



Performance Profile July - September 2023



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**Note: Unavailable due to industrial action*

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

Corporate Updates

Emergency Management Update

The HSE Emergency Management (EM) function assists HSE leaders and managers at all levels across the health service to plan, prepare for, respond to and recover from major emergencies. These actions generate resilience and assist in developing service contingency around identified hazards that threaten disruption to the provision of Health Services. EM fulfils the HSEs statutory obligations as a Local Competent Authority for Seveso sites nationally and is a prescribed body under the Planning Act for any licensed crowd events.

HSE COVID-19 Response: HSE EM continues to support the HSE's response and management of COVID-19 both strategically and operationally. EM is working with the National Director of Test, Trace and Vaccinate providing input for the Covid-19 Emergency Plan. In particular EM are facilitating discussions across all state bodies through the GTF mechanisms. Regionally, the EM teams continue to work as part of the Area Crisis Management Teams (ACMTs), and Interagency Working and Steering groups in coordinating support from other state agencies both locally and regionally.

Ukraine Humanitarian Response: EM is represented on the HSE National Ukrainian Health Response Planning and Coordination Group. Regionally it is working with the Area Crisis management Teams and Interagency Working and Steering groups, in coordinating support from other state agencies both locally and regionally.

Regional Inter-Agency Response: EM participates in the Interagency Major Emergency Management (MEM) structures at the Regional Steering Groups (RSGs) and the Regional Working Groups (RWGs). HSE EM continues to support senior management teams in briefings and planning response arrangements. EM is also engaged with the regional community forums, in provision of health advice for those providing accommodation for arrivals of Ukrainian displaced persons.

SEVESO: Work is ongoing in cooperation with the two other Principle Response Agencies to review external emergency plans for Seveso sites. In 2023, there are 18 sites to be reviewed and exercised in accordance with "Chemical Act (Control of Major Accident Hazards involving dangerous substances) Regulations 2015".

HSE Severe Weather: HSE Severe Weather planning, preparedness, response and recovery continues across all EM regions. Nationally, EM lead on vertical and horizontal coordination of HSE planning for anticipated weather events in accordance with HSE guidance. Regional EM staff lead on the coordination of HSE Severe weather contingency planning with staff through the Area Crisis Management team forum. Summer Ready booklet and leaflet finalised.

Brexit: EM continues to support the work of the Brexit group. Due diligence assessments continue to be undertaken of processes and procedures for key areas such as Emergency Transport of essential medicines and medical equipment. Monthly meetings continue to assess and monitor the situation.

COVID-19 Excess Mortality: Local monitoring of mortality rates continue and any emerging system pressures that arise in the acute or community setting assessed. National EM staff continue to work collaboratively with the Acute Hospital division, Public Health staff and cross government and agency partners to plan for and determine mitigation measures. Regional inter-agency Mass Fatality Groups continue to be situationally aware.

Crowd Events: Engagement is ongoing whereby event organisers and local authorities are proposing crowd events within the regions - as per adherence to the planning act requirements. The event season is well underway and again this year there is an increase in the number of events that would have occurred pre COVID 19. The regional offices are monitoring these events to ensure that there is no impact on health services locally.

High Consequence Infectious Disease (HCID) Planning: High Consequence Infectious Disease Planning actively continues between Emergency Management and the HPSC Health Threats Preparedness programme in the form of a Steering Group, a Clinical Advisory Group and three work streams. The Viral Haemorrhagic Fever operational manual is currently being drafted. HCID exercises are being planned for Quarter 4, 2023 and Quarter 1, 2024. Planning also continues with International partners.

Hospital Major Emergency Plans: Work continues on pilot test of the Hospital Major Emergency Plan (HMEP) activation procedure as per the HMEP template with NEOC and Hospitals continues. Emergency Management organised and coordinated two Major Emergency Exercises, using the EMERGO training system. Both exercises were conducted in June for UL hospital group. These exercises focused on the development of response procedures. Members from the NAS SLT Control and tactical and operational staff took part.

Emergency Management training for NAS staff: A working group with EM and NAS West membership continues to progress a work programme for the delivery of EM training to NAS staff. Emergency Management organised and coordinated two Major Emergency Exercises, using the EMERGO training system. Both exercises were conducted in June for NAS. These exercises focused on the development of response procedures around the new NAS structure. Members from the NAS SLT Control and tactical and operational staff took part.

NEOC/Hospital Major Emergency Plan (HMEP): Activation Project: A draft NEOC /Hospital Activation Project Plan continues to be developed, some delays experienced. Engagement continues with a representative from OCIO to develop a practical guidance for managers in the event of another cyber-attack.

Mass Casualty Incident Framework: Work continues to progress the development of an integrated Mass Casualty Incident (MCI) Framework for the HSE. EM and Acute Operations are collaboratively working to establish a MCI steering group. A Memorandum has been submitted to the Executive Management Team which will establish a mandate for several cross services work streams.

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.

Wexford General Hospital: EM continues to support the recovery and restoration process of Wexford General Hospital post fire on site and subsequent hospital evacuation. Reviews and debriefs of individual services / functions re: HSE organisational response are ongoing.

Pandemic Planning Group: EM is represented on the Pandemic Planning Group. EM and internal stakeholders are collaboratively working to create an operationally focused Pandemic Plan for the HSE. This plan will outline clear operational actions and coordinating instructions, for implementation at each stage of pandemic response.

OCR Phase II: EM continues to work on the development of BCM policy and guidance documents as part of the approved Phase II of OCR

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

2023 Allocation / Expenditure Analysis - Capital							
	Total Allocation (Profile) for 2023	Cum Profile for Period Jan - Sept	Expenditure for Period Jan - Sept	Variance for Period Jan - Sept	Expenditure to Sept as % of Sept YTD Profile	Expenditure to Sept as % of Annual Profile	Variance to Sept as % of Sept YTD Profile
M02 - Buildings & Equipment -Non Covid19	642.050	304.924	261.155	43.768	85.65%	40.68%	14.35%
M04 - Buildings & Equipment - Covid19	50.000	23.947	15.228	8.719	63.59%	30.46%	36.41%
M02 - New Children's Hospital	324.950	223.523	113.095	110.428	50.60%	34.80%	49.40%
	1017.000	552.394	389.479	162.915	70.51%	38.30%	29.49%
M03 - Info Systems for Health Agencies	140.000	71.099	60.302	10.798	84.81%	43.07%	15.19%
	1157.000	623.493	449.780	173.713	72.14%	38.87%	27.86%
Asset Disposals	1.004	1.004	0.000	1.004	0.00%	0.00%	100.00%
Net	1158.004	624.497	449.780	174.717	72.02%	38.84%	27.98%

CONSTRUCTION – M02 - Building & Equipment – Non Covid19

The variance on general construction projects for the nine months to September 2023 is 14.35% (or € 43.768m) behind profile. In the period to the end of September the total expenditure of € 261.155m represents 40.68% of the total annual profile for 2023.

CONSTRUCTION – M04 - Building & Equipment – Covid19

The variance on Covid19 construction projects for the nine months to September 2023 is 36.41% (or € 8.719m) behind profile. In the period to the end of September the total expenditure of € 15.228m represents 30.46% of the total annual profile for 2023.

CONSTRUCTION – M02 - (National Children's Hospital)

The variance on the National Children's Hospital project for the nine months to September 2023 is 49.40% (or € 110.428m) behind profile. In the period to the end of September the total expenditure of € 113.095m represents 34.80% of the total annual profile for 2023.

Information Systems for Health Agencies - M03

The variance on ICT projects for the nine months to September 2023 is 15.19% (or € 10.798m) behind profile. In the period to the end of September the total expenditure of € 60.302m represents 43.07% of the total annual profile for 2023.

Asset Disposals:

Income from sale of assets in the nine months to September 2023 amounted to € 1.004m.

Procurement – expenditure (non-pay) under management

Service Area	Q1 2023	Q2 2023	Q3 2023
Acute Hospitals (Hospital groups)	293,881,381	303,705,131	313,909,569
Community Healthcare	48,928,879	60,504,096	704,392,618
National Services	2,088,085,774	1,964,923,343	1,817,442,958
Total	2,430,896,034	2,329,132,570	2,835,745,144

Implementation of Internal Audit Recommendations* @ Q3 2023

	75% Implemented or superseded within 6 months			95% Implemented or superseded within 12 months		
	Closed	Total	YTD	Closed	Total	YTD
Overall Total	856	1,215	70%	845	1,041	81%
CHO 1	28	44	64%	61	71	86%
CHO 2	42	49	86%	45	54	83%
CHO 3	23	27	85%	12	16	75%
CHO 4	35	61	57%	33	55	60%
CHO 5	26	43	60%	68	83	82%
CHO 6	33	49	67%	43	45	96%
CHO 7	156	180	87%	63	68	93%
CHO 8	83	99	84%	83	100	83%
CHO 9	112	127	88%	103	107	96%
National Director Community Ops	49	52	94%	55	62	89%
Total Community Services	587	731	80%	566	661	86%
Dublin Midlands Hospital Group	21	52	40%	7	14	50%
Ireland East Hospital Group	24	63	38%	17	34	50%
RCSI Hospital Group	36	53	68%	16	18	89%
Saolta Hospital Group	49	65	75%	51	66	77%
South South West Hospital Group	27	68	40%	31	55	56%
University of Limerick Hospital Group	22	24	92%	16	17	94%
National Ambulance Service	0	11	0%	15	22	68%
National Director Acute Ops	20	37	54%	16	29	55%
Total Acute	199	373	53%	169	255	66%

	75% Implemented or superseded within 6 months			95% Implemented or superseded within 12 months		
	Closed	Total	YTD	Closed	Total	YTD
Chief Executive Officer	4	6	67%	0	0	N/A
Chief Information Officer	0	0	N/A	8	8	100%
Chief Operations Officer	12	23	52%	19	24	79%
Compliance / QAV / Gov & Risk	6	6	100%	0	0	N/A
Estates	4	4	100%	4	9	44%
Finance	0	0	N/A	14	17	82%
HBS - Finance	33	57	58%	9	9	100%
Human Resources	11	15	73%	16	16	100%
Integrated Operations Planning	0	0	N/A	24	24	100%
PCRS	0	0	N/A	2	2	100%
Strategy & Research	0	0	N/A	14	16	88%
Total Corporate	70	111	63%	110	125	88%

*The target is to have at least 75% of internal audit recommendations implemented within 6 months of the audit report, and 95% within 12 months. The KPI results are calculated on a quarterly basis, with the reference periods being: 75% - recommendations issued in the quarter ended 6 months previously; 95% - recommendations issued in the quarter ended 12 months previously. The YTD result is the cumulative performance for the quarters YTD.

Performance Achievement September 2023 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

Four Hospital Groups did not respond

Community data caveats

Three CHO areas 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.

Delivery Area	Headcount Sep 2023	Total completed Q1	Total completed Q2	Total completed Q3	Total completed Q4	% completed YTD 2023
Total Health Service	162,042	4,280	4,185	2,423	0	6.7%
National Ambulance Service	2,334	9	0	0		0.3%
Children's Health Ireland	4,972	338	109	0		9.0%
Dublin Midlands Hospital Group	14,335	2	562	0		3.9%
Ireland East Hospital Group	17,073	800	387	205		8.2%
RCSI Hospital Groups	12,553	196	77	10		2.3%
Saolta University Hospital Group	13,285	238	122	86		3.4%
South/South West Hospital Group	15,310	93	53	120		1.7%
Other Acute Services	6,073	262	181	167		10.0%
Acute	156	17	17	7		26.3%
Services	86,091	1,954	1,508	595	0	4.7%

Delivery Area	Headcount Sep 2023	Total completed Q1	Total completed Q2	Total completed Q3	Total completed Q4	% completed YTD 2023
CHO 1	7,546	121	151	0		3.6%
CHO 2	7,057	25	19	0		0.6%
CHO 3	6,212	175	145	234		8.9%
CHO 4	10,886	327	609	425		12.5%
CHO 5	7,160	103	136	122		5.0%
CHO 6	4,283	128	188	12		7.7%
CHO 7	8,539	242	148	231		7.3%
CHO 8	8,034	76	48	54		2.2%
CHO 9	8,299	387	217	279		10.6%
Other Community Services	856	0	19	30		5.7%
Community Services	68,872	1,584	1,680	1,387	0	6.8%
National Services & Central Functions	7,079	742	997	441	0	30.8%

Cross-Service Domains

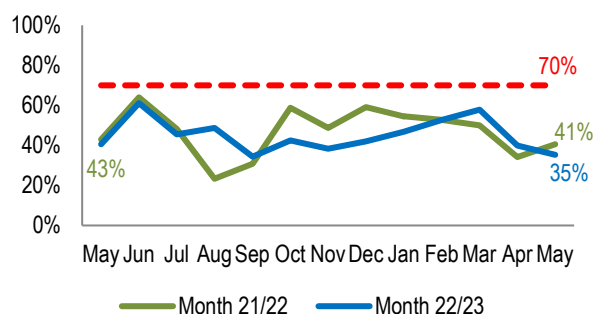
Quality and Safety

Performance area	Reporting Level	Target/ Expected Activity	Freq	Current Period12M/ 4Q	Current (-2)	Current (-1)	Current
Serious Incidents – Number of incidents reported as occurring (included: Category 1, who was involved=service user)	National		M	939	71	67	45
	Acute Hospital Services		M	566	35	39	31
	Community Services		M	373	36	28	14
% of reviews completed within 125 days of category 1 incidents from the date the service was notified of the incident*	National	70%	M	● 45%	58%	40%	35%
	Acute Hospital Services	70%	M	● 50%	65%	52%	44%
	Community Services	70%	M	● 26%	25%	9%	0%
% of reported incidents entered onto NIMS within 30 days of notification of the incident (reported @ July 2023)	National	70%	Q	● 75%	73%	76%	83%
	Acute Hospital Services	70%	Q	● 75%	74%	76%	81%
	Community Services	70%	Q	● 76%	71%	77%	85%
Extreme and major incidents as a % of all incidents reported as occurring **	National	<1%	Q	● 0.54%	0.53%	0.53%	0.48%
	Acute Hospital Services	<1%	Q	● 0.62%	0.61%	0.59%	0.53%
	Community Services	<1%	Q	● 0.45%	0.44%	0.46%	0.42%

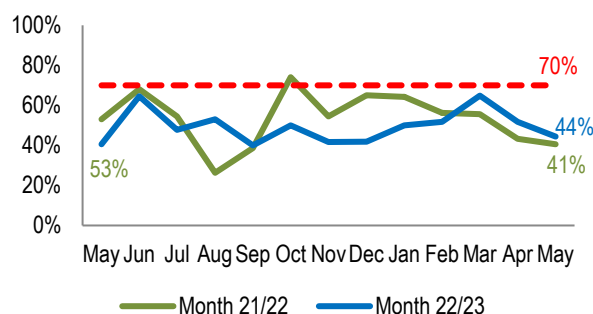
* Current - reflecting compliance for incidents notified in May 2023. Current 12M rolling period reflecting compliance June 2022 - May 2023.

** Current - reflecting compliance for incidents occurring in Q3 2023. Current 4Q rolling period reflecting compliance Q4 2022-Q3 2023

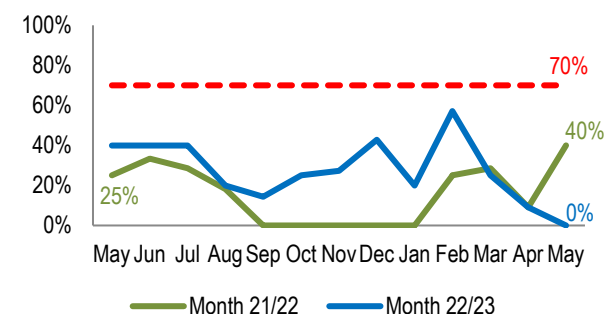
% of serious incidents requiring review completed within 125 days of notification of the incident - National



% 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) Sep 2023	Aug 2023	Jul 2023	Jun 2023	May 2023	Apr 2023	Mar 2023	Feb 2023	Jan 2023	Dec 2022	Nov 2022	Oct 2022
Acute Hospitals Services [inc. National Ambulance Service]	30	43	37	48	72	58	70	50	81	58	51	57
Community Services	10	24	18	26	18	18	19	20	18	32	18	17
Total*	40	67	55	74	90	76	89	70	99	90	69	74

*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.

40 SREs were reported as occurring in September 2023 and registered in NIMS up to 9th October 2023. 11 SREs were reported as patient falls, 16 were reported as Stage 3 or 4 pressure ulcers and the remaining 13 SREs reported comprised 6 SRE categories.

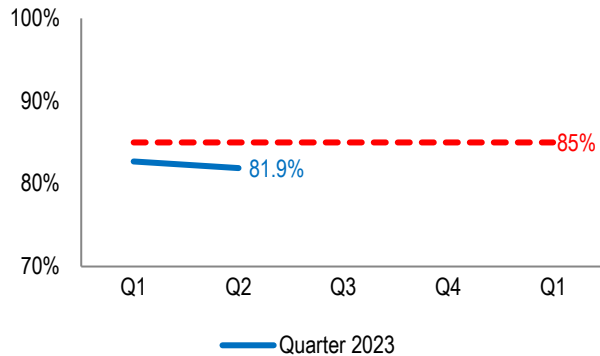
Your Service Your Say' Policy

Performance are	Reporting Level	Target/ Expected Activity	Freq	Current Period YTD	Current (-2)	Current (-1)	Current
% of complaints where an Action Plan is identified as necessary, is in place and progressing (New KPI)	National	65%	Q	● 87.9%		90.4%	85.3%
	Acute Hospital Services	65%	Q	● 88.3%		90.2%	86.3%
	Community Services	65%	Q	● 80%		95.2%	69%

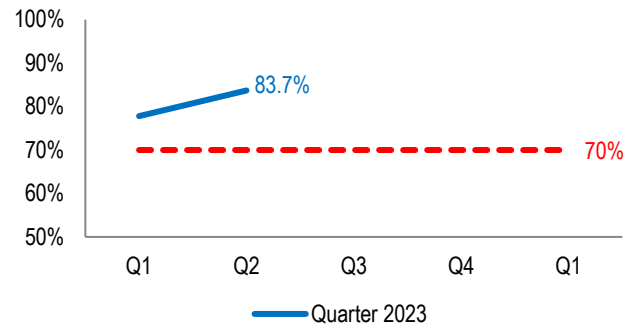
Safeguarding

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 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 (New KPI)	85%	Q-1M	●	81.9%			82.7%	81.9%	CHO1, 4, 6, 7 & 9 reached target	CHO3 (65.3%), CHO5 (66.4%), CHO2 (73.4%)
% 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 (New KPI)	70%	Q-1M	●	83.7%			77.8%	83.7%	CHO1, 2, 3, 5, 6, 7, 8 & 9 reached target	CHO4 (46.4%),

% 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

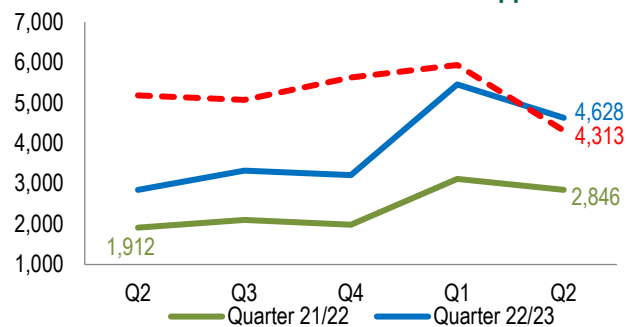


Enhancing Prevention and Early Intervention

Health and Wellbeing

Performance area	Target/ Expected Activity	Freq	Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current	Best performance	Outliers
Number of smokers who received intensive cessation support	10,248 YTD/ 18,849 FYT	Q-1Q	● 10,082	5,963	+4,119	3,209	5,454	4,628	(%Var) DM HG (261.1%), IE HG (84.6%), Nat Quitline (58.5%)	(%Var) SAOLTA HG (-77%), CHO6 (-41%), UL HG (-36.6%)
% of smokers on cessation programmes who were quit at four weeks	48%	Q-1Q	● 56.3%	48.1%	+8.2%	51.8%	56.6%	56%		

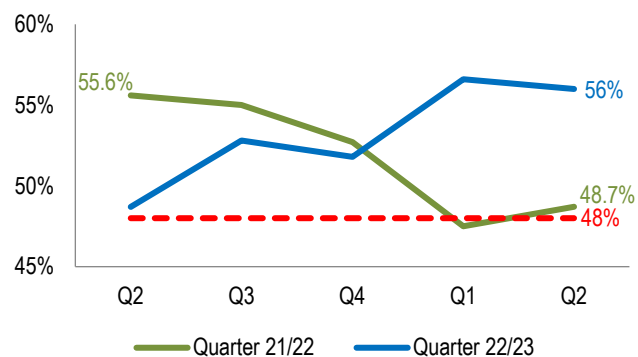
Tobacco smokers – intensive cessation support



Health and Wellbeing Update

Unavailable

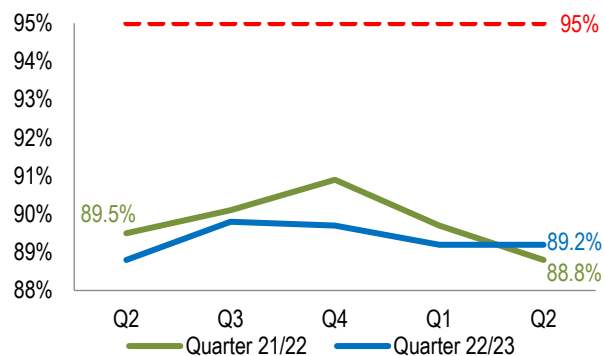
% of smokers quit at four weeks



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	95%	Q-1Q	● 89.2%	89.3%	-0.1%	89.7%	89.2%	89.2%	No CHO reached target	CHO1 (83.6%), CHO8 (84.8%), CHO9 (86.3%)
% of children aged 24 months who have received three doses of the 6 in 1 vaccine	95%	Q-1Q	● 92.4%	92.2%	+0.2%	93.3%	92.4%	92.4%	CHO7 (96.1%)	CHO8 (89.4%), CHO1 (90%), CHO9 (90.3%)

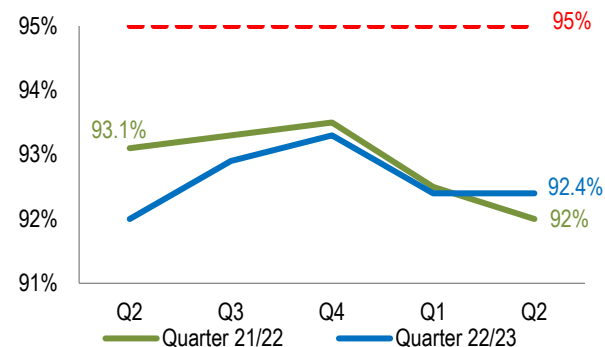
% of children 24 months – (MMR) vaccine



Public Health Update

Unavailable

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



COVID-19 Programme

Testing, Tracing and Vaccination Programme

Performance area	Target/ Expected Activity	Freq	Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current
COVID-19 Vaccination Programme – Uptake % uptake of booster doses for eligible adult population by approved cohorts:								
● * > 70 years	75%	M	● 46%	N/A	N/A	40%	40%	46%
● **Healthcare workers	>50%	M	● N/A	N/A	N/A	N/A	N/A	N/A
● *Immunocompromised > 5 Years	>50%	M	● 37%	N/A	N/A	31%	31%	37%
● * > 50 years in Long Term Residential Care Facilities (LTRCFs)	75%	M	● 62%	N/A	N/A	61%	61%	62%

Note: Reporting will be in line with cohorts as approved by NIAC in the context of public health recommendations.

