



**GIG**  
CYMRU  
**NHS**  
WALES

Bwrdd Iechyd Prifysgol  
Bae Abertawe  
Swansea Bay University  
Health Board



<b>Meeting Date</b>	<b>25<sup>th</sup> June 2020</b>	<b>Agenda Item</b>	<b>3.4</b>
<b>Report Title</b>	<b>Integrated Performance Report</b>		
<b>Report Author</b>	Hannah Roan, Head of Performance & Commissioning (interim)		
<b>Report Sponsor</b>	Darren Griffiths, Director of Finance and Performance (interim)		
<b>Presented by</b>	Darren Griffiths, Director of Finance and Performance (interim)		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	The purpose of this report is to provide an update on the current performance of the Health Board at the end of the most recent reporting window in delivering key local performance measures as well as the national measures outlined in the 2020/21 NHS Wales Delivery Framework.		
<b>Key Issues</b>	<p>The Integrated Performance Report is a routine report that provides an overview of how the Health Board is performing against the National Delivery measures and key local quality and safety measures. The traditional format for the report includes identifying actions where performance is not compliant with national or local targets as well as highlighting both short term and long terms risks to delivery. However, due to the operational pressures within the Health Board relating to the COVID-19 pandemic, it was agreed that the narrative update would be omitted from this iteration of the performance report.</p> <p>In addition, RAGing has not been applied to the targeted intervention priorities from the 1<sup>st</sup> April 2020 as the profiles were based on the actions within the 2020/21 annual plan which are now not being progressed due to the COVID19 pandemic. The profiles will need to be revised once the pandemic has subsided and services start to return to a new level of normality.</p> <p><b>Key issues:</b></p> <p><b>Benchmarking-</b> no benchmarking data is currently available following the suspension of national reporting by Welsh Government in response to the COVID19 pandemic. However, on 9<sup>th</sup> June 2020 Welsh health organisations were informed that all data flows to Welsh Government are to be reinstated and that Welsh Government performance team have agreed to return to national reporting of all NHS delivery measures where data has continued to be collected and reported locally. Therefore, it is anticipated that benchmarking data will be reintroduced into the next iteration of the Integrated Performance Report in July 2020.</p>		

**Stroke-** Due to reduced staffing levels and the operational pressures from COVID19, local stroke data has not been reported since February 2020. In line with Welsh Government's instruction that all data flows are to be reinstated, the Stroke team will recommence reporting from June 2020 however it is unlikely that any accurate backdated data to February 2020 will be available.

**Unscheduled Care-** May 2020 started to show signs of increased demand for emergency departments within SBU Health Board and this trend is continuing into June although the level of demand remains significantly lower than previous years. The change in demand in A&E is also reflected in the number of ambulance handovers taking over 1 hour, as there was only 20 recorded for May 2020. This is the lowest number on record.

In May 2020, the Minor Injuries Unit in Neath Port Talbot Hospital continued to exceed the national 4 hour waiting times target of 95%, falling just short of 100% (only 2 of 2,501 patients waited longer than 4 hours). Morriston Hospital's 4 hour performance in May 2020 was 75.6% which is a 6% improvement on April 2020. Morriston also saw an improvement in the 12 hour waiting times target with a reduction of 25% (from 131 in April 2020 to 97 in May 2020), this is the best position since July 2014.

**Planned Care-** On 14<sup>th</sup> March 2020 all Health Boards received written direction from the Welsh Government to suspend non-urgent outpatient appointments (ensuring that urgent appointments are prioritised) and to suspend non-urgent surgical admissions and procedures (whilst ensuring access for emergency and urgent surgery). Consequently, waiting times continue to increase for first outpatient appointments and treatment. In addition there has been a significant increase in the number of patients waiting more than 8 weeks for diagnostics and more than 14 weeks for Therapies Through the Health Board's Rest and Recovery Programme, SBU will focus on reinstating those essential services that were stood down in order to plan and prepare for COVID response

**Cancer-** The backlog of Urgent Suspected Cancer (USC) patients waiting over 53 days significantly increased in April and May 2020. The percentage of USC patients treated within 62 days shows an improving picture for May 2020 however this may be skewed by the low number of patients on a USC pathway as a result of the reduction in USC referrals (-51% in April 2020). May's figures were in the process of being validated at the time of writing this report.

	<p><b>Mental Health-</b> performance against the Mental Health measures continues to be maintained and all targets were achieved in April 2020. Psychological therapies are struggling to achieve the 26 weeks access target and in April 2020 performance fell below 100% for the first time in 15 months.</p> <p><b>Child and Adolescent Mental Health Services (CAMHS)-</b> access to CAMHS services continues to be challenging however, in April 2020 100% urgent assessments were undertaken within 48 hours. Despite the operational pressures from COVID19, the position for the routine access measures in April 2020 was in line with previous months.</p>			
<b>Specific Action Required</b>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>	<b>Approval</b>
			✓	
<b>Recommendations</b>	<p>Members are asked to:</p> <ul style="list-style-type: none"> <li>• <b>NOTE</b> the Health Board performance against key measures and targets.</li> </ul>			

# INTEGRATED PERFORMANCE REPORT

## 1. INTRODUCTION

The purpose of this report is to provide an update on current performance of the Health Board at the end of the most recent reporting window in delivering key performance measures outlined in the 2020/21 NHS Wales Delivery Framework and local quality & safety measures.

## 2. BACKGROUND

The 2020/21 NHS Wales Delivery Framework sets out the 78 measures under the quadruple aims which the performance of the Health Board is measured. The new aims within the NHS Delivery Framework are:

- **Quadruple Aim 1:** People in Wales have improved health and well-being with better prevention and self-management
- **Quadruple Aim 2:** People in Wales have better quality and more accessible health and social care services, enabled by digital and supported by engagement
- **Quadruple Aim 3:** The health and social care workforce in Wales is motivated and sustainable
- **Quadruple Aim 4:** Wales has a higher value health and social care system that has demonstrated rapid improvement and innovation, enabled by data and focused on outcomes

**Appendix 1** provides an overview of the Health Board's latest performance against the Delivery Framework measures along with key local quality and safety measures. The measures within **Appendix 1** have been aligned with the new quadruple aims within the national framework.

The traditional format for the report includes identifying actions where performance is not compliant with national or local targets as well as highlighting both short term and long terms risks to delivery. However, due to the operational pressures within the Health Board relating to the COVID-19 pandemic, it was agreed that the narrative update would be omitted from this iteration of the performance report and that the performance report would have reduced coverage to focus on key performance areas which continue to be routinely reported and where data integrity can be assured.

With this in mind this Performance Report has been stripped back from its usual content to reflect the revised reporting arrangements, to reflect that some data is currently not being captured, but to also provides an overview of the shifts in system delivery. Set out below are the high level areas that will continue to be reported: -

- Mental health
- Unscheduled care
- Planned care (including delayed follow ups)

- Cancer
- Infection control
- Quality and Safety measures to include (serious incidents, complaints response times, pressure ulcers and falls)

It would be helpful if members of the committee could consider this focussed suite of measures and whether further additional measures would assist in providing increased understanding of the changes in our care systems, particular at the time of COVID-19 pressure.

The performance measures reported here, begin to highlight where the healthcare system is starting to change as a result of the need to respond to COVID-19. We are seeing considerable fewer attendances at our emergency departments (page 13, chart 7), reduced levels of referrals from our General Practitioners (page 23, chart 1) and changes to access times for aspects of care (pages 13 and 23).

### **3. GOVERNANCE AND RISK ISSUES**

**Appendix 1** of this report provides an overview of how the Health Board is performing against the National Delivery measures and key local measures. Mitigating actions are listed where performance is not compliant with national or local targets as well as highlighting both short term and long terms risks to delivery.

### **4. FINANCIAL IMPLICATIONS**

At this stage in the financial year there are no direct impacts on the Health Board's financial bottom line resulting from the performance reported herein except for planned care. The Health Board has received additional funding for backlog reduction from Welsh Government and there is the possibility of a clawback at year-end however discussions are ongoing with Welsh Government.

### **5. RECOMMENDATION**

Members are asked to:

- **NOTE** the Health Board performance against key measures and targets.

Governance and Assurance		
Link to Enabling Objectives (please choose)	Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities	
	Partnerships for Improving Health and Wellbeing	<input checked="" type="checkbox"/>
	Co-Production and Health Literacy	<input checked="" type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input checked="" type="checkbox"/>
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	<input checked="" type="checkbox"/>
	Partnerships for Care	<input checked="" type="checkbox"/>
	Excellent Staff	<input checked="" type="checkbox"/>
	Digitally Enabled Care	<input checked="" type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input checked="" type="checkbox"/>
Health and Care Standards		
(please choose)	Staying Healthy	<input checked="" type="checkbox"/>
	Safe Care	<input checked="" type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input checked="" type="checkbox"/>
	Timely Care	<input checked="" type="checkbox"/>
	Individual Care	<input checked="" type="checkbox"/>
	Staff and Resources	<input checked="" type="checkbox"/>
Quality, Safety and Patient Experience		
<p>The performance report outlines performance over the domains of quality and safety and patient experience, and outlines areas and actions for improvement. Quality, safety and patient experience are central principles underpinning the National Delivery Framework and this report is aligned to the domains within that framework.</p> <p>There are no directly related Equality and Diversity implications as a result of this report.</p>		
Financial Implications		
At this stage in the financial year there are no direct impacts on the Health Board's financial bottom line resulting from the performance reported herein.		
Legal Implications (including equality and diversity assessment)		
A number of indicators monitor progress in relation to legislation, such as the Mental Health Measure.		
Staffing Implications		
At this stage in the financial year there are no direct impacts on the Health Board's workforce arising from the production of this report.		

## Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)

The '5 Ways of Working' are demonstrated in the report as follows:

- **Long term** – Actions within this report are both long and short term in order to balance the immediate service issues with long term objectives. In addition, profiles have been included for the Targeted Intervention Priorities for 2019/20 which provides focus on the expected delivery for every month as well as the year end position in March 2020.
- **Prevention** – the NHS Wales Delivery framework provides a measureable mechanism to evidence how the NHS is positively influencing the health and well-being of the citizens of Wales with a particular focus upon maximising people's physical and mental well-being.
- **Integration** – this integrated performance report brings together key performance measures across the seven domains of the NHS Wales Delivery Framework, which identify the priority areas that patients, clinicians and stakeholders wanted the NHS to be measured against. The framework covers a wide spectrum of measures that are aligned with the Well-being of Future Generations (Wales) Act 2015.
- **Collaboration** – in order to manage performance, the Corporate Functions within the Health Board liaise with leads from the Delivery Units as well as key individuals from partner organisations including the Local Authorities, Welsh Ambulance Services Trust, Public Health Wales and external Health Boards.
- **Involvement** – Corporate and Delivery Unit leads are key in identifying performance issues and identifying actions to take forward.

<b>Report History</b>	The last iteration of the Integrated Performance Report was presented to the Health Board in May 2020. This is a routine monthly report.
<b>Appendices</b>	Appendix 1: Integrated Performance Report



GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Bae Abertawe  
Swansea Bay University  
Health Board



## Appendix 1- Integrated Performance Report June 2020





## **CONTENTS PAGE**

	<b>Page number(s):</b>
1. <a href="#"><u>OVERVIEW</u></a>	10
2. <a href="#"><u>TARGETED INTERVENTION PRIORITY MEASURES SUMMARY- HEALTH BOARD LEVEL</u></a>	11
3. <a href="#"><u>MENTAL HEALTH AND LEARNING DISABILITIES</u></a>	12
4. <a href="#"><u>UNSCHEDULED CARE</u></a>	13-22
5. <a href="#"><u>PLANNED CARE</u></a>	23-33
6. <a href="#"><u>QUALITY &amp; SAFETY INDICATORS</u></a>	34-38
7. <a href="#"><u>WORKFORCE</u></a>	39
8. <a href="#"><u>FINANCE</u></a>	40-42
<a href="#"><u>APPENDIX 1: INTEGRATED PERFORMANCE DASHBOARD</u></a>	43-47

## 1. OVERVIEW

The following summarises the key successes, along with the priorities, risks and threats to achievement of the quality, access and workforce standards.

Successes	Priorities
<ul style="list-style-type: none"> <li>All GP practices have remained open during COVID-19 pandemic.</li> <li>Aspects of urgent elective care have recommenced to focus on clinical priority patients</li> <li>Urgent eye surgery and obstetric surgery continues to be in place at Singleton Hospital.</li> <li>Some non-Covid-19 services are being reintroduced but with plans in the background in case of a second wave of infections.</li> <li>The unscheduled care system is working efficiently. In May 2020, NPTH achieved 99% against the 4 hour target and Morriston achieved 75.6% which is the best position for three years. Whilst the number of attendances at the emergency departments is significantly lower than the same period last year, demand is slowly increasing.</li> <li>New critical care area has been set-up in the large open-plan waiting area in the outpatients department in Morriston Hospital and work continues on a self-contained area in the second waiting area.</li> </ul>	<ul style="list-style-type: none"> <li>Communicate with the public that the NHS is 'open for business' for patients seeking help for urgent medical conditions.</li> <li>Implementation of the health board's quarter one operational plan and development of the quarters two and three plans which will need to include a focus on winter planning.</li> <li>Introduction of non-COVID essential services within primary and secondary care in the safest and most sustainable way possible</li> <li>Ensure that clinically urgent and cancer patients continue to be treated and ensure that access to radiotherapy and chemotherapy is maintained.</li> <li>Adoption of the all-Wales COVID-19 Workforce Risk Assessment Tool, which is suitable for use for all staff who are vulnerable or at risk of contracting coronavirus, including people from BAME backgrounds.</li> <li>Continue to support staff health and wellbeing and ensure that staff are able to rest and take their annual leave entitlement.</li> <li>Roll out of Test, Trace and Protect.</li> </ul>
Opportunities	Risks & Threats
<ul style="list-style-type: none"> <li>Continue to explore further utilisation of digital technology to enable new ways of remote working.</li> <li>Services and teams continue to be redesigned in response to the pandemic such as the newly formed Respiratory Support Team who are monitoring and supporting shielding or recently discharged patients by phone, with rapid access to hospital consultants if they need more specialist advice.</li> <li>Additional capacity for managing COVID-19 patients with the establishment two dedicated field hospitals.</li> <li>Introduction of rapid discharge protocols and pathways in partnership with Local Authority partners</li> </ul>	<ul style="list-style-type: none"> <li>The ongoing COVID19 pandemic continues to have a significant impact on the Health Board's ability to meet increasing demands. Extensive work continues to be undertaken in response to the outbreak. Key pressures include: <ul style="list-style-type: none"> <li>Social distancing is limiting the rate at which staff can return to work and rota systems need to be considered alongside a continuation of remote working</li> <li>Reduction in outpatient appointments and elective treatments is increasing waiting times</li> <li>The health board's ability and pace to reintroduce essential services in the safest way for staff and patients</li> </ul> </li> </ul>

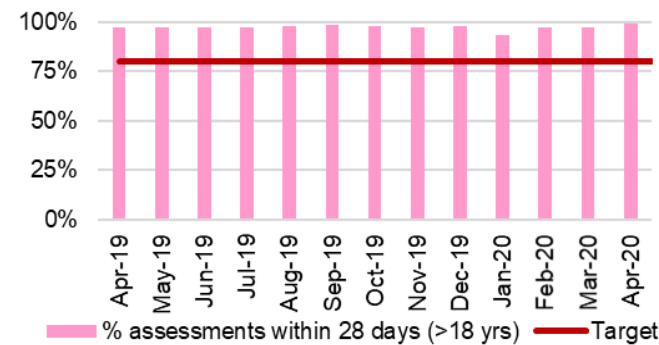
## 2. TARGETED INTERVENTION PRIORITY MEASURES SUMMARY (HEALTH BOARD LEVEL) –May 2020

