opiate addicted. It is important to track the numbers in treatment.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☐ Person Centred Care, ☐Effective Care ☑Safe Care, ☑ Better Health and Wellbeing, ☐ Use of Information, ☐ Workforce, ☐ Use of Resources, ☐ Governance, ☐ Leadership and Management
4	KPI Target	NSP 2014 Target – 9,100. DML 4,920 , DNE 3,265 , South 576 , West 339.
5	KPI Calculation	Count, the number of clients trcriving Opioid Substitute Treatment at the end of the calendar month.
6	Data Source Data Completeness Data Quality Issues	Two national registers record drug treatment data in Ireland: the National Drug Treatment Reporting System (NDTRS) is an epidemiological database that records demand for treatment for problem alcohol and drug use, and the Central Treatment List (CTL) is an administrative database to regulate the dispensing of methadone treatment. This data is submitted to the EMCDDA by the HRB & DoHC.
7	Data Collection Frequency	☐Daily ☐Weekly ☑Monthly ☐Quarterly ☐Bi-annually ☐Annually ☐Other – give details: This metric is to be reported monthly in arrears.
8	Tracer Conditions	A person who is an opioid user whom is considered suitable for Opioid Substitute Treatment
9	Minimum Data Set	the required minuimum dataset for treatment is the Central treatment List entry form which contains Standard Demographic Information, Diagnosis and reatment date (episode) record.
10	International Comparison	Engaging and retaining clients in Opioid Substitute Treatment is an international metric.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis:
12	KPI Reporting Frequency	☐Daily ☐Weekly ☐Monthly ☑ Quarterly ☐Bi-annually ☐Annually ☐Other – give details:
13	KPI report period	☐Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) ☑Monthly in arrears (June data reported in July) ☐Quarterly in arrears (quarter 1 data reported in quarter 2) ☐Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	☑ National ☑Regional ☑LHO Area ☐ Hospital ☐ County ☐ Institution ☐Other – give details:
15	KPI is reported in which reports ?	☐ Corporate Plan Report ☑ Performance Report (NSP/CBP) ☐CompStat ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
	Contact details for Data	Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie
	National Lead and Directorate	John Hennessey, National Director, Primary Care Division, HSE. Tel: 01 6352000 Susan Scally, Principal officer, DOH 01 6354221

Social Inclusion: Opioid Treatment

1	KPI Title	No. of clients in Opioid treatment (prisons)
2	KPI Description	Number of clients in Opioid Substitute Treatment at the end of the calendar month.
3	KPI Rationale	Opioid Substitute Treatment is the best evidence based alternative treatment for those who are opiate addicted. It is important to track the numbers in treatment.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☐ Person Centred Care, ☐Effective Care ☑Safe Care, ☑ Better Health and Wellbeing, ☐ Use of Information, ☐ Workforce, ☐ Use of Resources, ☐ Governance, ☐ Leadership and Management
4	KPI Target	NSP 2014 Target – 500 .
5	KPI Calculation	Count, the number of clients trcriving Opioid Substitute Treatment at the end of the calendar month.
6	Data Source Data Completeness Data Quality Issues	Two national registers record drug treatment data in Ireland: the National Drug Treatment Reporting System (NDTRS) is an epidemiological database that records demand for treatment for problem alcohol and drug use, and the Central Treatment List (CTL) is an administrative database to regulate the dispensing of methadone treatment. This data is submitted to the EMCDDA by the HRB & DoHC.
7	Data Collection Frequency	☐Daily ☐Weekly ☑Monthly ☐Quarterly ☐Bi-annually ☐Annually ☐Other – give details: This metric is to be reported monthly in arrears.
8	Tracer Conditions	A person who is an opioid user whom is considered suitable for Opioid Substitute Treatment
9	Minimum Data Set	the required minuimum dataset for treatment is the Central treatment List entry form which contains Standard Demographic Information, Diagnosis and reatment date (episode) record.
10	International Comparison	Engaging and retaining clients in Opioid Substitute Treatment is an international metric.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: ☐Daily ☐Weekly ☑ Monthly ☐Quarterly ☐Bi-annually ☐Annually ☐Other – give details: Please indicate who is responsible for monitoring this KPI:The Data collection Co-Ordinator will receive and collate the data obtained from the central treatment list. The validated data is sent to the BIU for Reporting by the 15th of the month for publication in the national Performance Report (PR).
12	KPI Reporting Frequency	☐Daily ☐Weekly ☐Monthly ☑ Quarterly ☐Bi-annually ☐Annually ☐Other – give details:
13	KPI report period	☐Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) ☑Monthly in arrears (June data reported in July) ☐Quarterly in arrears (quarter 1 data reported in quarter 2) ☐Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	☑ National ☑Regional ☑LHO Area ☐ Hospital ☐ County ☐ Institution ☐Other – give details:
15	KPI is reported in which reports ?	☐ Corporate Plan Report ☑ Performance Report (NSP/CBP) ☐CompStat ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
	Contact details for Data	Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie
	National Lead and Directorate	John Hennessey, National Director, Primary Care Division, HSE. Tel: 01 6352000 Susan Scally, Principal officer 01 6354221

Social Inclusion : Substance Misuse

1	KPI Title	No. of substance misusers (over 18 yrs) for whom treatment has commenced following assessment
2	KPI Description	The number of substance misusers, over 18 years of age, for whom treatment has commenced following assessment. Needs Assessment: aims to determine the seriousness and urgency of the drug/alcohol problem. An assessment of both the nature and extent of the addiction as well as the service user's motivation to engage with treatment and rehabilitation services is carried out. It also includes any immediate risk factors and whether or not the service user is suitable for treatment at a particular centre.
3	KPI Rationale	Access to treatment speedily and readily is important when clients are at this stage of the change cycle: This is a measure for the HSE contained in the NDS (Interim 2009-2016) and the NAPS 2007-2016.
	Indicator Classification	☑Person Centred Care, ☐Effective Care ☐Safe Care, ☐ Better Health and Wellbeing, ☐ Use of Information, ☐ Workforce, ☐ Use of Resources, ☐ Governance, ☐ Leadership and Management
4	KPI Target	NSP 2014 Expected activity = 1260 Nationally, 300 DML, 210 DNE, 550 South, 200 West
5	KPI Calculation	Percentage calculation: The number of substance misusers for whom treatment commenced within one month of assessment divided by the total number of Adult substance misusers treated during the month multiplied by 100 = %
6	Data Source	Information is sourced by the service providers who send it to the HRB for verification and validation. The validated information is returned to the RDO's who then forward the validated data to the BIU.
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	☐Daily ☐Weekly ☐Monthly ☑Quarterly ☐Bi-annually ☐Annually ☐Other – give details: This metric is to be reported quarterly in arrears.
8	Tracer Conditions	The numbers of people over the age of 18 years who have been assessed and deemed appropriate for treatment for substance abuse
9	Minimum Data Set	the required minimum dataset for admission is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason.
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: ☐Daily ☐Weekly ☐ Monthly ☑Quarterly ☐Bi-annually ☐Annually ☐Other – give details: Please indicate who is responsible for monitoring this KPI: The validated data is received by the RDO from the HRB. This data is then returned to their RDO Business Unit by the 13th of the month for collation and submission to the National BIU CPCP by the 15th of the month for publication in the national Performance Report (PR).
12	KPI Reporting Frequency	☐Daily ☐Weekly ☐ Monthly ☑ Quarterly ☐Bi-annually ☐Annually ☐Other – give details:
13	KPI report period	☐Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) ☐Monthly in arrears (June data reported in July) ☑ Quarterly in arrears (quarter 1 data reported in quarter 2) ☐Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	☑ National ☑ Regional ☑ LHO Area ☐ Hospital ☐ County ☐ Institution ☐Other – give details:
15	KPI is reported in which reports ?	☑ Corporate Plan Report ☑ Performance Report (NSP/CBP) ☐CompStat ☐Other – give details:
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	National Lead and Directorate	John Hennessey, National Director, Primary Care Division, HSE. Tel: 01 6352000 Susan Scally, Principal officer 01 6354221