* Data is based on administrations between 1st March and 30th of September

**This key performance indicator will be reported from 1st Oct 2023 onwards.

Vaccination Programme Summary

Covid-19 vaccination for the over 70s has commenced in Spring 2023 as a six week programme to 1st June 2023 (Extended to 18th June). Reporting will cease on the previous booster.

COVID-19 vaccine uptake for priority Health Care Workers.

Based on recent NIAC guidelines, HCWs will receive a Booster in autumn 2023.

In order to align with these recommendations the current reporting of KPI on Booster 2 will cease and this key performance indicator will be reported from Autumn 2023 onwards

COVID-19 vaccine uptake for immunocompromised >12 years.

Covid-19 vaccination for the immunocompromised has commenced in Spring 2023. This cohort has been expanded to include > 5 years and will be reflected in the target population. Reporting will cease on the previous booster.

COVID-19 vaccine uptake for over 50s in Long Term Residential Care facilities (LTRCFs).

Reporting has ceased on the previous booster and commenced on the over 50s in Long Term Residential Care facilities (LTRCFs).

Note: The COVID- 19 Test and Trace Key Performance Indicators have been stepped down due to the implementation of changes in national testing strategy in March 2023 The Key Performance Indicators will be reactivated as required in a surge/emergency response scenario.

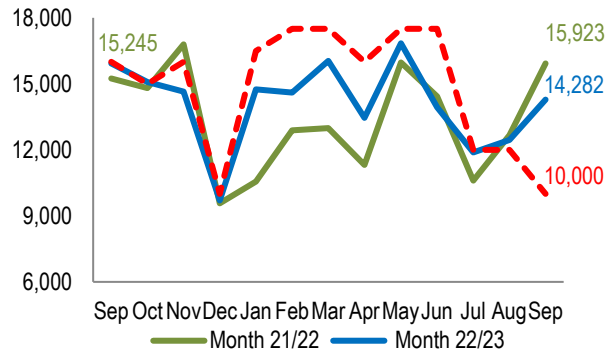
National Screening Service

		Reporting Frequency	Expected Activity / Target	National YTD	% Var YTD		Current (-2)	Current (-1)	Current
Quality & Safety	BreastCheck								
	% BreastCheck screening uptake rate	Q-1Q	70%	67.4% [G]	-3.7%		66.2%	74.4%	61.4%
Access and Integration	CervicalCheck								
	No. of unique women who have had one or more satisfactory cervical screening tests in a primary care setting	M	201,000	176,590 [R]	-12.1%		17,876	16,323	15,233

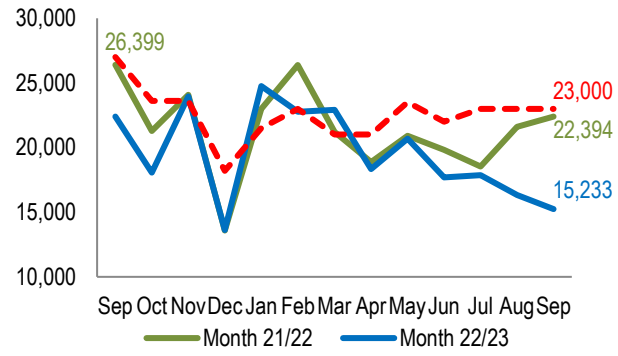
Note: Due to a 3 week process involved, the current month's provisional data and last month's actual data is available at the end of each month following the report period (29th/30th)

Performance area	Target/ Expected Activity	Freq		Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current
BreastCheck - number of eligible women who have had a complete mammogram	136,500 YTD/ 185,000 FYT	M	●	128,228	117,358	+10,870	11,886	12,455	14,282
BreastCheck - % screening uptake rate	70%	Q-1Q	●	67.4%	72.5%	-3.7%	66.2%	74.4%	61.4%
CervicalCheck -No. of unique women who have had one or more satisfactory cervical screening tests in a primary care setting	201,000 YTD/ 264,000 FYT	M	●	176,590	192,706	-16,116	17,876	16,323	15,233
Cervical Check - % eligible women with at least one satisfactory CervicalCheck screening in a five year period	80%	Q-1Q	●	73.5%	72.9%	+0.6%	73.1%	73.7%	73.2%
BowelScreen - number of clients who have completed a satisfactory FIT test	106,000 YTD/ 140,000 FYT	M	●	114,534	92,354	+22,180	9,278	11,807	11,426
BowelScreen - % uptake rate	45%	Q-1Q	●	50.1%	40.8%	+9.3%	38.7%	49.4%	51.1%
Diabetic RetinaScreen - number of clients screened with final grading result	78,800 YTD/ 110,000 FYT	M	●	88,908	84,990	+3,918	9,848	10,603	11,528
Diabetic RetinaScreen - % uptake rate	69%	Q-1Q	●	56.6%	56.2%	+0.4%	52.7%	55.9%	57.4%

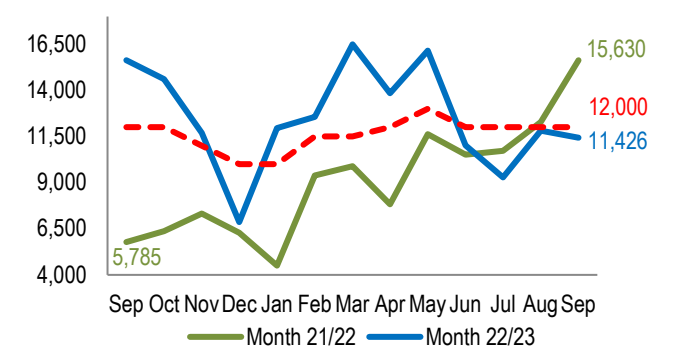
BreastCheck-number who had a mammogram



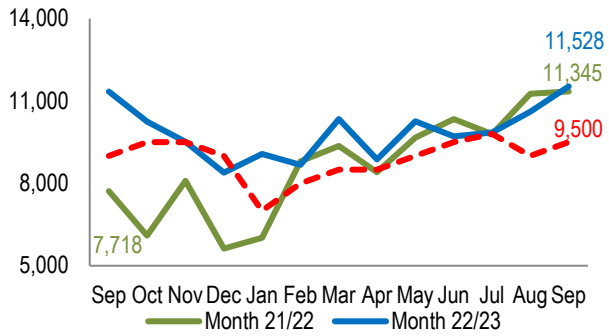
CervicalCheck-number screened



BowelScreen-number screened



RetinaScreen-number screened



National Screening Service Update

BreastCheck

- The number of women who had a complete mammogram in the period September 2023 was 14,282 against a target of 10,000 which is above the target by 4,282 (42.8%).
- The number of women who had a complete mammogram year to date (January-September 2023) was 128,228 against a target of 136,500 which is below the target by 8,272 (6.1%).
- Programme Uptake for Q2 was 61.4%
- The proportion of women offered surgery for breast cancer within 21 days of diagnosis was 59.5%
- The proportion of women offered an appointment for an assessment clinic within 2 weeks of an abnormal mammographic result was 54.4%

The invitations of Initial, Subsequent and DNA clients have been managed in an effort to optimise appointment uptake following the Covid-19 pandemic.

The shortages of Breast Radiologists and Radiographers are continuing to impact recovery to delayed invitations to the BreastCheck programme. Overcoming delays to invitations for BreastCheck screening is dependent on meeting the critical challenge of staff recruitment and retention. This remains the case and is not likely to change in the immediate future. This is an issue for Radiology/Radiography across the HSE. Increased Assessment Recall rates are contributing towards delays in issuing assessment clinic appointments. In some BreastCheck Units this is further exacerbated by reduced staffing across histopathology and surgery. This is impacting our ability to offer surgery within 21 days.

CervicalCheck

- The number of unique women who had one or more screening tests in a primary care setting in the period September 2023 notified to report date was 15,233 which is below the published target of 23,000 by 7,767 (33.8%)

- The number of unique women who had one or screening tests in a primary care setting year to date (January-September 2023) was 176,590 which is below the target of 201,000 by 24,410 (12.1%).
- Programme coverage for Q2 was 73.2% for 25-65 year olds
- Programme coverage for Q2 was 78.0% for 25-60 year olds
- In Q3 98.4% of women were issued their result within four weeks of a cervical 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. A national radio and print media campaign commenced in September to encourage women to check the register and book their test if it is overdue.

BowelScreen

- The number of men and women who have completed a satisfactory BowelScreen FIT test in the period (September 2023) was 11,426 which is below the target of 12,000 by 574 (4.8%).
- The number of men and women who have completed a satisfactory BowelScreen FIT test year to date (January-September 2023) was 114,534 which is above the target of 106,000 by 8,534 (8.1%).
- Programme Uptake for Q2 was 51.1%

Waiting times for a colonoscopy for those that have a FIT positive test was recorded and was below the $\geq 90\%$ target at 80% within 20 working days in September 2023. Six of the fifteen contracted colonoscopy centres which were offering colonoscopies in September 2023 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

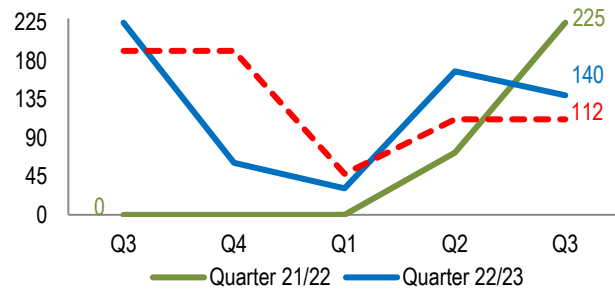
- The number of diabetics screened with a final grading result in the period September 2023 was 11,528 which is above the target of 9,500 by 2,028 clients (21.3%).
- The number of diabetics screened with a final grading result year to date (Jan-September 2023) was 88,908 which was above the target of 78,800 by 10,108 (12.8%).
- Programme Uptake for Q2 was 57.4%

The programme continues to invite participants for screening. The programme is introducing a systematic screening pathway for women with diabetes who become pregnant.

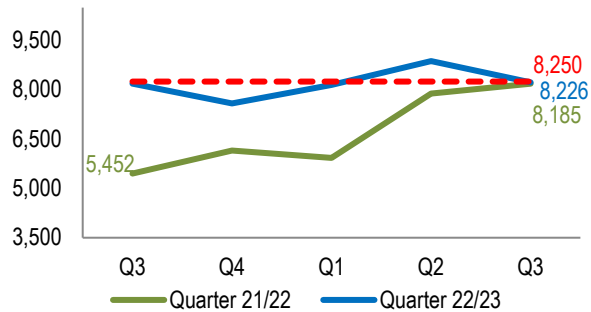
Environmental Health

Performance area	Target/ Expected Activity	Freq		Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current
Number of initial tobacco sales to minors test purchase inspections carried out	272 YTD/ 384 FYT	Q	●	339	298	+41	31	168	140
Number of official food control planned, and planned surveillance, inspections of food businesses	24,750 YTD/ 33,000 FYT	Q	●	25,248	22,002	+3,246	8,149	8,873	8,226

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 25,248 Planned and Planned Surveillance Inspections were carried out by the end of Q3. This equates to 100% of the Q3 target.

Of those Planned and Planned Surveillance inspections that were carried out, 20% 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 (NEHS) by the end of Q3. 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. 99% of all complaints received by the NEHS by the end of Q3 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 National 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 Q3, 1,750 drinking water samples were taken to assess compliance which is a 5% shortfall of the target. Non achievement of the target was likely to be part influenced by plants being offline and not fluoridating which is outside of the control of the HSE

37 Inspections of E Cigarette Manufactures, Importers, Distributers and Retailers under E.U. (Manufacturer, Presentation and Sale of Tobacco and related Products) Regulations were completed which is 100% of the Q3 target.

45 Sunbed Premises received a planned inspection in Q3. This equates to 96% of the target for Q3.

25 Test Purchase and 6 Mystery Shopping Inspections were completed in Q3 to assess compliance with the Sunbeds Act. This equates to 100% of the Test Purchase Inspections and 75% of the Mystery Shopping Inspections for this period. (Such test purchases normally carried out during the summer months when minors are available)

140 Test purchases of cigarettes were completed in Q3 which is 100% of the quarterly target. These are normally carried out during the summer months when minors are available.

Community Services Scorecard/Heatmap

Community Services Scorecard/Heatmap

	Reporting Frequency	Expected Activity / Target	National YTD	% Var YTD	CHO 1	CHO 2	CHO 3	CHO 4	CHO 5	CHO 6	CHO 7	CHO 8	CHO 9	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%	26% [R]	-63.9%											25%	9%	0%
	% of reported incidents entered onto NIMS within 30 days of notification of the incident (at July 2023)																
	Q	70%	76% [G]	8.6%											71%	77%	85%
	Extreme and major incidents as a % of all incidents reported as occurring																
	Q	<1%	0.45% [G]	-55%											0.44%	0.46%	0.42%
	Service User Experience (23.08.23)																
	Complaints investigated within 30 working days																
	Q	75%	71% [A]		61% [R]	64% [R]	68% [A]	100% [G]	75% [G]	100% [G]	83% [G]	40% [R]	80% [G]				
*Child Health																	
Child development assessment within 12 months																	
M-1M																	
% of infants visited within 72 Hours																	
Q																	
% of infants breastfed exclusively at three month PHN visit																	
Q-1Q																	
% of children aged 24 months who have received MMR vaccine																	
Q-1Q	95%	89.2% [A]	-6.1%	83.5% [R]	92.9% [G]	89.7% [A]	91.4% [G]	90.2% [A]	89.6% [A]	93% [G]	85.1% [R]	86.5% [A]	89.7%	89.2%	89.2%		
*CAMHs – Bed Days Used																	
% of bed days used																	
M																	
*Disability Services																	
Congregate Settings																	
M																	

		Reporting Frequency	Expected Activity / Target	National YTD	% Var YTD	CHO 1	CHO 2	CHO 3	CHO 4	CHO 5	CHO 6	CHO 7	CHO 8	CHO 9	Current (-2)	Current (-1)	Current
Access and Integration	Healthy Ireland																
	% of smokers on cessation programme who were quit at four weeks	Q-1Q	48%	56.3% [G]	17.4%										51.8%	56.6%	56%
	*Therapy Waiting Lists																
	Physiotherapy access within 52 weeks	M															
	Occupational Therapy access within 52 weeks	M															
	SLT access within 52 weeks	M															
	Podiatry treatment within 52 weeks	M															
	Ophthalmology treatment within 52 weeks	M															
	Audiology treatment within 52 weeks	M															
	Dietetics treatment within 52 weeks	M															
	Psychology treatment within 52 weeks	M															
	*Nursing																
	% of new patients accepted onto the nursing caseload and seen within 12 weeks	M-1M															
	*Mental Health																
	% of urgent referrals to CAMHS responded to within 3 working days	M															
% seen within 12 weeks by GAMHT	M																
% seen within 12 weeks by POLL Mental Health Teams	M																
*Disability Act Compliance																	
% of assessments completed within timelines	Q																

		Reporting Frequency	Expected Activity / Target	National YTD	% Var YTD	CHO 1	CHO 2	CHO 3	CHO 4	CHO 5	CHO 6	CHO 7	CHO 8	CHO 9	Current (-2)	Current (-1)	Current
Access and Integration	*Disability Emergency Supports																
	No. of new emergency places provided to people with a disability	M															
	No. of in home respite supports for emergency cases	M															
	Disability Respite Services																
	No. of day only respite sessions accessed by people with a disability	Q-1M	12,229	21,947 [G]	79.5%	4,671 [G]	4,339 [G]	1,087 [G]	826 [R]	2,073 [R]	678 [G]	174 [R]	2,672 [G]	5,427 [G]	8,376	9,537	12,410
	No. of people with a disability in receipt of respite services (ID / autism and physical and sensory disability)	Q-1M	5,758	5,803 [G]	0.8%	267 [R]	677 [R]	450 [R]	729 [G]	550 [G]	350 [R]	831 [G]	1,072 [G]	877 [G]	6,087	6,086	5,803
	No. of overnights (with or without day respite) accessed by people with a disability	Q-1M	64,705	76,994 [G]	19%	2,448 [R]	16,500 [G]	7,377 [G]	8,659 [G]	4,235 [R]	8,451 [G]	9,334 [G]	12,019 [G]	7,971 [G]	35,257	37,008	39,986
	*Home Support Hours																
	Number of hours provided	M															
	No. of people in receipt of home support	M															
	Delayed Transfers of Care																
	Number of beds subject to Delayed Transfers of Care	M	≤350	514 [R]	46.9%											510	501
*Homeless																	
% of service users assessed within two weeks of admission	Q																

		Reporting Frequency	Expected Activity / Target	National YTD	% Var YTD	CHO 1	CHO 2	CHO 3	CHO 4	CHO 5	CHO 6	CHO 7	CHO 8	CHO 9	Current (-2)	Current (-1)	Current	
	*Substance Misuse																	
	% of substance misusers (<18 years) - treatment commenced within one week	Q-1Q																
	% of substance misusers (> 18 years) - treatment commenced within one month	Q-1Q																
Finance, Governance & Compliance	*Financial Management – Expenditure variance from plan																	
	Net expenditure (pay + non-pay - income)	M																
	Pay expenditure variance from plan	M																
	Non-pay expenditure	M																
	Gross expenditure (pay and non-pay)	M																
	Service Arrangements (Q3 2023 at 26.09.23)																	
	% of monetary value signed	M	100%	60.15%	-39.85%											35.67%	56.87%	60.15%
Internal Audit																		
	% of recommendations implemented within 12 months	Q	95%	86% [A]	-9.5%										93%	85%	86%	
Workforce	Attendance Management																	
	% absence rates by staff category (non Covid)	M	≤4%	5.45% [R]	36.25%	7.1% [R]	3.91% [G]	6.03% [R]	5.39% [R]	6.45% [R]	4.58% [R]	5.43% [R]	5.76% [R]	4.84% [R]	5.39%	5.71%	5.54%	
	% absence rates by staff category (Covid)	M	NA	0.59%		0.69%	0.40%	0.56%	0.57%	0.69%	0.55%	0.68%	0.73%	0.45%	0.41%	0.8%	0.81%	