			Quarter 1			Quarter 2			Quarter 3			Quarter 4		
			Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-20	Feb-20	Mar-20
Unscheduled Care	4 hour A&E waits	Actual	78.4%	83.5%										
		Profile	76.8%	77.2%	77.1%	78.8%	78.4%	77.7%	78.5%	78.9%	78.5%	79.0%	81.4%	82.5%
	12 hour A&E waits	Actual	131	97										
		Profile	319	290	310	297	342	413	378	402	424	354	327	209
	1 hour ambulance handover	Actual	61	20										
		Profile	332	311	337	262	286	352	375	373	386	301	303	183
Stroke	Direct admission within 4 hours	Actual												
		Profile	61%	53%	56%	54%	41%	52%	64%	59%	63%	58%	77%	68%
	CT scan within 1 hour	Actual												
		Profile												
	Assessed by Stroke Specialist within 24 hours	Actual												
		Profile	96%	95%	95%	98%	97%	95%	95%	98%	98%	96%	96%	99%
	Thrombolysis door to needle within 45 minutes	Actual												
		Profile												
Planned care	Outpatients waiting more than 26 weeks	Actual	5,499	9,300										
		Profile												
	Treatment waits over 36 weeks	Actual	8,355	10,247										
		Profile	6,013	5,895	6,187	6,627	6,868	7,374	7,287	7,590	8,185	8,263	8,454	8,620
	Diagnostic waits over 8 weeks	Actual	5,788	8,346										
		Profile	400	390	380	370	330	250	180	150	130	100	50	0
	Therapy waits over 14 weeks	Actual	387	982										
		Profile	0	0	0	0	0	0	0	0	0	0	0	0
Cancer	NUSC patients starting treatment in 31 days	Actual	97%	82%										
		Profile	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%
	USC patients starting treatment in 62 days	Actual	81%	86%										
		Profile	87%	83%	86%	86%	90%	93%	92%	91%	96%	95%	94%	94%
Healthcare Acquired Infections	Number of healthcare acquired C.difficile cases	Actual	11	16										
		Profile	8	8	9	8	9	8	9	8	7	8	7	8
	Number of healthcare acquired S.Aureus Bacteraemia cases	Actual	10	6										
		Profile	7	6	6	7	6	7	6	7	6	7	6	6
	Number of healthcare acquired E.Coli Bacteraemia cases	Actual	14	14										
		Profile	22	22	22	22	22	22	22	22	21	21	21	21
	Number of healthcare acquired Klebsiella Bacteraemia cases	Actual	6	6										
		Profile	9	8	8	6	7	6	7	7	7	7	6	6
	Number of healthcare acquired Pseudomonas aeruginosa cases	Actual	2	5										
		Profile	2	3	2	2	3	2	2	1	2	2	1	0

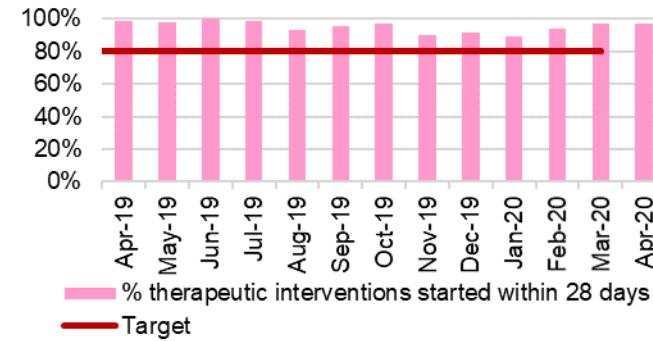
- No RAG status provided as profiles were aligned to the actions in the 20/21 annual plan which are not currently being progressed due to COVID19
- The profiles included are the profiles set out in the original 2020/21 Annual plan
- No benchmarking data available as Welsh Government has stood down performance reporting arrangements during the COVID19 pandemic

### 3.1 Mental Health and Learning Disabilities- Overview

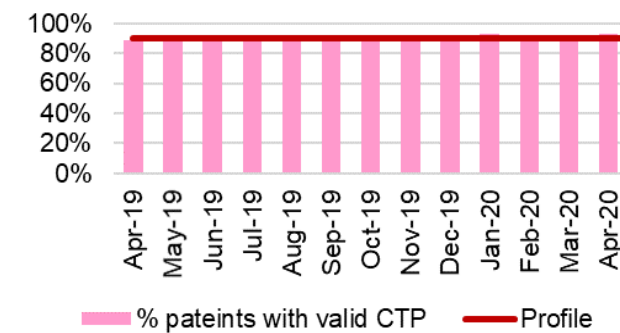
**Chart 1: % of mental health assessments undertaken within (up to and including) 28 days from the date of receipt of referral**



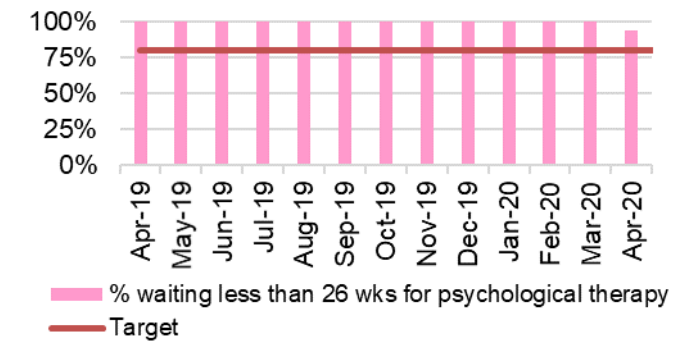
**Chart 2: % of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS**



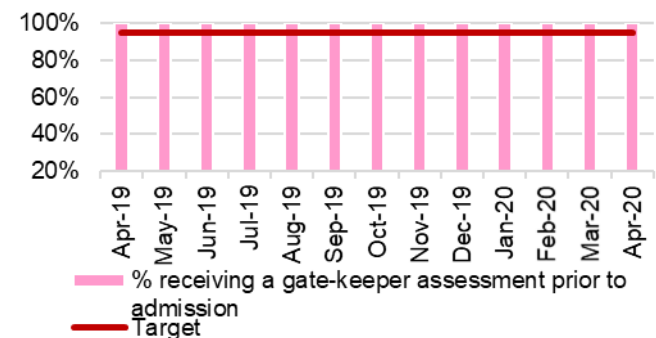
**Chart 3: % of health board residents in receipt of secondary mental health services (all ages) who have a valid care and treatment plan (CTP)**



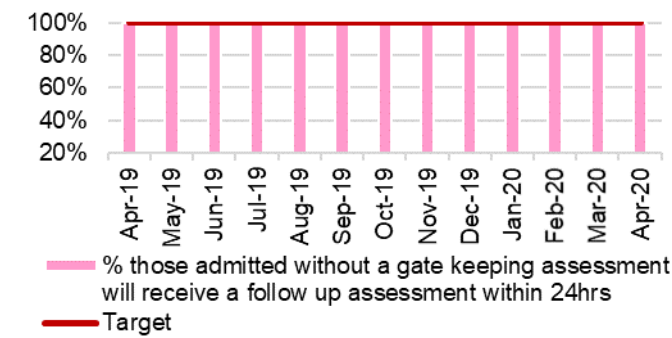
**Chart 4: % of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health**



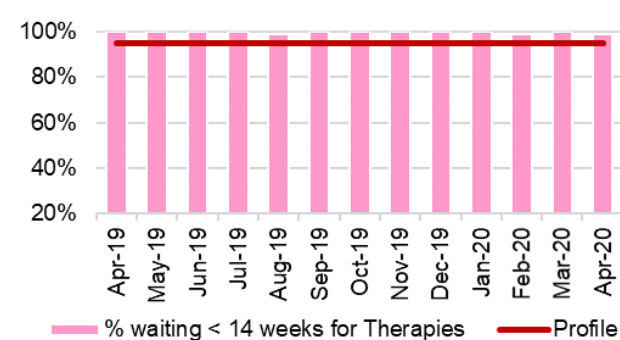
**Chart 5: 95% of those admitted 0900-2100 will receive a gate-keeping assessment by the CRHTS prior to admission**



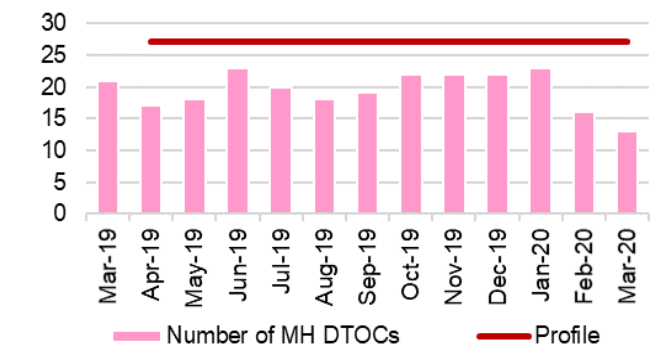
**Chart 6: 100% of those admitted without a gate keeping assessment will receive a follow up assessment by CRHTS within 24hrs of admission**



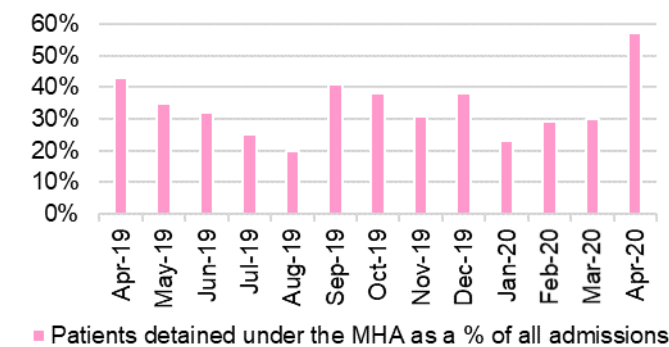
**Chart 7: % of patients waiting under 14 weeks for Therapies**



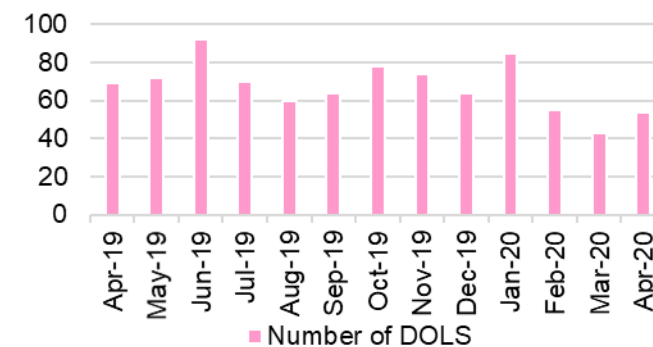
**Chart 8: Number of Mental Health Delayed Transfers of Care (DTOCs)**



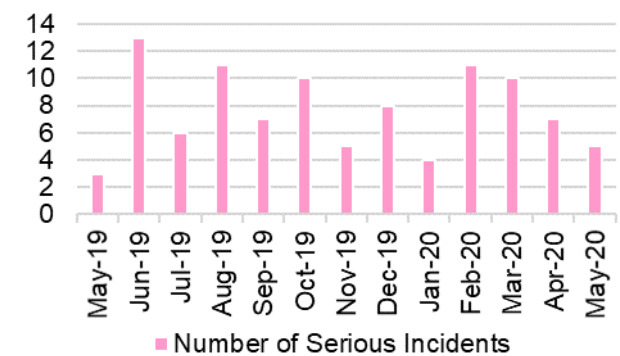
**Chart 9: Number of patients detained under the Mental Health Act as a percentage of all admissions**



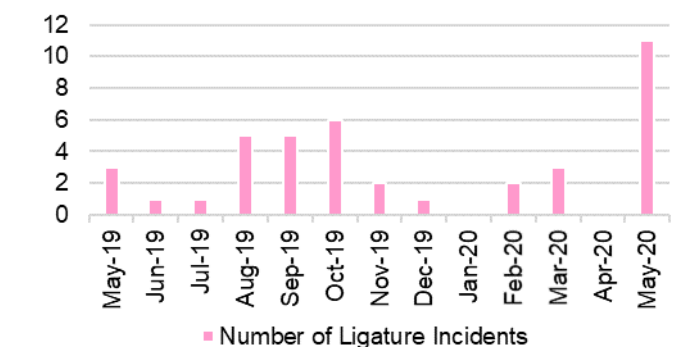
**Chart 10: Number of patients subject to Deprivation of Liberty Safeguards (DOLS)**



**Chart 11 Number of Serious Incidents**

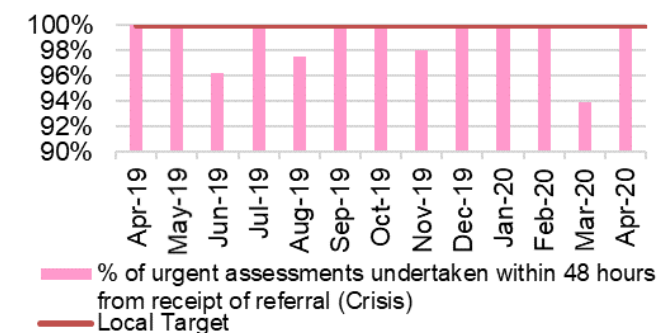


**Chart 12: Number of ligature incidents**

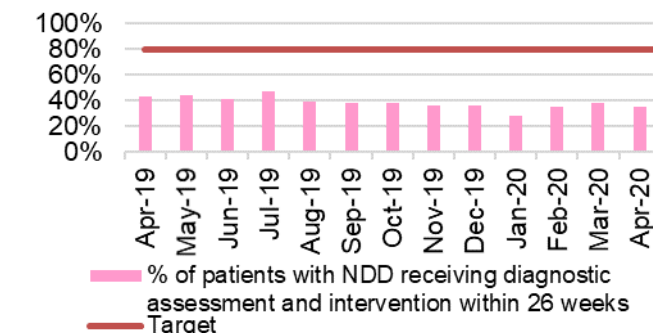


### Child & Adolescent Mental Health Services (CAMHS)

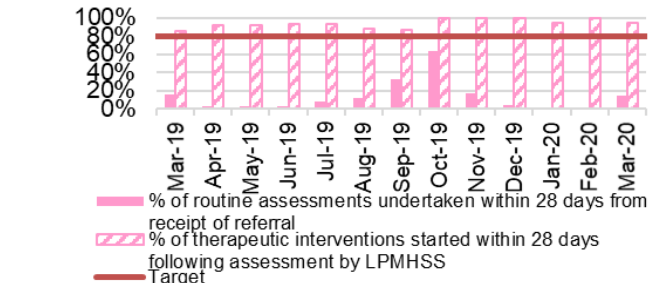
**Chart 13: Urgent assessments undertaken within 24 hours from receipt of referral**



**Chart 14: Neuro-developmental disorder assessment and intervention received within 26 weeks**

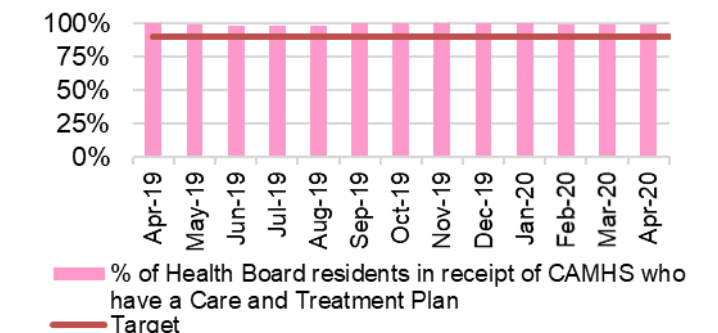


**Chart 15: Assessment and intervention within 28 days**



\* Apr-20 data not available at the time of writing this report

**Chart 16: residents with a Care and Treatment Plan**



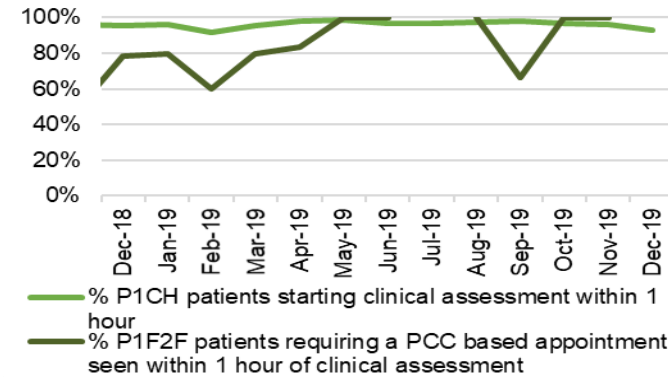


## 4.1 Unscheduled Care- Overview

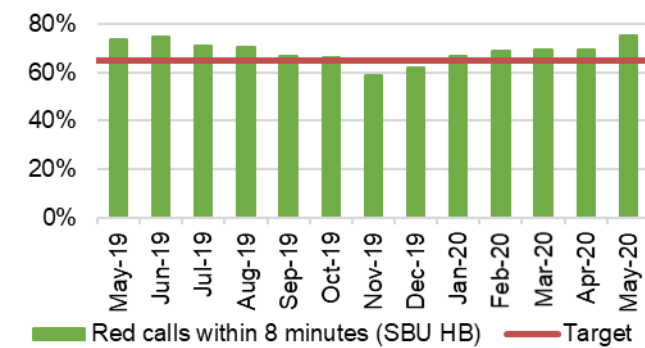
**Chart 1: % GP practices offering daily appointments between 5pm- 6:30pm**



