



**An
Phríomh-Oifig
Staidrimh**

Central
Statistics
Office

Summary Quality Report:
Health System Performance
Assessment Platform,
Dept. of Health



Summary Quality Report

For

Health System Performance Assessment Platform

This documentation applies to the reporting period:
2025

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2. Introduction

The Irish Health System Performance Assessment (HSPA) is a reliable framework that provides an overall view on the performance of Ireland's Health system.

This framework looks at outcomes, resources and workforce in the health sector of the country, but also focuses on:

- the equity and level of access to health services;
- the affordability and quality of the care provide;
- the efficiency and safety of the health services;
- the information systems in place for better coordination; and
- the level of continuity of health services.

The HSPA platform has been developed with available data sources to provide a visualisation of the framework. This platform is an important tool in assessing how the National health system is progressing, both over time and internationally. It also allows users to interact with the framework and get key trends on particular areas of interest.

The Department of Health developed the HSPA framework with the assistance of the European Commission and in collaboration with key stakeholders, including the Health Service Executive (HSE). This platform is the first prototype version, with updates in both content and functionalities to be included within future platform versions.

Access to thee HSPA platform can be found here: <https://hspa.gov.ie/>.

More information on the development phase of the HSPA framework can be found here: <https://www.gov.ie/en/department-of-health/publications/health-system-performance-assessment-hspa-framework/>.

3. Contact

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4. Metadata Update

4.1. Metadata last update

07/08/2025

5. Statistical Presentation

5.1. Data Description

The HSPA platform was developed as a visualisation tool to keep track and assess the indicators making up the Irish HSPA framework. The framework is organised into five dimensions and 16 domains, structured as follows:

- i. Outcomes – Health status;
- ii. Outputs – Access, Person-centredness, Quality and Costs;
- iii. Processes – Coordination of care, Integration of services and Continuity of care;
- iv. Structures – Finances, Health workforce, Health services structures, Health technologies and Health information; and
- v. Cross-cutting cluster – Resilience, Equity and Efficiency.

Each domain is then further specified by subdomains and related features, which were populated with over 260 indicators.



5.2. Classification System

The HSPA indicators active on the platform make use of various classifications (e.g. country of birth, level of health-care need, type of hospital, etc.). A description of the classification used is clearly listed for each respective HSPA indicator on the online platform.

5.3. Sector Coverage

For geographical coverage, HSPA indicators cover healthcare activity occurring in the Republic of Ireland, unless otherwise specified in the individual indicator. When international comparison is made, international geographical methodology by Eurostat, OECD and WHO are applied, unless specified otherwise in the individual indicator.

Whenever possible, coverage of the Public, Voluntary and Private healthcare sectors is made to provide a national coverage. Similarly, whenever applicable coverage of healthcare over all sectors of health provision (e.g. acute, psychiatric, community, etc.) is made to provide a holistic picture. However, when this is not possible, coverage notes are included for each respective HSPA indicator on the platform.

5.4. Statistical Concepts and definitions

The HSPA indicators active on the platform make use of various statistical concepts and definitions (e.g. sex, age, type of expenditure, type of records, etc.). A description of the definitions/concepts applied is included in the metadata section for each respective HSPA indicator on the online platform.

5.5. Statistical Unit

The HSPA indicators active on the platform make reference to various statistical units (e.g. eligible service user, person aged 15 and older, euro expenditure, etc.). A description of the statistical unit is clearly referenced for each respective HSPA indicator on the online platform.

5.6. Statistical Population

The HSPA indicators active on the platform make reference to various populations (e.g. eligible service users, population aged 15 and older, total annual expenditure, etc.). A description of the statistical population is clearly referenced for each respective HSPA indicator on the online platform.

5.7. Reference Area

HSPA indicators reflect activity occurring in the Republic of Ireland, unless otherwise specified in the individual indicator. When international comparison is available, international geographical methodology by Eurostat, OECD and WHO are applied, unless specified otherwise in the individual indicator.