Social Inclusion : Substance Misuse

1	KPI Title	No. and % of substance misusers (over 18 yrs) for whom treatment has commenced within one calendar month following assessment
2	KPI Description	The percentage of substance misusers, over 18 years of age, for whom treatment has commenced within one calendar month following assessment. Needs Assessment: aims to determine the seriousness and urgency of the drug/alcohol problem. An assessment of both the nature and extent of the addiction as well as the service user's motivation to engage with treatment and rehabilitation services is carried out. It also includes any immediate risk factors and whether or not the service user is suitable for treatment at a particular centre.
3	KPI Rationale	Access to treatment speedily and readily is important when clients are at this stage of the change cycle: This is a measure for the HSE contained in the NDS (Interim 2009-2016) and the NAPS 2007-2016.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑Person Centred Care, ☐Effective Care ☐Safe Care, ☐ Better Health and Wellbeing, ☐ Use of Information, ☐ Workforce, ☐ Use of Resources, ☐ Governance, ☐ Leadership and Management
4	KPI Target	NSP 2014 Expected activity = 1260 Nationally, 300 DML, 210 DNE, 550 South, 200 West NSP 2014 Target = 100% of substance misusers commencing treatment within one calendar month following assessment
5	KPI Calculation	Percentage calculation: The number of substance misusers for whom treatment commenced within one month of assessment divided by the total number of Adult substance misusers treated during the month multiplied by 100 = %
6	Data Source	Information is sourced by the service providers who send it to the HRB for verification and validation. The validated information is returned to the RDO's who then forward the validated data to the BIU.
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	☐Daily ☐Weekly ☐Monthly ☑Quarterly ☐Bi-annually ☐Annually ☐Other – give details: This metric is to be reported quarterly in arrears.
8	Tracer Conditions	The numbers of people over the age of 18 years who have been assessed and deemed appropriate for treatment for substance abuse
9	Minimum Data Set	the required minimum dataset for admission is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason.
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: ☐Daily ☐Weekly ☐ Monthly ☑Quarterly ☐Bi-annually ☐Annually ☐Other – give details: Please indicate who is responsible for monitoring this KPI: The validated data is received by the RDO from the HRB. This data is then returned to their RDO Business Unit by the 13th of the month for collation and submission to the National BIU CPCP by the 15th of the month for publication in the national Performance Report (PR).
12	KPI Reporting Frequency	☐Daily ☐Weekly ☐ Monthly ☑ Quarterly ☐Bi-annually ☐Annually ☐Other – give details:
13	KPI report period	☐Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) ☐Monthly in arrears (June data reported in July) ☑ Quarterly in arrears (quarter 1 data reported in quarter 2) ☐Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	☑ National ☑ Regional ☑ LHO Area ☐ Hospital ☐ County ☐ Institution ☐Other – give details:
15	KPI is reported in which reports ?	☑ Corporate Plan Report ☑ Performance Report (NSP/CBP) ☐CompStat ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
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	Contact details for Data	Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie
	National Lead and Directorate	John Hennessey, National Director, Primary Care Division, HSE. Tel: 01 6352000 Susan Scally, Principal officer 01 6354221

Social Inclusion : Substance Misuse

1	KPI Title	Number of substance misusers (under 18 yrs) for whom treatment has commenced following assessment
2	KPI Description	The number of substance misusers under 18 years of age, for whom treatment has commenced following assessment. Needs Assessment: aims to determine the seriousness and urgency of the drug/alcohol problem. An assessment of both the nature and extent of the addiction as well as the service user's motivation to engage with treatment and rehabilitation services is carried out. It also includes any immediate risk factors and whether or not the service user is suitable for treatment at a particular centre.
3	KPI Rationale	Speedy access to treatment is critical when clients are at this stage of the change cycle but particularly so for young people – this is a PI in the NDS (Interim 2009-2016)
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑ Person Centred Care, ☐Effective Care ☐Safe Care, ☐ Better Health and Wellbeing, ☐ Use of Information, ☐ Workforce, ☐ Use of Resources, ☐ Governance, ☐ Leadership and Management
4	KPI Target	NSP 2014 Expected Activity: 105 Nationally, 25 DML. 15 DNE, 40 South, 25 West.
5	KPI Calculation	Count
6	Data Source	Information is sourced by the service providers who send it to the HRB for verification and validation. The validated information is returned to the RDO's who then forward the validated data to the BIU.
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	☐Daily ☐Weekly ☐Monthly ☑Quarterly ☐Bi-annually ☐Annually ☐Other – give details: This metric is to be reported quarterly in arrears.
8	Tracer Conditions	The numbers of people under the age of 18 years who have been assessed and deemed appropriate for treatment for substance abuse
9	Minimum Data Set	the required minimum dataset for admission is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason.
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: ☐Daily ☐Weekly ☐ Monthly ☑Quarterly ☐Bi-annually ☐Annually ☐Other – give details: Please indicate who is responsible for monitoring this KPI: The validated data is received by the RDO from the HRB. This data is then returned to their RDO Business Unit by the 13th of the month for collation and submission to the National BIU CPCP by the 15th of the month for publication in the national Performance Report (PR).
12	KPI Reporting Frequency	☐Daily ☐Weekly ☐ Monthly ☑ Quarterly ☐Bi-annually ☐Annually ☐Other – give details:
13	KPI report period	☐Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) ☐Monthly in arrears (June data reported in July) ☑ Quarterly in arrears (quarter 1 data reported in quarter 2) ☐Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	☑ National ☑ Regional ☑ LHO Area ☐ Hospital ☐ County ☐ Institution ☐Other – give details:
15	KPI is reported in which reports ?	☑ Corporate Plan Report ☑ Performance Report (NSP/CBP) ☐CompStat ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
	Contact details for Data	Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie
	National Lead and Directorate	John Hennessey, National Director, Primary Care Division, HSE. Tel: 01 6352000 Susan Scally, Principal officer 01 6354221