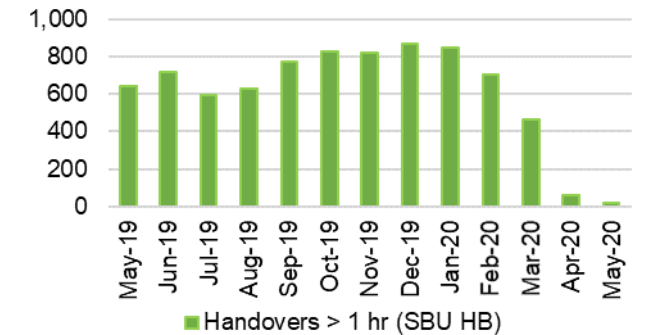
**Chart 2: GP Out of Hours/ 111**



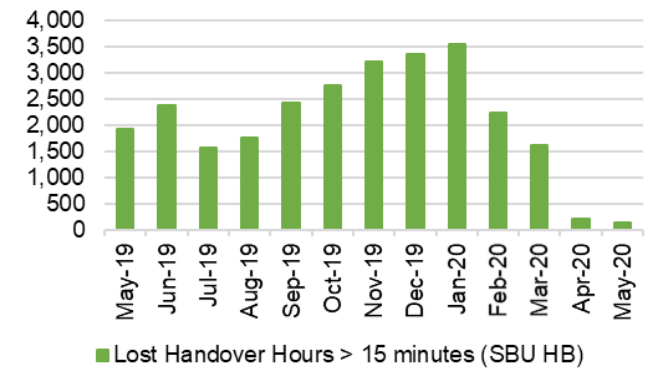
**Chart 3: % red calls responded to within 8 minutes**



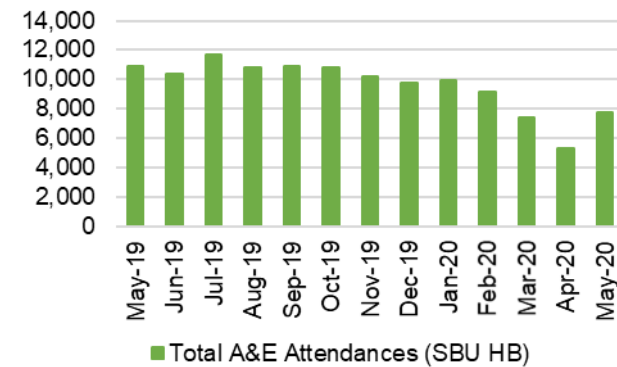
**Chart 4: Number of ambulance handovers over 1 hour**



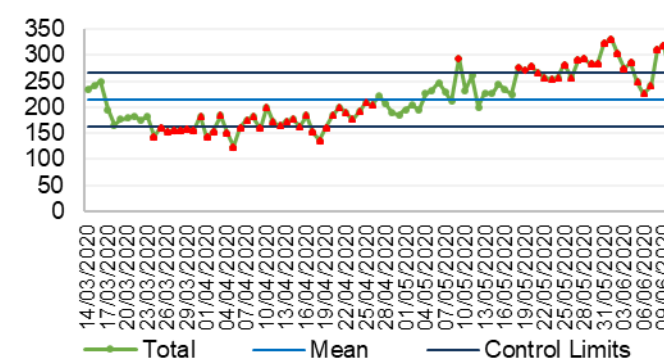
**Chart 5: Lost hours- notification to ambulance handover over 15 minutes**



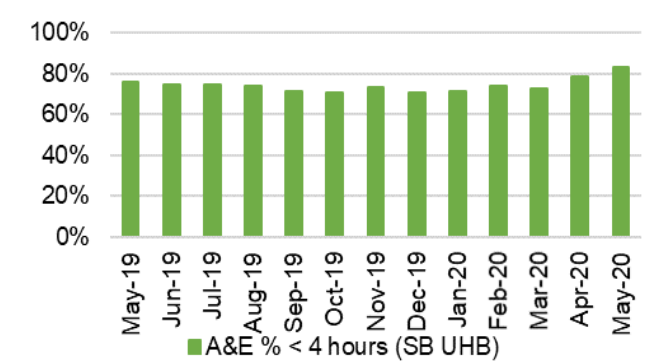
**Chart 6: A&E Attendances**



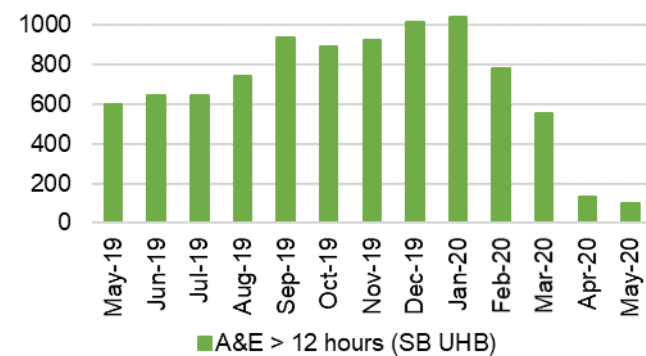
**Chart 7: 90 days ED Attendance (14/03/20 to 11/06/20)**



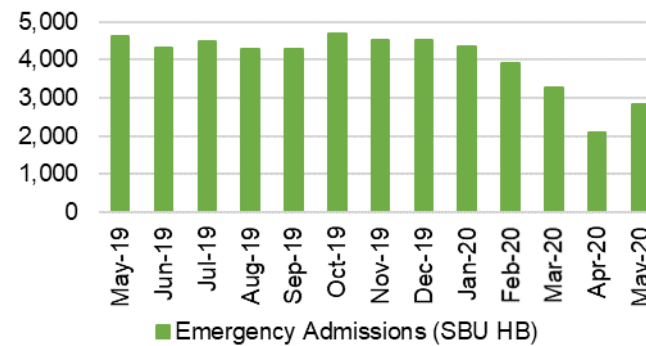
**Chart 8: % patients who spend less than 4 hours in A&E**



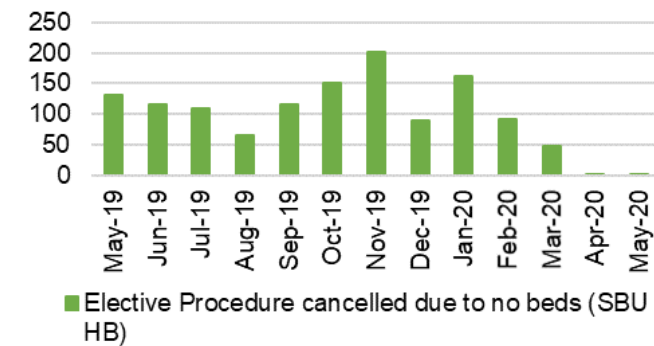
**Chart 9: Number of patients waiting over 12 hours in A&E**



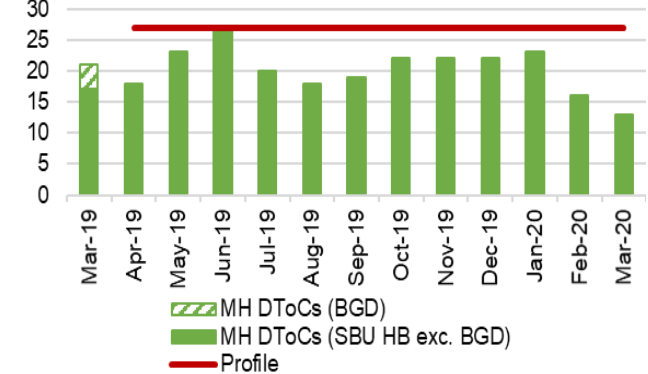
**Chart 10: Number of emergency admissions**



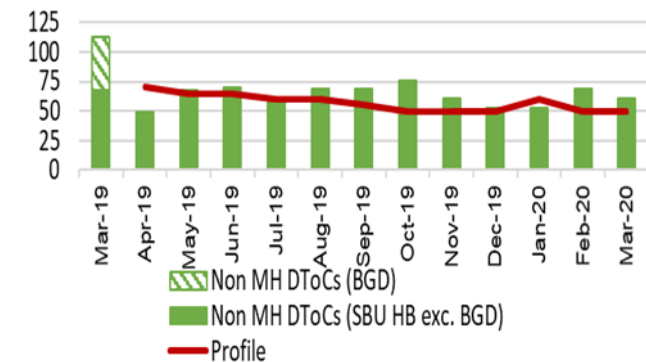
**Chart 11: Elective procedures cancelled due to lack of beds**



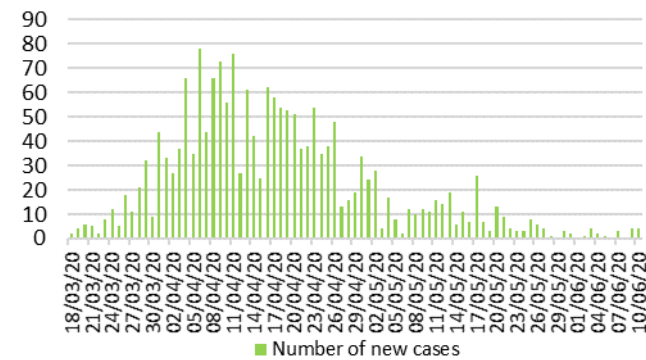
**Chart 12: : Number of mental health delayed transfers of care**



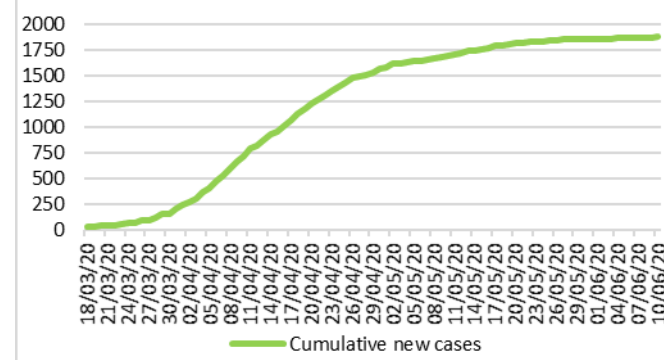
**Chart 13: Number of non- mental health delayed transfers of care**



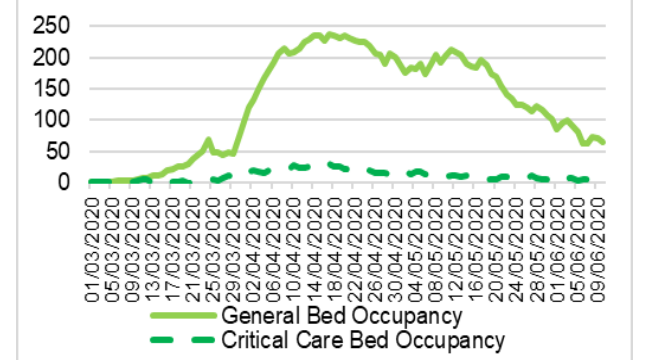
**Chart 14: Number of new positive COVID-19 cases (13/03/20 to 10/06/20)**



**Chart 15: Number of cumulative COVID-19 positive cases (01/03/20 to 10/06/20)**



**Chart 16: Confirmed and Suspected COVID-19 patient bed utilisation (01/03/20 to 10/06/20)**



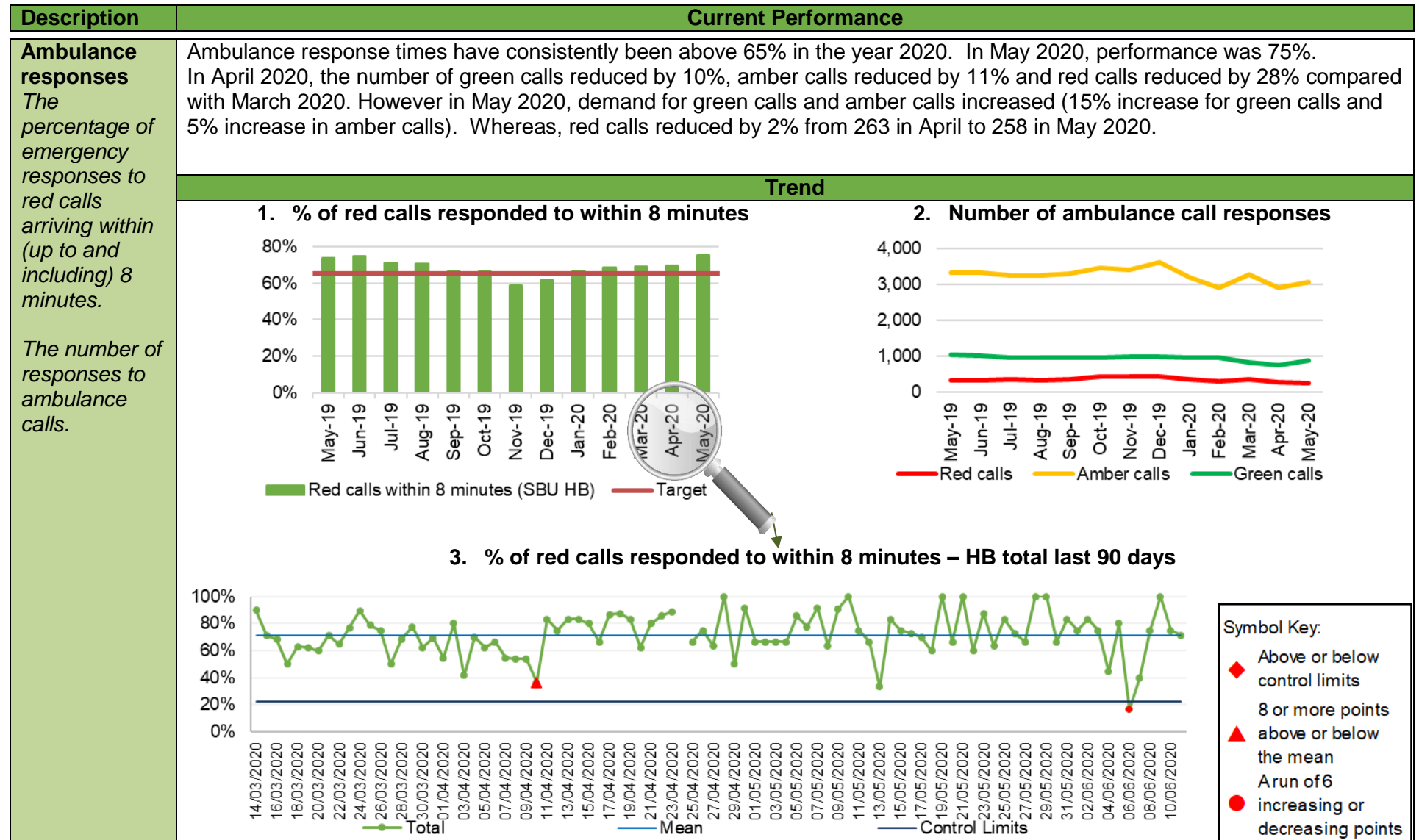
## Unscheduled Care Overview (May 2020)