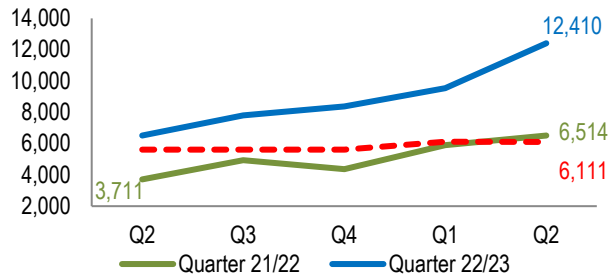
*Note: Unavailable due to industrial action

Disability Services

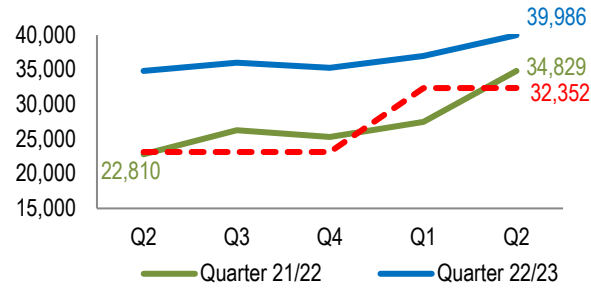
Disability Services (Q2 2023)

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	12,229 YTD/ 24,444 FYT	Q-1M	●	21,947	12,416	+9,531	8,376	9,537	12,410	(% Var): CHO9 (1420.2%), CHO8 (280.1%), CHO2 (72.5%)	(% Var): CHO7 (-68.1%), CHO4 (-13.3%), CHO5 (-11.2%)
Number of people with a disability in receipt of respite services (ID / autism and physical and sensory disability)	5,758 YTD/ 5,758 FYT	Q-1M	●	5,803	5,500	+303	6,087	5,885	5,803	(% Var): CHO8 (71.5%), CHO9 (47.6%), CHO5 (19.6%)	(% Var): CHO1 (-44.3%), CHO2 (-38.6%), CHO3 (-21.5%)
Respite – Number of overnights	64,705 YTD/ 129,396 FYT	Q-1M	●	76,994	62,308	+14,686	35,257	37,008	39,986	(% Var): CHO6 (99%), CHO8 (71.4%), CHO4 (24%)	(% Var): CHO1 (-32.5%), CHO5 (-13.4%)
Number of Home Support Hours delivered	1,560,006 YTD/ 3.12m FYT	Q-1M	●	1,741,307	1,576,908	+164,399	929,633	827,772	913,535	(% Var): CHO3 (107.5%), CHO2 (40.5%), CHO8 (35.4%)	(% Var): CHO7 (-12.8%), CHO5 (-9.8%), CHO6 (-8%)
Number of Personal Assistance Hours delivered	885,011 YTD/ 1.77m FYT	Q-1M	●	850,298	843,978	+6,320	422,209	432,015	418,283	(% Var): CHO6 (64.4%), CHO9 (20.6%), CHO5 (11.4%)	(% Var): CHO1 (-59.7%), CHO7 (-40.6%), CHO4 (-8.8%)

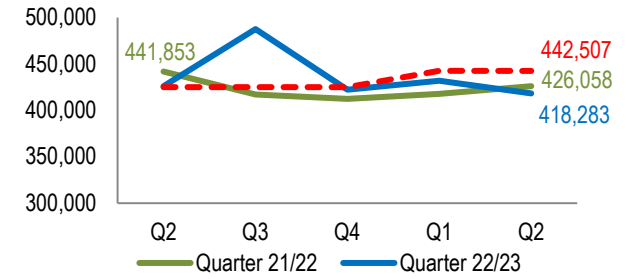
Respite: Day Only



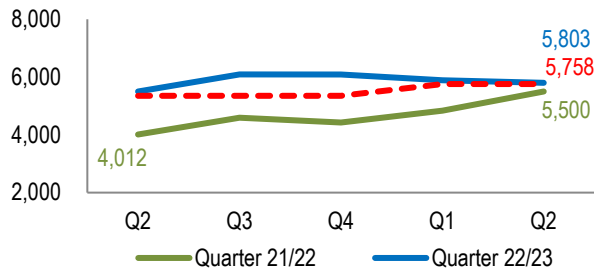
Respite: Overnights



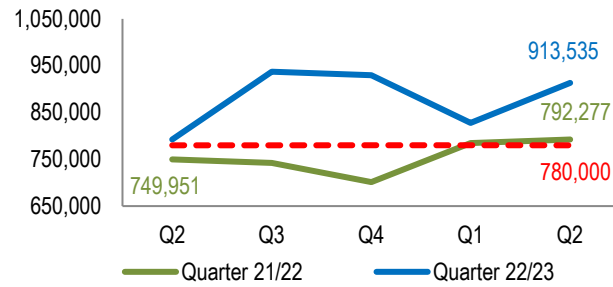
Personal Assistance Hours



Number of people with a disability in receipt of respite service



Home Support Hours



Acute Care Scorecard/Heatmap

Acute Care Scorecard/sap

		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%	50% [R]	-28.6%								65%	52%	44%	
	% of reported incidents entered onto NIMS within 30 days of notification of the incident (at July 2023)	Q	70%	75% [G]	7.1%								74%	76%	81%	
	Extreme and major incidents as a % of all incidents reported as occurring	Q	<1%	0.62% [G]	-38%								0.61%	0.59%	0.53%	
	Service User Experience (at 23.08.23)															
	Complaints investigated within 30 working days	Q	75%	70% [A]		76% [G]	80% [G]	75% [G]	82% [G]	33% [R]	40% [R]	55% [R]				
	HCAI Rates															
	Staph. Aureus (per 10,000 bed days)	M	<0.8	0.8 [G]	3.4%	0.7 [G]	1.1 [R]	0.8 [G]	0.7 [G]	0.7 [G]	0.7 [G]	1.0 [R]	0.9	0.8	1.2	
	C Difficile (per 10,000 bed days)	M	<2	2.1 [A]	6.1%	0.8 [G]	2.0 [G]	1.9 [G]	2.4 [R]	1.8 [G]	2.1 [G]	3.3 [R]	2.2	1.7	2.6	
	% of acute hospitals implementing the requirements for screening of patient with CPE guidelines	Q	100%	72.9% [R]	-27.1%	0% [R]	71.4% [R]	75% [R]	83.3% [R]	33.3% [R]	80% [R]	100% [G]	93.8%	95.8%	72.9%	
Surgery																
Hip fracture surgery within 48 hours of initial assessment	Q-1Q	85%	76.6% [A]	-9.9%		75.8% [R]	84% [G]	79% [A]	80.6% [A]	73.1% [R]	64.9% [R]	72.5%	76.7%	76.4%		
Surgical re-admissions within 30 days of discharge (site specific targets)	M-1M	≤2%	1.6% [G]	-18.4%		2.5% [R]	1.2% [G]	1.6% [G]	1.7% [G]	1.5% [G]	2.2% [A]	1.6%	1.7%	1.6%		
Procedure conducted on day of admission (DOSa) (site specific targets)	M-1M	82.4%	80% [G]	-2.9%		69.3% [A]	91.3% [G]	81.3% [G]	65% [R]	86.4% [G]	69.1% [R]	80.4%	80.8%	78.8%		

		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	Medical															
	Emergency re-admissions within 30 days of discharge	M-1M	≤11.1%	11.9% [A]	7.6%		11.9% [A]	11% [G]	10.9% [G]	12.5% [R]	12.4% [R]	13.6% [R]	12.1%	12.3%	12.4%	
	Urgent colonoscopy															
	Number waiting > 4 weeks (zero tolerance)	M	0	1,073 [R]		0 [G]	115 [R]	422 [R]	0 [G]	452 [R]	28 [R]	56 [R]	160	58	20	
Access and Integration	Routine Colonoscopy															
	% Waiting < 13 weeks following a referral for colonoscopy or OGD	M	65%	60.2% [A]	-7.4%	30.1% [R]	41.5% [R]	56.7% [R]	79.5% [G]	68.8% [G]	67.1% [G]	69.7% [G]	61.2%	58.0%	60.2%	
	Emergency Department Patient Experience Time															
	ED within 24 hours (Zero Tolerance)	M	97%	95.8% [R]	-1.3%	98.7% [G]	93.6% [R]	96.1% [R]	97.3% [G]	96% [R]	95.3% [R]	92.9% [R]	96.7%	96.5%	96.2%	
	75 years or older within 24 hours (Zero Tolerance)	M	99%	90.7% [R]	-8.4%		91% [R]	91.5% [R]	94% [R]	91.1% [R]	88.7% [R]	82.6% [R]	93%	92.9%	92.7%	
	ED within 6 hours	M	70%	56.9% [R]	-18.7%	78.1% [G]	50% [R]	64.3% [A]	48.4% [R]	51.1% [R]	57.9% [R]	54.4% [R]	56.9%	57.8%	58.5%	
	75 years or older within 6 hours	M	95%	36.3% [R]	-61.8%		33.6% [R]	49.6% [R]	27.9% [R]	29% [R]	35.9% [R]	34.4% [R]	37.6%	38%	37.3%	
	Waiting times															
	Adult waiting < 9 months (inpatient) New KPI	M	90%	68.5% [R]	-23.9%		62.8% [R]	72.6% [R]	71.5% [R]	56.6% [R]	72.1% [R]	93.8% [G]	68.2%	67.3%	68.5%	
	Adult waiting < 9 months (day case) New KPI	M	90%	78.2% [R]	-13.1%		75% [R]	79.2% [R]	85.8% [G]	75.5% [R]	74.9% [R]	88.8% [G]	77.3%	77.1%	78.2%	
Children waiting <9 months (inpatient) New KPI	M	90%	65% [R]	-27.8%	54.1% [R]	100% [G]	68.2% [R]	84.4% [A]	90.3% [G]	96.1% [G]	85.3% [A]	63.7%	64.8%	65%		
Children waiting < 9 months (day case) New KPI	M	90%	72.5% [R]	-19.5%	69.5% [R]	100% [G]	90.5% [G]	71.9% [R]	69.9% [R]	81.1% [A]	83.2% [A]	74.1%	73.2%	72.5%		
Outpatient waiting < 15 months New KPI	M	90%	84.1% [A]	-6.5%	81.7% [A]	85.4% [A]	84.1% [A]	98.3% [G]	77.8% [R]	79.2% [R]	90.6% [G]	83.5%	83.8%	84.1%		
Delayed Transfers of Care																
Number of beds subject to Delayed Transfers of Care (site specific targets) (Zero Tolerance)	M	≤350		514 [R]	46.9%	10	124	114	23	94	129	20	510	501	514	

		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															
	Rapid Access Breast (urgent), Lung and Prostate Clinics within recommended timeframe	M	95%	78.2% [R]	-17.7%		70.1% [R]	92.8% [G]	99.5% [G]	58.8% [R]	66% [R]	88.6% [A]	74.3%	71.1%	60.4%	
	Urgent Breast Cancer within 2 weeks	M	95%	76% [R]	-20%		58.9% [R]	91.1% [G]	99.9% [G]	51.5% [R]	67.4% [R]	96.7% [G]	69.9%	65.4%	52.7%	
	Non-urgent breast within 12 weeks	M	95%	70.4% [R]	-25.9%		97% [G]	54.5% [R]	99.6% [G]	55.1% [R]	65.4% [R]	99.6% [G]	69.8%	75.3%	73.6%	
	Lung Cancer within 10 working days	M	95%	83.3% [R]	-12.3%		99% [G]	98.7% [G]	96.7% [G]	67.3% [R]	66.4% [R]	63.6% [R]	86.5%	85.9%	91.7%	
	Prostate Cancer within 20 working days	M	90%	84.5% [A]	-6.1%		97.1% [G]	98.3% [G]	99.2% [G]	92.5% [G]	61.6% [R]	76.8% [R]	84.8%	84.2%	85.5%	
	Radiotherapy treatment within 15 working days	M	90%	64.3% [R]	-28.5%		48.8% [R]			74.6% [R]	78.4% [R]	87.8% [G]	65.7%	61.1%	78.7%	
	Ambulance Response Times															
	ECHO within 18 minutes, 59 seconds	M	75%	72.6% [G]	-3.2%									71.3%	71.1%	67.4%
Delta within 18 minutes, 59 seconds	M	45%	44.2% [G]	-1.7%									43.8%	42.7%	45.1%	
Finance, Governance & Compliance	*Financial Management – Expenditure variance from plan															
	Net expenditure (pay + non-pay - income)	M														
	Pay expenditure variance from plan	M														
	Non-pay expenditure	M														
	Gross expenditure (pay and non-pay)	M														
	Service Arrangements (Q3 2023 at 26.09.23)															
	% of monetary value signed	M	100%	0%	-100%									0%	0%	0%
Internal Audit																
% of recommendations implemented within 12 months	Q	95%	66% [R]	-30.5%									83%	75%	66%	

		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	
Workforce	Attendance Management															
	% absence rates by staff category (Non Covid)	M	≤4%	4.83% [R]	20.75%	4.02% [A]	4.88% [R]	4.4% [R]	4.72% [R]	4.97% [R]	4.67% [R]	6.41% [R]	4.81%	4.97%	4.86%	
	% absence rates by staff category (Covid)	M	NA	0.54%		0.76%	0.67%	0.43%	0.47%	0.58%	0.44%	0.72%	0.36%	0.77%	0.72%	

*Note: Unavailable due to industrial action

Acute Care

Acute Hospital Services

Overview of Key Acute Hospital Activity

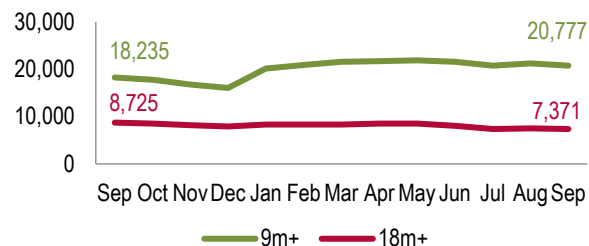
Activity Area	Expected Activity YTD	Current Period YTD	% Var YTD	SPLY YTD	SPLY % Var	Current (-2)	Current (-1)	Current
Emergency Presentations	1,246,480	1,193,685	-4.2%	1,227,412	-2.7%	139,170	141,735	78,036
New ED Attendances	1,010,406	958,566	-5.1%	999,508	-4.1%	111,834	113,451	65,149
OPD Attendances	2,566,065	2,648,564	3.2%	2,556,394	3.6%	289,302	314,499	237,277

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	421,028	429,890	2.1%	398,394	7.9%	54,898	54,324	55,278
Inpatient weight units	425,400	426,564	0.3%	411,724	3.6%	54,506	50,714	52,871
Day case (includes dialysis)	750,102	791,731	5.5%	728,736	8.6%	100,553	97,650	102,530
Day case weight units (includes dialysis)	731,332	786,363	7.5%	723,175	8.7%	100,088	95,623	99,441
IP & DC Discharges	1,171,130	1,221,621	4.3%	1,127,130	8.4%	155,451	151,974	157,808
% IP	36.0%	35.2%	-2.1%	35.3%	-0.4%	35.3%	35.7%	35.0%
% DC	64.0%	64.8%	1.2%	64.7%	0.2%	64.7%	64.3%	65.0%
Emergency IP discharges	302,285	307,056	1.6%	283,517	8.3%	38,884	38,381	39,490
Elective IP discharges	55,056	57,824	5%	49,744	16.2%	7,754	7,486	7,744
Maternity IP discharges	63,687	65,010	2.1%	65,133	-0.2%	8,260	8,457	8,044
Inpatient discharges >75 years	91,457	96,080	5.1%	85,890	11.9%	12,489	11,832	12,563
Day case discharges >75 years	154,309	158,653	2.8%	148,874	6.6%	20,294	19,736	20,756

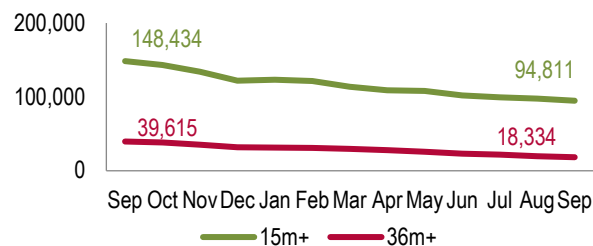
Inpatient, Day case and Outpatient Waiting Lists

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 (New KPI)	90%	M	● 68.5%	67.5%	+1%	68.2%	67.3%	68.5%	15 out of 37 hospitals reached target	SLK (21.4%), Portlaoise (42.1%), SJH (51.7%)
Day case adult waiting list within 9 months (New KPI)	90%	M	● 78.2%	77.7%	+0.5%	77.3%	77.1%	78.2%	20 out of 42 hospitals reached target	Bantry (58.9%), CUH (64.9%), SJH (67.4%)
Inpatient children waiting list within 9 months (New KPI)	90%	M	● 65%	62.1%	+2.9%	63.7%	64.8%	65%	9 out of 17 hospitals reached target	CHI (54.1%), Cappagh (62.3%), Beaumont (74.1%)
Day case children waiting list within 9 months (New KPI)	90%	M	● 72.5%	75.1%	-2.6%	74.1%	73.2%	72.5%	14 out of 25 hospitals reached target	Beaumont (50%), LUH (60.7%), GUH (63.4%)
Outpatient waiting list within 15 months (New KPI)	90%	M	● 84.1%	76.3%	+7.8%	83.5%	83.8%	84.1%	24 out of 44 hospitals reached target	St Columcille's (51.2%), RVEEH (72.2%), SIVUH (72.8%)

Inpatient & Day Case Waiting List



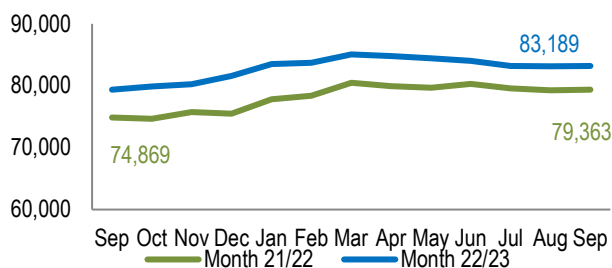
Outpatient Waiting List



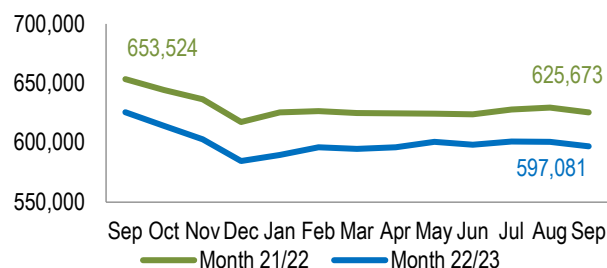
Waiting List Numbers

	Total	Total SPLY	SPLY Change	>9 Mths	>15 Mths
Adult IP	18,413	18,733	-320	5,799	3,369
Adult DC	55,074	53,134	1,940	12,014	5,380
Adult IPDC	73,487	71,867	1,620	17,813	8,749
Child IP	3,934	3,392	542	1,377	786
Child DC	5,768	4,104	1,664	1,587	664
Child IPDC	9,702	7,496	2,206	2,964	1,450
OPD	597,081	625,673	-28,592	180,753	94,811

Total No. on Inpatient & Day Case Waiting List¹



Total No. on Outpatient Waiting List¹

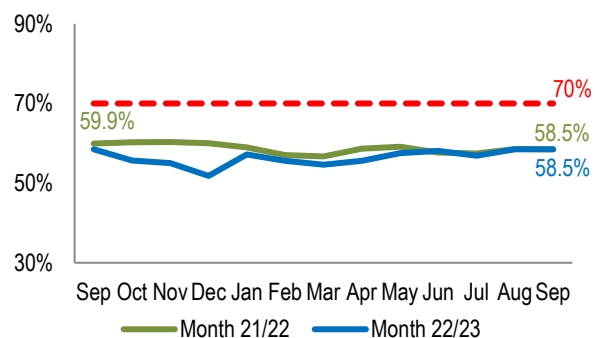


¹ Waiting list data not available May to July 21 due to cyber-attack

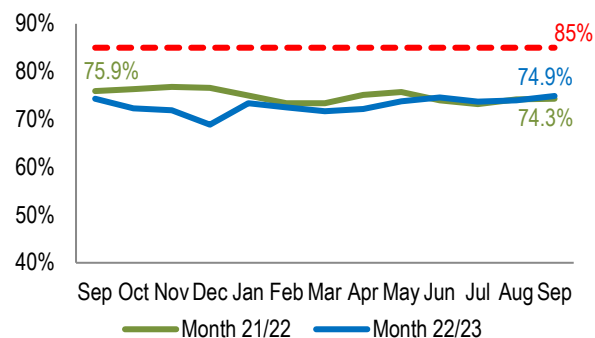
ED Performance

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	70%	M	● 56.9%	58.2%	-1.3%	56.9%	57.8%	58.5%	5 out of 28 hospitals	Naas (36.5%), Tallaght - Adults (38.3%), Beaumont (40.2%),
% 75 years+ admitted or discharged within 6 hours	95%	M	● 36.3%	36.9%	-0.6%	37.6%	38%	37.3%	St Michaels (86.8%), SLK (61.7%), Tullamore (51.6%)	LUH (18.8%), Naas (24.6%), Tallaght - Adults (26.6%),
% admitted or discharged within 9 hours	85%	M	● 73.5%	74.3%	-0.8%	73.7%	74.2%	74.9%	5 out of 28	Naas (51%), Tallaght - Adults (52.3%), Beaumont (61.7%)
% 75 years+ admitted or discharged within 9 hours	99%	M	● 54.3%	53.8%	0.5%	56.8%	56.2%	55.4%	St Michaels (98.8%), Tullamore (78.7%), SLK (78.1%)	Naas (34.5%), LUH (36.9%), Tallaght - Adults (41.7%),
% in ED admitted or discharged within 24 hours	97%	M	● 95.8%	95.9%	-0.1%	96.7%	96.5%	96.2%	14 out of 28 hospitals	Tallaght - Adults (89.8%), Naas, Mercy (90.9%),
% 75 years+ admitted or discharged within 24 hours	99%	M	● 90.7%	90%	0.7%	93%	92.9%	92.7%	8 out of 27 hospitals	CUH (79%), UHK (83.4%), Naas (84.1%),