Social Inclusion : Substance Misuse

1	KPI Title	No. & % of substance misusers (under 18 yrs) for whom treatment has commenced within one week following assessment
2	KPI Description	The number of substance misusers under 18 years of age, for whom treatment has commenced within one week following assessment. Needs Assessment: aims to determine the seriousness and urgency of the drug/alcohol problem. An assessment of both the nature and extent of the addiction as well as the service user's motivation to engage with treatment and rehabilitation services is carried out. It also includes any immediate risk factors and whether or not the service user is suitable for treatment at a particular centre.
3	KPI Rationale	Speedy access to treatment is critical when clients are at this stage of the change cycle but particularly so for young people – this is a PI in the NDS (Interim 2009-2016)
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑ Person Centred Care, ☐Effective Care ☐Safe Care, ☐ Better Health and Wellbeing, ☐ Use of Information, ☐ Workforce, ☐ Use of Resources, ☐ Governance, ☐ Leadership and Management
4	KPI Target	NSP 2014 Expected Activity: 105 Nationally, 25 DML, 15 DNE, 40 South, 25 West. NSP 2014 Target: 100%
5	KPI Calculation	The number of substance misusers (under 18yrs) for whom treatment commenced within one week following assessment divided by the total number of substance misusers (under 18yrs) treated during the month multiplied by 100 = %
6	Data Source	Information is sourced by the service providers who send it to the HRB for verification and validation. The validated information is returned to the RDO's who then forward the validated data to the BIU.
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	☐Daily ☐Weekly ☐Monthly ☑Quarterly ☐Bi-annually ☐Annually ☐Other – give details: This metric is to be reported quarterly in arrears.
8	Tracer Conditions	The numbers of people under the age of 18 years who have been assessed and deemed appropriate for treatment for substance abuse
9	Minimum Data Set	the required minimum dataset for admission is the Referral form with standard demographic information, Diagnosis, Treatment record, referral reason.
10	International Comparison	No
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: ☐Daily ☐Weekly ☐ Monthly ☑Quarterly ☐Bi-annually ☐Annually ☐Other – give details: Please indicate who is responsible for monitoring this KPI: The validated data is received by the RDO from the HRB. This data is then returned to their RDO Business Unit by the 13th of the month for collation and submission to the National BIU CPCP by the 15th of the month for publication in the national Performance Report (PR).
12	KPI Reporting Frequency	☐Daily ☐Weekly ☐ Monthly ☑ Quarterly ☐Bi-annually ☐Annually ☐Other – give details:
13	KPI report period	☐Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) ☐Monthly in arrears (June data reported in July) ☑ Quarterly in arrears (quarter 1 data reported in quarter 2) ☐Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	☑ National ☑ Regional ☑ LHO Area ☐ Hospital ☐ County ☐ Institution ☐Other – give details:
15	KPI is reported in which reports ?	☑ Corporate Plan Report ☑ Performance Report (NSP/CBP) ☐CompStat ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
	Contact details for Data	Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie
	National Lead and Directorate	John Hennessey, National Director, Primary Care Division, HSE. Tel: 01 6352000 Susan Scally, Principal officer, DOH, Tel: 01 6354221

Social Inclusion: Needle Exchange

1	KPI Title	Number of individuals attending pharmacy needle exchange per month
2	KPI Description	Each service user is given a unique identifier the first time they use the service and the total number of unique service users/individuals is then calculated each month. Pharmacies are being recruited and trained to provide a needle exchange service to persons with a substance miuse addiction. Pharmacy based Needle Exchange is being rolled out on a pilot basis for three years across the Country. Average number per month.
3	KPI Rationale	Needle exchange is provided to substance misusers to ensure that if persons with an addiction have to use intravenous drugs, that they do so with sterile equipment. Each unique individual who uses the service is recorded so the PNEX also provides a way in which to monitor persons who have drug issues nationwide. Needle exchange is a key element of the National Drugs Strategy. The pilot programme is a joint parnership with the Elton John AIDS Foundation who are also joint funders of the project. This initiative is intended to become a model of good practice for future service development.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☐ Person Centred Care, ☐Effective Care ☑ Safe Care, ☑ Better Health and Wellbeing, ☐ Use of Information, ☐ Workforce,☐ Use of Resources, ☐ Governance,☐ Leadership and Management
4	KPI Target	NSP 2014 expected activity: 700 Nationally, 40 DML, 70 DNE, 340 South, 250 West.
5	KPI Calculation	Count the number of individuals attending pharmacy needle exchange per month and give a total at the end of the month. Average monthly figure is reported for the target.
6	Data Source	Records submitted by pharmacies and the national liaison pharmacists office.
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	☐Daily ☐Weekly ☐Monthly ☐Quarterly ☑Bi-annually ☐Annually ☐Other – give details: end of quarter's 2 and 4.
8	Tracer Conditions	Any member of the population , service user or non service user can avail of the service for or on behalf of a service user.
9	Minimum Data Set	Anonymous service minimum dataset not applicable
10	International Comparison	Needle exchange is reported annually by 29 countries to the EMCDDA. This will be the second time that Ireland we be in a position to collect/ provide any needle exchange information.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: ☐Daily ☐Weekly ☐Monthly ☐Quarterly ☑Bi-annually ☐Annually ☐Other – give details: :Monitored by the National Pharmacy Needle Exchange Steering Group and National Liaison Pharmacist. Forwarded on to National Specialist for Addiction in Social Inclusion by 15th of the reporting month or previous Friday if this date falls on a weekend. Forward on to Non acute BIU on the 15th of the reporting month
12	KPI Reporting Frequency	☐Daily ☐Weekly ☐ Monthly ☐Quarterly ☑Bi-annually ☐Annually ☐Other – give details: quarterly in arrears.
13	KPI report period	☐Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) ☐Monthly in arrears (June data reported in July) ☑ Quarterly in arrears (quarter 1 data reported in quarter 2, Q3 in Q4) ☐Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	☑ National Regional ☐ LHO Area ☐ Hospital ☐ County ☐ Institution ☐Other – give details:
15	KPI is reported in which reports ?	☐ Corporate Plan Report√Performance Report (NSP/CBP) ☐CompStat ☐Other – give details:
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	National Lead and Directorate	John Hennessey, National Director, Primary Care Division, HSE. Tel: 01 6352000 Susan Scally, Principal officer, DOH Tel: 01 6354221