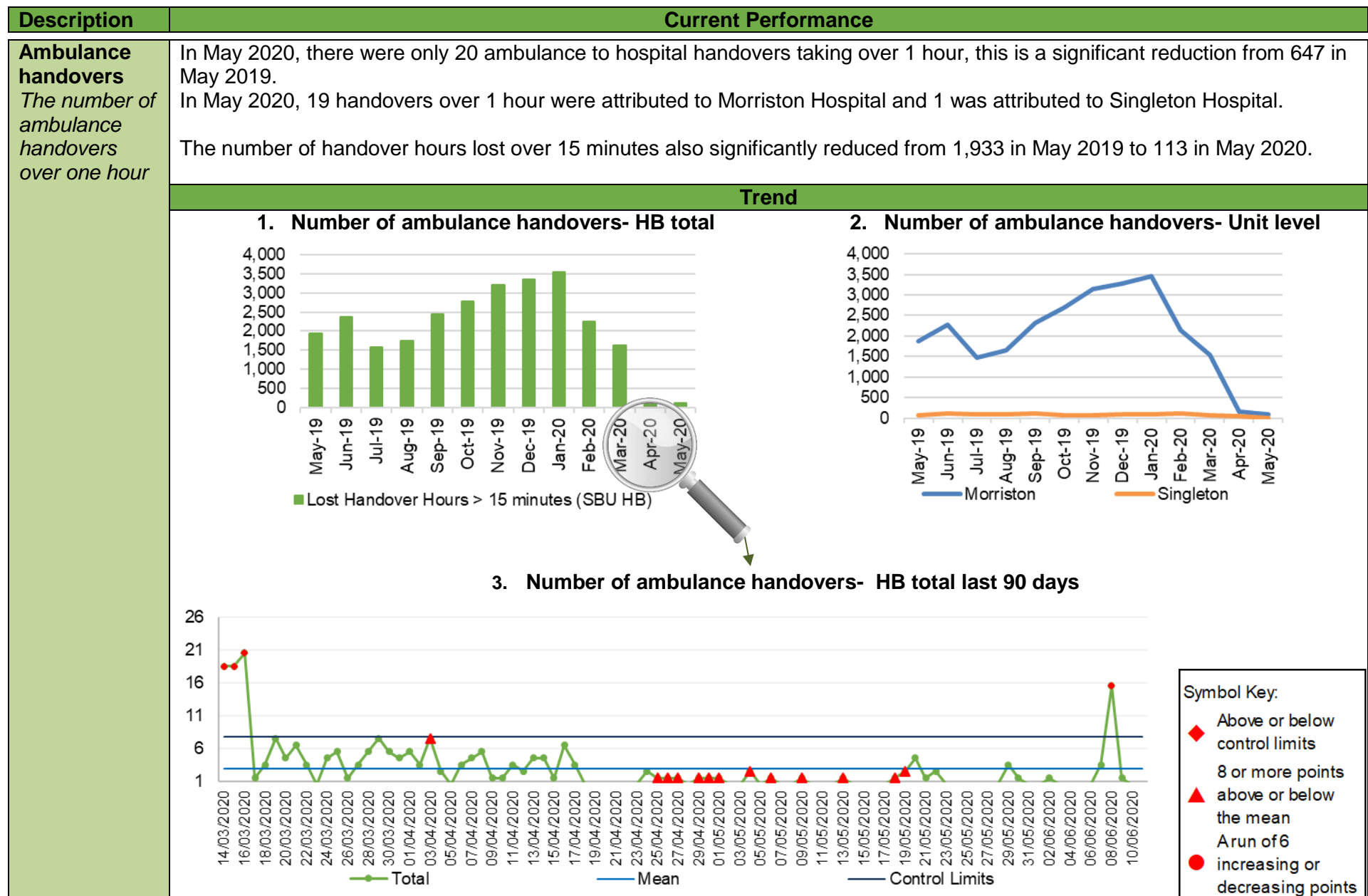
Primary Care Access		Ambulance	Emergency Department	
<b>97% (→)</b> GP practices open during daily core hours	<b>88% (→)</b> GP practices offering appointments between 5pm-6:30pm	<b>75.0% (5.5%↑)</b> Red calls responded to within 8 minutes	<b>7,761 (47%↑)</b> A&E attendances	<b>83.45% (5.1%↑)</b> Waits in A&E under 4 hours
<b>93% (3%↓)</b> % of Out of Hours (OoH)/111 patients prioritised as P1CH that started their definitive clinical assessment within 1 hour of their initial call being answered ( <i>July-19</i> )	<b>100% (50%↑)</b> % of Out of Hours (OOH)/111 patients prioritised as P1F2F requiring a Primary Care Centre (PCC) based appointment seen within 1 hour following completion of their definitive clinical assessment ( <i>Jun-19</i> )	<b>20 (67%↓)</b> Ambulance handovers over 1 hour	<b>97 (26%↓)</b> Waits in A&E over 12 hours	<b>1,423 (47%↑)</b> Patients admitted from A&E
		<b>3,057 (5%↑)</b> Amber calls		
		<b>258 (2%↓)</b> Red calls		
Emergency Activity		Patient Flow		
<b>2,821 (36%↑)</b> Emergency Inpatient Admissions	<b>273 (24%↑)</b> Emergency Theatre Cases	<b>13 (19%↓) (Mar-20)</b> Mental Health DTOCs * Data collection temporarily suspended	<b>60 (13%↓) (Mar-20)</b> Non-Mental Health DTOCs * Data collection temporarily suspended	
<b>127273 (21%↑)</b> Trauma theatre cases	<b>2 (100%↑)</b> Elective procedures cancelled due to no beds			<b>79 (9%↓)</b> Medically fit patients

\*RAG status and trend is based on in month-movement

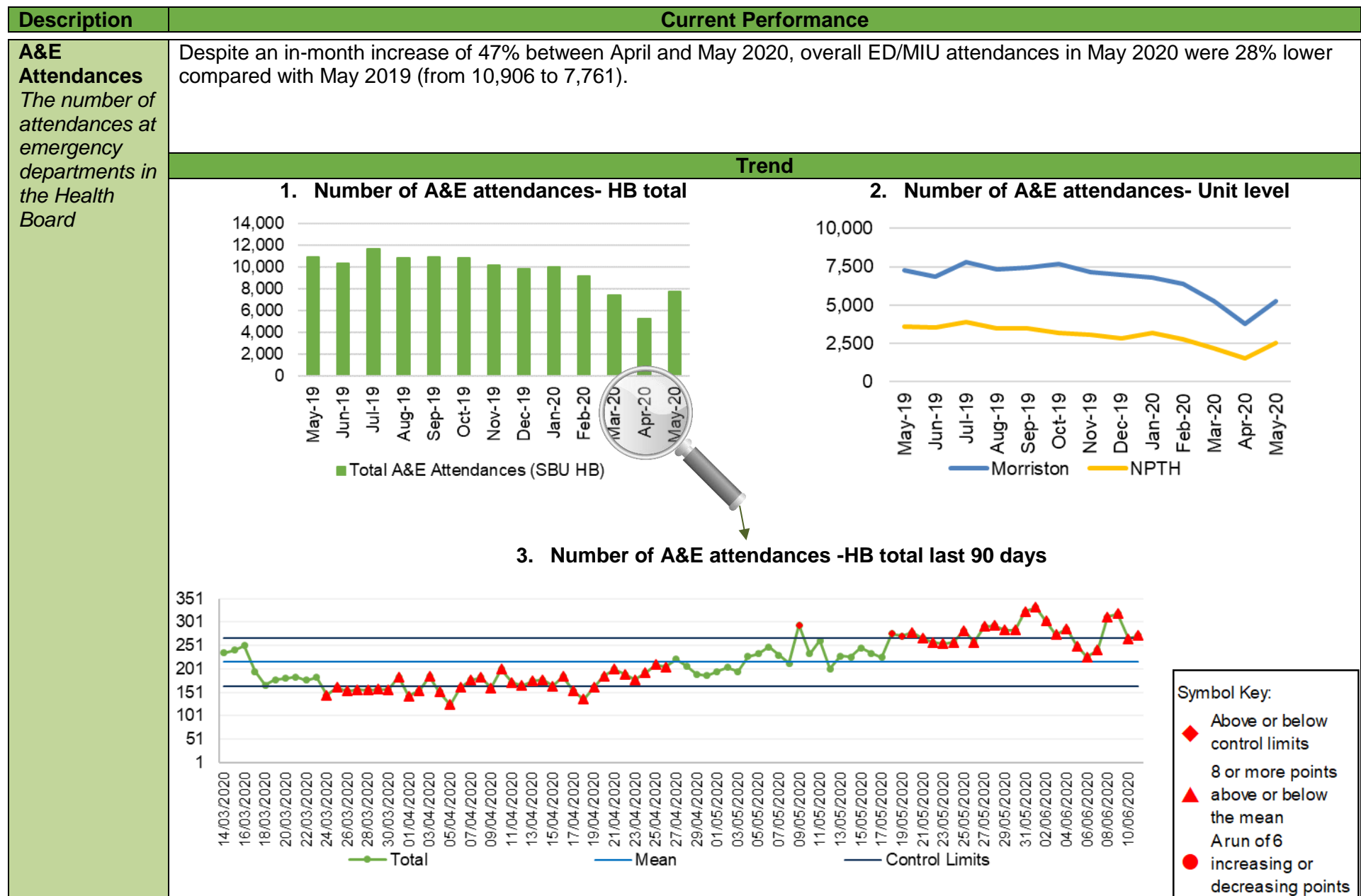
## 4.2 Unscheduled Care - Updates

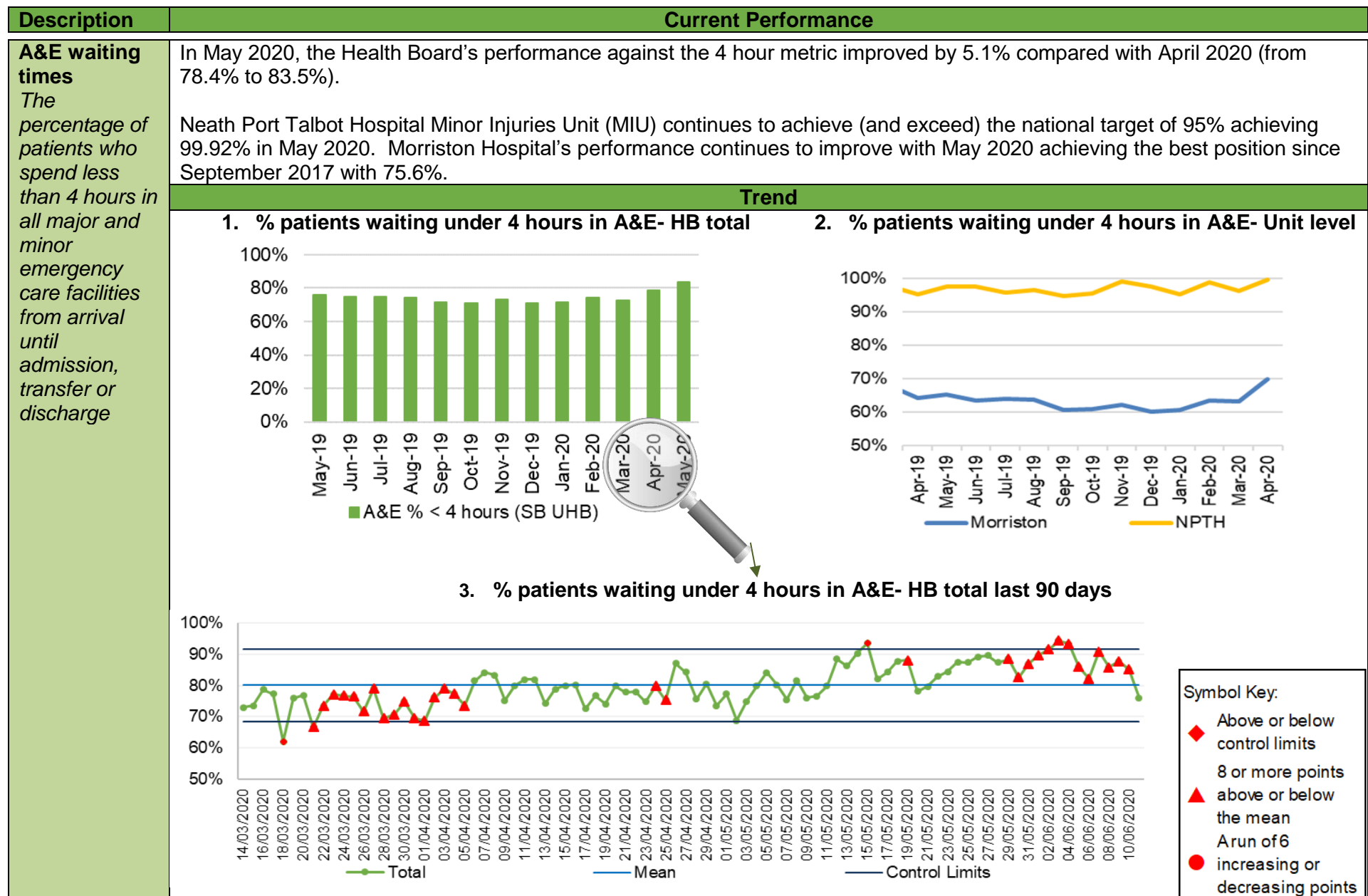
This section of the report provides further detail on key unscheduled care measures.

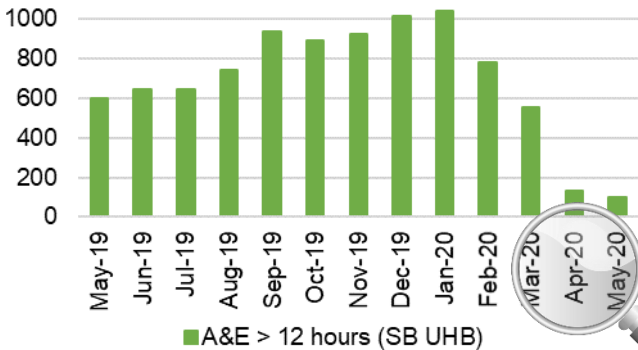
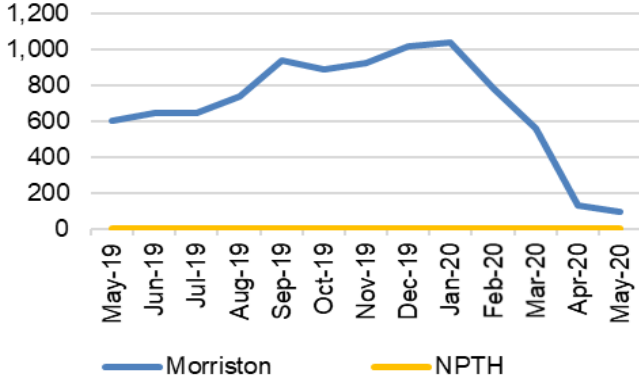
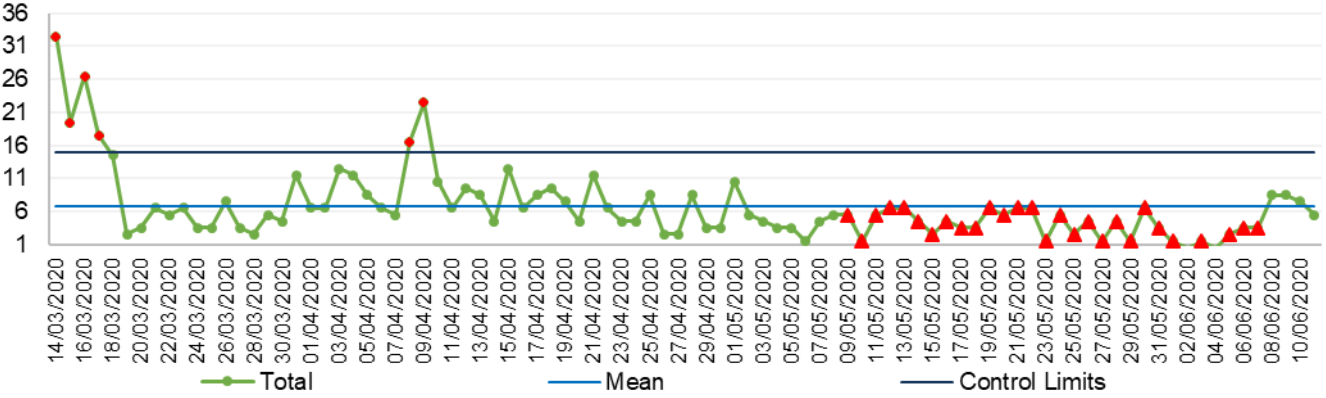




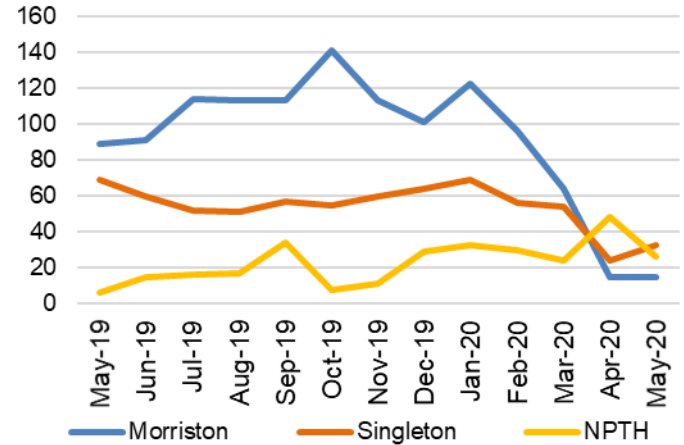
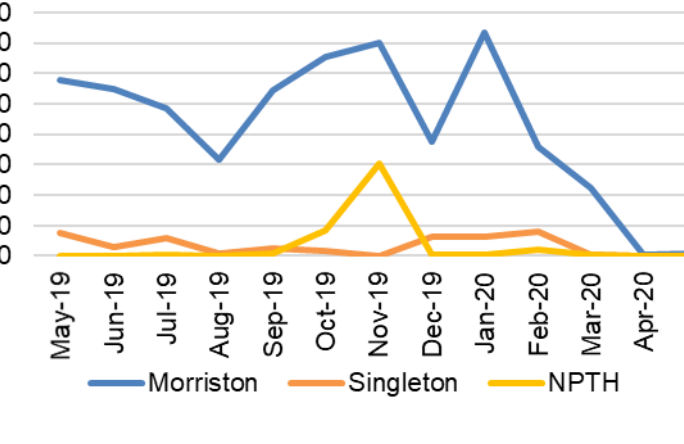