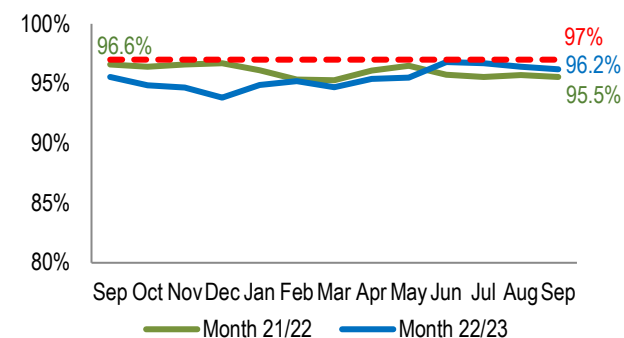
% admitted or discharged within 6 hours



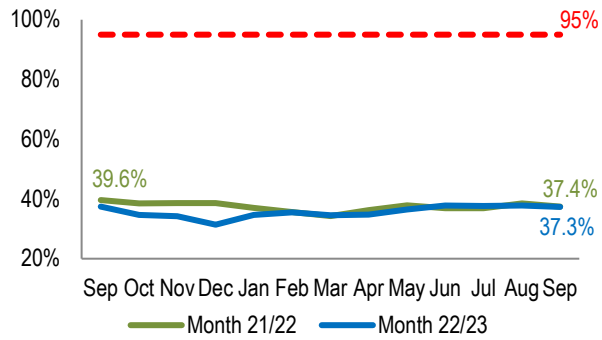
% admitted or discharged within 9 hours



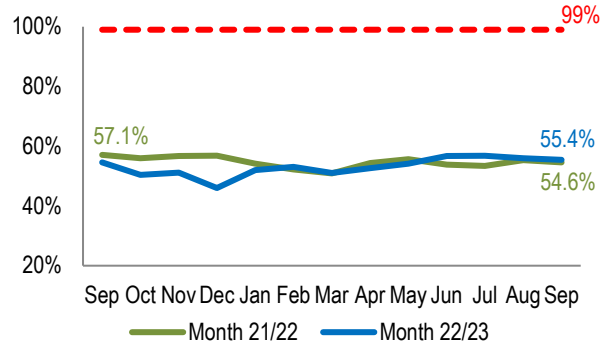
% in ED admitted or discharged within 24 hours



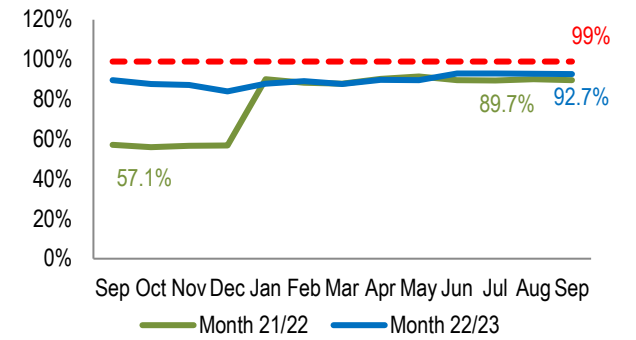
% 75 years+ admitted or discharged within 6 hours



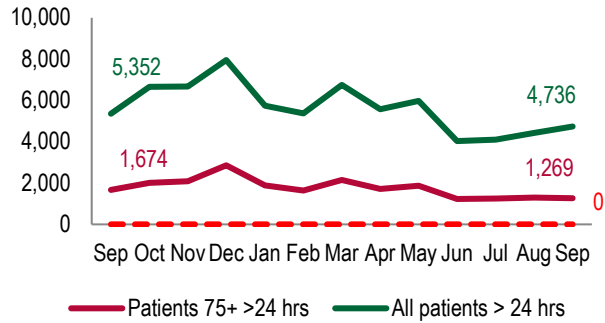
% 75years+ admitted or discharged within 9 hours



% 75 years+ admitted or discharged within 24 hours



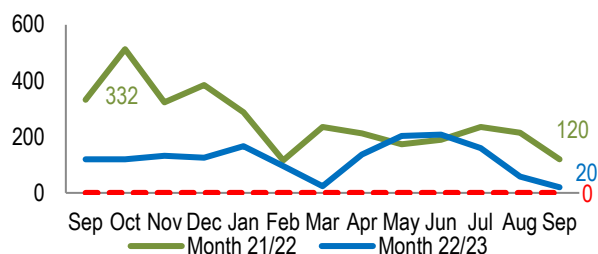
Number in ED waiting over 24 hours



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	0	M	● 1,073	1,799	-726	160	58	20	34 out of 38 have 0	Portlaoise (8), St Columcille's, Mullingar (5)
Bowelscreen – no. colonoscopies scheduled > 20 working days		M	● 623	286	+337	48	33	53	10 out of 15 hospitals	SVUH (13), Wexford, SJH (10)
Colonoscopy and OGD <13 weeks	65%	M	● 60.2%	53.2%	+7%	61.2%	58%	60.2%	21 out of 37 hospitals	Tallaght - Adults (29.4%), CHI (30.1%), St Michael's (35.9%)
% of people waiting < 9 months for an elective procedure GI scope New KPI	95%	M	● 93.4%	91.3%	+2.1%	94.2%	93.7%	93.4%	28 out of 37 hospitals	Portlaoise (67.9%), CHI (74.3%), Tallaght - Adults (75.5%)

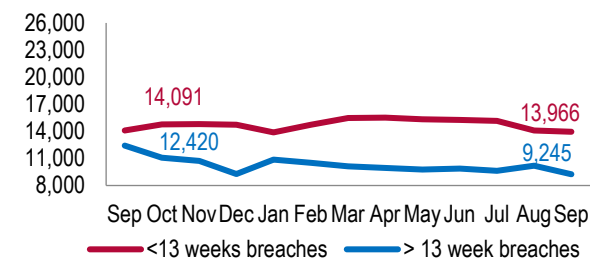
Urgent Colonoscopy – No. of new people waiting



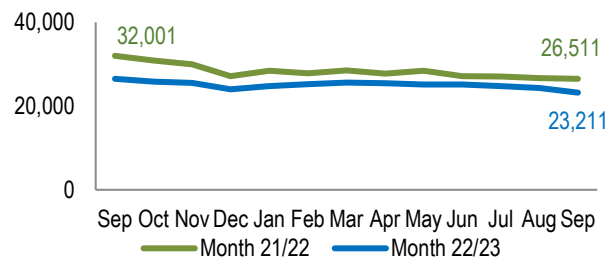
BowelScreen: Urgent Colonoscopies

	Current (-2)	Current (-1)	Current
Number deemed suitable for colonoscopy	259	300	268
Number scheduled over 20 working days	48	33	53

No. on waiting list for Colonoscopy and OGD



Total No. on waiting list for Colonoscopy and OGD²

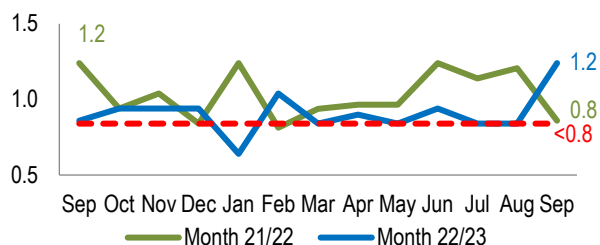


² Waiting list data not available May to July 21 due to cyber attack

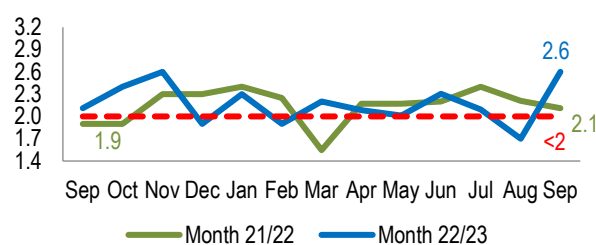
HCAI Performance

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 Staph. Aureus infection	<0.8	M	● 0.8	1.0	-0.2	0.9	0.8	1.2	20 out of 28 hospitals	RUH (5.6), MMUH (2.6), Beaumont (2.5)
Rate of new cases of C Difficile infection	<2	M	● 2.1	2.1	0.0	2.2	1.7	2.6	16 out of 28 hospitals	Ennis (5.7), Beaumont (5.5), Naas (4.6)
% of hospitals implementing the requirements for screening with CPE Guidelines	100%	Q	● 72.9%	79.2%	-6.3%	93.8%	95.8%	72.9%	35 out of 48 hospitals achieved target	13 hospitals didn't submit data.

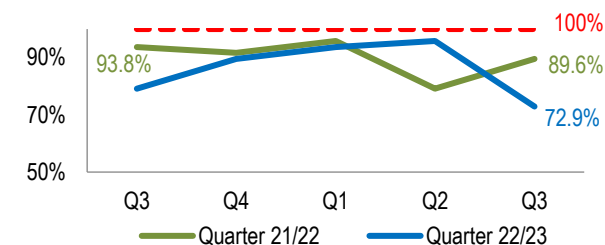
Rate of Staph. Aureus bloodstream infections



Rate of new cases of C Difficile associated diarrhoea



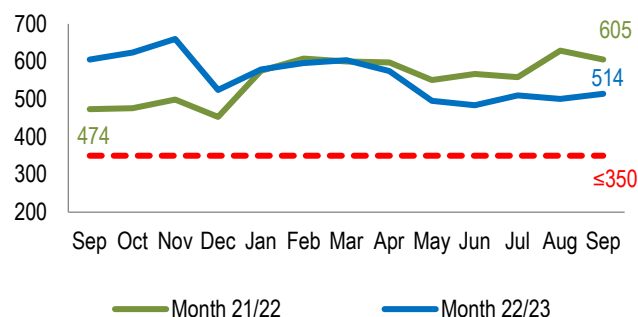
Requirements for screening with CPE Guidelines



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	≤350	M	● 514	605	-91	510	501	514	SLRON, Mallow (0)	SJH (64), CUH (58), SVUH (46)

Delayed Transfers of Care



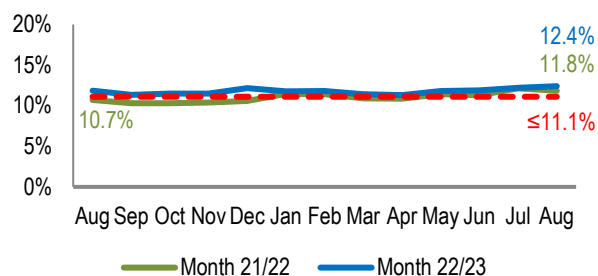
Delayed Transfers of Care by Category

	Over 65	Under 65	Total	Total %
Home	50	15	65	12.6%
Residential Care	198	29	227	44.2%
Rehab	37	17	54	10.5%
Complex Needs	22	18	40	7.8%
Housing/Homeless	10	25	35	6.8%
Legal complexity	67	10	77	15%
Non compliance	11	2	13	2.5%
COVID-19	2	1	3	0.6%
Total	397	117	514	100%

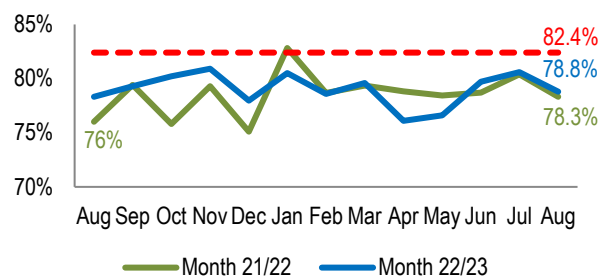
Surgery and Medical Performance

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	≤11.1%	M-1M	● 11.9%	11.4%	+0.5%	12.1%	12.3%	12.4%	10 out of 34 hospitals	Ennis (23.6%), Nenagh (19.2%), Cavan (16.6%)
Procedure conducted on day of admission (DOSA)	82.4%	M-1M	● 80%	79.3%	+0.7%	80.4%	80.8%	78.8%	26 out of 35 hospitals	Croom (40.4%), SJH (40.6%), MUH (70.3%)
Laparoscopic Cholecystectomy day case rate	60%	M-1M	● 49.3%	46.9%	+2.4%	49.3%	52.7%	48.2%	12 out of 31 hospitals	6 out of 31 hospitals (0%)
Surgical re-admissions within 30 days of discharge	≤2%	M-1M	● 1.6%	1.7%	-0.1%	1.6%	1.7%	1.6%	30 out of 40 hospitals	Croom (2%), SIVUH (0.7%), UHL (3.9%)

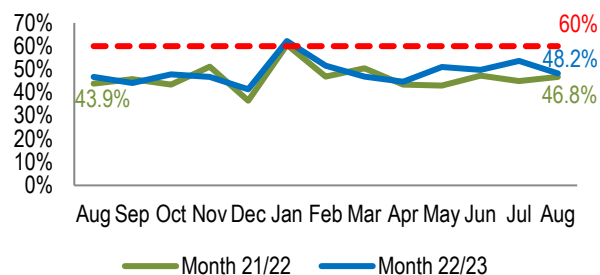
Emergency re-admissions within 30 days



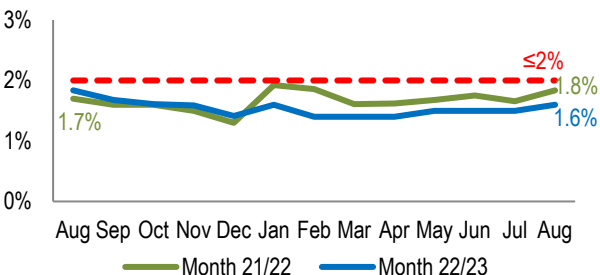
Procedure conducted on day of admissions



Laparoscopic Cholecystectomy day case rate



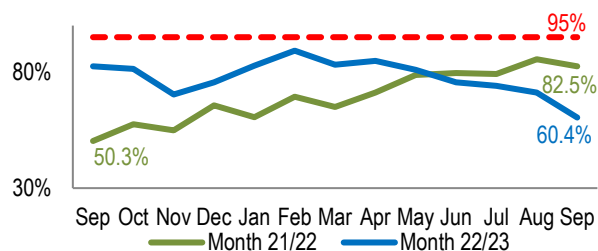
Surgical re-admissions within 30 days



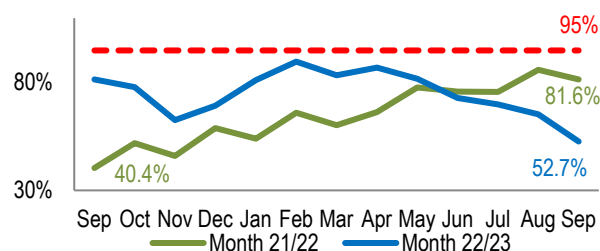
Cancer Services

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 and Prostate Clinics within recommended timeframe	95%	M	●	78.2%	74.6%	+3.6%	74.3%	71.1%	60.4%	3 out of 9 hospitals reached the target	GUH (10.3%), CUH (36%), SJH (51%)
Urgent breast cancer within 2 weeks	95%	M	●	76%	71.2%	+4.8%	69.9%	65.4%	52.7%	4 out of 8 hospitals reached the target	GUH (10.3%), CUH (24.7%), SJH (36.5%)
Non-urgent breast within 12 weeks	95%	M	●	70.4%	49.1%	+21.3%	69.8%	75.3%	73.6%	4 out of 8 hospitals reached the target	SVUH (22%), CUH (31.8%), LUH (65.4%)
Lung Cancer within 10 working days	95%	M	●	83.3%	89.1%	-5.8%	86.5%	85.9%	91.7%	SJH, MMUH, SVUH (100%)	UHW (63.3%), CUH (87.2%), Beaumont (88.9%)
Prostate cancer within 20 working days	90%	M	●	84.5%	79.6%	+4.9%	84.8%	84.2%	85.5%	5 out of 8 hospitals reached the target	CUH (50%), UHL (75%)
Radiotherapy within 15 working days	90%	M	●	64.3%	72.1%	-7.8%	65.7%	61.1%	78.7%	UHW (94.1%)	CUH (69.3%), UHL (80.5%), GUH (83.1%)

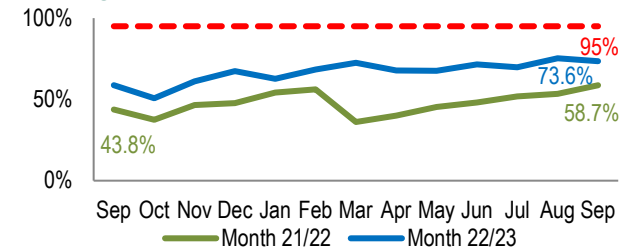
Rapid Access within recommended timeframe



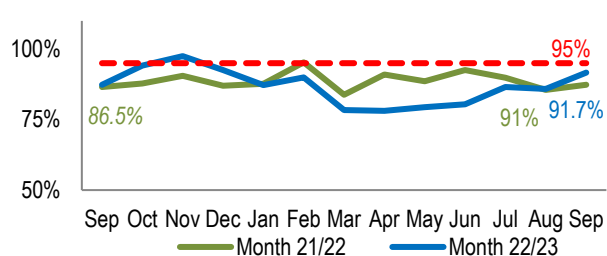
Breast Cancer within 2 weeks



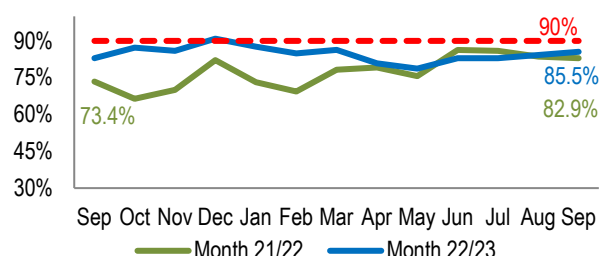
Non-urgent breast within 12 weeks



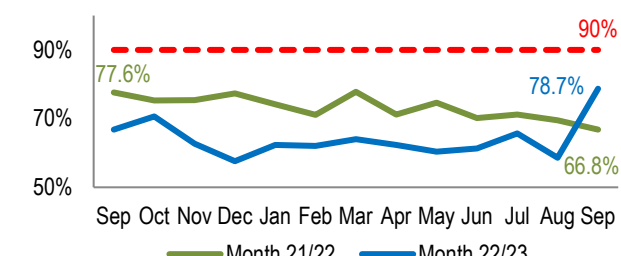
Lung Cancer within 10 working days



Prostate Cancer within 20 working days



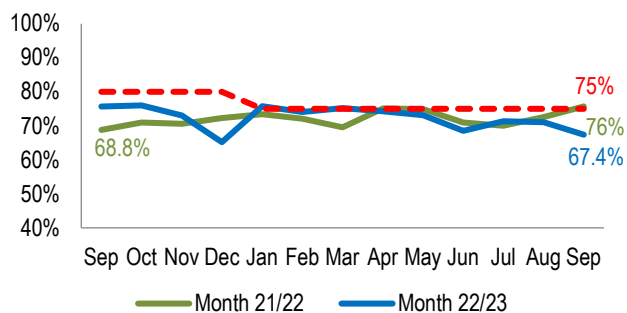
Radiotherapy within 15 working days



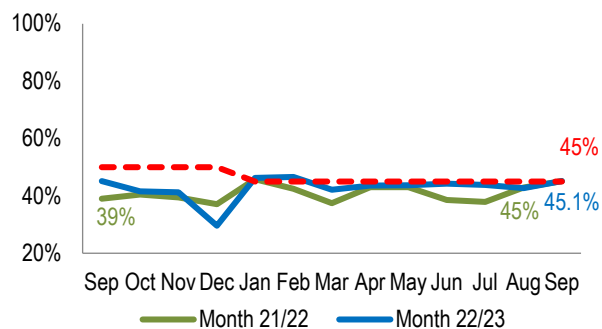
National Ambulance Service

Performance area	Target/ Expected Activity	Freq	Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current	Best performance	Outliers
Response Times – ECHO - excludes DFB data from June 2023	75%	M	● 72.6%	72.7%	-0.1%	71.3%	71.1%	67.4%		North Leinster (72.4%), South (65.8%), West (62.1%)
Response Times – DELTA - excludes DFB data from June 2023	45%	M	● 44.2%	41.8%	2.4%	43.8%	42.7%	45.1%	North Leinster (47.2%)	West (46.8%) South (40.3%)
Return of spontaneous circulation (ROSC)	40%	Q	● 40.3%	39.6%	0.7%	38.8%	38.6%	43.9%		

Response Times – ECHO



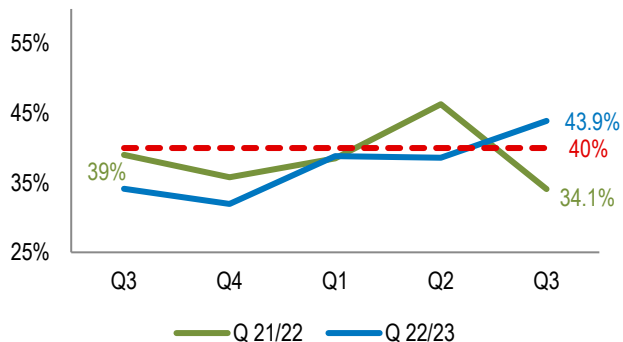
Response Times – DELTA



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

	Target/ Expected Activity	Current Period YTD	% Var YTD	SPLY YTD	SPLY change
ECHO	5,085	4,303	-15.4%	4,814	-511
DELTA	121,635	105,917	-12.9%	114,479	-8,562

ROSC



Acute Care Update

Note; Data from a number of sites is missing due to work-to-rule industrial action

Data missing due to Industrial Action

Emergency Care - All Emergency Presentations

New ED Attendances

Return ED Attendances

Outpatient Attendances (New + Return)

Cancer

Emergency Care

***All Emergency Presentations:** The total number of Emergency presentations (including Local injury units) for September 2023 was **78,036**

***Emergency Department (ED) attendances:** The total number of ED attendances for September 2023 was **70,309**

*Outpatient Department Attendances

The number of new and return outpatient attendances was 237,277 in September 2023

Patient Experience Time (PET): 96.2% of all patients attending ED were seen within 24 hours in September 2023 which is below the NSP target of 97%. This compares with **95.9%** in September 2022.