Social Inclusion: Needle Exchange

1	KPI Title	No. of Pharmacies recruited to provide Needle Exchange Programme
2	KPI Description	Pharmacies are being recruited and trained to provide a needle exchange service to persons with a substance misuse addiction. Pharmacy based Needle Exchange is being rolled out on a pilot basis for three years across the Country.
3	KPI Rationale	Needle exchange is provided to substance misusers to ensure that if persons with an addiction have to use intravenous drugs, that they do so with sterile equipment. Each unique individual who uses the service is recorded so the PNEX also provides a way in which to monitor persons who have drug issues nationwide. Needle exchange is a key element of the National Drugs Strategy. The pilot programme is a joint parnership with the Elton John AIDS Foundation who are also joint funders of the project. This initiative is intended to become a model of good practice for future service development.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two).
4	KPI Target	NSP recruitment 2014 target: DML 23, DNE 18, South 58, West 31. This is a National Target of 130. The national target is 130 pharmacies recruited by quarter 4 2014
5	KPI Calculation	Count the numbers of pharmacies trained and with an agreed SLA to provide the service by the end of 2013.This figure will increase gradually as the year progresses as more pharmacies are recruited.
6	Data Source	Records submitted by pharmacies and the national liaison pharmacists office.
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	☐Daily ☐Weekly ☐Monthly ☐Quarterly ✓Bi-annually ☐Annually ☐Other – give details: end of quarter's 2 and 4.
8	Tracer Conditions	Any member of the population , service user or non service user can avail of the service for or on behalf of a service user.
9	Minimum Data Set	Anonymous service minimum dataset not applicable
10	International Comparison	Needle exchange is reported annually by 29 countries to the EMCDDA. This will be the second time that Ireland we be in a position to collect/ provide any needle exchange information.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: ☐Daily ☐Weekly ☐ Monthly ☑Quarterly ☑Bi-annually ☐Annually ☐Other – give details: Monitored by the National Pharmacy Needle Exchange Steering Group and National Liaison Pharmacist. Forwarded on to National Specialist for Addiction in Social Inclusion by 15th of the reporting month or previous Friday if this date falls on a weekend. Forward on to Non acute BIU on the 15th of the reporting month
12	KPI Reporting Frequency	☐Daily ☐Weekly ☐Monthly ☐Quarterly ☑ Bi-annually ☐Annually ☐Other – give details:
13	KPI report period	☐Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) ☐Monthly in arrears (June data reported in July) ☑ Quarterly in arrears (quarter 1 data reported in quarter 2, Q3 in Q4) ☐Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	☑ National ☑ Regional ☐ LHO Area ☐ Hospital ☐ County ☐ Institution ☐Other – give details:
15	KPI is reported in which reports ?	☐ Corporate Plan Report√Performance Report (NSP/CBP) ☐CompStat ☐Other – give details:
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	National Lead and Directorate	John Hennessey, National Director, Primary Care Division, HSE. Tel: 01 6352000 Susan Scally, Principal officer, DOH Tel: 01 6354221

Social Inclusion: Needle Exchange

1	KPI Title	No. of pharmacy needle exchange packs provided per month
2	KPI Description	Pharmacy pack consits of 10 "One hit kits" i.e. 1ml syringes with an inbuilt filter, 10 citric acid sachets, 10 spoons for liquefying the heroin, 10 alcohol swabs, 1 mini sharps bin, 4 condoms and a leaflet which provides information on how to access addiction services, safe injecting practices and what to do in the case of a drug overdose. Pharmacies are being recruited and trained to provide a needle exchange service to persons with a substance miuse addiction. Pharmacy based Needle Exchange is being rolled out on a pilot basis for three years across the Country.
3	KPI Rationale	Needle exchange is provided to substance misusers to ensure that if persons with an addiction have to use intravenous drugs, that they do so with sterile equipment. The contents of the pack have been specifically chosen to reduce the risk to the injecting drug user and to minimise the spread of blood borne viruses. This is an anonymous and confidential service. The number of unique clients attending each pharmacy is collated along with the number of packs given out monthly. Pharmacists strongly encourage all clients to return packs. Pharmacists encourage patients to attend addiction clinics for treatment. The number of unique individuals using the service is collated. The pilot programme is a joint parnership with the Elton John AIDS Foundation who are also joint funders of the project. This initiative is intended to become a model of good practice for future service development.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☐ Person Centred Care, ☐Effective Care ☑Safe Care, ☑ Better Health and Wellbeing, ☐ Use of Information, ☐ Workforce,☐ Use of Resources, ☐ Governance,☐ Leadership and Management
4	KPI Target	NSP 2014 target: 1898 Nationally, 80 DML, 140 DNE, 1135 South, 543 West.
5	KPI Calculation	Count
6	Data Source	Records submitted by pharmacies and the national liaison pharmacists office.
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	☐Daily ☐Weekly ☐Monthly ☐Quarterly ☑ Bi-annually ☐Annually ☐Other – give details: monthly metric captured quarterly in arrears. i.e. OCT, Nov & Dec 2012 to be submitted for March PR
8	Tracer Conditions	any member of the population , service user or non service user can avail of the service for or on behalf of a service user.
9	Minimum Data Set	Anonymous service minimum dataset not applicable
10	International Comparison	Needle exchange is reported annually by 29 countries to the EMCDDA. This will be the second time that Ireland we be in a position to collect/ provide any needle exchange information.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: ☐Daily ☐Weekly ☑Monthly ☐Quarterly ☐Bi-annually ☐Annually ☐Other – give details: :Monitored by the National Pharmacy Needle Exchange Steering Group and National Liaison Pharmacist. Forwarded on to National Specialist for Addiction in Social Inclusion by 15th of the reporting month or previous Friday if this date falls on a weekend. Forward on to Non acute BIU on the 15th of the reporting month
12	KPI Reporting Frequency	☐Daily ☐Weekly ☐ Monthly ☐Quarterly ☐Bi-annually ☐Annually ☑Other – give details: Frequency: monthly metric captured quarterly in arrears. i.e. OCT, Nov & Dec 2012 to be submitted for March PR)
13	KPI report period	☐Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) ☐Monthly in arrears (June data reported in July) ☑ Quarterly in arrears (quarter 1 data reported in quarter 2) ☐Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	☑ National ☑ Regional ☐ LHO Area ☐ Hospital ☐ County ☐ Institution ☐Other – give details:
15	KPI is reported in which reports ?	☐ Corporate Plan Report ☑ Performance Report (NSP/CBP) ☐CompStat ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
	Contact details for Data	Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie

National Lead and Directorate	John Hennessey, National Director, Primary Care Division, HSE. Tel: 01 6352000
	Susan Scally, Principal officer 01 6354221