Description	Current Performance
<b>A&amp;E waiting times</b> <i>The number of patients who spend 12 hours or more in all hospital major and minor care facilities from arrival until admission, transfer or discharge</i>	<p>In May 2020, performance against this measure improved compared with April 2020 reducing from 731 to 97. All patients waiting over 12 hours in May 2020 were in Morriston Hospital. The position in May 2020 for Morriston Hospital was the best position since July 2014.</p>
	<p style="text-align: center;"><b>Trend</b></p>
	<div style="display: flex; justify-content: space-around;"> <div style="width: 45%;"> <p><b>1. Number of patients waiting over 12 hours in A&amp;E- HB total</b></p>  <p>■ A&amp;E &gt; 12 hours (SB UHB)</p> </div> <div style="width: 45%;"> <p><b>2. Number of patients waiting over 12 hours in A&amp;E- Unit level</b></p>  <p>— Morriston      — NPTH</p> </div> </div> <div style="margin-top: 20px;"> <p><b>3. Number of patients waiting over 12 hours in A&amp;E – HB total last 90 days</b></p>  <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p><b>Symbol Key:</b></p> <ul style="list-style-type: none"> <li>◆ Above or below control limits</li> <li>8 or more points above or below the mean</li> <li>▲ above or below the mean</li> <li>— A run of 6</li> <li>● increasing or decreasing points</li> </ul> </div> </div>

Description	Current Performance
<b>Emergency admissions</b>  <i>The number of emergency inpatient admissions</i>	<p>In May 2020, there were 2,821 emergency admissions across the Health Board which is 749 (+36%) more admissions than in April 2020.</p> <p>Morryston saw the largest in-month increase with reduction with 712 more admissions (from 1,490 in April 2020 to 2,202 in May 2020).</p>
	<b>Trend</b>
	<div> <div> <p><b>1. Number of emergency admissions- HB total</b></p> <p>■ Emergency Admissions (SBU HB)</p> </div> <div> <p><b>2. Number of emergency admissions</b></p> <p>— Morryston — Singleton — NPTH</p> </div> <div> <p><b>3. Number of emergency admissions- HB total last 90 days</b></p> <p>● Total — Mean — Control Limits</p> <p><b>Symbol Key:</b></p> <ul style="list-style-type: none"> <li>◆ Above or below control limits</li> <li>▲ 8 or more points above or below the mean</li> <li>● Arun of 6</li> <li>● increasing or decreasing points</li> </ul> </div> </div>

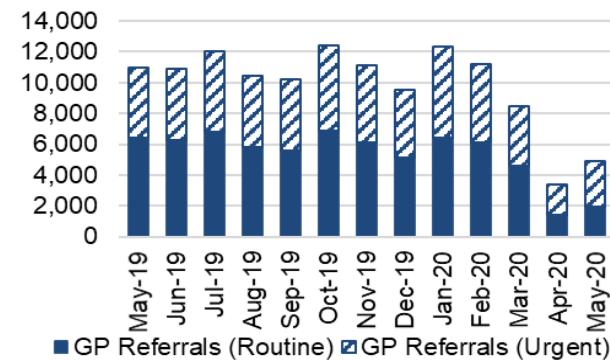
Description	Current Performance	Trend																																																								
<b>Medically Fit</b> <i>The number of patients waiting at each site in the Health Board that are deemed discharge/ medically fit</i>	<p>In May 2020, there were on average 79 patients who were deemed medically/ discharge fit but were still occupying a bed in the Health Board’s Hospitals.</p> <p>This figure has seen a continual reduction since January 2020 (from 224 in January, to 182 in February, to 142 in March and 87 in April).</p>	<p><b>The number of discharge/ medically fit patients by site</b></p>  <table><caption>Estimated data for Discharge/medically fit patients</caption><thead><tr><th>Month</th><th>Morrison</th><th>Singleton</th><th>NPTH</th></tr></thead><tbody><tr><td>May-19</td><td>90</td><td>70</td><td>10</td></tr><tr><td>Jun-19</td><td>95</td><td>60</td><td>15</td></tr><tr><td>Jul-19</td><td>115</td><td>50</td><td>15</td></tr><tr><td>Aug-19</td><td>115</td><td>50</td><td>15</td></tr><tr><td>Sep-19</td><td>115</td><td>55</td><td>35</td></tr><tr><td>Oct-19</td><td>140</td><td>55</td><td>10</td></tr><tr><td>Nov-19</td><td>115</td><td>60</td><td>10</td></tr><tr><td>Dec-19</td><td>100</td><td>65</td><td>30</td></tr><tr><td>Jan-20</td><td>120</td><td>70</td><td>35</td></tr><tr><td>Feb-20</td><td>100</td><td>55</td><td>25</td></tr><tr><td>Mar-20</td><td>60</td><td>55</td><td>30</td></tr><tr><td>Apr-20</td><td>15</td><td>25</td><td>45</td></tr><tr><td>May-20</td><td>15</td><td>30</td><td>30</td></tr></tbody></table>	Month	Morrison	Singleton	NPTH	May-19	90	70	10	Jun-19	95	60	15	Jul-19	115	50	15	Aug-19	115	50	15	Sep-19	115	55	35	Oct-19	140	55	10	Nov-19	115	60	10	Dec-19	100	65	30	Jan-20	120	70	35	Feb-20	100	55	25	Mar-20	60	55	30	Apr-20	15	25	45	May-20	15	30	30
Month	Morrison	Singleton	NPTH																																																							
May-19	90	70	10																																																							
Jun-19	95	60	15																																																							
Jul-19	115	50	15																																																							
Aug-19	115	50	15																																																							
Sep-19	115	55	35																																																							
Oct-19	140	55	10																																																							
Nov-19	115	60	10																																																							
Dec-19	100	65	30																																																							
Jan-20	120	70	35																																																							
Feb-20	100	55	25																																																							
Mar-20	60	55	30																																																							
Apr-20	15	25	45																																																							
May-20	15	30	30																																																							
<b>Elective procedures cancelled due to lack of beds</b> <i>The number of elective procedure cancelled across the hospital where the main cancellation reasons was lack of beds</i>	<p>In May 2020, there were two elective procedure cancelled due to lack of beds on the day of surgery. This is one more cancellation that in April 2020 (from 1 to 2).</p> <p>In May 2020 both of the cancelled procedures were attributed to Morrison Hospital.</p>	<p><b>Total number of elective procedures cancelled due to lack of beds</b></p>  <table><caption>Estimated data for Elective procedures cancelled</caption><thead><tr><th>Month</th><th>Morrison</th><th>Singleton</th><th>NPTH</th></tr></thead><tbody><tr><td>May-19</td><td>115</td><td>15</td><td>5</td></tr><tr><td>Jun-19</td><td>105</td><td>10</td><td>5</td></tr><tr><td>Jul-19</td><td>95</td><td>15</td><td>5</td></tr><tr><td>Aug-19</td><td>65</td><td>5</td><td>5</td></tr><tr><td>Sep-19</td><td>105</td><td>5</td><td>5</td></tr><tr><td>Oct-19</td><td>130</td><td>10</td><td>15</td></tr><tr><td>Nov-19</td><td>140</td><td>5</td><td>60</td></tr><tr><td>Dec-19</td><td>75</td><td>10</td><td>5</td></tr><tr><td>Jan-20</td><td>145</td><td>15</td><td>5</td></tr><tr><td>Feb-20</td><td>70</td><td>15</td><td>5</td></tr><tr><td>Mar-20</td><td>45</td><td>5</td><td>5</td></tr><tr><td>Apr-20</td><td>10</td><td>5</td><td>5</td></tr><tr><td>May-20</td><td>5</td><td>5</td><td>5</td></tr></tbody></table>	Month	Morrison	Singleton	NPTH	May-19	115	15	5	Jun-19	105	10	5	Jul-19	95	15	5	Aug-19	65	5	5	Sep-19	105	5	5	Oct-19	130	10	15	Nov-19	140	5	60	Dec-19	75	10	5	Jan-20	145	15	5	Feb-20	70	15	5	Mar-20	45	5	5	Apr-20	10	5	5	May-20	5	5	5
Month	Morrison	Singleton	NPTH																																																							
May-19	115	15	5																																																							
Jun-19	105	10	5																																																							
Jul-19	95	15	5																																																							
Aug-19	65	5	5																																																							
Sep-19	105	5	5																																																							
Oct-19	130	10	15																																																							
Nov-19	140	5	60																																																							
Dec-19	75	10	5																																																							
Jan-20	145	15	5																																																							
Feb-20	70	15	5																																																							
Mar-20	45	5	5																																																							
Apr-20	10	5	5																																																							
May-20	5	5	5																																																							

Description	Current Performance	Trend
<b>Delayed Transfers of Care (DTOC)</b>  <i>The number of DTOCs per Health Board- Mental Health (all ages)</i>	<p>The number of mental health related delayed transfers of care in March 2020 from 16 to 13. This is the best position in 2019/20.</p> <p><i>* DTOC data collection has been temporarily suspended</i></p>	<p><b>Number of Mental Health DTOCs</b></p>
<b>Delayed Transfers of Care (DTOC)</b>  <i>The number of DTOCs per Health Board - Non Mental Health (age 75+)</i>	<p>In March 2020, the number of non-mental health and learning disability delayed transfers of care was 60. This is 13% less than in February 2020 (from 69 to 60)</p> <p><i>* DTOC data collection has been temporarily suspended</i></p>	<p><b>Number of Non Mental Health DTOCs</b></p>

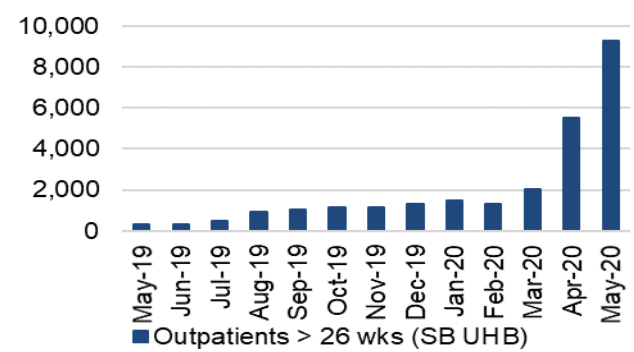


## 5.1 Planned Care- Overview

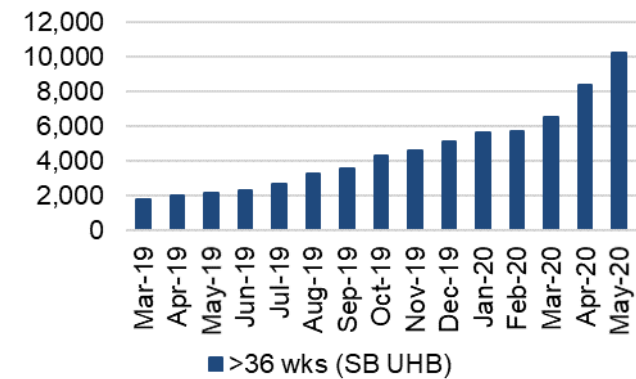
**Chart 1: Number of GP Referrals into secondary care**



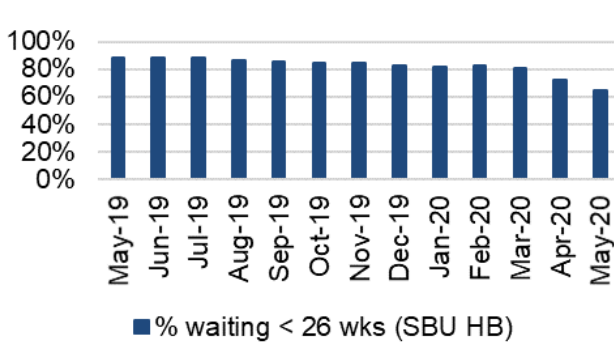
**Chart 2: Number of patients waiting over 26 weeks for an outpatient appointment**



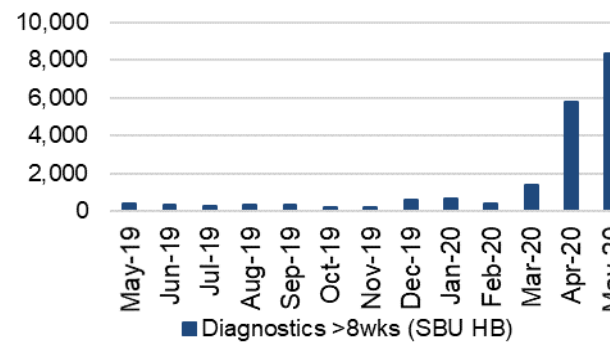
**Chart 3: Number of patients waiting over 36 weeks for treatment**



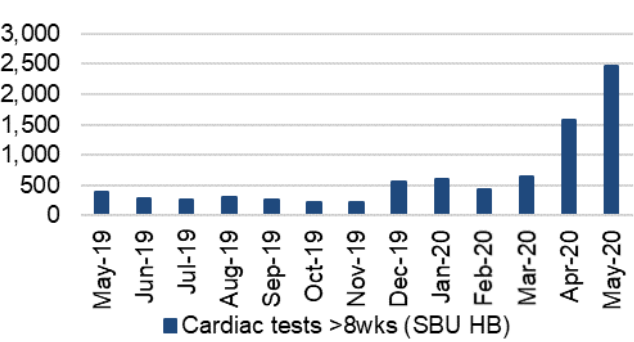
**Chart 4: % patients waiting less than 26 weeks from referral to treatment**



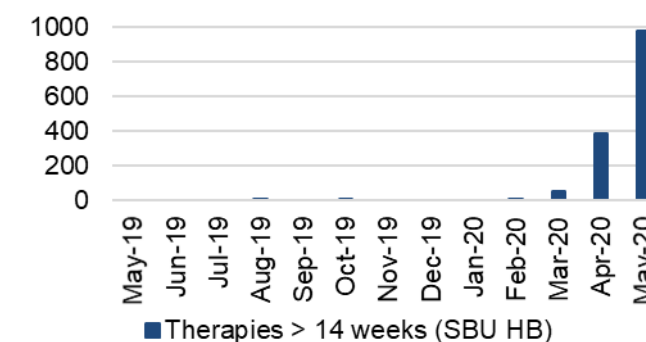
**Chart 5: Number of patients waiting for reportable diagnostics over 8 weeks**



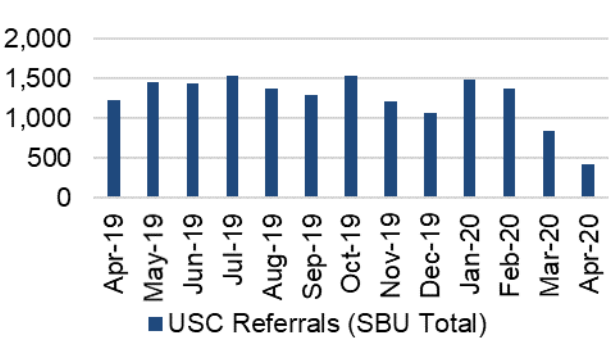
**Chart 6: Number of patients waiting for reportable Cardiac diagnostics over 8 weeks**



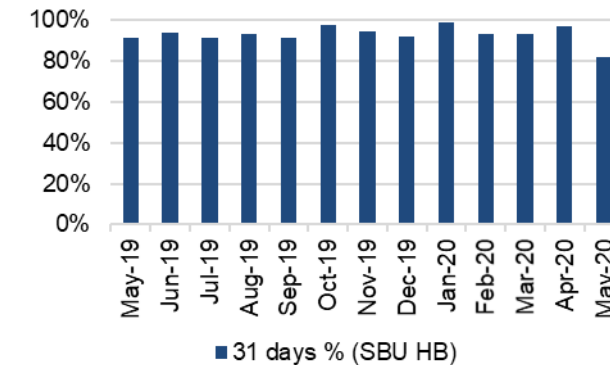
**Chart 7: Number of patients waiting less than 14 weeks for Therapies**



