



Health & Wellbeing

Key Performance Indicator Metadata 2021



Tobacco

1	KPI Title	HWB101 - No. of smokers who are receiving online cessation support services
1a	KPI Short Title	Smokers receiving online cessation support
2	KPI Description	This metric quantifies the number of smokers/tobacco users who are motivated to sign up to the online quitplan (an online quitting tracker) plus or minus a series of email/text or telephone supports to support tobacco cessation. The metric measures those who sign up to the quitplan and activate their account in the reporting period. The quitplan consists of an online personal quitting tracker which measures the users' level of nicotine dependence, their smoking triggers, reasons for quitting and financial savings during their quit attempt. As part of the quitplan sign up the user is encouraged to also avail of a series of other supports including motivational email and/or text based supports as well as the standard telephone support service offered through the national QUITline. The preparatory and motivational emails and texts are sent daily for two weeks before the 'set quit date', on the 'quit date' and for up to one month post the 'set quit date' followed by further less frequent emails for up to 12 months. It is possible that a tobacco user who signs up to the quitplan plus or minus the email or text supports could also be accessing either the face to face support through a HSE quit smoking cessation clinic or group and/or could be in receipt of the standardised schedule of telephone supports. The evidence suggests that those who access a combination of behavioural supports (online/telephone/face to face) and use evidenced based medication have an increased likelihood of a successful quit. The target will not be consistent for each quarter. Activity in cessation services is generally higher in Q1 and 2, lower in Q3 and rises again in the first half of Q4. A full profile breakdown will be provided. This metric reflects key actions for the HSE as outlined in the governments Tobacco Free Ireland Strategy and Healthy Ireland Strategy.
3	KPI Rationale	Tobacco users in our target population group (all tobacco users/smokers but particularly C2DE aged 24-35) are increasingly choosing our online cessation and text based messaging support services, including our personalised quit plan profile to aid them in their quit attempt. The introduction of this KPI will help measure the effectiveness of a wider range of cessation support services (in addition to the current metric HWB 27 measuring phone and face to face counselling services) and provide a more accurate picture of service activity across all channels and of the effectiveness of our award winning QUIT campaign. Quitplan sign up data is available and robust and has been monitored internally as part of campaign evaluation for some years, however the TFI programme feel it is now prudent to add this metric to the suite.
3a	Indicator Classification	National Scorecard Quadrant: Access and Integration
4	National Target	2021 NSP Target: 7,000 Smokers. This is a cumulative calculation
4a	Target	
4b	Volume Metrics	
5	KPI Calculation	"Count. This metric will be drawn from the administrative part of the quitplan within the quit.ie website through the P Tools programme. It will count all tobacco users who log on to the quitplan and activate their account."The metric measures those who sign up to the quitplan and activate their account.
6	Data Source	Communications Department - Ptools (administrative part of quit.ie website)The data is national data reported by national communications using the P tools programme. This metric quantifies the number of tobacco users who are motivated to sign up to the online quitplan (an online quitting tracker) plus or minus a series of email/text or telephone supports to support tobacco cessation.
6a	Data Sign Off	Ben Cloney, Digital Manager, Communications Department
6b	Data Quality Issues	
7	Data Collection Frequency	Quarterly
8	Tracer Conditions	Smoker seeking assistance to quit
9	Minimum Data Set MDS	No. of smokers who received support > 10 mins
10	International Comparison	NHS Stop Smoking Service reports similar data
11	KPI Monitoring	Quarterly
12	KPI Reporting Frequency	Quarterly
13	KPI Report Period	Quarterly
14	KPI Reporting Aggregation	National
15	KPI is reported in which reports?	NSP / Management Data Report
16	Web link to data	http://www.hse.ie/eng/services/publications/performance-reports/
17	Additional Information	
	KPI owner/lead for implementation	Elaine Buckley, National Tobacco Cessation Co-Ordinator
	PBI data support	Siobhán O'Brien, Data Analyst, Population Health & Wellbeing, National Business Information Unit - siobhan.obrien2@hse.ie
	Governance/sign off	Helen Deely, Assistant National Director, Health & Wellbeing