Social Inclusion: Needle Exchange

1	KPI Title	Average no. of clean needles provided per person per month
2	KPI Description	This is the average number of clean needles issued each month to unique individuals who are participating in the needle exchange programme from participating pharmacies. Service users are strongly encouraged to return used needles but are still provided with clean needles if no returns are brought back.
3	KPI Rationale	Needle exchange is provided to substance misusers to ensure that if persons with an addiction have to use intravenous drugs, that they do so with sterile equipment. Each unique individual who uses the service is recorded so the PNEX also provides a way in which to monitor persons who have drug issues nationwide. Needle exchange is a key element of the National Drugs Strategy. The pilot programme is a joint parnership with the Elton John AIDS Foundation who are also joint funders of the project. This initiative is intended to become a model of good practice for future service development.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☐ Person Centred Care, ☐Effective Care ☑ Safe Care, ☑ Better Health and Wellbeing, ☐ Use of Information, ☐ Workforce,☐ Use of Resources, ☐ Governance,☐ Leadership and Management
4	KPI Target	NSP 2014 target: An average of 20 clean needles per month per unique individual, National pharmacy NEX 2014.
5	KPI Calculation	Number of clean needles provided each month divided by the number of unique individuals attending for that month. E.g. 11600 needles/400 unique individuals in the month = 29 clean needles per unique individual per month.
6	Data Source	Records submitted by pharmacies and the national liaison pharmacists office.
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	☐Daily ☐Weekly ☐Monthly ☐Quarterly ✓Bi-annually ☐Annually ☐Other – give details: end of quarter's 2 and 4.
8	Tracer Conditions	Any member of the population , service user or non service user can avail of the service for or on behalf of a service user.
9	Minimum Data Set	Anonymous service minimum dataset not applicable
10	International Comparison	Needle exchange is reported annually by 29 countries to the EMCDDA. This will be the second time that Ireland we be in a position to collect/ provide any needle exchange information.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: ☐Daily ☐Weekly ☑Monthly ☐Quarterly ☐Bi-annually ☐Annually ☐Other – give details: :Monitored by the National Pharmacy Needle Exchange Steering Group and National Liaison Pharmacist. Forwarded on to National Specialist for Addiction in Social Inclusion by 15th of the reporting month or previous Friday if this date falls on a weekend. Forward on to Non acute BIU on the 15th of the reporting month
12	KPI Reporting Frequency	☐Daily ☐Weekly ☐ Monthly ☐Quarterly ☐Bi-annually ☐Annually ☑Other – give details: Frequency: monthly metric captured quarterly in arrears. i.e. OCT, Nov & Dec 2012 to be submitted for March PR)
13	KPI report period	☐Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) ☐Monthly in arrears (June data reported in July) ☑ Quarterly in arrears (quarter 1 data reported in quarter 2) ☐Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	☑National ☑ Regional ☐ LHO Area ☐ Hospital ☐ County ☐ Institution ☐Other – give details:
15	KPI is reported in which reports ?	☐ Corporate Plan Report ☑ Performance Report (NSP/CBP) ☐CompStat ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	
	Contact details for Data	Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie
	National Lead and Directorate	John Hennessey, National Director, Primary Care Division, HSE. Tel: 01 6352000 Susan Scally, Principal officer, DOH Tel: 01 6354221

Social Inclusion: Needle Exchange		
1	KPI Title	No. & % of Pharmacy needle exchange packs returned per month
2	KPI Description	Pharmacy pack consits of 10 "One hit kits" i.e. 1ml syringes with an inbuilt filter, 10 citric acid sachets, 10 spoons for liquefying the heroin, 10 alcohol swabs, 1 mini sharps bin, 4 condoms and a leaflet which provides information on how to access addiction services, safe injecting practices and what to do in the case of a drug overdose. Pharmacies are being recruited and trained to provide a needle exchange service to persons with a substance miuse addiction. Pharmacy based Needle Exchange is being rolled out on a pilot basis for three years across the Country.
3	KPI Rationale	Needle exchange is provided to substance misusers to ensure that if persons with an addiction have to use intravenous drugs, that they do so with sterile equipment. The contents of the pack have been specifically chosen to reduce the risk to the injecting drug user and to minimise the spread of blood borne viruses. This is an anonymous and confidential service. The number of unique clients attending each pharmacy is collated along with the number of packs given out monthly. Pharmacists strongly encourage all clients to return packs. Pharmacists encourage patients to attend addiction clinics for treatment. The number of unique individuals using the service is collated. The pilot programme is a joint parnership with the Elton John AIDS Foundation who are also joint funders of the project. This initiative is intended to become a model of good practice for future service development.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☐ Person Centred Care, ☐Effective Care ☑Safe Care, ☑ Better Health and Wellbeing, ☐ Use of Information, ☐ Workforce,☐ Use of Resources, ☐ Governance,☐ Leadership and Management
4	KPI Target	NSP 2014 Expected Activity: 760 Nationally, 32 DML, 56 DNE, 454 South, 218 West. NSP 2014 Target: 40% Regionally and Nationally
5	KPI Calculation	The total number of personal sharps bins returned each month divided by the total number of packs given out each month, expressed as a percentage. Calculated at the end of each month.
6	Data Source	Records submitted by pharmacies and the national liaison pharmacists office.
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	☐Daily ☐Weekly √Monthly ☐Quarterly ☑ Bi-annually ☐Annually ☐Other – give details: monthly metric captured quarterly in arrears. i.e. OCT, Nov & Dec 2012 to be submitted for March PR
8	Tracer Conditions	Any member of the population , service user or non service user can avail of the service for or on behalf of a service user.
9	Minimum Data Set	Anonymous service minimum dataset not applicable
10	International Comparison	Needle exchange is reported annually by 29 countries to the EMCDDA. This will be the second time that Ireland we be in a position to collect/ provide any needle exchange information.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: ☐Daily ☐Weekly ☑Monthly ☐Quarterly ☐Bi-annually ☐Annually ☐Other – give details: :Monitored by the National Pharmacy Needle Exchange Steering Group and National Liaison Pharmacist. Forwarded on to National Specialist for Addiction in Social Inclusion by 15th of the reporting month or previous Friday if this date falls on a weekend. Forward on to Non acute BIU on the 15th of the reporting month
12	KPI Reporting Frequency	☐Daily ☐Weekly ☐ Monthly ☑ Quarterly ☐Bi-annually ☐Annually ☑Other – give details: Frequency: monthly metric captured quarterly in arrears. i.e. OCT, Nov & Dec 2012 to be submitted for March PR)
13	KPI report period	☐Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) ☐Monthly in arrears (June data reported in July) ☑ Quarterly in arrears (quarter 1 data reported in quarter 2) ☐Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	☑ National ☑ Regional ☐ LHO Area ☐ Hospital ☐ County ☐ Institution ☐Other – give details:
15	KPI is reported in which reports ?	☐ Corporate Plan Report ☑ Performance Report (NSP/CBP) ☐CompStat ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	

Contact details for Data	Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie
National Lead and Directorate	John Hennessey, National Director, Primary Care Division, HSE. Tel: 01 6352000
	Susan Scally, Principal officer , DOH Tel: 01 6354221