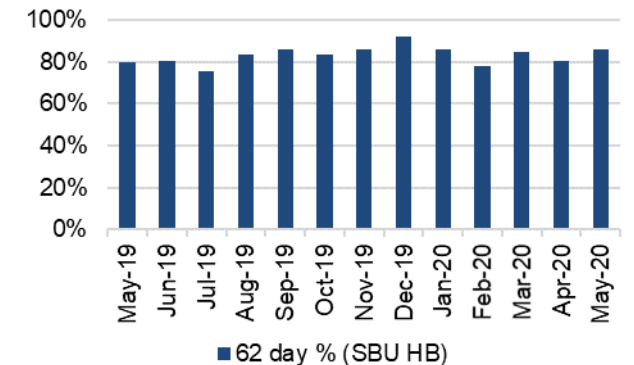
**Chart 8: Cancer referrals**



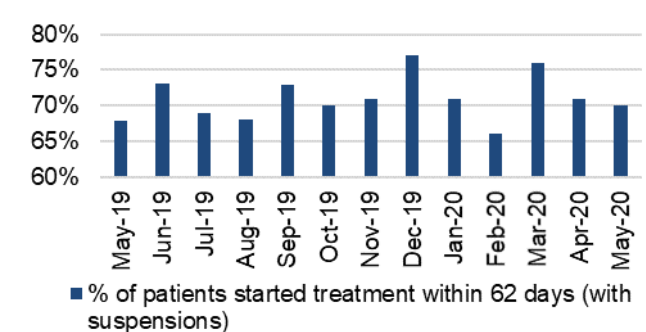
**Chart 9: % patients newly diagnosed with cancer, not via the urgent route, that started definitive treatment within (up to & including) 31 days**



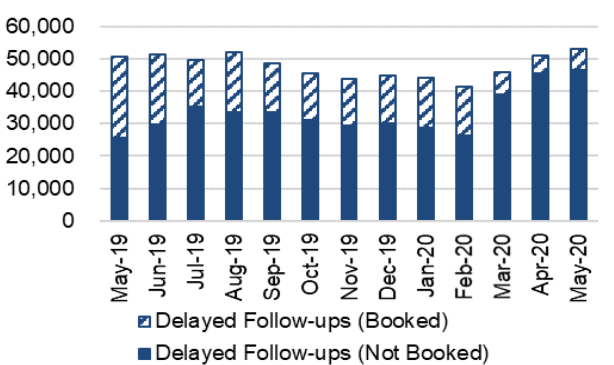
**Chart 10: % patients newly diagnosed with cancer, via the urgent suspected cancer route, that started definitive treatment within (up to & including) 62 days of receipt of referral**



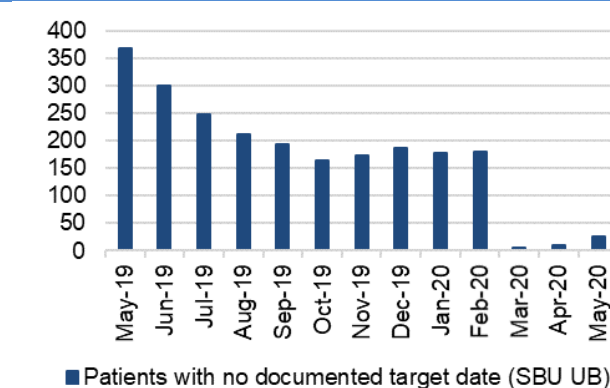
**Chart 11: Single Cancer Pathway- % of patients starting definitive treatment within 62 days from point of suspicion (with adjustments)**



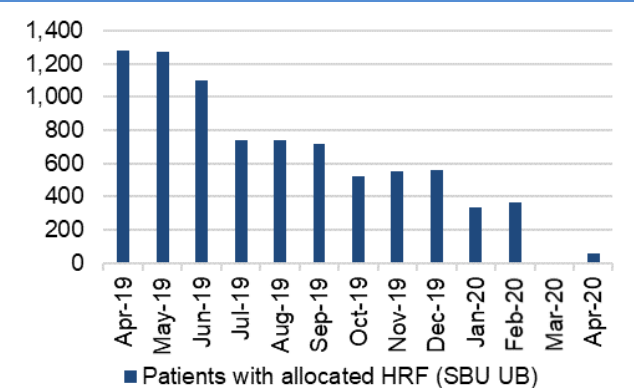
**Chart 12: Number of patients waiting for an outpatient follow-up who are delayed past their target date (planned care specialities only)**



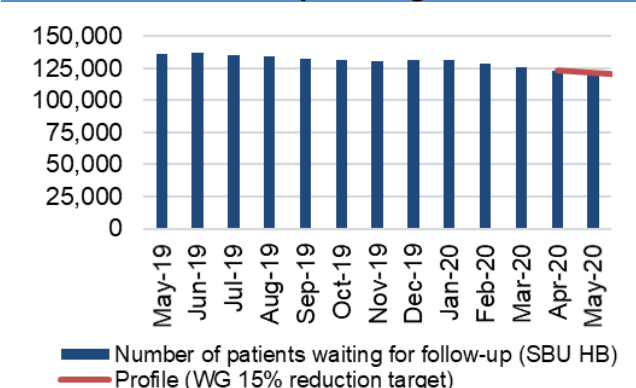
**Chart 13: Number of patients without a documented clinical review date**



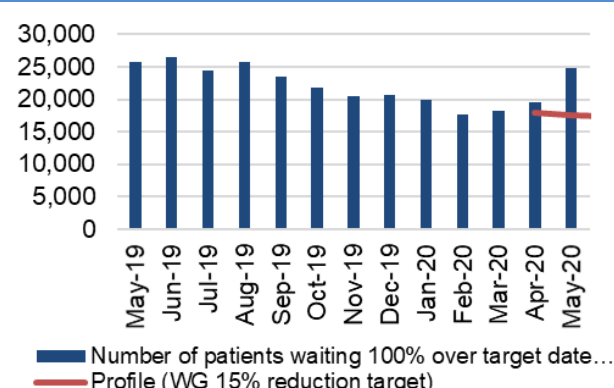
**Chart 14: Ophthalmology patients without an allocated health risk factor**



**Chart 15: Total number of patients on the follow-up waiting list**



**Chart 16: Number of patients delayed by over 100%**



## Planned Care- Overview (May 2020)

Demand		Waiting Times	
<b>4,906 (44%↑)</b> Total GP referrals	<b>9,300 (69%↑)</b> Patients waiting over 26 weeks for a new outpatient appointment	<b>10,247 (23%↑)</b> Patients waiting over 36 weeks for treatment	<b>4,204 (22%↑)</b> Patients waiting over 52 weeks for treatment
<b>1,973 (36%↑)</b> Routine GP referrals	<b>64.2% (8.1%↓)</b> Patients waiting under 26 weeks from referral to treatment	<b>8,346 (44%↑)</b> Patients waiting over 8 weeks for all reportable diagnostics	<b>2,478 (566%↑)</b> Patients waiting over 8 weeks for Cardiac diagnostics only
<b>2,933 (50%↑)</b> Urgent GP referrals	<b>982 (154%↑)</b> Patients waiting over 14 weeks for reportable therapies	<b>12,434 (1.3%↓)</b> Patients waiting for a follow-up outpatient appointment	<b>24,880 (27%↑)</b> Patients waiting for a follow-up outpatients appointment who are delayed over 100%
Cancer		Theatre Efficiencies	
<b>409 (52%↓)</b> Number of USC referrals received	<b>275 (40%↑)</b> USC backlog over 52 days	<b>11% (5%↑)</b> Theatre utilisation rate	<b>45% (2%↑)</b> % of theatres sessions finishing early
<b>82% (15%↓) draft</b> NUSC patients receiving treatment within 31 days	<b>86% (5%↑) draft</b> USC patients receiving treatment within 62 days	<b>43% (2%↓)</b> % of theatres sessions starting late	<b>47% (42%↑)</b> Operations cancelled on the day

*\*RAG status and trend is based on in month-movement*

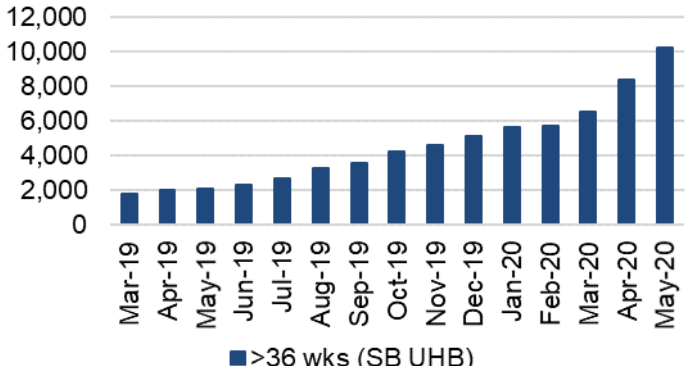
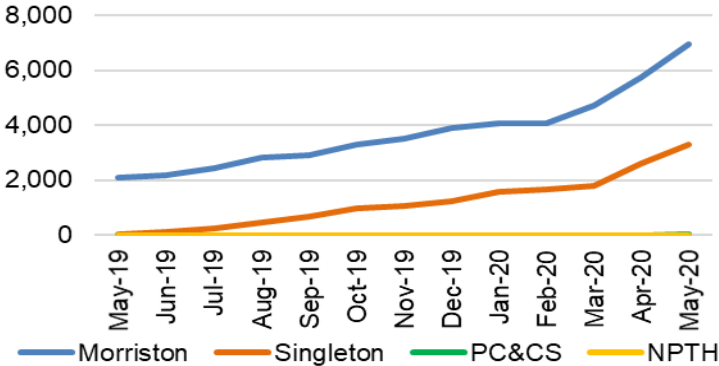
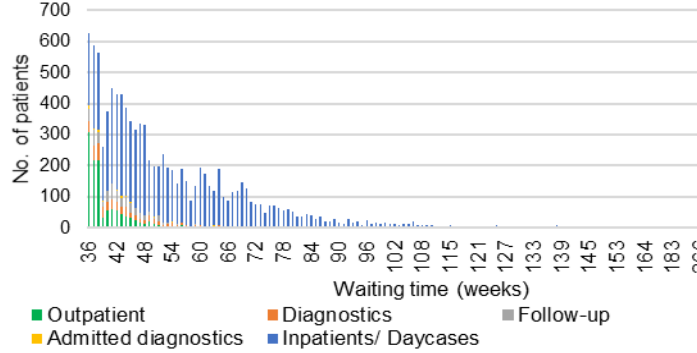
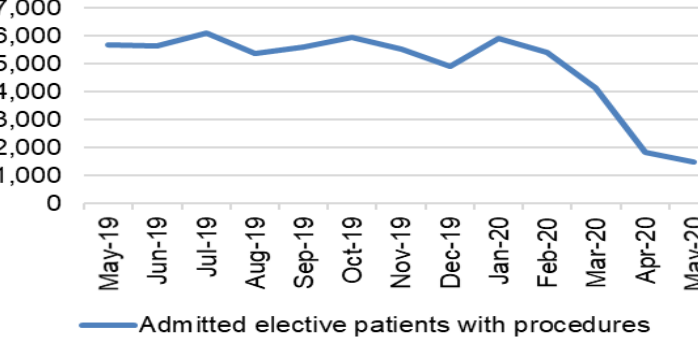


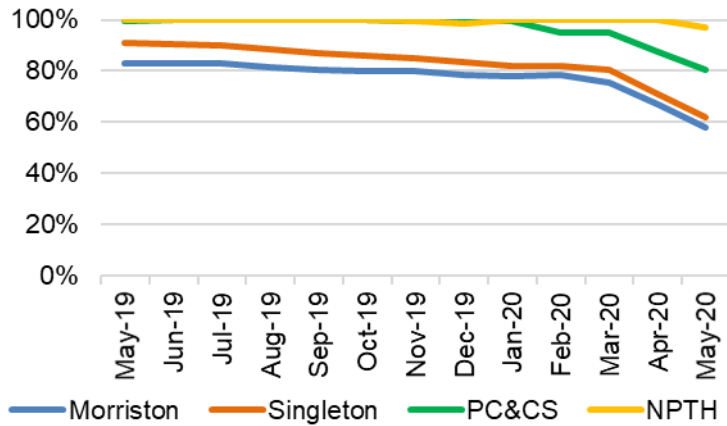
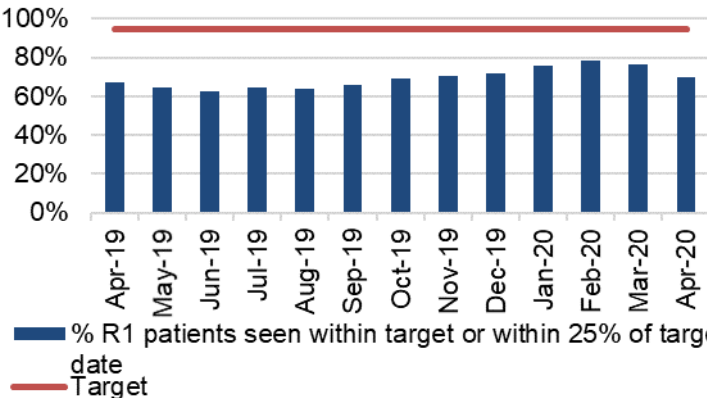
## 5.2 Planned Care Updates

This section of the report provides further detail on key planned care measures.

Description	Current Performance
<p><b>Referrals and shape of the waiting list</b></p> <ul style="list-style-type: none"> <li><b>GP Referrals</b> <i>The number of Stage 1 additions per week</i></li> <li><b>Stage 1 additions</b> <i>The number of new patients that have been added to the outpatient waiting list</i></li> <li><b>Size of the waiting list</b> <i>Total number of patients on the waiting list (all stages)</i></li> <li><b>Shape of the waiting list</b> <i>Total number of patients waiting by weeks wait</i></li> </ul>	<p>The number of GP referrals and additions to the outpatient waiting list per week consistently reduced throughout March and April 2020 however the additions increased in May 2020. This is reflected in the reduction in the waiting list in April 2020 and subsequent increase in May 2020 as well as the significant reduction in the number of patients waiting at the front end of the waiting list. In May 2019 there was 17,194 patients waiting under 10 weeks whereas in May 2020 there are 7,881 waiting under 10 weeks.</p> <p style="text-align: center;"><b>Trend</b></p> <div style="display: flex; justify-content: space-around;"> <div data-bbox="495 536 1211 983"> <p><b>1. Number of GP referrals received by SBU Health Board</b></p> <p>GP Referrals (Routine) GP Referrals (Urgent)</p> </div> <div data-bbox="1211 536 2094 983"> <p><b>2. Number of stage 1 additions per week</b></p> <p>Number of new additions to the waiting list</p> </div> </div> <div style="display: flex; justify-content: space-around;"> <div data-bbox="495 999 1211 1422"> <p><b>3. Total size of the waiting list</b></p> <p>Total number of patients on the waiting list (SB UHB Total)</p> </div> <div data-bbox="1211 999 2094 1422"> <p><b>4. Total number of patients on the waiting list by weeks wait as at May 2020</b></p> <p>No. patients waiting</p> <p>Waiting time (weeks)</p> </div> </div>

Description	Current Performance
<b>Outpatient waiting times</b> <i>The number of patients waiting more than 26 weeks for an outpatient appointment (stage 1)</i>	<p>The number of patients waiting over 26 weeks for a first outpatient appointment is a challenge. In May 2020, there were 9,300 patients waiting over 26 weeks compared with 5,499 in April 2020. Ophthalmology has the largest proportion of patients waiting over 26 weeks for an outpatient appointment closely followed by Dermatology and ENT. The number of outpatient attendances has significantly reduced since February 2020 due to COVID19, however the number of attendances saw a slight increase in May 2020.</p>
	<p style="text-align: center;"><b>Trend</b></p> <div style="display: flex; justify-content: space-around;"> <div data-bbox="495 467 1227 901"> <p><b>1. Number of stage 1 over 26 weeks- HB total</b></p> <p>■ Outpatients &gt; 26 wks (SB UHB)</p> </div> <div data-bbox="1227 467 2096 901"> <p><b>2. Number of stage 1 over 26 weeks- Unit level</b></p> <p>— Morriston — Singleton — PC&amp;CS — NPTH</p> </div> </div> <div style="display: flex; justify-content: space-around; margin-top: 20px;"> <div data-bbox="495 930 1227 1394"> <p><b>3. Patients waiting over 26 weeks for an outpatient appointment by specialty as at May 2020</b></p> </div> <div data-bbox="1227 930 2096 1394"> <p><b>4. Outpatient activity undertaken</b></p> <p>— New outpatient attendances — Follow-up attendances</p> </div> </div>