Tobacco

1	KPI Title	HWB26- % of smokers on cessation programmes who were quit at four weeks
1a	KPI Short Title	% smokers quit at four weeks
2	KPI Description	Refers to smokers who have signed up to the standardised HSE tobacco cessation support programme, who have set a quit date and who are quit at 4 weeks. The support programme i.e. structured support provided to smokers prior to their quit date and each week for four weeks following this date. Quit date: The date a smoker plans to stop smoking completely with support from a stop smoking specialist as part of an assisted quit attempt. A self reported 4 - week quitter is a treated smoker who reports not smoking for at least days 15–28 of a quit attempt and is followed up 28 days from their quit date (-3 or +14 days). The -3 or +14 day rule allows for cases where it is impossible to carry out a face-to-face follow-up at the normal four-week point (although in most cases it is expected that follow-up will be carried out at four weeks from the quit date). This means that follow-up must occur 25 to 42 days from the quit date (Russell Standard). A CO- verified 4 week quitter is a treated smoker who reports not smoking for at least days 15–28 of a quit attempt and whose CO reading is assessed 28 days from their quit date (-3 or +14 days) and is less than 10 ppm. The -3 or +14 day rule allows for cases where it is impossible to carry out a face-to-face follow-up at the normal four-week point (although in most cases it is expected that follow-up will be carried out at four weeks from the quit date). This means that follow-up must occur 25 to 42 days from the quit date (Russell Standard). A treated smoker is a smoker who has received at least one session of a structured, multi-session intervention (delivered by a trained smoking cessation specialist) on or prior to the quit date, who consents to treatment and sets a quit date with a smoking cessation specialist. Smokers who attend a first session but do not consent to treatment or set a quit date should not be counted. A 'smoker' is defined as a person who smokes a smoked product. In adulthood this is defined in terms of daily use, whereas in adolescence (i.e. for those aged 16 or under) it is defined in terms of weekly use).
3	KPI Rationale	Seven out of 10 smokers want to quit and four out of ten make a quit attempt every year. Behavioural support doubles a smoker's chance of quitting successfully. Smoking cessation is a highly cost effective intervention. The Tobacco Control Framework identified the need to set realistic performance targets for both the numbers using the service and the proportion who quit successfully. This KPI will provide baseline data for this action.
3a	Indicator Classification	National Scorecard Quadrant: Quality & Safety
4	National Target	2021 NSP Target: 45%. This is a cumulative calculation
4a	Target	Performance target constant over the full year e.g. 45%
4b	Volume Metrics	
5	KPI Calculation	Denominator: No. of smokers who set a quit date and agree to participate in the HSE standard tobacco cessation support programme. Numerator: No. of treated smokers in the standardised HSE tobacco cessation support programme who either self report as quit or are CO validated as quit when followed up at 4 weeks. This is expressed as a count and as a percentage. (Please note that hospital based intensive tobacco cessation services are reported within the CHO in which they are located and not by Hospital group.)
6	Data Source	Administrative databases. Data provided by tobacco cessation specialists to Health Promotion. Manual system.
6a	Data Sign Off	Helen Deely, Interim AND Health & Wellbeing, Strategy & Research
6b	Data Quality Issues	
7	Data Collection Frequency	Quarterly
8	Tracer Conditions	Quit definition - Russell Standard UK
9	Minimum Data Set MDS	No. of smokers who participated in a HSE standardised tobacco cessation support programme. No. of smokers who set a quit date. No. of smokers who either self report being quit/are validated as quit at 4 weeks.
10	International Comparison	NHS Stop Smoking Service reports similar data
11	KPI Monitoring	Quarterly
12	KPI Reporting Frequency	Quarterly
13	KPI Report Period	Q-1Q
14	KPI Reporting Aggregation	National
15	KPI is reported in which reports?	NSP / Management Data Report / Performance Profile
16	Web link to data	http://www.hse.ie/eng/services/publications/corporate/performance-reports/
17	Additional Information	
	KPI owner/lead for implementation	Elaine Buckley, National Tobacco Cessation Co-Ordinator (elaine.buckley1@hse.ie)
	PBI data support	Siobhán O'Brien, Data Analyst, Population Health & Wellbeing, National Business Information Unit - siobhan.obrien2@hse.ie
	Governance/sign off	Helen Deely, Assistant National Director, Health & Wellbeing