ED PET less than 24 hours for patients aged 75+: was **92.7%** in September 2023, this is below the NSP target of 99%. This compares with **90%** in September 2022.

Inpatient/Day Case Discharges (data is one month in arrears)

Inpatient Discharges

There were **55,278** inpatient discharges in August 2023 which is an increase of **6.3%** on the same period in August 2022 (**52,000**)

Day Case Discharges (including dialysis) (data is one month in arrears)

There were **102,530** Day Case discharges in August 2023 which is an increase of **5.86%** when compared to the same period August 2022 (**96,849**).

Elective Inpatient Discharges*Note: The following data excludes activity at the three Dublin Maternity Hospitals.This issue is currently being addressed by the HPO* (**data is one month in arrears**)

- There were **7,527** elective inpatient discharges in August 2023 which is a **9.86%** increase when compared with the same period in August 2022 (**6,851**).

Emergency Inpatient Discharges (data is one month in arrears)

- There were **39,490** emergency inpatient discharges in August 2023 which is a **6.74%** increase on August 2022 (**36,995**).

Maternity Inpatient Discharges (data is one month in arrears)

There were **8,044** maternity patient discharges in August 2023 which is an increase of **1.36%** on August 2022 (**7,936**).

Delayed Transfers of Care (DTC)

There was 514 Delayed Transfers of Care at the end of September 2023 which is a **-15.04%** decrease from the number of DTCs in September 2022 (**605**).

Elective Access

Inpatient and Day Case Waiting Lists

At the end of September 2023, the number of people waiting for an inpatient or day case appointment (IPDC) was **83,189** which represents a decrease of **103 (-0.12%)** on the previous month (August 2023) (**83,292**).

Colonoscopy/OGD Waiting lists

At the end of September 2023, the number of people on the Colonoscopy/OGD waiting list was **23,211**. This is a decrease of **1,077 (-4.43%)** on the number waiting at the end of the previous month August 2023 (**24,288**).

Outpatient Waiting Lists

The total number of people waiting for an Outpatient appointment was **597,081** at the end of September 2023 which is a decrease of **3,738 (0.62%)** since August 2023 (**600,819**).

BowelScreen

The BowelScreen target is that 90% of patients are scheduled within 20 days. In September 2023, **268** invitations were issued of which **180 (80.22%)** were scheduled within the target time of 20 days.

*Cancer Services

Symptomatic Breast Cancer Clinics

Four 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 September 2023:

- Beaumont Hospital – **100%**
- University Hospital Waterford – **100%**
- Letterkenny University Hospital – **97.2%**
- Mater Misericordiae University Hospital – **95.6%**

Four hospitals were below target and one returned no data:

- St Vincent's University Hospital – **64.6%**
- St James's Hospital – **51%**
- Cork University Hospital – **24.7%**
- Galway University Hospital – **10.3%**
- University Hospital Limerick – **No Data returned**

Rapid Access Clinics for Lung Cancer Services

Three 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 September 2023:

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

Three hospitals were below the target of 95% within 10 days and two returned no data:

- Beaumont Hospital – **88.9%**
- Cork University Hospital – **87.2%**
- University Hospital Waterford – **63.3%**
- University Hospital Limerick – **No Data returned**
- Galway University Hospital – **No Data returned**

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 September 2023:

- Mater Misericordiae University Hospital – **100%**
- University Hospital Waterford – **100%**
- St James' Hospital – **100%**
- Beaumont Hospital – **100%**
- St Vincent's University Hospital – **91.2%**

Two hospitals were below the target of 90% within 20 days and one returned no data:

- University Hospital Limerick – **75%**
- Cork University Hospital – **50%**
- Galway University Hospital – **No Data returned**

Radiotherapy

The target is that 90% of patients commence treatment within 15 working days of the patient being deemed ready to treat target. In September 2023 compliance was as follows:

- UPMC Waterford – **94.1%**
- Galway University Hospital – **83.1%**
- Mid-Western Radiation Oncology Centre Limerick – **80.5%**
- Cork University Hospital – **69.3%**
- St Luke's Network (SLRON) – **No Data returned**

National Ambulance Service

Activity volume: for AS1 and AS2 calls received this month has increased by 1,520 (32,981) calls (+5%) compared to the same month last year (September 2022 – 31,461). The daily average call rate for AS1 and AS2 calls received this month was 1099 (30 days this month).

PURPLE (ECHO) life-threatening cardiac or respiratory arrest) incidents responded to within the target timeframe of 75% in 18 minutes and 59 seconds was below target at 67% this month, -8% compared to last month i.e. August 2023

PURPLE (ECHO) calls decreased by -10% (58) compared to the same month last year (September 2022)

RED (DELTA) 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 43% this month, +1% compared to last month i.e. August 2023

RED (DELTA) calls increased by +6% (836) compared to the same month last year (September 2022)

Intermediate Care Service; 77% of all inter hospital transfer requests were managed by the NAS this month compared to 81% in August 2023 -8%

Ambulance Turnaround (excludes Dublin Fire Brigade DFB) times: Decreased for 30 minutes by 5% and increased for 60 minutes by 4% compared to September 2022

16% of vehicles were released and had their crews and vehicles available to respond to further calls within 30 minutes or less, compared to 21% of vehicles being released within 30 minutes or less last year (September 2022)

70% of vehicles were released from Emergency Departments and had their crews and vehicles available to respond to further calls within 60 minutes or less, compared to 66% of vehicles being released within 60 minutes or less last year (September 2022)

89% of delays were escalated where crews were not cleared nationally in 60 minutes; in line with the process / flow path in the ambulance turnaround framework.

Human Resources

WTE Data – Not available

Absence data (August)

In Acute Services the total absence rate is 5.73% of which 0.75% (13.03% of the total) is COVID-19 related. Within Acute Services the highest absence rates are reported in National Ambulance Service at 7.93%, of which 1.01% is COVID -19 related and ULHG at 7.88% of which 1.14% is COVID-19 related. Other Acute Services reported the lowest absence rate at 2.02% and CHI at 4.88%, of which 0.87% is COVID – 19 related. Acute Services overall are showing an increase of 0.55% on last month.

Patient & Client Care was the staff category with the highest total absence rate at 8.67% while Medical & Dental had the lowest total absence rate at 1.25%. Patient & Client Care reported the highest Covid-19 related absence at 1.04% while Medical & Dental had the lowest Covid-19 related absence, at 0.26%.

Data Sources

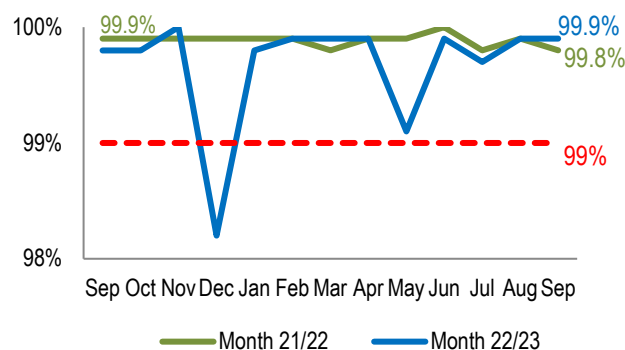
Acute BIU Final MDR
National Ambulance Service (W/O Dublin Fire Brigade)
National Human Resources
National BowelScreen Programme

Primary Care Reimbursement Scheme

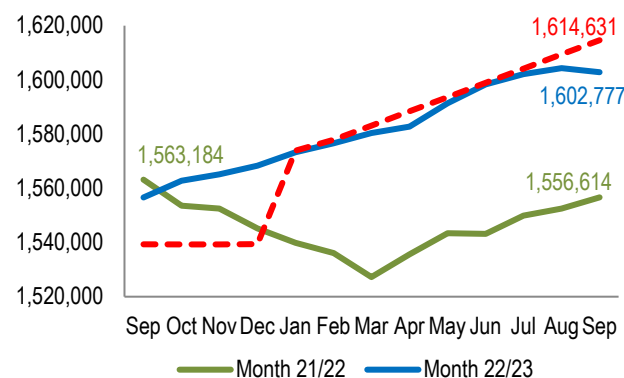
Primary Care Reimbursement Scheme

Performance area	Target/ Expected Activity	Freq		Current Period YTD	SPLY YTD	SPLY Change	Current (-2)	Current (-1)	Current
Medical card turnaround within 15 days	99%	M	●	99.9%	99.8%	+0.1%	99.7%	99.9%	99.9%
Number of persons covered by Medical Cards	1,614,631 YTD/ 1,630,367 FYT	M	●	1,602,777	1,556,614	+46,163	1,602,093	1,604,327	1,602,777
Number of persons covered by GP Visit Cards	934,727 YTD/ 1,069,391 FYT	M	●	595,149	531,792	+63,357	552,904	579,982	595,149

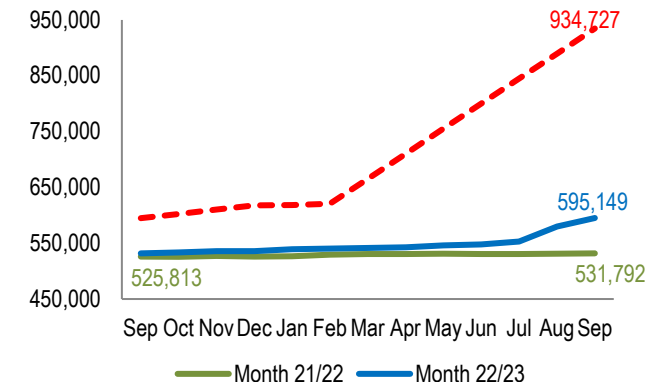
Medical card turnaround within 15 days



Number of persons covered by Medical Card



Number of persons covered by GP Visit cards



Primary Care Reimbursement Scheme Update

The number of people who held medical card eligibility on 30th September 2023 was 1,602,777, a decrease of 1,550 on the previous month. The total number of persons with eligibility for a GP visit card on 30th September 2023 was 595,149, an increase of 15,167 on the previous month. As at 30th September 2023, 2,197,926 or 42.7% of the population had medical card or GP visit card eligibility, an overall increase of 13,617 on the previous month. (Population figures are based on the CSO 2022 census figure of 5,149,139).

The first phase of the weekly income limit threshold increase for the GP visit card commenced on 11th September 2023.

While the number of new Medical Cards issued was slightly down on previous months and more people lost eligibility, GP visit cards numbers increased as the new means thresholds came into effect and Under 8 applications continue to be received.

Human Resources

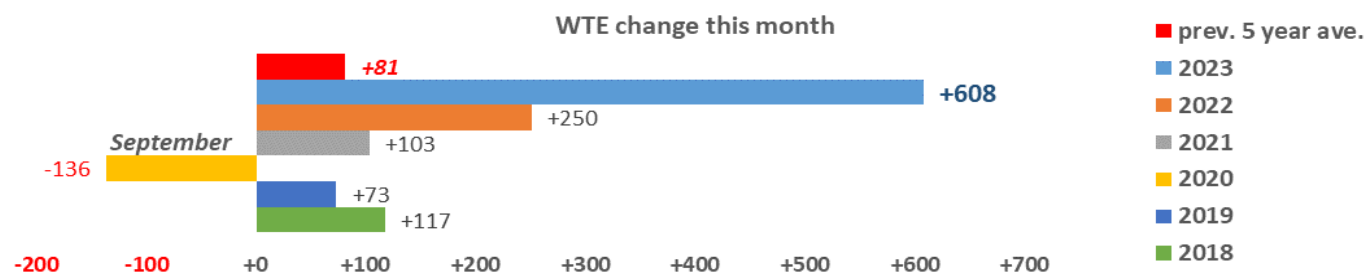
Health Sector Workforce: September 2023

Headlines

Employment levels at the end of September 2023, show there were 143,075 WTE (equating to 162,042 personnel) directly employed in the provision of Health & Social Care Services by the HSE and the various Section 38 hospitals & agencies.

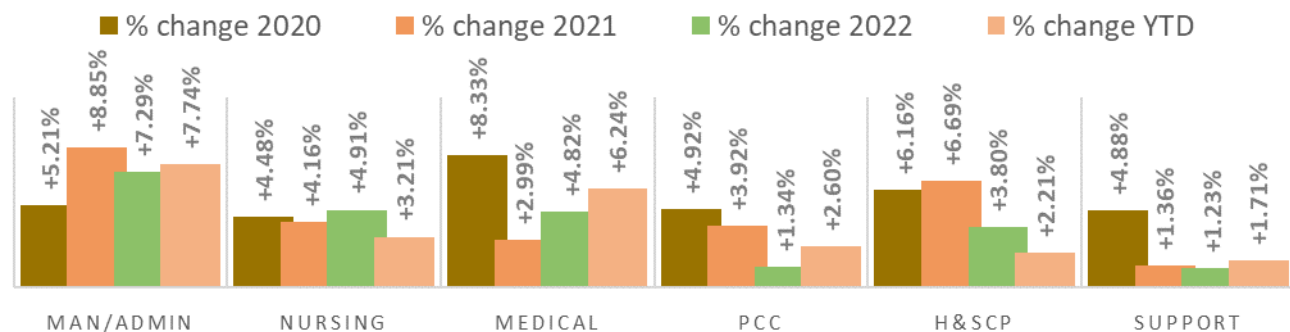
Year-to-date employment levels continue to show strong growth at **+5,330 WTE**. The change this month is **+608 WTE** and similar to the outturn reported in August, is evident of 'out of trend' growth for the period as shown further below.

The overall increase since December 2019 now stands at **+23,262 (+19.4%)**. The staff category reporting the greatest WTE increase is **Nursing & Midwifery at +6,807 WTE (+17.8%)**, with Staff Nurse/Staff Midwife reporting the greatest staff group WTE increase at +3,445 WTE (+13.4%). The staff category with the greatest percentage increase is **Management & Administrative +32.4%** (+6,097 WTE).



Key findings by Staff Category & Staff Group: September 2023

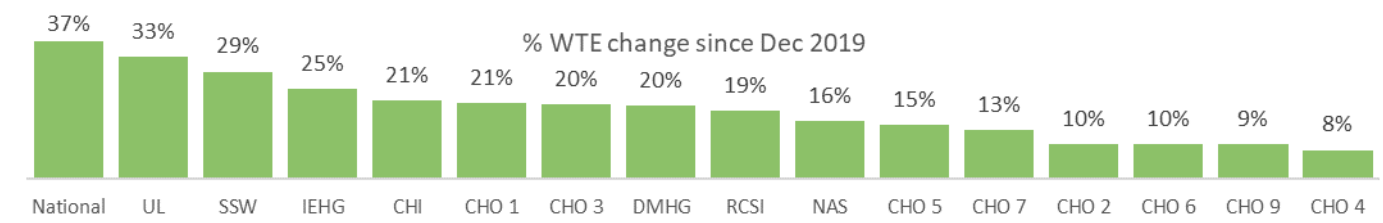
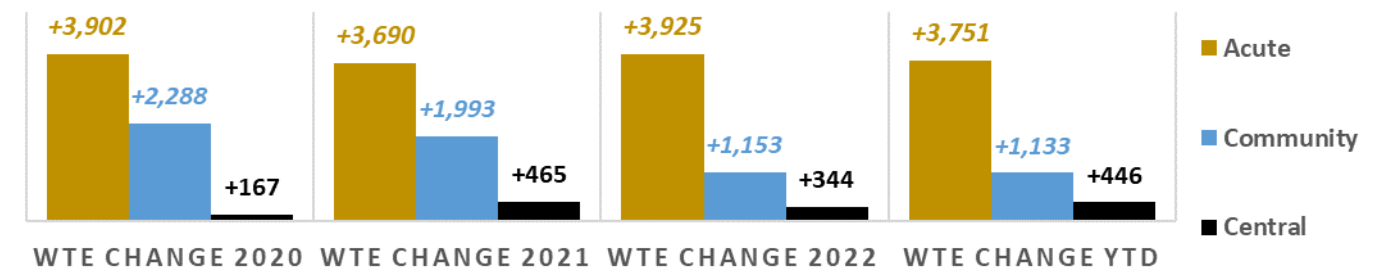
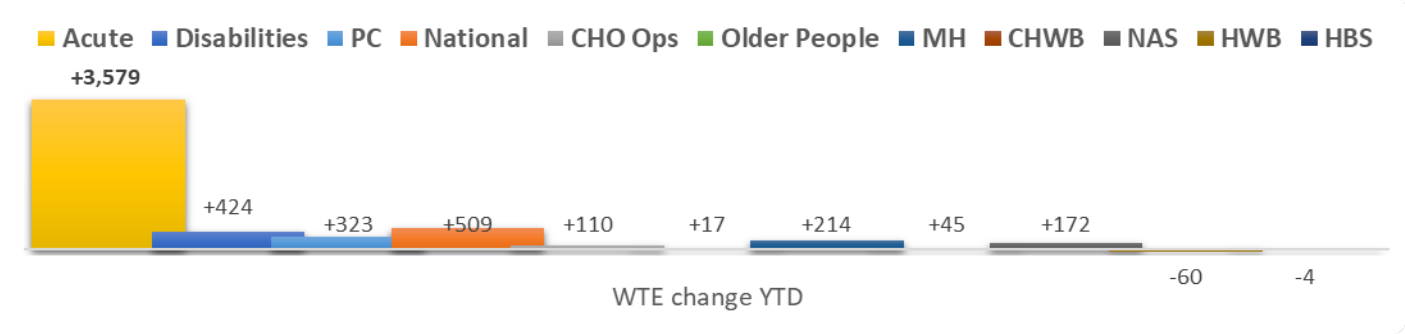
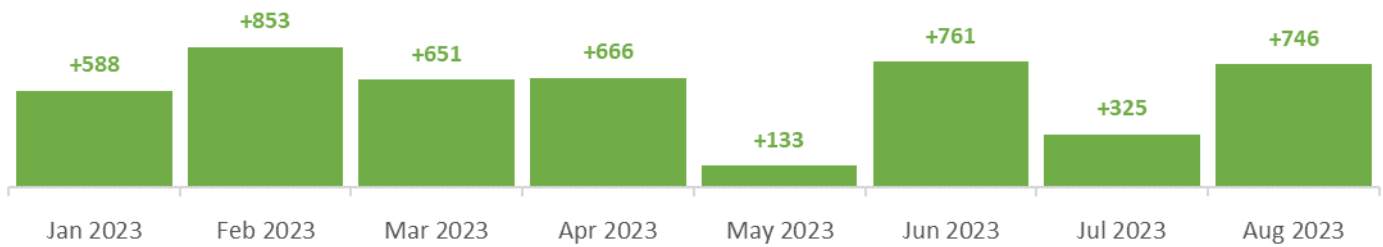
- With the exception of **General Support** and **Patient and Client Care**, all other staff categories are reporting growth this month.
- **Health & Social Care Professionals** are reporting the largest increase of **+256 WTE**. All Staff Groups are reporting an increase with Therapy Professions reporting the largest increase of **+80 WTE** followed by Social Care **+64 WTE**, Health Science / Diagnostics **+45 WTE**, Social Workers **+25 WTE**, Pharmacy **+20 WTE**, Psychologists **+12 WTE** and H&SC Other **+11 WTE**.
- **Management & Administrative** are reporting an increase of **+143 WTE**. The **greatest increase** is reported in Administrative/ Supervisory (**V to VII**) **+78 WTE** followed by Clerical (III & IV) **+72 WTE**. Management (Grade VIII & above) are reporting a decrease again this month of **-7 WTE**.
- **Medical & Dental** are reporting an increase of **+132**. All staff groups are reporting an increase. Consultants are reporting the largest increase of **+82 WTE** followed by SHO/ Interns **+27 WTE**, Registrars **+19 WTE** and Medical/ Dental Other **+4 WTE**.
- **Nursing & Midwifery** are reporting an increase of **+125 WTE**. The largest increase is in Staff Nurse/ Staff Midwife **+77 WTE** followed by Nurse/ Midwife Specialist & AN/MP **+53 WTE**, Public Health Nurse **+16 WTE** and Nursing/Midwife other **+3 WTE**. The Nursing/ Midwifery Student staff group are reporting a decrease of **-20 WTE** followed by Nurse/ Midwife Manager **-5 WTE**.
- **Patient & Client Care** are reporting a decrease of **-6 WTE**, however, Ambulance Staff are reporting an increase of **+41 WTE** followed by Care, Other **+12 WTE**. Health Care Assistants are reporting the largest decrease **-43 WTE** followed by Home Help reporting a decrease of **-16 WTE**.
- **General Support** are reporting a decrease of **-40 WTE** predominantly in Support **-46 WTE**, with Maintenance/Technical reporting an increase of **+5 WTE**.