Description	Current Performance
<p><b>Patients waiting over 36 weeks for treatment</b></p> <p><i>The number of patients waiting more than 36 weeks for treatment and the number of elective patients admitted for treatment</i></p>	<p>The number of patients waiting longer than 36 weeks from referral to treatment continues to be increase In May 2020 there were 10,247 patients waiting over 36 weeks compared with 8,355 in April 2020. 4,204 of the 10,247 patients in May 2020 were waiting over 52 weeks, this is an increase from 3,432 in April 2020. Orthopaedics/ Spinal accounted for 36% of the breaches, followed by Ophthalmology with 18%. Chart 3 below shows the shape of the 36 week waiting list and that there are now outpatients waiting over 36 weeks.</p> <p>The number of patients receiving a procedure (and subsequently removed from the waiting list) significantly reduced between March and May 2020 which is resulting in the increase in waiting times.</p>
	<p><b>Trend</b></p>
	<div data-bbox="528 534 1223 598"> <p><b>1. Number of patients waiting over 36 weeks- HB total</b></p>  <p>■ &gt;36 wks (SB UHB)</p> </div> <div data-bbox="1290 534 2074 566"> <p><b>2. Number of patients waiting over 36 weeks- Unit level</b></p>  <p>— Morriston — Singleton — PC&amp;CS — NPTH</p> </div> <div data-bbox="528 997 1223 1061"> <p><b>3. The shape of the waiting list over 36 weeks by stage as at May 2020</b></p>  <p>■ Outpatient ■ Diagnostics ■ Follow-up ■ Admitted diagnostics ■ Inpatients/ Daycases</p> </div> <div data-bbox="1335 997 2029 1061"> <p><b>4. Number of elective admissions who received procedures</b></p>  <p>— Admitted elective patients with procedures</p> </div>

Description	Current Performance	Trend																																																																						
<b>Total waiting times</b> <i>Percentage of patients waiting less than 26 weeks from referral to treatment</i>	<p>Throughout 2019/20 the overall percentage of patients waiting less than 26 weeks from referral to treatment ranged between 80% and 88%. However, in May 2020 the percentage was 64.2%.</p>	<p><b>Percentage of patient waiting less than 26 weeks</b></p>  <table><caption>Percentage of patient waiting less than 26 weeks</caption><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>PC&amp;CS</th><th>NPTH</th></tr></thead><tbody><tr><td>May-19</td><td>85%</td><td>90%</td><td>90%</td><td>100%</td></tr><tr><td>Jun-19</td><td>85%</td><td>90%</td><td>90%</td><td>100%</td></tr><tr><td>Jul-19</td><td>85%</td><td>90%</td><td>90%</td><td>100%</td></tr><tr><td>Aug-19</td><td>85%</td><td>90%</td><td>90%</td><td>100%</td></tr><tr><td>Sep-19</td><td>85%</td><td>90%</td><td>90%</td><td>100%</td></tr><tr><td>Oct-19</td><td>85%</td><td>90%</td><td>90%</td><td>100%</td></tr><tr><td>Nov-19</td><td>85%</td><td>90%</td><td>90%</td><td>100%</td></tr><tr><td>Dec-19</td><td>85%</td><td>90%</td><td>90%</td><td>100%</td></tr><tr><td>Jan-20</td><td>85%</td><td>90%</td><td>90%</td><td>100%</td></tr><tr><td>Feb-20</td><td>85%</td><td>90%</td><td>90%</td><td>100%</td></tr><tr><td>Mar-20</td><td>85%</td><td>90%</td><td>90%</td><td>100%</td></tr><tr><td>Apr-20</td><td>85%</td><td>90%</td><td>90%</td><td>100%</td></tr><tr><td>May-20</td><td>58%</td><td>60%</td><td>80%</td><td>100%</td></tr></tbody></table>	Month	Morriston	Singleton	PC&CS	NPTH	May-19	85%	90%	90%	100%	Jun-19	85%	90%	90%	100%	Jul-19	85%	90%	90%	100%	Aug-19	85%	90%	90%	100%	Sep-19	85%	90%	90%	100%	Oct-19	85%	90%	90%	100%	Nov-19	85%	90%	90%	100%	Dec-19	85%	90%	90%	100%	Jan-20	85%	90%	90%	100%	Feb-20	85%	90%	90%	100%	Mar-20	85%	90%	90%	100%	Apr-20	85%	90%	90%	100%	May-20	58%	60%	80%	100%
Month	Morriston	Singleton	PC&CS	NPTH																																																																				
May-19	85%	90%	90%	100%																																																																				
Jun-19	85%	90%	90%	100%																																																																				
Jul-19	85%	90%	90%	100%																																																																				
Aug-19	85%	90%	90%	100%																																																																				
Sep-19	85%	90%	90%	100%																																																																				
Oct-19	85%	90%	90%	100%																																																																				
Nov-19	85%	90%	90%	100%																																																																				
Dec-19	85%	90%	90%	100%																																																																				
Jan-20	85%	90%	90%	100%																																																																				
Feb-20	85%	90%	90%	100%																																																																				
Mar-20	85%	90%	90%	100%																																																																				
Apr-20	85%	90%	90%	100%																																																																				
May-20	58%	60%	80%	100%																																																																				
<b>Ophthalmology waiting times</b> <i>Percentage of ophthalmology R1 patients who are waiting within their clinical target date or within 25% in excess of their clinical target date for their care or treatments</i>	<p>In April 2020 69.9% of ophthalmology R1 patients were waiting within their clinical target date or within 25% of the target date.</p> <p>There was an upward trend in performance in 2019/20, however this has not been sustained so far in 2020/21.</p>	<p><b>Percentage of ophthalmology R1 patients who are waiting within their clinical target date or within 25% in excess of their clinical target date for their care or treatments</b></p>  <table><caption>Percentage of ophthalmology R1 patients seen within target or within 25% of target</caption><thead><tr><th>Month</th><th>% R1 patients seen within target or within 25% of target</th><th>Target</th></tr></thead><tbody><tr><td>Apr-19</td><td>68%</td><td>95%</td></tr><tr><td>May-19</td><td>65%</td><td>95%</td></tr><tr><td>Jun-19</td><td>62%</td><td>95%</td></tr><tr><td>Jul-19</td><td>65%</td><td>95%</td></tr><tr><td>Aug-19</td><td>65%</td><td>95%</td></tr><tr><td>Sep-19</td><td>68%</td><td>95%</td></tr><tr><td>Oct-19</td><td>70%</td><td>95%</td></tr><tr><td>Nov-19</td><td>72%</td><td>95%</td></tr><tr><td>Dec-19</td><td>75%</td><td>95%</td></tr><tr><td>Jan-20</td><td>78%</td><td>95%</td></tr><tr><td>Feb-20</td><td>80%</td><td>95%</td></tr><tr><td>Mar-20</td><td>78%</td><td>95%</td></tr><tr><td>Apr-20</td><td>70%</td><td>95%</td></tr></tbody></table>	Month	% R1 patients seen within target or within 25% of target	Target	Apr-19	68%	95%	May-19	65%	95%	Jun-19	62%	95%	Jul-19	65%	95%	Aug-19	65%	95%	Sep-19	68%	95%	Oct-19	70%	95%	Nov-19	72%	95%	Dec-19	75%	95%	Jan-20	78%	95%	Feb-20	80%	95%	Mar-20	78%	95%	Apr-20	70%	95%																												
Month	% R1 patients seen within target or within 25% of target	Target																																																																						
Apr-19	68%	95%																																																																						
May-19	65%	95%																																																																						
Jun-19	62%	95%																																																																						
Jul-19	65%	95%																																																																						
Aug-19	65%	95%																																																																						
Sep-19	68%	95%																																																																						
Oct-19	70%	95%																																																																						
Nov-19	72%	95%																																																																						
Dec-19	75%	95%																																																																						
Jan-20	78%	95%																																																																						
Feb-20	80%	95%																																																																						
Mar-20	78%	95%																																																																						
Apr-20	70%	95%																																																																						

Description	Current Performance	Trend																																																								
<b>Diagnostics waiting times</b> <i>The number of patients waiting more than 8 weeks for specified diagnostics</i>	<p>In May 2020, there was a significant increase in the number of patients waiting over 8 weeks for specified diagnostics. It increased from 5,788 in April 2020 to 8,346 in May 2020.</p> <p>All of the diagnostic areas have seen a significant increase in breaches. The following is a breakdown for the 8 week breaches by diagnostic test:</p> <ul style="list-style-type: none"><li>• Radiology= 4,007</li><li>• Cardiac tests= 2,478</li><li>• Endoscopy= 1,149</li><li>• Neurophysiology= 535</li><li>• Fluoroscopy= 82</li><li>• Physiological measurement= 72</li><li>• Cystoscopy= 23</li></ul>	<p><b>Number of patients waiting longer than 8 weeks for diagnostics</b></p> <table border="1"><caption>Approximate data for diagnostics waiting times</caption><thead><tr><th>Month</th><th>Cardiac tests</th><th>Endoscopy</th><th>Other diagnostics (inc. radiology)</th></tr></thead><tbody><tr><td>May-19</td><td>500</td><td>0</td><td>0</td></tr><tr><td>Jun-19</td><td>400</td><td>0</td><td>0</td></tr><tr><td>Jul-19</td><td>300</td><td>0</td><td>0</td></tr><tr><td>Aug-19</td><td>400</td><td>0</td><td>0</td></tr><tr><td>Sep-19</td><td>300</td><td>0</td><td>0</td></tr><tr><td>Oct-19</td><td>200</td><td>0</td><td>0</td></tr><tr><td>Nov-19</td><td>300</td><td>0</td><td>0</td></tr><tr><td>Dec-19</td><td>600</td><td>0</td><td>0</td></tr><tr><td>Jan-20</td><td>600</td><td>0</td><td>0</td></tr><tr><td>Feb-20</td><td>400</td><td>0</td><td>0</td></tr><tr><td>Mar-20</td><td>800</td><td>200</td><td>1000</td></tr><tr><td>Apr-20</td><td>2000</td><td>500</td><td>4000</td></tr><tr><td>May-20</td><td>2500</td><td>1200</td><td>4500</td></tr></tbody></table>	Month	Cardiac tests	Endoscopy	Other diagnostics (inc. radiology)	May-19	500	0	0	Jun-19	400	0	0	Jul-19	300	0	0	Aug-19	400	0	0	Sep-19	300	0	0	Oct-19	200	0	0	Nov-19	300	0	0	Dec-19	600	0	0	Jan-20	600	0	0	Feb-20	400	0	0	Mar-20	800	200	1000	Apr-20	2000	500	4000	May-20	2500	1200	4500
Month	Cardiac tests	Endoscopy	Other diagnostics (inc. radiology)																																																							
May-19	500	0	0																																																							
Jun-19	400	0	0																																																							
Jul-19	300	0	0																																																							
Aug-19	400	0	0																																																							
Sep-19	300	0	0																																																							
Oct-19	200	0	0																																																							
Nov-19	300	0	0																																																							
Dec-19	600	0	0																																																							
Jan-20	600	0	0																																																							
Feb-20	400	0	0																																																							
Mar-20	800	200	1000																																																							
Apr-20	2000	500	4000																																																							
May-20	2500	1200	4500																																																							
<b>Therapy waiting times</b> <i>The number of patients waiting more than 14 weeks for specified therapies</i>	<p>In May 2020 there were 982 patients waiting over 14 weeks for specified Therapies.</p> <p>The breakdown for the breaches in May 2020 are:</p> <ul style="list-style-type: none"><li>• Podiatry= 431</li><li>• Audiology= 384</li><li>• Physiotherapy= 78</li><li>• Speech &amp; Language Therapy= 78</li><li>• Occupational Therapy= 11</li></ul>	<p><b>Number of patients waiting longer than 14 weeks for therapies</b></p> <table border="1"><caption>Approximate data for therapy waiting times (May 2020)</caption><thead><tr><th>Therapy</th><th>Number of Patients</th></tr></thead><tbody><tr><td>Podiatry</td><td>431</td></tr><tr><td>Audiology</td><td>384</td></tr><tr><td>Physiotherapy</td><td>78</td></tr><tr><td>Speech &amp; Language Therapy</td><td>78</td></tr><tr><td>Occupational Therapy</td><td>11</td></tr><tr><td><b>Total</b></td><td><b>982</b></td></tr></tbody></table>	Therapy	Number of Patients	Podiatry	431	Audiology	384	Physiotherapy	78	Speech & Language Therapy	78	Occupational Therapy	11	<b>Total</b>	<b>982</b>																																										
Therapy	Number of Patients																																																									
Podiatry	431																																																									
Audiology	384																																																									
Physiotherapy	78																																																									
Speech & Language Therapy	78																																																									
Occupational Therapy	11																																																									
<b>Total</b>	<b>982</b>																																																									

Description	Current Performance	Trend																																																												
<b>Cancer- NUSC waiting times-</b> <i>Percentage of patients newly diagnosed with cancer, not via urgent route that started definitive treatment within 31 days of diagnosis</i>	<p>May 2020 figures will be finalised on the 2<sup>nd</sup> July 2020. Draft figures indicate a possible achievement of 82% of patients starting treatment within 31 days. At the time of writing this report there are 9 breaches across the Health Board for May 2020:</p> <ul style="list-style-type: none"><li>• Lower GI – 5</li><li>• Upper GI – 2</li><li>• Breast – 1</li><li>• Urology - 1</li></ul>	<p><b>Percentage of NUSC patients starting treatment within 31 days of diagnosis</b></p> <table><caption>Percentage of NUSC patients starting treatment within 31 days of diagnosis</caption><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>NPTH</th></tr></thead><tbody><tr><td>May-19</td><td>90%</td><td>90%</td><td>90%</td></tr><tr><td>Jun-19</td><td>95%</td><td>95%</td><td>95%</td></tr><tr><td>Jul-19</td><td>90%</td><td>95%</td><td>95%</td></tr><tr><td>Aug-19</td><td>90%</td><td>95%</td><td>95%</td></tr><tr><td>Sep-19</td><td>85%</td><td>95%</td><td>95%</td></tr><tr><td>Oct-19</td><td>95%</td><td>95%</td><td>95%</td></tr><tr><td>Nov-19</td><td>90%</td><td>95%</td><td>95%</td></tr><tr><td>Dec-19</td><td>85%</td><td>95%</td><td>95%</td></tr><tr><td>Jan-20</td><td>95%</td><td>95%</td><td>95%</td></tr><tr><td>Feb-20</td><td>90%</td><td>90%</td><td>95%</td></tr><tr><td>Mar-20</td><td>90%</td><td>90%</td><td>95%</td></tr><tr><td>Apr-20</td><td>90%</td><td>95%</td><td>95%</td></tr><tr><td>May-20</td><td>65%</td><td>85%</td><td>95%</td></tr></tbody></table>	Month	Morriston	Singleton	NPTH	May-19	90%	90%	90%	Jun-19	95%	95%	95%	Jul-19	90%	95%	95%	Aug-19	90%	95%	95%	Sep-19	85%	95%	95%	Oct-19	95%	95%	95%	Nov-19	90%	95%	95%	Dec-19	85%	95%	95%	Jan-20	95%	95%	95%	Feb-20	90%	90%	95%	Mar-20	90%	90%	95%	Apr-20	90%	95%	95%	May-20	65%	85%	95%				
Month	Morriston	Singleton	NPTH																																																											
May-19	90%	90%	90%																																																											
Jun-19	95%	95%	95%																																																											
Jul-19	90%	95%	95%																																																											
Aug-19	90%	95%	95%																																																											
Sep-19	85%	95%	95%																																																											
Oct-19	95%	95%	95%																																																											
Nov-19	90%	95%	95%																																																											
Dec-19	85%	95%	95%																																																											
Jan-20	95%	95%	95%																																																											
Feb-20	90%	90%	95%																																																											
Mar-20	90%	90%	95%																																																											
Apr-20	90%	95%	95%																																																											
May-20	65%	85%	95%																																																											
<b>Cancer- USC waiting times-</b> <i>Percentage of patients newly diagnosed with cancer, via the urgent suspected cancer route, that started definitive treatment within 62 days of receipt of referral</i>	<p>May 2020 figures will be finalised on the 2<sup>nd</sup> July 2020. Draft figures indicate a possible achievement of 86% of patients starting treatment within 62 days. At the time of writing this report there are 7 breaches in total across the Health Board for May 2020:</p> <ul style="list-style-type: none"><li>• Lower GI – 2</li><li>• Breast – 1</li><li>• Haematology – 1</li><li>• Head &amp; Neck – 1</li><li>• Lung – 1</li><li>• Urology – 1</li></ul>	<p><b>Percentage of USC patients starting treatment within 62 days of receipt of referral</b></p> <table><caption>Percentage of USC patients starting treatment within 62 days of receipt of referral</caption><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>NPTH</th></tr></thead><tbody><tr><td>Apr-19</td><td>95%</td><td>70%</td><td>95%</td></tr><tr><td>May-19</td><td>90%</td><td>75%</td><td>95%</td></tr><tr><td>Jun-19</td><td>85%</td><td>80%</td><td>95%</td></tr><tr><td>Jul-19</td><td>85%</td><td>75%</td><td>20%</td></tr><tr><td>Aug-19</td><td>85%</td><td>80%</td><td>95%</td></tr><tr><td>Sep-19</td><td>90%</td><td>80%</td><td>65%</td></tr><tr><td>Oct-19</td><td>85%</td><td>85%</td><td>95%</td></tr><tr><td>Nov-19</td><td>85%</td><td>85%</td><td>95%</td></tr><tr><td>Dec-19</td><td>90%</td><td>90%</td><td>95%</td></tr><tr><td>Jan-20</td><td>95%</td><td>80%</td><td>65%</td></tr><tr><td>Feb-20</td><td>85%</td><td>75%</td><td>95%</td></tr><tr><td>Mar-20</td><td>85%</td><td>85%</td><td>75%</td></tr><tr><td>Apr-20</td><td>85%</td><td>80%</td><td>95%</td></tr><tr><td>May-20</td><td>75%</td><td>80%</td><td>95%</td></tr></tbody></table>	Month	Morriston	Singleton	NPTH	Apr-19	95%	70%	95%	May-19	90%	75%	95%	Jun-19	85%	80%	95%	Jul-19	85%	75%	20%	Aug-19	85%	80%	95%	Sep-19	90%	80%	65%	Oct-19	85%	85%	95%	Nov-19	85%	85%	95%	Dec-19	90%	90%	95%	Jan-20	95%	80%	65%	Feb-20	85%	75%	95%	Mar-20	85%	85%	75%	Apr-20	85%	80%	95%	May-20	75%	80%	95%
Month	Morriston	Singleton	NPTH																																																											
Apr-19	95%	70%	95%																																																											
May-19	90%	75%	95%																																																											
Jun-19	85%	80%	95%																																																											
Jul-19	85%	75%	20%																																																											
Aug-19	85%	80%	95%																																																											
Sep-19	90%	80%	65%																																																											
Oct-19	85%	85%	95%																																																											
Nov-19	85%	85%	95%																																																											
Dec-19	90%	90%	95%																																																											
Jan-20	95%	80%	65%																																																											
Feb-20	85%	75%	95%																																																											
Mar-20	85%	85%	75%																																																											
Apr-20	85%	80%	95%																																																											
May-20	75%	80%	95%																																																											