5.8. Time Coverage

Each of the active HSPA indicators on the HSPA platform carry their own timeseries, depending on the; data frequency, reference periods and data reporting. For each HSPA indicator on the platform, a time-series is provided in either the visualisation section or the data download section. In addition, information on time series availability and comparability is also included in the respective metadata for each indicator.

6. Unit of Measure

The HSPA indicators active on the platform make reference to various units of measure (e.g. counts, percentage population, percentage of service users, percentage of total expenditure, etc.). Each unit measure applied is clearly stated for each respective HSPA indicator on the online platform.



7. Reference Period

The HSPA indicators active on the platform make use of various reference periods (e.g. calendar year, scholastic year, survey year, etc.). A description of the reference period applied is included for each respective HSPA indicator on the online platform.

8. Institutional Mandate

8.1. Legal Acts and other agreements

The HSPA platform was developed based on the Irish-specific HSPA Framework developed in 2021. The framework development follows closely the renewed Health Systems Performance framework developed earlier by the OECD (link: <https://www.oecd.org/en/topics/health-system-performance.html>).

The Irish HSPA framework consists of 5 dimensions which are made up of different aspects of healthcare processes and is supported by a dashboard of 268 indicators which are available on the HSPA platform (link: <https://hspa.gov.ie/>). More information on the development of the Irish HSPA framework can be found here: <https://www.gov.ie/en/department-of-health/publications/health-system-performance-assessment-hspa-framework/>.

8.2. Data Sharing

Not applicable.

9. Confidentiality

9.1. Confidentiality – policy

The Department of Health's Statistics and Analytics Unit has a confidentiality policy which is available at this link: [department-of-health-confidentiality-policy.pdf](#)

9.2. Confidentiality – data treatment

Since the HSPA platform reports data at a high level, confidentiality is rarely applied. However, should any update in any of the HSPA indicators lead to potentially identifiable information and/or small counts, engagement with the data source to establish preferred data treatment is sought.

10. Release Policy

10.1. Release Calendar

The date of dissemination of all statistics released by CSO can be found in the Statistical Work Plan published on CSO.ie. This calendar is regularly updated.

A release calendar is also available on the Statistics and Analytics Unit webpage on Gov.ie which shows the details of the HSPA platform updates.

10.2. Release calendar access

The Statistical Work Plan of the National Statistical System can be accessed directly from this link: [National Statistical System - CSO - Central Statistics Office](#)

The release calendar on the Statistics and Analytics webpage on Gov.ie can be accessed here at this link: [statistical-release-calendar-a89957fa-c071-4d47-b4c0-78079eb96fc5.pdf](#)



11. Frequency of Dissemination

The HSPA platform is updated four times over a typical calendar year, usually in; March, July, October and December. However, interim updates may occur in case of substantial revisions or corrections.

12. Quality Management

12.1. Quality Assurance

The Statistics and Analytics Unit in the Department of Health has the following Quality Statement that outlines the processes that are carried out to ensure quality: [department-of-health-quality-statement.pdf](#)

12.2. User Needs

The HSPA platform contains indicators developed on the HSPA framework, which was in turn developed in consultation with broad and distinct stakeholders. In addition, the HSPA indicators are also based on national and international key performance indicators, which have been in their turn designed after establishing user needs.

13. Relevance

13.1. Data Completeness

Not applicable.

14. Accuracy and reliability

14.1. Overall accuracy

Considerable efforts are made to ensure that the sourced data for each HSPA indicator active on the HSPA platform closely and correctly reflects the respective indicator. Each HSPA indicator source is reviewed upon each update to ensure that:

- i. Coverage – the data source has maintained the same coverage over the reported timeseries, with any inclusions/exclusions duly noted in the respective metadata sections;
- ii. Data compilation methodology – the data source has maintained the same data compilation methodology over the reported timeseries, with any changes duly noted in the respective metadata sections;
- iii. Relevance to the indicator – the data source is still collecting data that is relevant to the HSPA indicator, with any deviations from the HSPA indicator duly noted in the respective metadata sections; and
- iv. Comparable to other (similar) indicators – where other comparable sources are available, ensure that the data is consistent as much as feasibly possible.