Key findings Operations: September 2023

- Overall in this period **Acute Services** is reporting an increase of **+377 WTE** followed by **Community Services +185 WTE** and **National Functions & Central Services +46 WTE**.
- At Care Group level, Acute Hospital Services reported an increase of **+339 WTE** followed by Primary Care **+121 WTE**, Mental Health **+43 WTE**, Ambulance Service **+38 WTE**, National & Central Services **+33 WTE**, Disabilities **+16 WTE**, Health & Well-being **+15 WTE**, CHO Operations **+10 WTE** and Community Health & Wellbeing **+3 WTE**. Older People are reporting a decrease of **-8 WTE** followed by Health Business Service **-3 WTE**.
- The **largest** WTE increase this month is reported in Saolta University Hospital Care at **+110 WTE** followed by Dublin Midlands Hospital Group at **+102 WTE**. In Community Services CHO 7 is reporting the largest increase (**+61 WTE**) followed by CHO 2 (**+60 WTE**). Conversely SSWHG is reporting the largest decrease at **-88 WTE**.

Date	WTE	WTE change	NAS	Acute	Acute Services	CHWB	MH	PC	Disabilities	Older People	CHO Ops	Community Services	National Services & Central Functions
2023 YTD		+5,330	+172	+3,579	+3,751	+45	+214	+323	+424	+17	+110	+1,133	+446
Sep-23	143,075	+608	+38	+339	+377	+3	+43	+121	+16	-8	+10	+185	+46
Aug-23	142,468	+746	-11	+759	+748	+3	+23	-97	+9	+39	-7	-31	+29
Jul-23	141,722	+325	+34	+276	+310	-23	-54	+59	+5	-41	+15	-39	+54
Jun-23	141,397	+761	+5	+387	+392	+8	-16	+55	+152	+83	+0	+283	+86
May-23	140,636	+133	+5	+123	+128	-22	+32	-73	+53	-77	+43	-43	+48
Apr-23	140,503	+666	+26	+370	+396	-13	+52	+104	+102	-28	+14	+232	+38
Mar-23	139,838	+651	-8	+508	+500	+19	+49	+100	-9	-48	+3	+114	+38
Feb-23	139,186	+853	+24	+530	+555	+57	+12	+16	+108	+75	+15	+282	+16
Jan-23	138,334	+588	+58	+287	+345	+13	+74	+38	-12	+23	+16	+152	+92
Dec-22	137,745	+525	-14	+462	+448	+16	+1	-7	+58	-8	+6	+66	+11
Nov-22	137,220	+1,128	+2	+771	+772	+6	+55	-43	+118	+56	+96	+289	+67
Oct-22	136,092	+848	+47	+347	+394	+15	-2	-33	+70	+120	+206	+376	+78
Sep-22	135,245	+250	+11	+185	+196	+10	+6	+53	-45	+10	+28	+62	-8



Further details are shown in the charts & tables below.

By Service Delivery Area: September 2023

Service / HG & CHO	WTE Dec 2022	WTE Aug 2023	WTE Sep 2023	WTE change since Aug 2023	WTE change 2022	WTE change 2023 (YTD)	WTE change Dec 2019 to Sep 2023	% WTE change 2023 (YTD)	% WTE change Dec 2019 to Sep 2023
Total Health Service	137,745	142,468	143,075	+608	+5,422	+5,330	+23,263	+3.9%	+19.4%
National Ambulance Service	2,067	2,201	2,238	+38	+7	+172	+306	+8.3%	+15.8%
Children's Health Ireland	4,108	4,332	4,373	+41	+134	+265	+771	+6.5%	+21.4%
Dublin Midlands Hospitals	12,326	12,879	12,981	+102	+619	+655	+2,162	+5.3%	+20.0%
Ireland East Hospitals	14,889	15,469	15,570	+101	+760	+681	+3,067	+4.6%	+24.5%
RCSI Hospitals Group	11,267	11,442	11,458	+16	+660	+191	+1,795	+1.7%	+18.6%
Saolta University Hospital Care	11,327	11,799	11,909	+110	+761	+583	+2,656	+5.1%	+28.7%
South/South West Hospitals	12,723	13,691	13,603	-88	+789	+880	+3,075	+6.9%	+29.2%
University of Limerick Hospitals	5,222	5,470	5,524	+54	+179	+302	+1,378	+5.8%	+33.2%
other Acute Services	127	146	148	+2	+16	+22	+57	+17.2%	+62.7%
Acute Services	74,055	77,428	77,806	+377	+3,925	+3,751	+15,267	+5.1%	+24.4%
CHO 1	6,398	6,603	6,595	-8	+309	+197	+1,127	+3.1%	+20.6%
CHO 2	5,972	6,013	6,073	+60	+153	+101	+528	+1.7%	+9.5%
CHO 3	5,069	5,205	5,244	+39	+123	+175	+888	+3.5%	+20.4%
CHO 4	8,961	8,827	8,835	+8	+104	-126	+646	-1.4%	+7.9%
CHO 5	5,805	6,017	6,063	+47	+134	+259	+787	+4.5%	+14.9%
CHO 6	3,620	3,695	3,699	+4	+59	+79	+321	+2.2%	+9.5%
CHO 7	7,215	7,326	7,386	+61	+142	+172	+872	+2.4%	+13.4%
CHO 8	6,514	6,772	6,751	-21	+65	+237	+616	+3.6%	+10.0%
CHO 9	7,230	7,210	7,200	-10	+65	-30	+618	-0.4%	+9.4%
other Community Services	740	804	808	+4	-1	+68	+168	+9.2%	+26.2%
Community Services	57,523	58,471	58,656	+185	+1,153	+1,133	+6,571	+2.0%	+12.6%
National Services & Central Functions	6,168	6,568	6,614	+46	+344	+446	+1,424	+7.2%	+27.4%

By Care Group: September 2023

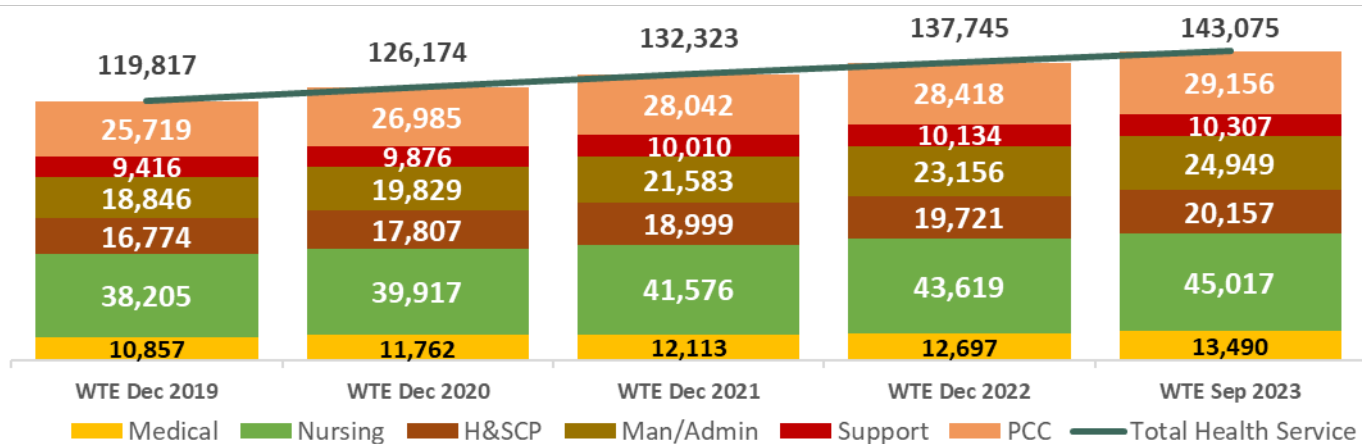
Care Group	WTE Dec 2022	WTE Aug 2023	WTE Sep 2023	WTE change since Aug 2023	WTE change 2022	WTE change 2023 (YTD)	WTE change Dec 2019 to Sep 2023	% WTE change 2023 (YTD)	% WTE change Dec 2019 to Sep 2023
Total Health Service	137,745	142,468	143,075	+608	+5,422	+5,330	+23,263	+3.9%	+19.4%
Ambulance Services	2,067	2,201	2,238	+38	+7	+172	+306	+8.3%	+15.8%
Acute Hospital Services	71,988	75,228	75,567	+339	+3,918	+3,579	+14,962	+5.0%	+24.7%
Acute Services	74,055	77,428	77,806	+377	+3,925	+3,751	+15,267	+5.1%	+24.4%
Community Health & Wellbeing	322	364	367	+3	+141	+45	+367	+14.1%	
Mental Health	10,453	10,625	10,667	+43	+91	+214	+700	+2.0%	+7.0%
Disabilities	19,903	20,311	20,328	+16	+281	+424	+2,055	+2.1%	+11.2%
Older People	13,947	13,973	13,964	-8	+325	+17	+725	+0.1%	+5.5%
Primary Care	12,057	12,259	12,380	+121	-517	+323	+1,783	+2.7%	+16.8%
CHO Operations	839	939	950	+10	+832	+110	+941	+13.1%	
Community Services	57,523	58,471	58,656	+185	+1,153	+1,133	+6,567	+2.0%	+12.6%
National Services & Central Functions	6,168	6,568	6,614	+46	+344	+446	+1,423	+7.2%	+27.4%

By Administration: September 2023

HSE /S38	WTE Dec 2022	WTE Aug 2023	WTE Sep 2023	WTE change since Aug 2023	WTE change 2022	WTE change 2023 (YTD)	WTE change Dec 2019 to Sep 2023	% WTE change 2023 (YTD)	% WTE change Dec 2019 to Sep 2023
Total Health Service	137,745	142,468	143,075	+608	+5,422	+5,330	+23,258	+3.9%	+19.4%
Health Service Executive	89,227	92,505	92,950	+445	+3,719	+3,723	+16,052	+4.2%	+20.9%
Section 38 Hospitals	30,874	32,082	32,261	+180	+1,409	+1,388	+5,571	+4.5%	+20.9%
Section 38 Voluntary Agencies	17,645	17,881	17,864	-17	+294	+219	+1,639	+1.2%	+10.1%

By Staff Group: September 2023

Staff Category /Group\	WTE Dec 2022	WTE Aug 2023	WTE Sep 2023	WTE change since Aug 2023	WTE change 2022	WTE change 2023 (YTD)	WTE change Dec 2019 to Sep 2023	% WTE change 2023 (YTD)	% WTE change Dec 2019 to Sep 2023
Total Health Service	137,745	142,468	143,075	+608	+5,422	+5,330	+23,263	+3.9%	+19.4%
Medical & Dental	12,697	13,358	13,490	+132	+584	+792	+2,633	+6.2%	+24.2%
Consultants	3,869	4,034	4,116	+82	+261	+247	+866	+6.4%	+26.7%
Registrars	4,353	4,594	4,613	+19	+249	+260	+932	+6.0%	+25.3%
SHO/ Interns	3,661	3,963	3,990	+27	+75	+328	+874	+9.0%	+28.1%
Medical/ Dental, other	813	767	771	+4	-0	-43	-40	-5.2%	-4.9%
Nursing & Midwifery	43,619	44,893	45,017	+125	+2,042	+1,398	+6,808	+3.2%	+17.8%
Nurse/ Midwife Manager	9,345	9,691	9,686	-5	+493	+341	+1,700	+3.7%	+21.3%
Nurse/ Midwife Specialist & AN/MP	2,974	3,392	3,446	+53	+493	+472	+1,452	+15.9%	+72.9%
Staff Nurse/ Staff Midwife	28,757	29,055	29,132	+77	+908	+375	+3,445	+1.3%	+13.4%
Public Health Nurse	1,504	1,479	1,494	+16	-19	-9	-45	-0.6%	-2.9%
<i>Nursing/ Midwifery awaiting registration</i>	305	67	195	+128	+180	-110	-30	-36.1%	-13.3%
<i>Post-registration Nurse/ Midwife Student</i>	237	129	182	+52	-40	-55	-112	-23.3%	-38.1%
<i>Pre-registration Nurse/ Midwife Intern</i>	170	743	543	-200	+45	+373	+407	+219.2%	+299.8%
Nursing/ Midwifery Student	712	939	919	-20	+185	+208	+266	+29.2%	+40.7%
Nursing/ Midwifery other	327	337	340	+3	-17	+13	-10	+3.9%	-3.0%
Health & Social Care Prof	19,721	19,901	20,157	+256	+723	+435	+3,388	+2.2%	+20.2%
Therapy Professions	6,320	6,380	6,459	+80	+373	+140	+1,227	+2.2%	+23.5%
Health Science/ Diagnostics	5,052	5,109	5,155	+45	+134	+103	+658	+2.0%	+14.6%
Social Care	3,171	3,152	3,216	+64	+43	+45	+506	+1.4%	+18.7%
Pharmacy	1,323	1,363	1,383	+20	+31	+60	+345	+4.6%	+33.2%
Psychologists	1,120	1,144	1,156	+12	+25	+36	+152	+3.2%	+15.1%
Social Workers	1,430	1,467	1,491	+25	+134	+61	+326	+4.3%	+28.0%
H&SC, Other	1,306	1,286	1,297	+11	-17	-10	+175	-0.7%	+15.6%
Management & Administrative	23,156	24,806	24,949	+143	+1,574	+1,793	+6,098	+7.7%	+32.3%
Management (VIII & above)	2,446	2,530	2,522	-7	+230	+76	+677	+3.1%	+36.7%
Administrative/ Supervisory (V to VII)	7,737	8,574	8,652	+78	+1,031	+915	+3,447	+11.8%	+66.2%
Clerical (III & IV)	12,974	13,703	13,775	+72	+312	+801	+1,974	+6.2%	+16.7%
General Support	10,134	10,347	10,307	-40	+123	+173	+1,002	+1.7%	+10.8%
Support	8,913	9,110	9,064	-46	+100	+152	+933	+1.7%	+11.5%
Maintenance/ Technical	1,221	1,237	1,242	+5	+24	+22	+69	+1.8%	+5.9%
Patient & Client Care	28,418	29,163	29,156	-6	+376	+738	+3,334	+2.6%	+12.9%
Health Care Assistants	19,309	20,050	20,007	-43	-17	+698	+2,499	+3.6%	+14.3%
Home Help	3,782	3,678	3,662	-16	+236	-120	+97	-3.2%	+2.7%
Ambulance Staff	1,932	2,014	2,055	+41	-4	+123	+227	+6.4%	+12.4%
Care, other	3,395	3,420	3,432	+12	+161	+37	+511	+1.1%	+17.5%



Health Sector Absence Rates: September 2023

This report provides the overview of the reported National Health Sector Absence Rates for September 2023.

The reported absence rate for September 2023 stands at **5.8%**.

- This month's absence rate is showing a decrease of **0.14%** when compared with the **previous month** (including COVID-19).
- **Excluding COVID-19 absence**, this month's absence rate is **5.06%** which is **0.12%** lower than the rate reported last month. This month's data is the same as the rate reported in 2022 (5.06%) and higher than the rates reported in previous years i.e. 4.8% (2021), 4.5% (2020) and 4.7% (2019).
- **Including COVID-19 absence³**, this month's absence rate is showing an increase of **0.05%** when compared to the same month in 2022. Notably COVID-19 absence rate has decreased this month reporting at 0.74% compared with 0.76% last month.

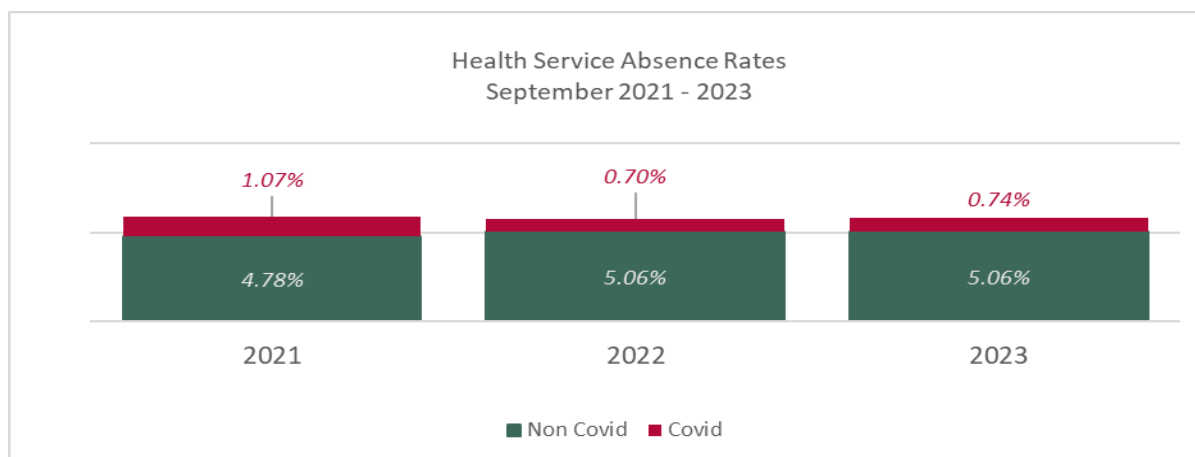
When compared with the National Service Plan KPI target of **≤4%** excluding COVID-19, this month's absence rate of **5%** is **1%** above this target.

These figures are reflected in the attached National Absence Report.

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.

² All agencies with the exception of Brothers of Charity Limerick, Brothers of Charity Southern, Health Protection Surveillance Unit, Roscommon University Hospital, Brothers of Charity Waterford, Connolly Hospital, Leopardstown Park Hospital, Library Services, Mayo University Hospital, & Peamount Hospital provided a National absence return for September. Environmental Health National provided a partial return for September.