Social Inclusion: Homeless Services

1	KPI Title	Number of service users admitted during the quarter to homeless emergency accommodation hostels / facilities
2	KPI Description	This metric is designed to measure the number and percentage of service users admitted to emergency accommodation homeless hostels / facilities during the quarter.Service UserA service user is an individual who has been assesed as being homeless and placed in an emergency accomodation hostel/ facility. Emergency Accomodation Emergeny accomodation mainly refers to hostel type accomodation for short term / emergency use for people experiecing homelessness.
3	KPI Rationale	Health and well being may be severely compromised when one is homeless so it is critical that homeless people are able to access Primary Care Services quickly and easily.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑ Person Centred Care, ☐Effective Care ☐Safe Care, ☑ Better Health and Wellbeing, ☐ Use of Information, ☐ Workforce, ☐Use of Resources, ☐ Governance, ☐ Leadership and Management
4	KPI Target	NSP 2014 target: 2,000 Nationally, 416 DML, 334 DNE, 700 South, 550 West.
5	KPI Calculation	Count
6	Data Source	Emergency Accomodation Providers/ / Social Inclusion Specialists/ Social Inclusion Managers/ Area Managers. Data is sourced from Emergency Accomodation providers who in turn send it to the RDO's and/or Social Inclusion Specialists for verification. Information is then sent by the RDO offices to the BIU for recording
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	☐Daily ☐Weekly ☐Monthly ☑Quarterly ☐Bi-annually ☐Annually ☐Other – give details:
8	Tracer Conditions	
9	Minimum Data Set	the required minuimum dataset for admission is the standard demographic information. Also the completion of the Holistic needs assessment form
10	International Comparison	Yes: e.g http://www.seattle.gov/housing/homeless/HNA_report_11-09.pdf. http://www.huduser.org/Publications/pdf/ahar.pdf
11	KPI Monitoring	KPI will be monitored on a quarterly basis: ☐Daily ☐Weekly ☐ Monthly ☑ Quarterly ☐Bi-annually ☐Annually ☐Other – give details: Social Inclusion Specialists / Social Inclusion Managers/ Area Managers. The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a quarterly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 13th of the month for collation and submission to the National BIU CPCP by the 15th of the month for publication in the national Performance Report (PR)
12	KPI Reporting Frequency	☐Daily ☐Weekly ☐Monthly ☑Quarterly ☐Bi-annually ☑Annually ☐Other – give details:
13	KPI report period	☐Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) ☐Monthly in arrears (June data reported in July), ☑Quarterly ☐Quarterly in arrears (quarter 1 data reported in quarter 2) ☐Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	☑ National ☑Regional ☐ LHO Area ☐ Hospital ☐ County ☐ Institution ☐Other – give details:
15	KPI is reported in which reports ?	☐ Corporate Plan Report ☑Performance Report (NSP/CBP) ☐CompStat ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html

17	Additional Information	Metric to be included in SLA's with Service Providers. Collection template has been developed and in use to capture this KPI. Services users should be counted once in the given reporting period,i.e Quarter.
	Contact details for Data Manager / Specialist Lead	Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Diane Nurse, Ass/National Director, Integrated Services, Tel: 01635 2337
	National Lead and Directorate	John Hennessey, National Director, Primary Care Division, HSE. Tel: 01 6352000 Geraldine Luddy, Principal Officer, Department of Health, Tel: 01 635 4000

Social Inclusion: Homeless Services

1	KPI Title	No. and % of service users admitted to homeless emergency accommodation hostels/ facilities who have medical cards.
2	KPI Description	This metric is designed to measure the number and percentage of service users admitted to emergency accommodation homeless hostels / facilities that have a current medical card.Service UserA service user is an individual who has been assesed as being homeless and placed in an emergency accomodation hostel/ facility. Emergency Accomodation Emergeny accomodation mainly refers to hostel type accomodation for short term / emergency use for people experiecing homelessness.
3	KPI Rationale	Health and well being may be severely compromised when one is homeless so it is critical that homeless people are able to access Primary Care Services quickly and easily – thus a medical card is a critical starting point.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑ Person Centred Care, ☐Effective Care ☐Safe Care, ☑ Better Health and Wellbeing, ☐ Use of Information, ☐ Workforce, ☐Use of Resources, ☐ Governance, ☐ Leadership and Management
4	KPI Target	NSP 2014 target: 75%. (75% of all service users admitted have access to a medical card)
5	KPI Calculation	Total number of persons residing in emergency accommodation homeless services who have a medical card on the last day of each quarter, ,i.e. 31st March, 30th June, 30th Sept , 31st December. Total number of persons residing in emergency accommodation homeless services on the last day of each quarter ,i.e. 31st March, 30th June, 30th Sept , 31st December. Calculation Percentage of homeless people with medical cards in quarter (number of people admitted)/(number with a medical card) x 100 = %
6	Data Source	Emergency Accomodation Providers/ / Social Inclusion Specialists/ Social Inclusion Managers/ Area Managers. Data is sourced from Emergency Accomodation providers who in turn send it to the RDO's and/or Social Inclusion Specialists for verification. Information is then sent by the RDO offices to the BIU for recording
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	☐Daily ☐Weekly ☐Monthly ☑Quarterly ☐Bi-annually ☐Annually ☐Other – give details:
8	Tracer Conditions	a person presenting as homeless and who required emergency accomodation who has a medical card
9	Minimum Data Set	the required minuimum dataset for admission is the standard demographic information. Also the completion of the Holistic needs assessment form
10	International Comparison	Yes: e.g http://www.seattle.gov/housing/homeless/HNA_report_11-09.pdf. http://www.huduser.org/Publications/pdf/ahar.pdf

11	KPI Monitoring	KPI will be monitored on a quarterly basis: ☐Daily ☐Weekly ☐ Monthly ☑ Quarterly ☐Bi-annually ☐Annually ☐Other – give details: Social Inclusion Specialists / Social Inclusion Managers/ Area Managers. The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a quarterly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 13th of the month for collation and submission to the National BIU CPCP by the 15th of the month for publication in the national Performance Report (PR)
12	KPI Reporting Frequency	☐Daily ☐Weekly ☐Monthly ☑Quarterly ☐Bi-annually ☑Annually ☐Other – give details:
13	KPI report period	☐Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) ☐Monthly in arrears (June data reported in July), ☑**Quarterly** ☐Quarterly in arrears (quarter 1 data reported in quarter 2) ☐Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	☑ National ☑Regional ☐ LHO Area ☐ Hospital ☐ County ☐ Institution ☐Other – give details:
15	KPI is reported in which reports ?	☐ Corporate Plan Report ☑Performance Report (NSP/CBP) ☐CompStat ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	Metric to be included in SLA's with Service Providers. Collection template has been developed and in use to capture this KPI. Services users should be counted once in the given reporting period,i.e Quarter.
Contact details for Data Manager / Specialist Lead		Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Diane Nurse, Ass/National Director, Integrated Services, Tel: 01635 2337
National Lead and Directorate		John Hennessey, National Director, Primary Care Division, HSE. Tel: 01 6352000 Geraldine Luddy, Principal Officer, Department of Health, Tel: 01 635 4000