Tobacco

1	KPI Title	HWB27- No. of smokers who received face to face or telephone intensive cessation support from a cessation counsellor
1a	KPI Short Title	Smokers receiving cessation support
2	KPI Description	Intensive cessation support is a consultation of greater than 10 mins (more than a brief intervention) provided by a trained *tobacco cessation specialist to a smoker either in an acute or community setting. It can be delivered in a variety of ways - face to face (one-to-one), group or via telephone. Tobacco Cessation Specialists are trained to Level 2/NCSCCT/HSE standardised training.
3	KPI Rationale	Seven out of 10 smokers want to quit and four out of ten make a quit attempt every year. Support doubles a smoker's chance of quitting successfully. Smoking cessation is a highly cost effective intervention. The Department of Health's Tobacco Free Ireland framework emphasises the need to monitor and evaluate cessation services.
3a	Indicator Classification	National Scorecard Quadrant: Access and Integration
4	National Target	2021 NSP Target: 10,000 Smokers. This is a cumulative calculation
4a	Target Trajectory	CHO1 423; CHO2 200; CHO3 200; CHO4 493; CHO5 250; CHO6 216; CHO7 364; CHO8 150; CHO9 270; National Quitline 2,388; IE HG 1,233; RCSI HG 1,743; Saolta HG 443; Dub Midlands HG 564; UL HG 190; SSW HG 873
4b	Volume Metrics	
5	KPI Calculation	Count (Please note that hospital based intensive tobacco cessation services are reported within the CHO in which they are located and not by Hospital group).
6	Data Source	Administrative databases. Data provided by tobacco cessation specialists to Health Promotion & Improvement tobacco coordinator and forwarded to the BIU. Data also provided to the National HP& I office and the Tobacco Control Programme office. Manual system.
6a	Data Sign Off	Helen Deely, Interim AND Health & Wellbeing, Strategy & Research
6b	Data Quality Issues	
7	Data Collection Frequency	Monthly
8	Tracer Conditions	Smoker seeking assistance to quit
9	Minimum Data Set MDS	No. of smokers who received support > 10 mins
10	International Comparison	NHS Stop Smoking Service reports similar data
11	KPI Monitoring	Monthly
12	KPI Reporting Frequency	Quarterly in arrears
13	KPI Report Period	Quarterly in arrears
14	KPI Reporting Aggregation	National / CHO / Hospital Group
15	KPI is reported in which reports?	NSP / Management Data Report / Performance Profile / Operational Plan
16	Web link to data	http://www.hse.ie/eng/services/publications/performance-reports/
17	Additional Information	
	KPI owner/lead for implementation	Elaine Buckley, National Tobacco Cessation Co-ordinator
	PBI data support	Siobhán O'Brien, Data Analyst, Population Health & Wellbeing, National Business Information Unit - siobhan.obrien2@hse.ie
	Governance/sign off	Helen Deely, Assistant National Director, Health & Wellbeing