Year/ month	Certified absence	Self- certified absence	Non Covid-19 absence	Covid-19 absence	Total absence rate	KPI Target
2023 Year To Date	4.44%	0.59%	5.02%	0.55%	5.57%	≤4%
Change in Month	-0.12%	-0.01%	-0.12%	-0.02%	-0.14%	
September 2023	4.47%	0.59%	5.06%	0.74%	5.80%	
August 2023	4.59%	0.59%	5.18%	0.76%	5.94%	
September 2022	4.45%	0.61%	5.06%	0.70%	5.75%	
Full Year 2022	4.40%	0.61%	5.01%	2.09%	7.10%	



Latest monthly figures (September 2023)

September 2023								
Health Service Absence Rate - by Staff Category: Sept 2023	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	4.47%	0.59%	● 5.06%	● 0.74%	5.80%	-0.14%	87.23%	12.77%
Medical & Dental	1.09%	0.23%	● 1.32%	● 0.23%	1.55%	0.02%	85.14%	14.86%
Nursing & Midwifery	4.94%	0.82%	● 5.76%	● 0.88%	6.64%	-0.15%	86.72%	13.28%
Health & Social Care Professionals	3.67%	0.43%	● 4.10%	● 0.65%	4.75%	-0.06%	86.40%	13.60%
Management & Administrative	3.86%	0.37%	● 4.22%	● 0.58%	4.80%	0.05%	87.91%	12.09%
General Support	5.99%	0.58%	● 6.57%	● 0.81%	7.38%	-0.22%	89.05%	10.95%
Patient & Client Care	6.08%	0.72%	● 6.80%	● 0.97%	7.77%	-0.32%	87.46%	12.54%

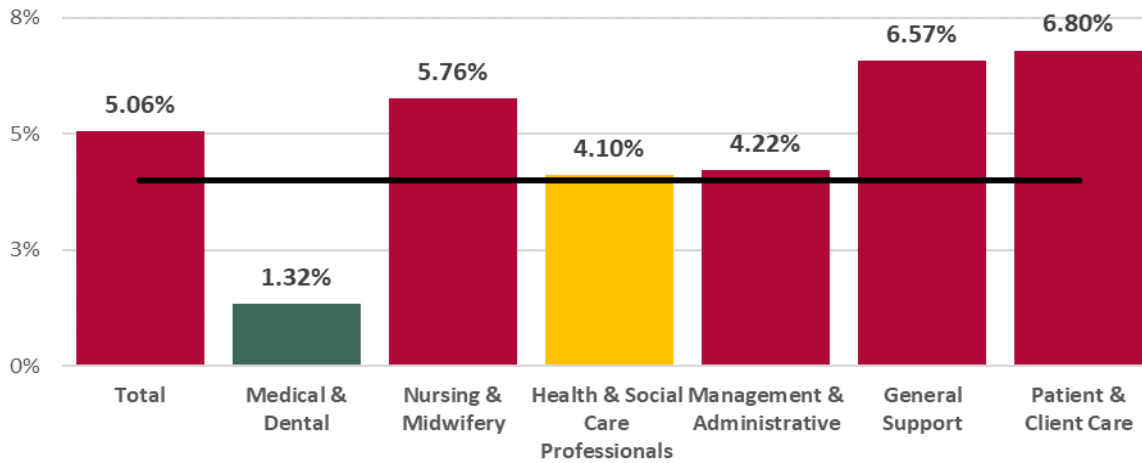
*Non Covid-19 RAG Rating: Red ● >4.2% Amber ● >4 - ≤4.2 Green ● ≤4

September 2023	Covid-19 absence			% Non Covid-19 absence			Total absence rate		
Health Service Absence Rate - by Staff Category: Sep 2023	Sep-23	Aug-23	Sep-22	Sep-23	Aug-23	Sep-22	Sep-23	Aug-23	Sep-22
Total	0.74%	0.76%	0.70%	5.06%	5.18%	5.06%	5.80%	5.94%	5.75%
Medical & Dental	0.23%	0.29%	0.24%	1.32%	1.25%	1.33%	1.55%	1.54%	1.58%
Nursing & Midwifery	0.88%	0.88%	0.90%	5.76%	5.92%	5.73%	6.64%	6.80%	6.63%
Health & Social Care Professionals	0.65%	0.66%	0.53%	4.10%	4.15%	3.77%	4.75%	4.81%	4.30%
Management & Administrative	0.58%	0.60%	0.46%	4.22%	4.16%	3.91%	4.80%	4.75%	4.38%
General Support	0.81%	0.82%	0.72%	6.57%	6.78%	6.87%	7.38%	7.60%	7.59%
Patient & Client Care	0.97%	1.02%	0.91%	6.80%	7.07%	6.91%	7.77%	8.09%	7.82%

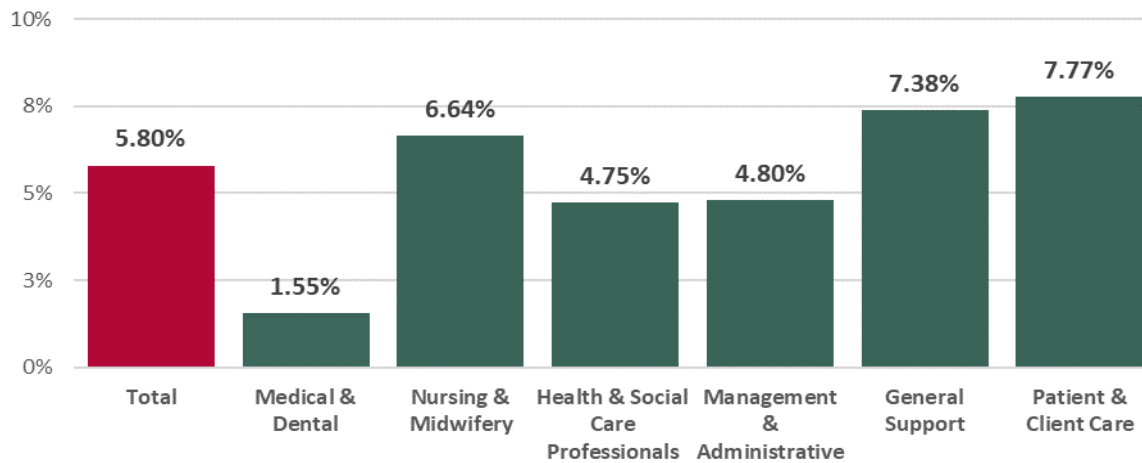
Key findings by Staff Category

- **Patient & Client Care** reports the **highest** total absence rates at **7.77%** with 0.97% related to COVID-19 absence (12.54%). This is a **decrease of 0.32%** when compared to last month and **an increase of 0.05%** when compared to last year.
- **General Support** reports a total absence rate of **7.38%** with 0.81% related to COVID-19 absence (10.95%). This is a **decrease of 0.22%** when compared to last month and a **decrease of 0.21%** compared to last year
- **Nursing & Midwifery** reports a total absence rate of **6.64%** with 0.88% related to COVID-19 absence (13.28%). This is a **decrease of 0.15%** when compared to last month and **an increase of 0.01%** compared to last year
- **Health & Social Care Professionals** reports a total absence rate of **4.75%** with **0.65%** related to COVID-19 absence (13.6%). This is a **decrease of 0.06%** when compared to last month and **an increase of 0.45%** compared to last year
- **Management & Administrative** reports a total absence rate of **4.8%** with 0.58% related to COVID-19 absence (12.09%). This is **an increase of 0.05%** when compared to last month and **an increase of 0.42%** compared to last year
- **Medical and Dental** is reporting the **lowest** total absence rate at **1.55%** in September, with 0.23% related to COVID-19 (14.86%) This is **an increase of 0.01%** when compared to last month and a **decrease of 0.03%** compared to last year
- Based on the KPI, **one** staff categories are reporting **within the target**, with **five** categories **above the target**. Details as follows:

Non Covid Absence by Staff Category



Total absence rate by Staff Category



Key findings Operations:

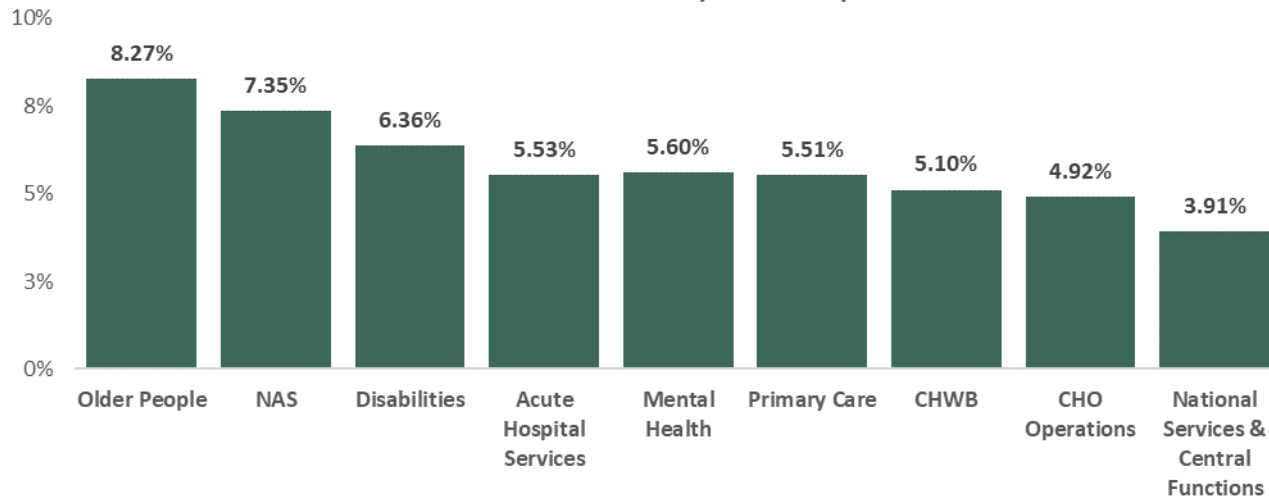
September 2023 absence rate stands at **5.80%** of which **4.47%** is certified, **0.59%** Self-Certified with **0.74%** (or 12.77% of all absence) relating to **COVID-19**.

- In **Acute Services** the absence rate is **5.59%** of which 0.72% (12.97% of the total) is COVID-19 related. Within Acute Services the **highest absence** rates are reported in **National Ambulance Service** at **7.35%**, of which 0.70% is COVID -19 related and **ULHG** at **7.57%** of which 1.02% is COVID-19 related. Acute Services overall are showing a **decrease of 0.16%** on last month.
- **Community Services** stands at **6.35%** of which 0.81% (12.77% of the total) is also COVID-19 related. Within Community Services, **Older People** is reporting the **highest absence rate** at **8.27%**. Notably Older People are reporting the highest COVID-19 related absence at 1.13%. Community Services overall are showing a **decrease of 0.16%** on last month.

National Services & Central Functions rate is **3.91%** of which 0.38% (9.74% of the total) is COVID-19 related. National Services & Central Functions overall are showing an **increase of 0.12%** on last month.

Health Service Absence Rate - by Care Group: Sept 2023	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	4.47%	0.59%	●	5.06%	0.74%	5.80%	-0.14%	87.23%	12.77%
Ambulance Services	6.00%	0.65%	●	6.65%	0.70%	7.35%	-0.67%	90.42%	9.58%
Acute Hospital Services	4.13%	0.67%	●	4.80%	0.73%	5.53%	-0.15%	86.88%	13.12%
Acute Services	4.19%	0.67%	●	4.86%	0.72%	5.59%	-0.16%	87.03%	12.97%
Community Health & Wellbeing	3.95%	0.30%	●	4.24%	0.86%	5.10%	0.01%	83.12%	16.88%
Mental Health	4.43%	0.49%	●	4.92%	0.68%	5.60%	0.00%	87.78%	12.22%
Primary Care	4.46%	0.36%	●	4.82%	0.70%	5.51%	-0.05%	87.36%	12.64%
Disabilities	5.02%	0.55%	●	5.57%	0.79%	6.36%	-0.25%	87.57%	12.43%
Older People	6.42%	0.72%	●	7.14%	1.13%	8.27%	-0.26%	86.38%	13.62%
CHO Operations	4.01%	0.24%	●	4.25%	0.67%	4.92%	0.50%	86.41%	13.59%
Community Services	5.02%	0.52%	●	5.54%	0.81%	6.35%	-0.16%	87.23%	12.77%
National Services & Central Functions	3.29%	0.24%	●	3.53%	0.38%	3.91%	0.12%	90.26%	9.74%

Total Absence rate by Care Group



September 2023

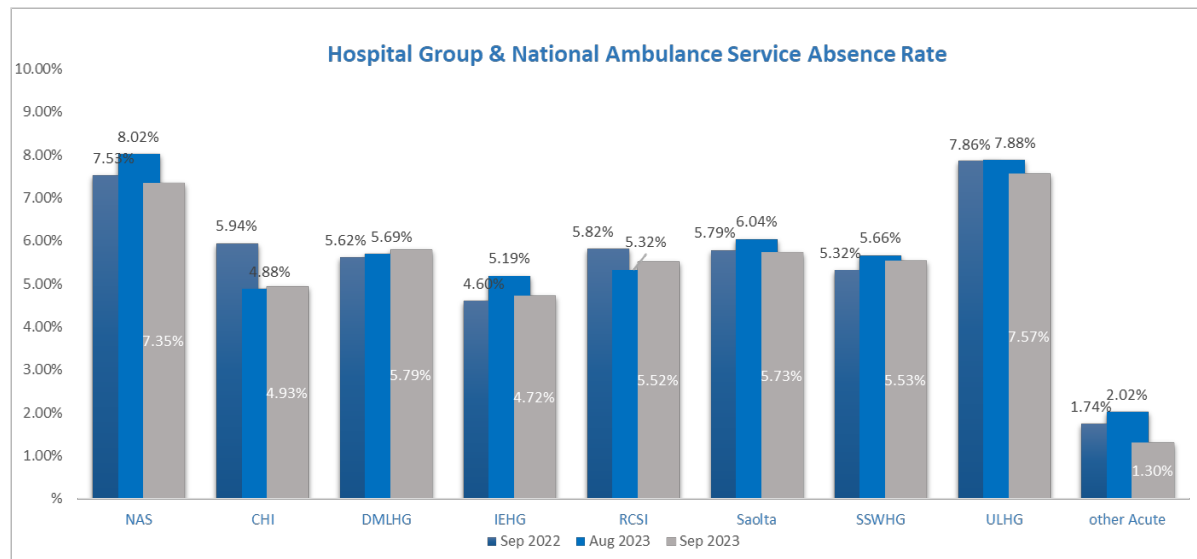
Health Service Absence Rate - Type of Admin by Staff Category: Sept 2023	Certified absence	Self-certified absence	Non Covid-19 absence	Covid-19 absence	Total absence rate	% Change from last month	% Non Covid-19 absence	% Covid-19 absence
Total	4.47%	0.59%	● 5.06%	0.74%	5.80%	-0.14%	87.23%	12.77%
National Ambulance Service	6.00%	0.65%	● 6.65%	0.70%	7.35%	-0.67%	90.42%	9.58%
Children's Health Ireland	3.47%	0.53%	● 3.99%	0.94%	4.93%	0.05%	80.92%	19.08%
Dublin Midlands Hospital Group	4.23%	0.75%	● 4.98%	0.81%	5.79%	0.10%	85.99%	14.01%
Ireland East Hospital Group	3.61%	0.55%	● 4.16%	0.56%	4.72%	-0.47%	88.12%	11.88%
RCSI Hospitals Group	4.26%	0.67%	● 4.93%	0.58%	5.52%	0.20%	89.42%	10.58%
Saolta University Hospital Care Group	4.14%	0.79%	● 4.93%	0.80%	5.73%	-0.31%	86.01%	13.99%
South/South West Hospital Group	4.11%	0.72%	● 4.83%	0.70%	5.53%	-0.13%	87.31%	12.69%
University of Limerick Hospital Group	5.90%	0.65%	● 6.55%	1.02%	7.57%	-0.31%	86.46%	13.54%
Other Acute Services	0.91%	0.07%	● 0.98%	0.32%	1.30%	-0.71%	75.15%	24.85%
Acute Services	4.19%	0.67%	● 4.86%	0.72%	5.59%	-0.16%	87.03%	12.97%
CHO 1	6.70%	0.50%	● 7.20%	0.78%	7.98%	-0.69%	90.21%	9.79%

Health Service Absence Rate - Type of Admin by Staff Category: Sept 2023	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
CHO 2	3.73%	0.22%	3.95%	0.68%	4.63%	0.29%	85.29%	14.71%
CHO 3	5.99%	0.45%	6.44%	1.11%	7.55%	0.27%	85.29%	14.71%
CHO 4	5.08%	0.76%	5.84%	0.81%	6.65%	-0.21%	87.86%	12.14%
CHO 5	5.85%	0.57%	6.42%	1.01%	7.43%	-0.31%	86.37%	13.63%
CHO 6	3.82%	0.67%	4.49%	0.50%	4.99%	-0.38%	89.97%	10.03%
CHO 7	5.07%	0.55%	5.62%	0.88%	6.50%	-0.17%	86.46%	13.54%
CHO 8	5.01%	0.44%	5.44%	0.93%	6.37%	-0.74%	85.46%	14.54%
CHO 9	4.41%	0.48%	4.89%	0.68%	5.57%	0.21%	87.81%	12.19%
Other Community Services	3.32%	0.76%	4.08%	0.52%	4.60%	0.99%	88.79%	11.21%
Community Services	5.02%	0.52%	5.54%	0.81%	6.35%	-0.16%	87.23%	12.77%
National Services & Central Functions	3.29%	0.24%	3.53%	0.38%	3.91%	0.12%	90.26%	9.74%

- At Hospital Group level, University of Limerick Hospital Care Group is reporting the highest absence rate at 7.57%. Ireland East Hospital Group have the lowest absence rate reported at 4.72%
- At CHO level, CHO 1 is reporting the highest absence rate within at 7.98%. CHO 2 have the lowest absence rate reported at 4.63%.

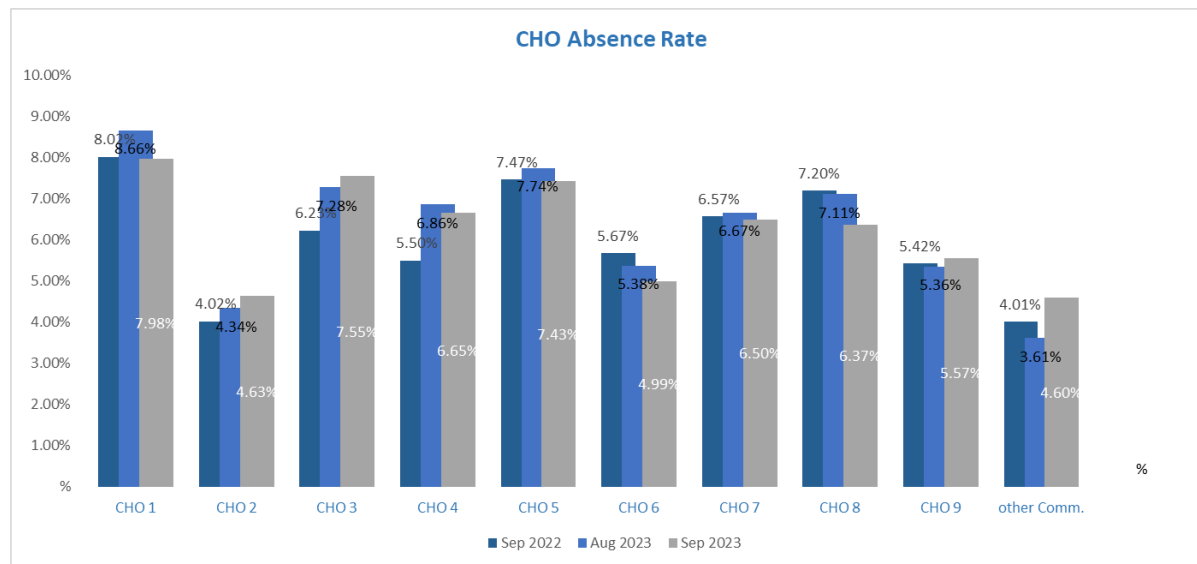
Acute Services Absence Rate Breakdown: September 2023

Acute Services	Covid			Non Covid			Total Absence		
	Sep-23	Aug-23	Sep-22	Sep-23	Aug-23	Sep-22	Sep-23	Aug-23	Sep-22
Total	0.72%	0.77%	0.69%	4.86%	4.97%	4.96%	5.59%	5.74%	5.65%
Ambulance	0.70%	1.02%	0.84%	6.65%	7.00%	6.69%	7.35%	8.02%	7.53%
Children's Health Ireland	0.94%	0.87%	1.09%	3.99%	4.02%	4.85%	4.93%	4.88%	5.94%
Dublin Midlands Hospital Group	0.81%	0.88%	0.59%	4.98%	4.81%	5.04%	5.79%	5.69%	5.62%
Ireland East Hospital Group	0.56%	0.57%	0.55%	4.16%	4.62%	4.05%	4.72%	5.19%	4.60%
RCSI Hospitals Group	0.58%	0.69%	0.62%	4.93%	4.62%	5.20%	5.52%	5.32%	5.82%
Saolta University Hospital Care Group	0.80%	0.88%	0.80%	4.93%	5.16%	4.99%	5.73%	6.04%	5.79%
South/South West Hospital Group	0.70%	0.67%	0.60%	4.83%	5.00%	4.72%	5.53%	5.66%	5.32%
University of Limerick Hospital Group	1.02%	1.14%	1.10%	6.55%	6.73%	6.76%	7.57%	7.88%	7.86%
Other Acute Services	0.32%	0.00%	0.24%	0.98%	2.02%	1.50%	1.30%	2.02%	1.74%