	Social Inclusion: Homeless Services	
1	KPI Title	No. and % of individual service users admitted to homeless emergency accommodation hostels/ facilities whose health needs have been assessed as part of a Holistic Needs Assessment (HNA) within two weeks of admission
2	KPI Description	Emergency Accomodation: Emergeny accomodation mainly refers to hostel type accomodation for short term / emergency use for people experiecing homelessness. This metric is designed to measure the number and percentage of service users admitted to emergency accommodation homeless hostels / facilities whose health needs have been assessed as part of a Holistic Needs Assessmen(HNA) within two weeks from the date of admission.
3	KPI Rationale	Under national homeless policy, the HSE is responsible for the health and in house care needs of homeless persons across the hostel network. The implementation of a formal Needs Assessment is central to the effective operation of a care planning system in addressing and supporting the health and care needs of homeless people. Care / Support plans are prepared to enable homeless persons to maximise their potential and return to independent living, where possible. This approach has proven internationally to significantly improve outcomes for service users with varying support needs
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑ Person Centred Care, ☐Effective Care ☐Safe Care, ☑ Better Health and Wellbeing, ☐ Use of Information, o Workforce, o Use of Resources, o Governance, o Leadership and Management
4	KPI Target	NSP 2014 expected activity/target: 1,700 Nationally, 354 DML, 284 DNE, 595 South, 467 West or 85%
5	KPI Calculation	(a) The count of persons admitted to homeless emergency accommodation hostels/ facilities during the quarter ended 31st March, 30th June, 30th Sept and 31st December. (b) The count of persons admitted to homeless emergency accommodation hostels/ facilities whose health needs have been assessed as part of a Holistic Needs Assessment within two weeks from the date of admission, during the quarter ended 31st March, 30th June, 30th Sept and 31st December. This is reported also as a percentage in the Performance report. The percentage is calculated by the BIU. The number is cumulative in the month and each person should be counted once only in each quarter.
6	Data Source	
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	☐Daily ☐Weekly ☐Monthly ☑Quarterly ☐Bi-annually ☐Annually ☐Other – give details:
8	Tracer Conditions	Any person presenting as homeless and deemed by the Homeless Persons Unit / Local Authority to require emergency accomodation would normally be admitted to an emergency hostel/facility if available and who is deemed in need of a eritten care plan as outlined by the criteria contained by the Holistic needs assessment protocol.
9	Minimum Data Set	the required minuimum dataset for admission is the standard demographic information. Also the completion of the Holistic needs assessment form
10	International Comparison	Yes: e.g http://www.seattle.gov/housing/homeless/HNA_report_11-09.pdf. http://www.huduser.org/Publications/pdf/ahar.pdf
11	KPI Monitoring	KPI will be monitored on a quarterly basis: ☐Daily ☐Weekly ☐ Monthly ☑ Quarterly ☐Bi-annually ☐Annually ☐Other – give details: Social Inclusion Specialists / Social Inclusion Managers/ Area Managers. The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a quarterly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 13th of the month for collation and submission to the National BIU CPCP by the 15th of the month for publication in the national Performance Assurance Report (PAR).
12	KPI Reporting Frequency	☐Daily ☐Weekly ☐Monthly ☑Quarterly ☐Bi-annually ☑Annually ☐Other – give details:

13	KPI report period	☐Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) ☐Monthly in arrears (June data reported in July), ☑**Quarterly** ☐Quarterly in arrears (quarter 1 data reported in quarter 2) ☐Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	☑ National ☑Regional ☐ LHO Area ☐ Hospital ☐ County ☐ Institution ☐Other – give details:
15	KPI is reported in which reports ?	☐ Corporate Plan Report ☑Performance Report (NSP/CBP) ☐CompStat ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	Metric to be included in SLA's with Service Providers. Collection template has been developed and in use to capture this KPI. Services users should be counted once in the given reporting period,i.e Quarter.

Contact details for Data Manager / Specialist Lead	Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Diane Nurse, Ass/National Director, Integrated Services, Tel: 01635 2337
National Lead and Directorate	John Hennessey, National Director, Primary Care Division, HSE. Tel: 01 6352000 Geraldine Luddy, Principal Officer, Department of Health, Tel: 01 635 4000

Social Inclusion: Homeless Services

1	KPI Title	No. and % of individual service users admitted to homeless emergency accommodation hostels / facilities whose health needs have been assessed and are being supported to manage their physical/ mental health as part of their care/ support plan
2	KPI Description	**Service User:** A service user is an individual who has been assesed as being homeless and placed in an emergency accomodation hostel/ facility. **Health Needs Assessment:** is a detailed assessment of an individual's health needs and is an integral part of the Holistic Needs assessemnt (HNA) which is fundamental component of the care/support planning system. It is completed in co operation with the person's key worker/ project worker and should cover the full range of a person's health and care related needs including general healthcare, mental health, and addiction issues. **Homeless Emergency Accommodation:** Emergeny accomodation mainly refers to hostel type accomodation for short term / emergency use for people experiecing homelessness. **Care / Support Plan:** A care /support plan is an individualised plan formulated by a care worker in consultation with the individual resident, their families and other appropriate professionals that describes what kind of services and care that person should receive. It is a key component in the implementation of an effective care and case management approach.
3	KPI Rationale	Under national homeless policy, the HSE is responsible for the health and in house care needs of homeless persons with a significant amount of HSE homeless funding being provided to meet the pay costs of care staff across the hostel network. This metric is designed to measure the number and percentage of service users admitted to emergency accommodation homeless hostels / facilities whose health needs have been assessed and that person(s) is being supported by hostel staff to manage their physical/general health, mental health and addiction issues, where required. Support provided by hostel staff in addessing the health needs of homeless persons is key to the effective operation of a Care Planning system which is crucial in to enable them to maximize their potential and return to independent living , where possible. This approach has proven internationally to significantly improve outcomes for service users with varying support needs.
	Indicator Classification	Please tick which Indicator Classification this indicator applies to, ideally choose one classification (in some cases you may need to choose two). ☑ Person Centered Care, ☐Effective Care ☐Safe Care, ☑ Better Health and Wellbeing, ☐ Use of Information, o Workforce, o Use of Resources, o Governance, o Leadership and Management
4	KPI Target	NSP 2014 expected activity/target: 60%
5	KPI Calculation	(a) The count of persons admitted to homeless emergency accommodation hostels/ facilities during the quarter ended 31st March, 30th June, 30th Sept and 31st December. (b) The count of persons admitted to homeless emergency accommodation hostels/ facilities whose needs have been formally assessed within one week from the date of admission, during the quarter ended 31st March, 30th June, 30th Sept and 31st December. This is reported also as a percentage in the Performance report. The percentage is calculated by the BIU. The number is cumulative in the month and each person should be counted once only
6	Data Source	Emergency Accomodation Providers/ / Social Inclusion Specialists/ Social Inclusion Managers/ Area Managers. Data is sourced from Emergency Accomodation providers who in turn send it to the RDO's and/or Social Inclusion Specialists for verification. Information is then sent by the RDO offices to the BIU for recording
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	☐Daily ☐Weekly ☐Monthly ☑Quarterly ☐Bi-annually ☐Annually ☐Other – give details:
8	Tracer Conditions	Any person presenting as homeless and deemed by the Homeless Persons Unit / Local Authority to require emergency accomodation would normally be admitted to an emergency hostel/facility if available.
9	Minimum Data Set	the required minimum dataset for admission is the standard demographic information. Also the completion of the Holistic needs assessment form
10	International Comparison	Yes: e.g. http://www.seattle.gov/housing/homeless/HNA_report_11-09.pdf. http://www.huduser.org/Publications/pdf/ahar.pdf