MECC

1	KPI Title	HWB94- No of frontline Staff to complete the eLearning Making Every Contact Count Training in brief intervention
1a	KPI Short Title	MECC online training module
2	KPI Description	A national Making Every Contact Count training programme is being rolled out to deliver brief intervention training to frontline healthcare staff. Frontline staff refers to those staff delivering services to patients/service users. It includes all grades of staff in the medical/dental, nursing, health and social care professionals and other patient & client care such as Health Care Assistants and Therapy Assistants with direct patient contact. Making Every Contact Count involves Health Professionals providing opportunistic advice, and support through a brief intervention, to make a lifestyle behaviour change in relation to the main lifestyle risk factors for chronic disease. It typically takes between 3 and 10 minutes. The blended learning training course is designed to develop skills in brief interventions for lifestyle behaviour change. The training programme will consist of 6 elearning modules 1) behaviour change module 2) tobacco 3) alcohol and substance use 4) healthy eating 5) physical activity 6) skills into practice and an additional Enhancing your Skills Masterclass delivered face to face in classroom style. This KPI is concerned with measuring the level of activity of the online elements of the training programme.
3	KPI Rationale	One of the key areas of focus of the Healthy Ireland Framework is chronic disease prevention. The Making Every Contact Count Implementation plan commits to training of frontline staff in brief interventions for lifestyle behaviour change in the four key lifestyle behaviours of tobacco use, alcohol and substance use, healthy eating and physical activity. Actions 13; 14; 15 of this framework are concerned with the training of health professionals. All healthcare staff have a role in promoting lifestyle behaviour change with their patients. Staff have previously been offered training in brief intervention for smoking cessation but minimal unco-ordinated training has been offered to staff in the areas of behavior change for the other lifestyle areas. It is essential that HSE staff are upskilled with the knowledge and skills necessary to support lifestyle behaviour change with their patients. This training aims to maximise the millions of contacts that frontline staff have with patients to support lifestyle changes as part of their routine care. The Making Every Contact Count Framework sets out in detail the actions that need to happen to integrate this into our health service. Specific training of frontline staff is essential to support chronic disease prevention and management and the successful implementation of the Making Every Contact Count Framework.
3a	Indicator Classification	National Scorecard Quadrant: Access and Integration
4	National Target	NSP 2021 Full Year Target 3,946 This is a cumulative calculation
4a	Target	3,946 which represents 5% of the eligible cohort of frontline staff to complete the e-learning modules of this training.
4b	Volume Metrics	
5	KPI Calculation	Count the number of frontline staff completing all of the 6 modules for the e-learning programme. Profile the number per month expected in each area targeted. Performance will be scored on the outcome:expected activity
6	Data Source	Data will be collected from all frontline staff when they register and complete the online training which is hosted on an external Learning Management System (Learnupon). Data will be reported quarterly from this Learning Management System.
6a	Data Sign Off	Marcella Ryan, Project Manager, MECC Programme
6b	Data Quality Issues	None known
7	Data Collection Frequency	Quarterly
8	Tracer Conditions	Frontline healthcare staff (coded as Medical/Dental/Nursing/Health and Social Care/Other patient and client care) providing frontline services to patients/serviceusers in hospitals and community settings who haven't previously undertaken the course.
9	Minimum Data Set MDS	No of staff who have accessed the course & no of staff who have completed the course. Number of frontline staff who have completed the elearning modules by CHO and Hospital group. Professional breakdown of staff by CHO/Hospital group completing the elearning programme.
10	International Comparison	No
11	KPI Monitoring	Quarterly
12	KPI Reporting Frequency	Quarterly
13	KPI Report Period	Quarterly
14	KPI Reporting Aggregation	National
15	KPI is reported in which reports?	Management Data Report / Annual Report
16	Web link to data	http://www.hse.ie/eng/services/publications/performance-reports/
17	Additional Information	None known
	KPI owner/lead for implementation	Helen Deely, Interim AND Health & Wellbeing, Strategy & Research
	PBI data support	Siobhán O'Brien, Data Analyst, Population Health & Wellbeing, National Business Information Unit - siobhan.obrien2@hse.ie
	Governance/sign off	Helen Deely, Assistant National Director, Health & Wellbeing