14.2. Non-sampling Error

Not applicable.

14.2.1. Measurement error

Not applicable.

14.2.2. Item Non-Response Rate

Not applicable.



15. Timeliness and punctuality

15.1. Timeliness

The HSPA platform is updated four times over a typical calendar year, usually in; March, July, October and December. However, interim updates may occur in case of substantial revisions or corrections. A schedule of indicators to be updated per each update month is listed on the HSPA platform. This schedule was organised based on the data frequency of the indicators and its usual dissemination timeframe.

15.2. Punctuality

The HSPA platform is updated four times over a typical calendar year, usually in; March, July, October and December. This update schedule has been met each year so far since the HSPA platform launch.

16. Coherence & Comparability

16.1. Comparability – Geographical

HSPA indicators reflect activity occurring in the Republic of Ireland, unless otherwise specified in the individual indicator. When international comparison is available, international geographical methodology by Eurostat, OECD and WHO are applied, unless specified otherwise in the individual indicator.

16.2. Comparability over time

Each of the active HSPA indicators on the HSPA platform carry their own timeseries, depending on the; data frequency, reference periods and data reporting. For each HSPA indicator on the platform, a time-series is provided in either the visualisation section or the data download section. In addition, information on time series availability and comparability is also included in the respective metadata for each indicator.

16.2.1. Length of Comparable Time series

Information on time series availability and comparability is also included in the respective metadata for each indicator.

17. Revisions

17.1. Data Revision Policy

Details on our Revisions policy are found in the following document:

www.gov.ie/pdf/?file=https://assets.gov.ie/203502/aa620091-7be2-40f5-ba95-57d891766ff7.pdf#page=null

17.2. Data Revision Practice

If an error is spotted in either the data source of specific HSPA indicator or on the HSPA platform after publishing, it will be revised as quickly as possible. The corrected figure/s will be double checked and a new HTML version will be published on the official HSPA platform website.

18. Statistical processing

18.1. Source Type

The HSPA indicators active on the platform make use of multiple modes of sources (i.e. administrative, in-person surveys, over-the-phone surveys, expenditure reports, etc.). A description of the source and additional metadata specific to that source is available with each indicator on the online HSPA platform.



18.2. Data Collection

Due to the variation of data sources and data collection modalities referenced in all the HSPA indicators, a description of the data source type and data collection information is included in the metadata specific to that HSPA on the online HSPA platform.

18.3. Data Capture

Due to the variation of data sources and data capture modalities referenced in all the HSPA indicators, a description of the data source type and data capture methods is included in the metadata specific to that HSPA indicator on the online HSPA platform.

18.4. Data Validation

The HSPA does not collect and compile microdata for its indicators, the data included and updated onto the platform is done only at an aggregated level. However, data checks on the aggregated data are carried out, mainly for:

- i. Frequency and timeliness of data availability;
- ii. Comparability issues with respect to consistent methodology in data capture, compilation and dissemination;
- iii. Completeness, in terms of sector coverage for the respective indicator; and
- iv. Time series consistency.

18.5. Data Compilation

The HSPA does not collect and compile microdata for its indicators, the data included and updated onto the platform is done only at an aggregated level. With regards to compilation of figures for dissemination on the online HSPA platform, the following tasks are carried out:

- i. Updating of back-end files setting up the platform;
- ii. Updating any notes/methodology references as necessary;
- iii. Testing of updated data visualisation and interactivity HTML; and
- iv. Testing of updated visualisation and interactivity on various device sizes.

19. Adjustment

Not applicable.

20. Additional Notes

Not applicable.