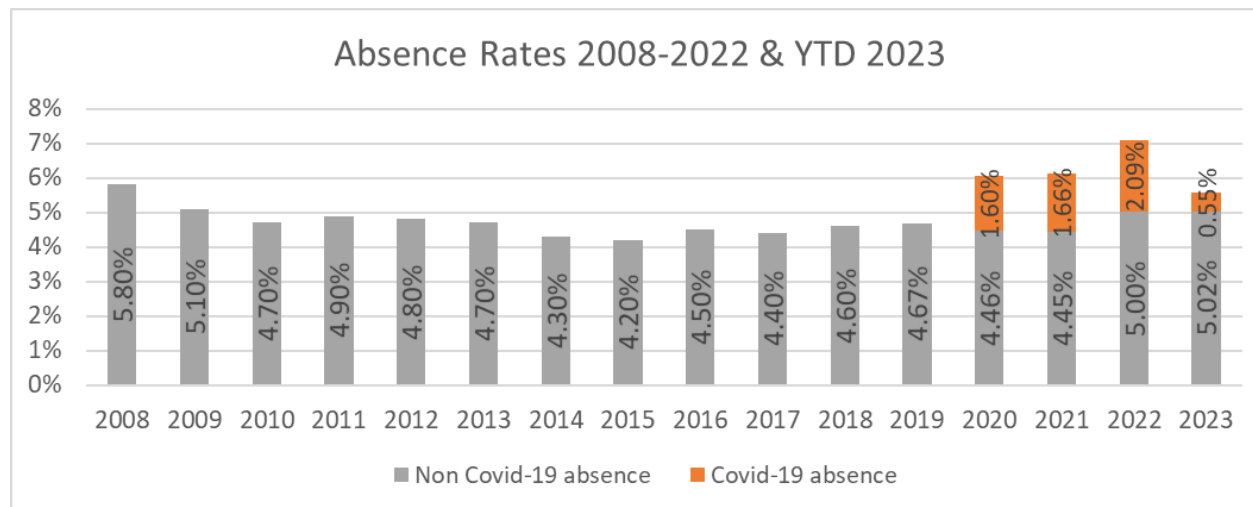
Community Services Absence Rate Breakdown: September 2023

Community Services	Covid			Non Covid			Total Absence		
	Sep-23	Aug-23	Sep-22	Sep-23	Aug-23	Sep-22	Sep-23	Aug-23	Sep-22
Total	0.81%	0.80%	0.76%	5.54%	5.71%	5.41%	6.35%	6.51%	6.17%
CHO 1	0.78%	0.98%	0.77%	7.20%	7.68%	7.25%	7.98%	8.66%	8.02%
CHO 2	0.68%	0.57%	0.51%	3.95%	3.77%	3.51%	4.63%	4.34%	4.02%
CHO 3	1.11%	0.84%	0.59%	6.44%	6.45%	5.64%	7.55%	7.28%	6.23%
CHO 4	0.81%	0.85%	0.74%	5.84%	6.01%	4.76%	6.65%	6.86%	5.50%
CHO 5	1.01%	1.00%	1.07%	6.42%	6.74%	6.40%	7.43%	7.74%	7.47%
CHO 6	0.50%	0.65%	0.70%	4.49%	4.73%	5.00%	4.99%	5.38%	5.67%
CHO 7	0.88%	0.80%	1.00%	5.62%	5.87%	5.56%	6.50%	6.67%	6.57%
CHO 8	0.93%	1.05%	0.90%	5.44%	6.05%	6.31%	6.37%	7.11%	7.20%
CHO 9	0.68%	0.55%	0.56%	4.89%	4.81%	4.87%	5.57%	5.36%	5.42%
other Comm.	0.52%	0.46%	0.60%	4.08%	3.15%	3.41%	4.60%	3.61%	4.01%

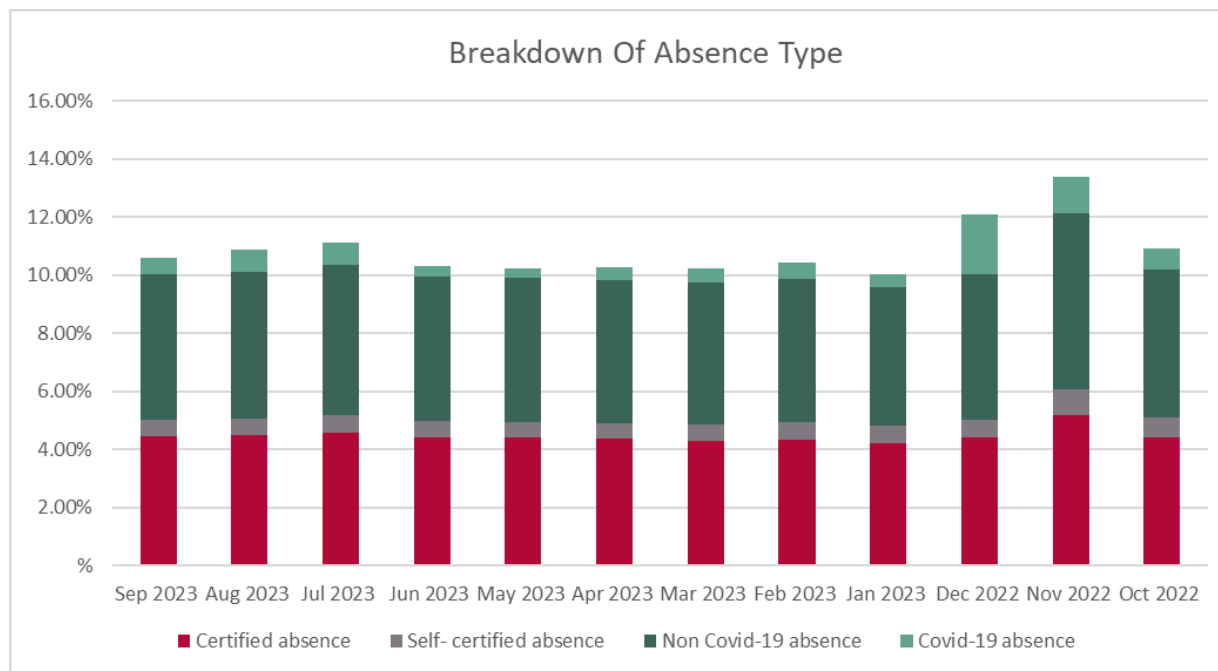


Year-to-date & trends 2008 – 2023

The year to date 2023 figure of **5.57%** has also been impacted by COVID-19 related absence with **0.55%** of the 2023 absence rate (or 9.8% of all 2023 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, 2021, 2022 & 2023.



- When compared with previous years, the 2023 Year to Date figure is running at **1.5%** below the previous annual rate. COVID-19 related absence accounts for **0.5%** of absence so far in 2023. 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%** 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 2023 is the same as what is reported in 2022, however with both years reporting higher than that reported in 2021 and 2020. Notably, 10 years prior to the outbreak of COVID-19, staff absence rate was running at an average of **4.5%**.



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 (EWTd)

	% Compliance with 24 hour shift	% Compliance with 48 hour working week
Acute Hospitals	94.2%	82.1%
Mental Health Services	96.1%	90.3%
Other Agencies	97.3%	91.9%

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 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 22/23	—————
Month 21/22	—————

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
EU North South Commentary	N/A	Non return – due to industrial action
Health & Wellbeing	Immunisations and Vaccines HWB105 % uptake in Flu vaccine for those aged 65 and older	Complete Non Return – data not available
Service User Experience	Complaints investigated within 30 working days	DMHG The Coombe IEHG Royal Victoria Eye & Ear Hospital Saoita Sligo University Hospital National Screening Service
NAS	NAS3 - Total no. of AS1 and AS2 (emergency ambulance) calls - excludes DFB data from June 2023 NAS6 - Number of clinical status 1 ECHO Calls activated - excludes DFB data from June 2023 NAS7 - Number of clinical status 1 ECHO calls arrived at scene (excludes those stood down en route) - excludes DFB data from June 2023 NAS10 - Total number of clinical status 1 ECHO incidents responded to by a patient-carrying vehicle in 18 minutes and 59 seconds or less - excludes DFB data from June 2023 NAS11 - % of clinical status 1 ECHO incidents responded to by a patient-carrying vehicle in 18 minutes and 59 seconds or less - excludes DFB data from June 2023 NAS12 - Number of clinical status 1 DELTA calls – activated - excludes DFB data from June 2023 NAS13 - Number of clinical status 1 DELTA calls arrived at scene (excludes those stood down en route) - excludes DFB data from June 2023 NAS16 - Total number of clinical status 1 DELTA incidents responded to by a patient-carrying vehicle in 18 minutes and 59 seconds or less - excludes DFB data from June 2023 NAS17 - % of clinical status 1 DELTA incidents responded to by a patient-carrying vehicle in 18 minutes and 59 seconds or less - excludes DFB data from June 2023	In recent years, HSE ambulance performance reporting for the Dublin area has also included data shared by Dublin City Council (DCC) in relation to their ambulance service. The HSE has not had any mechanism to validate DCC data which is collected on a separate Computer Aided Dispatch system. A Ministerial Task and Finish Group established in 2022 by the Ministers for Health and Housing, Local Government and Heritage to consider the Ambulance Service Delivery Model in Dublin held a series of meetings between February 2023 and June 2023. The Group have confirmed and agreed that the ambulance service delivered by DCC is a statutory service as provided for in Section 25 of the Fire Services Act 1981 and is not subject to any form of service agreement with the HSE. Consequently, the HSE has no governance or oversight over, or accountability or reporting responsibility for ambulance services delivered by DCC. In this context, HSE ambulance reporting in the Dublin area no longer includes the data shared by DCC.
Acute Hospitals	% of new patients attending rapid access breast (urgent), lung and prostate clinics within recommended timeframe	Please refer to NCCP KPI's below
Acute Hospitals	% of attendances whose referrals were triaged as urgent by the cancer centre and adhered to the national standard of 2 weeks for urgent referrals	UHL outstanding Sept 23 NCCP confirmed this is due to work to rule

Service Area	KPI Title	Data Coverage Issues
Acute Hospitals	% of attendances whose referrals were triaged as non-urgent by the cancer centre and adhered to the National standard of 12 weeks for non-urgent referrals (% offered an appointment that falls within 12 weeks)	UHL outstanding Sept 23 NCCP confirmed this is due to work to rule
Acute Hospitals	% 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	GUH & UHL outstanding Sept 23 NCCP confirmed this is due to work to rule
Acute Hospitals	% 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	GUH outstanding Sept 23 NCCP confirmed this is due to work to rule
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 Aug & Sept 23, SLRON outstanding NCCP confirmed this id due to work to rule Sept 23
Acute Hospitals	Emergency Care - All Emergency Presentations	CHI, Portlaoise, Tullamore, Mullingar, Navan, SLK, Wexford, Cavan, Connolly, Louth, Monaghan, OLOL, SUH, Bantry, Mallow, Mercy, TUH & UHK all have data missing due to work-to-rule industrial action
Acute Hospitals	New ED Attendances	CHI, Portlaoise, Tullamore, Mullingar, Navan, SLK, Wexford, Cavan, Connolly, Louth, Monaghan, OLOL, SUH, Mercy, TUH, & UHK all have data missing due to work-to-rule industrial action
Acute Hospitals	Return ED Attendances	CHI, Portlaoise, Tullamore, Mullingar, Navan, SLK, Wexford, Cavan, Connolly, Louth, Monaghan, OLOL, SUH, Mercy, TUH, & UHK all have data missing due to work-to-rule industrial action
Acute Hospitals	Injury Units Attendances	CHI, Mullingar, Louth, Monaghan, Bantry, Mallow & Mercy all have data missing due to work-to-rule industrial action
Acute Hospitals	Other Emergency Presentations	Portlaoise, SLK, Wexford, Cavan, Mercy, TUH & UHK all have data missing due to work-to-rule industrial action
Acute Hospitals	Number of Births	Portlaoise, Mullingar, SLK, Wexford, Cavan, OLOL, SUH, TUH & UHK all have data missing due to work-to-rule industrial action
Acute Hospitals	Outpatient Attendances (New + Return)	CHI, Portlaoise, Tullamore, Mullingar, Navan, SLK, Wexford, Cavan, Connolly, Louth, Monaghan, OLOL, Sligo, Bantry, Mallow, Mercy, TUH & UHK all have data missing due to work-to-rule industrial action
Acute Hospitals	OPD New Attendances	CHI, Portlaoise, Tullamore, Mullingar, Navan, SLK, Wexford, Cavan, Connolly, Louth, Monaghan, OLOL, Sligo, Bantry, Mallow, Mercy, TUH & UHK all have data missing due to work-to-rule industrial action
Acute Hospitals	OPD Return Attendances	CHI, Portlaoise, Tullamore, Mullingar, Navan, SLK, Wexford, Cavan, Connolly, Louth, Monaghan, OLOL, Sligo, Bantry, Mallow, Mercy, TUH & UHK all have data missing due to work-to-rule industrial action
Acute Hospitals	% of ED patients who leave before completion of treatment	CHI, Portlaoise, Tullamore, Mullingar, Navan, SLK, Wexford, Cavan, Connolly, Louth, Monaghan, OLOL, Sligo, Bantry, Mallow, Mercy, TUH & UHK all have data missing due to work-to-rule industrial action

Service Area	KPI Title	Data Coverage Issues
Acute Hospitals	% of medical patients who are discharged or admitted from AMAU within six hours AMAU registration	Nenagh & Tallaght Adults - delay in data. Tullamore & Mullingar data missing due to work-to-rule industrial action
Acute Hospitals	HCAI Rate of new cases of Hospital acquired S. Aureus bloodstream infection	<p>The following hospitals have September 2023 HCAI data outstanding: CHI at Temple Street, Connolly Hospital, Galway University Hospitals, Letterkenny University Hospital, MRH Portlaoise, MRH Tullamore, Royal Victoria Eye and Ear Hospital, Sligo University Hospital, St. Luke's General Hospital Kilkenny</p> <p>The following hospital have September 2023 bed days used due to the Forsa Union instruction to hold the data locally: Bantry General Hospital, Cavan General Hospital, CHI at Crumlin, CHI at Temple Street, Connolly Hospital, Louth County Hospital, Mallow General Hospital, Mercy University Hospital, MRH Mullingar, MRH Portlaoise, MRH Tullamore, Our Lady of Lourdes Hospital, Our Lady's Hospital Navan, Sligo University Hospital, St. Luke's General Hospital Kilkenny, St. Luke's Radiation Oncology Network, Tipperary University Hospital, UH Kerry, Wexford General Hospital</p> <p>5 cases have been excluded due to no bed days used being reported because it will impact the rates: Mercy University Hospital 2, CHI at Crumlin 1, Our Lady of Lourdes Hospital 1, Tipperary University Hospital 1</p>
Acute Hospitals	Rate of new cases of hospital associated C. difficile infection	<p>The following hospitals have September 2023 HCAI data outstanding: CHI at Temple Street, Connolly Hospital, Galway University Hospitals, Letterkenny University Hospital, MRH Portlaoise, MRH Tullamore, Royal Victoria Eye and Ear Hospital, Sligo University Hospital, St. Luke's General Hospital Kilkenny</p> <p>The following hospital have September 2023 bed days used due to the Forsa Union instruction to hold the data locally: Bantry General Hospital, Cavan General Hospital, CHI at Crumlin, CHI at Temple Street, Connolly Hospital, Louth County Hospital, Mallow General Hospital, Mercy University Hospital, MRH Mullingar, MRH Portlaoise, MRH Tullamore, Our Lady of Lourdes Hospital, Our Lady's Hospital Navan, Sligo University Hospital, St. Luke's General Hospital Kilkenny, St. Luke's Radiation Oncology Network, Tipperary University Hospital, UH Kerry, Wexford General Hospital</p>

Service Area	KPI Title	Data Coverage Issues
		The following hospitals reported cases, however the bed days used are unavailable, therefore the cases are excluded Tipperary University Hospital (4), UH Kerry (3), Cavan General Hospital (2), Our Lady of Lourdes Hospital (2), Mercy University Hospital (1)
Acute Hospitals	No. of new cases of CPE	The following hospitals data is outstanding for Sep-23: CHI at Temple Street, Connolly Hospital, Galway University Hospital, Letterkenny University Hospital, MRH Portlaoise, MRH Tullamore, Royal Victoria Eye and Ear Hospital, Sligo University Hospital, St Luke's General Hospital Kilkenny
Acute Hospitals	Rate of new hospital acquired COVID-19 cases in hospital inpatients	<p>The following hospitals have September 2023 HCAI data outstanding: CHI at Temple Street, Connolly Hospital, Galway University Hospitals, Letterkenny University Hospital, MRH Portlaoise, MRH Tullamore, Royal Victoria Eye and Ear Hospital, Sligo University Hospital, St. Luke's General Hospital Kilkenny</p> <p>The following hospital have September 2023 bed days used due to the Forsa Union instruction to hold the data locally: Bantry General Hospital, Cavan General Hospital, CHI at Crumlin, CHI at Temple Street, Connolly Hospital, Louth County Hospital, Mallow General Hospital, Mercy University Hospital, MRH Mullingar, MRH Portlaoise, MRH Tullamore, Our Lady of Lourdes Hospital, Our Lady's Hospital Navan, Sligo University Hospital, St. Luke's General Hospital Kilkenny, St. Luke's Radiation Oncology Network, Tipperary University Hospital, UH Kerry, Wexford General Hospital</p> <p>79 cases excluded due to no bed days information because it will impact the rates: UH Kerry (19), Cavan General Hospital (17), Wexford General Hospital (13), Mercy University Hospital (12), MRH Mullingar (4), St. Luke's Radiation Oncology Network (4), Tipperary University Hospital (4), Our Lady's Hospital Navan (3), Bantry General Hospital (1), CHI at Crumlin (1), Our Lady of Lourdes Hospital (1)</p>
Acute Hospitals	% of acute hospitals implementing the requirements for screening of patients with Carbapenemase-producing Enterobacterales (CPE) guidelines	The following hospitals data for Q3 2023 is outstanding: Children's Health Ireland (CHI at Crumlin, CHI at Temple St), MRH Portlaoise, MRH Tullamore, Cappagh National Orthopaedic Hospital, Royal Victoria Eye and Ear Hospital, St. Columcille's Hospital, Connolly Hospital, Letterkenny University Hospital, Mayo University Hospital,

Service Area	KPI Title	Data Coverage Issues
		Portiuncula University Hospital, Sligo University Hospital, Bantry General Hospital, Mercy University Hospital
Acute Hospitals	% of acute hospitals implementing the national policy on restricted antimicrobial agents	The following hospitals data for Q3 2023 is outstanding: Children's Health Ireland (CHI at Crumlin, CHI at Temple St), MRH Portlaoise, MRH Tullamore, Cappagh National Orthopaedic Hospital, Royal Victoria Eye and Ear Hospital, St. Columcille's Hospital, Connolly Hospital, Letterkenny University Hospital, Mayo University Hospital, Portiuncula University Hospital, Sligo University Hospital, Bantry General Hospital, Mercy University Hospital

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	South/South West Hospital Group	Sligo University Hospital	SUH
	MRH Portlaoise	Portlaoise		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
Ireland East Hospital Group	Mater Misericordiae University Hospital	MMUH	University of Limerick Hospital Group	South Infirmary Victoria University Hospital	SIVUH
	MRH Mullingar	Mullingar		Tipperary University Hospital	TUH
	National Maternity Hospital	NMH		University Hospital Kerry	UHK
	National Orthopaedic Hospital Cappagh	Cappagh		University Hospital Waterford	UHW
	National Rehabilitation Hospital	NRH		Croom Orthopaedic Hospital	Croom
	Our Lady's Hospital Navan	Navan		Ennis Hospital	Ennis
	Royal Victoria Eye and Ear Hospital	RVEEH		Nenagh Hospital	Nenagh
	St. Columcille's Hospital	Columcille's		St. John's Hospital Limerick	St. John's
	St. Luke's General Hospital Kilkenny	SLK		University Hospital Limerick	UHL
	St. Michael's Hospital	St. Michael's		University Maternity Hospital Limerick	LUMH
	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		LOL			
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			
CHO 2	Community Healthcare West	CHO 7	Dublin South, Kildare and West Wicklow Community Healthcare	
	Galway		Dublin South City	
	Mayo		Dublin South West	
	Roscommon		Dublin West	
CHO 3	Mid West Community Healthcare		CHO 8	Midlands Louth Meath Community Healthcare
	Clare			Laois
	Limerick			Offaly
CHO 4	Cork Kerry Community Healthcare	Longford		
	Cork	Westmeath		
	Kerry	Louth		
CHO 5	South East Community Healthcare	CHO 9		Dublin North City and County Community Healthcare
	Carlow			Dublin North Central
	Kilkenny			Dublin North West
	South Tipperary		Dublin North City	
	Waterford			
	Wexford			