1	KPI Title	HWB95- No of frontline Staff to complete the Face to Face / Virtual Module of the Making Every Contact Count Training in brief intervention
1a	KPI Short Title	MECC Face to Face/Virtual masterclass
2	KPI Description	A national Making Every Contact Count training programme is being rolled out to deliver brief intervention training to frontline healthcare staff. Frontline staff refers to those staff delivering services to patients/service users. It includes all grades of staff in the medical/dental, nursing, health and social care professionals and other patient & client care such as Health Care Assistants and Therapy Assistants with direct patient contact. Making Every Contact Count involves Health Professionals providing opportunistic advice, and support through a brief intervention, to make a lifestyle behaviour change in relation to the main lifestyle risk factors for chronic disease. It typically takes between 3 and 10 minutes. The blended learning training course is designed to develop skills in brief interventions for lifestyle behaviour change. The training programme will consist of 6 elearning modules 1) Introduction to Behaviour change 2) tobacco Free 3) alcohol and drug use 4) healthy eating 5) physical activity 6) skills into practice and an additional face to face workshop called Enhancing your Brief Intervention Skills. This KPI is concerned with measuring the level of activity of the Face to Face elements of the training programme.
3	KPI Rationale	One of the key areas of focus of the Healthy Ireland Framework is chronic disease prevention. The Making Every Contact Count Implementation plan commits to training of frontline staff in brief interventions for lifestyle behaviour change in the four key lifestyle behaviours of tobacco use, alcohol and substance use, healthy eating and physical activity. Actions 13; 14; 15 of this framework are concerned with the training of health professionals. All healthcare staff have a role in promoting lifestyle behaviour change with their patients. Staff have previously been offered training in brief intervention for smoking cessation but minimal unco-ordinated training has been offered to staff in the areas of behavior change for the other lifestyle areas. It is essential that HSE staff are upskilled with the knowledge and skills necessary to support lifestyle behaviour change with their patients. This training aims to maximise the millions of contacts that frontline staff have with patients to support lifestyle changes as part of their routine care. The Making Every Contact Count Framework sets out in detail the actions that need to happen to integrate this into our health service. Specific training of frontline staff is essential to support chronic disease prevention and management and the successful implementation of the Making Every Contact Count Framework.
3a	Indicator Classification	National Scorecard Quadrant: Access & Integration
4	National Target	NSP 2021 Full Year Target 790. This is a cumulative target
4a	Target	20% of those completing the online modules will attend the face to face/virtual element of the training programme
4b	Volume Metrics	
5	KPI Calculation	Count the number of frontline staff completing the Face to Face/virtual masterclass. Profile the number per month expected in each area targeted. Performance will be scored on the outcome:expected activity
6	Data Source	Data will be collected from all frontline staff when they register and attend a masterclass which is hosted on an external Learning Management System (Learnupon). Data will be reported quarterly from this Learning Management System.
6a	Data Sign Off	Marcella Ryan, Project Manager, MECC Programme
6b	Data Quality Issues	None known
7	Data Collection Frequency	Quarterly
8	Tracer Conditions	Frontline healthcare staff (coded as Medical/Dental/Nursing/Health and Social Care/Other patient and client care) providing frontline services to patients/serviceusers in hospitals and community settings who haven't previously undertaken the course.
9	Minimum Data Set MDS	No of staff who have completed the masterclass. Number of frontline staff who have completed the masterclass by CHO and Hospital group. Professional breakdown of staff by CHO/Hospital group completing the masterclass.
10	International Comparison	No
11	KPI Monitoring	Quarterly
12	KPI Reporting Frequency	Quarterly
13	KPI Report Period	Quarterly
14	KPI Reporting Aggregation	National
15	KPI is reported in which reports?	Management Data Report / Annual Report
16	Web link to data	http://www.hse.ie/eng/services/publications/performance-reports/
17	Additional Information	None known
	KPI owner/lead for implementation	Helen Deely, Interim AND Health & Wellbeing, Strategy & Research
	PBI data support	Siobhán O'Brien, Data Analyst, Population Health & Wellbeing, National Business Information Unit - siobhan.obrien2@hse.ie
	Governance/sign off	Helen Deely, Assistant National Director, Health & Wellbeing