11	KPI Monitoring	KPI will be monitored on a quarterly basis: ☐Daily ☐Weekly ☐ Monthly ☑ Quarterly ☐Bi-annually ☐Annually ☐Other – give details: The Data collection Co-Ordinator will receive, collate, analyse and quality assure KPI outturns on a quarterly basis for accuracy, completeness and ongoing performance against target. Once satisfied, they will forward the collated KPI on a monthly basis to their Area Manager for approval and Regional Lead/Specialist/relevant nominee for oversight. The Regional Lead/Specialist/relevant nominee will inform the Area Manager if further quality assurance is required and follow up with the relevant Co-Ordinator to provide same to the Area Manager. Upon receipt, the Area Manager will then forward the approved KPI return to their RDO Business Unit by the 13th of the month for collation and submission to the National BIU CPCP by the 15th of the month for publication in the national Performance Assurance Report (PAR).
12	KPI Reporting Frequency	☐Daily ☐Weekly ☐Monthly ☑Quarterly ☐Bi-annually ☑Annually ☐Other – give details:
13	KPI report period	☐Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) ☐Monthly in arrears (June data reported in July), ☑**Quarterly** ☐Quarterly in arrears (quarter 1 data reported in quarter 2) ☐Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	☑ National ☑Regional ☐ LHO Area ☐ Hospital ☐ County ☐ Institution ☐Other – give details:
15	KPI is reported in which reports ?	☐ Corporate Plan Report ☑Performance Report (NSP/CBP) ☐CompStat ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	Metric to be included in SLA's with Service Providers. Collection template has been developed and in use to capture this KPI. Services users should be counted once in the given reporting period,i.e Quarter.
Contact details for Data Manager / Specialist Lead		Stephen Toft Non Acute BIU. Tel 01 6352270. Email: stephen.toft1@hse.ie Diane Nurse, Ass/National Director, Integrated Services, Tel: 01635 2337
National Lead and Directorate		John Hennessey, National Director, Primary Care Division, HSE. Tel: 01 6352000 Geraldine Luddy, Principal Officer, Department of Health, Tel: 01 635 4000

Social Inclusion: Traveller Health Screening

1	KPI Title	No. of clients to receive health awareness raising/ screening programmes (breast check, cervical smear screening, men's health screening, blood pressure testing) delivered through the Traveller Health Units/ Primary Health Care Projects.
2	KPI Description	Monitoring of the number of clients per THU/ISA region facilitated to access National screening programmes and participating in awareness raising programmes and, where necessary referred for assessment for treatment.
3	KPI Rationale	The All Ireland Traveller Health Study - published in September 2010 - found that • 52% of Travellers aged 40 – 60 had been diagnosed with high blood pressure in the past 12 months compared to 35% of the general Irish Population. • 25 % of Travellers died from Heart Disease, and 19% from Cancer. Traveller Primary Health Care Projects will: 1) assist Traveller clients to access National Screening Programmes such as Breast Check and Cervical Check; 2) conduct awareness programmes for cardiovascular disease and, where necessary, assist those who need further assessment to be referred to PCT's and acute services
	Indicator Classification	☑Person Centred Care ☐Effective Care
		Safe Care☐ Better Health and Wellbeing ☐Use of Information☐
		Workforce☐Use of Resources☐Governance, Leadership and Management ☐
4	KPI Target	NSP 2014 Target - 1,650 Nationally, 380 DML, 412 DNE, 231 South, 627 West.
5	KPI Calculation	Number of clients per THU assisted to access National screening programmes at the end of each six month period. Number of clients per THU participating in awareness raising programmes for Cardiovascular disease.
6	Data Source	Regional Social Inclusion Unit via Traveller Health Units
	Data Completeness	Data Completeness is expected at 100%.
	Data Quality Issues	Data quality issues are addressed as they arise.
7	Data Collection Frequency	☐Daily ☐Weekly ☐Monthly ☐Quarterly ☑Bi-annually ☐Annually ☐Other – give details:
8	Tracer Conditions	The numbers of persons who presented for screening
9	Minimum Data Set	The required minuimum dataset for this metric is standard demographic information, Diagnosis, Treatment record, referral reason. commences.
10	International Comparison	The disease profile of the Traveller community is similar to certain minority ethnic populations in other countries eg Australian Aboriginals, Native Americans.
11	KPI Monitoring	KPI will be monitored on a (please indicate below) basis: ☐Daily ☐Weekly ☐ Monthly ☐Quarterly ☑Bi-annually ☐Annually ☐Other – give details: This KPI is submitted to each Regional Social Inclusion Specialist for oversight who in turn submit it to the national office for collation into a national return.
12	KPI Reporting Frequency	☐Daily ☐Weekly ☐Monthly ☐Quarterly ☑Bi-annually ☐Annually ☐Other – give details:
13	KPI report period	☐Current (e.g. daily data reported on that same day of activity, monthly data reported within the same month of activity) ☐Monthly in arrears (June data reported in July) ☑Quarterly in arrears (quarter 1 data reported in quarter 2) ☐Rolling 12 months (previous 12 month period)
14	KPI Reporting Aggregation	☑ National ☑Regional ☐ LHO Area ☐ Hospital ☐ County ☐ Institution ☐Other – give details:
15	KPI is reported in which reports ?	☐ Corporate Plan Report ☑Performance Report (NSP/CBP) ☐CompStat ☐Other – give details:
16	Web link to data	http://www.hse.ie/eng/services/Publications/corporate/Performance_Reports_Monthly.html
17	Additional Information	Plans are in place to carry out an effectiveness review of all types of needle exchange.
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