Description	Current Performance	Trend
<b>Single Cancer Pathway</b> <i>Percentage of patients starting first definitive cancer treatment within 62 days from point of suspicion (regardless of the referral route)</i>	<p>May 2020 figures will be finalised on the 2<sup>nd</sup> July 2020. Draft figures indicate a possible achievement of 70% of patients starting treatment within 62 days of the suspicion of cancer first being raised. At the time of writing this report 34 patients did not receive their treatment within the time frame.</p> <p>Both adjusted and unadjusted waits are provided as per reporting requirements to WG.</p>	<p><b>Percentage of patients starting first definitive cancer treatment within 62 days from point of suspicion (regardless of the referral route)</b></p> <p>— % of patients started treatment within 62 days (with suspensions)</p>

<b>USC backlog</b> <i>The number of patients with an active wait status of more than 53 days</i>	<p>End of May 2020 backlog by tumour site:</p> <table border="1"> <thead> <tr> <th>Tumour Site</th><th>53 - 62 days</th><th>63 &gt;</th></tr> </thead> <tbody> <tr><td>Breast</td><td>2</td><td>0</td></tr> <tr><td>Gynaecological</td><td>6</td><td>16</td></tr> <tr><td>Haematological</td><td>0</td><td>2</td></tr> <tr><td>Head and Neck</td><td>4</td><td>12</td></tr> <tr><td>Lower GI</td><td>9</td><td>80</td></tr> <tr><td>Lung</td><td>0</td><td>3</td></tr> <tr><td>Other</td><td>13</td><td>72</td></tr> <tr><td>Skin</td><td>4</td><td>11</td></tr> <tr><td>Upper GI</td><td>1</td><td>13</td></tr> <tr><td>Urological</td><td>6</td><td>21</td></tr> <tr><td><b>Grand Total</b></td><td><b>45</b></td><td><b>230</b></td></tr> </tbody> </table>	Tumour Site	53 - 62 days	63 >	Breast	2	0	Gynaecological	6	16	Haematological	0	2	Head and Neck	4	12	Lower GI	9	80	Lung	0	3	Other	13	72	Skin	4	11	Upper GI	1	13	Urological	6	21	<b>Grand Total</b>	<b>45</b>	<b>230</b>	<p><b>Number of patients with a wait status of more than 53 days</b></p> <p>■ 53-62 days (HB Total)    ▨ 63 days+ (HB Total)</p>
Tumour Site	53 - 62 days	63 >																																				
Breast	2	0																																				
Gynaecological	6	16																																				
Haematological	0	2																																				
Head and Neck	4	12																																				
Lower GI	9	80																																				
Lung	0	3																																				
Other	13	72																																				
Skin	4	11																																				
Upper GI	1	13																																				
Urological	6	21																																				
<b>Grand Total</b>	<b>45</b>	<b>230</b>																																				



Description	Current Performance	Trend																																																																																																																																																									
<b>USC First Outpatient Appointments</b> <i>The number of patients at first outpatient appointment stage by days waiting</i>	Week to week through May 2020 the percentage of patients seen within 14 days to first appointment/ assessment ranged between 31% and 67%.	<b>The number of patients waiting for a first outpatient appointment (by total days waiting) - End of May 2020</b> <table><tr><th></th><th>≤10</th><th>11-20</th><th>21-30</th><th>&gt;31</th><th>Total</th></tr><tr><td>Breast</td><td>16</td><td>2</td><td>1</td><td>0</td><td>19</td></tr><tr><td>Gynaecological</td><td>4</td><td>11</td><td>25</td><td>10</td><td>50</td></tr><tr><td>Haematological</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Head&amp;Neck</td><td>0</td><td>10</td><td>1</td><td>0</td><td>11</td></tr><tr><td>LGI</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Lung</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Other</td><td>1</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Sarcoma</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Skin</td><td>2</td><td>27</td><td>8</td><td>2</td><td>2</td></tr><tr><td>UGI</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Urological</td><td>0</td><td>4</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Total</td><td>23</td><td>54</td><td>35</td><td>12</td><td>124</td></tr></table>		≤10	11-20	21-30	>31	Total	Breast	16	2	1	0	19	Gynaecological	4	11	25	10	50	Haematological	0	0	0	0	0	Head&Neck	0	10	1	0	11	LGI	0	0	0	0	0	Lung	0	0	0	0	0	Other	1	0	0	0	0	Sarcoma	0	0	0	0	0	Skin	2	27	8	2	2	UGI	0	0	0	0	0	Urological	0	4	0	0	0	Total	23	54	35	12	124																																																																											
	≤10	11-20	21-30	>31	Total																																																																																																																																																						
Breast	16	2	1	0	19																																																																																																																																																						
Gynaecological	4	11	25	10	50																																																																																																																																																						
Haematological	0	0	0	0	0																																																																																																																																																						
Head&Neck	0	10	1	0	11																																																																																																																																																						
LGI	0	0	0	0	0																																																																																																																																																						
Lung	0	0	0	0	0																																																																																																																																																						
Other	1	0	0	0	0																																																																																																																																																						
Sarcoma	0	0	0	0	0																																																																																																																																																						
Skin	2	27	8	2	2																																																																																																																																																						
UGI	0	0	0	0	0																																																																																																																																																						
Urological	0	4	0	0	0																																																																																																																																																						
Total	23	54	35	12	124																																																																																																																																																						
<b>Radiotherapy waiting times</b>  <i>The percentage of patients receiving radiotherapy treatment</i>	<p>Radiotherapy waiting times are challenging however the provision of emergency radiotherapy within 1 and 2 days has been maintained at 100% throughout the COVID19 outbreak.</p> <table><tr><th>Measure</th><th>Target</th><th>May-20</th></tr><tr><td>Scheduled (21 Day Target)</td><td>80%</td><td>46.0%</td></tr><tr><td>Scheduled (28 Day Target)</td><td>100%</td><td>84.0%</td></tr><tr><td>Urgent SC (7 Day Target)</td><td>80%</td><td>33.0%</td></tr><tr><td>Urgent SC (14 Day Target)</td><td>100%</td><td>83.0%</td></tr><tr><td>Emergency (within 1 day)</td><td>80%</td><td>100.0%</td></tr><tr><td>Emergency (within 2 days)</td><td>100%</td><td>100.0%</td></tr><tr><td>Elective Delay (21 Day Target)</td><td>80%</td><td>83.0%</td></tr><tr><td>Elective Delay (28 Day Target)</td><td>100%</td><td>100.0%</td></tr></table>	Measure	Target	May-20	Scheduled (21 Day Target)	80%	46.0%	Scheduled (28 Day Target)	100%	84.0%	Urgent SC (7 Day Target)	80%	33.0%	Urgent SC (14 Day Target)	100%	83.0%	Emergency (within 1 day)	80%	100.0%	Emergency (within 2 days)	100%	100.0%	Elective Delay (21 Day Target)	80%	83.0%	Elective Delay (28 Day Target)	100%	100.0%	<p><b>Radiotherapy waiting times</b></p> <table><caption>Radiotherapy Waiting Times Data (Estimated from Chart)</caption><thead><tr><th>Measure</th><th>May-19</th><th>Jun-19</th><th>Jul-19</th><th>Aug-19</th><th>Sep-19</th><th>Oct-19</th><th>Nov-19</th><th>Dec-19</th><th>Jan-20</th><th>Feb-20</th><th>Mar-20</th><th>Apr-20</th><th>May-20</th></tr></thead><tbody><tr><td>Scheduled (21 Day Target)</td><td>40%</td><td>38%</td><td>55%</td><td>45%</td><td>45%</td><td>55%</td><td>45%</td><td>40%</td><td>35%</td><td>28%</td><td>55%</td><td>45%</td><td>45%</td></tr><tr><td>Scheduled (28 Day Target)</td><td>65%</td><td>75%</td><td>85%</td><td>80%</td><td>70%</td><td>72%</td><td>75%</td><td>60%</td><td>58%</td><td>55%</td><td>80%</td><td>85%</td><td>84%</td></tr><tr><td>Urgent SC (7 Day Target)</td><td>75%</td><td>52%</td><td>55%</td><td>62%</td><td>55%</td><td>62%</td><td>55%</td><td>50%</td><td>48%</td><td>50%</td><td>45%</td><td>45%</td><td>33%</td></tr><tr><td>Urgent SC (14 Day Target)</td><td>95%</td><td>75%</td><td>95%</td><td>95%</td><td>88%</td><td>85%</td><td>88%</td><td>78%</td><td>78%</td><td>92%</td><td>92%</td><td>85%</td><td>83%</td></tr><tr><td>Emergency (within 1 day)</td><td>95%</td><td>95%</td><td>95%</td><td>95%</td><td>95%</td><td>95%</td><td>95%</td><td>95%</td><td>95%</td><td>95%</td><td>95%</td><td>95%</td><td>95%</td></tr><tr><td>Emergency (within 2 days)</td><td>95%</td><td>95%</td><td>95%</td><td>95%</td><td>95%</td><td>95%</td><td>95%</td><td>95%</td><td>95%</td><td>95%</td><td>95%</td><td>95%</td><td>95%</td></tr><tr><td>Elective Delay (21 Day Target)</td><td>52%</td><td>60%</td><td>55%</td><td>45%</td><td>30%</td><td>35%</td><td>40%</td><td>35%</td><td>58%</td><td>92%</td><td>75%</td><td>80%</td><td>83%</td></tr><tr><td>Elective Delay (28 Day Target)</td><td>65%</td><td>75%</td><td>60%</td><td>65%</td><td>38%</td><td>40%</td><td>45%</td><td>68%</td><td>70%</td><td>72%</td><td>95%</td><td>100%</td><td>100%</td></tr></tbody></table>	Measure	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Scheduled (21 Day Target)	40%	38%	55%	45%	45%	55%	45%	40%	35%	28%	55%	45%	45%	Scheduled (28 Day Target)	65%	75%	85%	80%	70%	72%	75%	60%	58%	55%	80%	85%	84%	Urgent SC (7 Day Target)	75%	52%	55%	62%	55%	62%	55%	50%	48%	50%	45%	45%	33%	Urgent SC (14 Day Target)	95%	75%	95%	95%	88%	85%	88%	78%	78%	92%	92%	85%	83%	Emergency (within 1 day)	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	Emergency (within 2 days)	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	Elective Delay (21 Day Target)	52%	60%	55%	45%	30%	35%	40%	35%	58%	92%	75%	80%	83%	Elective Delay (28 Day Target)	65%	75%	60%	65%	38%	40%	45%	68%	70%	72%	95%	100%	100%
Measure	Target	May-20																																																																																																																																																									
Scheduled (21 Day Target)	80%	46.0%																																																																																																																																																									
Scheduled (28 Day Target)	100%	84.0%																																																																																																																																																									
Urgent SC (7 Day Target)	80%	33.0%																																																																																																																																																									
Urgent SC (14 Day Target)	100%	83.0%																																																																																																																																																									
Emergency (within 1 day)	80%	100.0%																																																																																																																																																									
Emergency (within 2 days)	100%	100.0%																																																																																																																																																									
Elective Delay (21 Day Target)	80%	83.0%																																																																																																																																																									
Elective Delay (28 Day Target)	100%	100.0%																																																																																																																																																									
Measure	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20																																																																																																																																														
Scheduled (21 Day Target)	40%	38%	55%	45%	45%	55%	45%	40%	35%	28%	55%	45%	45%																																																																																																																																														
Scheduled (28 Day Target)	65%	75%	85%	80%	70%	72%	75%	60%	58%	55%	80%	85%	84%																																																																																																																																														
Urgent SC (7 Day Target)	75%	52%	55%	62%	55%	62%	55%	50%	48%	50%	45%	45%	33%																																																																																																																																														
Urgent SC (14 Day Target)	95%	75%	95%	95%	88%	85%	88%	78%	78%	92%	92%	85%	83%																																																																																																																																														
Emergency (within 1 day)	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%																																																																																																																																														
Emergency (within 2 days)	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%																																																																																																																																														
Elective Delay (21 Day Target)	52%	60%	55%	45%	30%	35%	40%	35%	58%	92%	75%	80%	83%																																																																																																																																														
Elective Delay (28 Day Target)	65%	75%	60%	65%	38%	40%	45%	68%	70%	72%	95%	100%	100%																																																																																																																																														

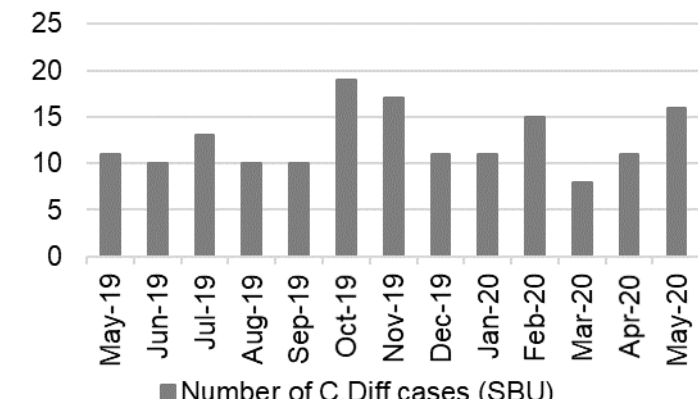
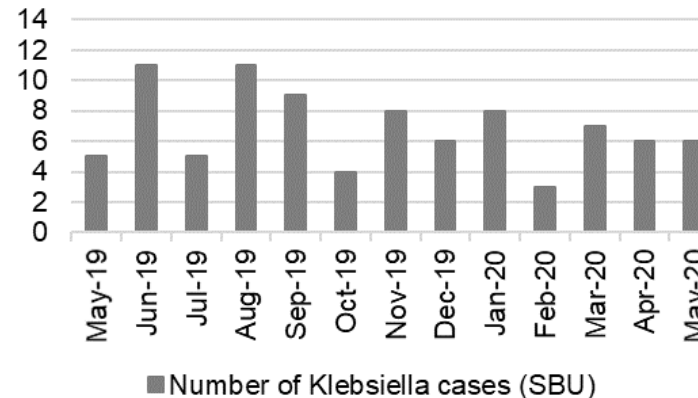


Description	Current Performance	Trend
<b>Delayed follow-ups</b> <i>The number patients delayed past their target date for a follow-up</i>	<p>In May 2020 there was a total of 53,046 patients waiting for a follow-up past their target date. This is an 4% increase compared with April 2020 (from 51,028 to 53,046).</p> <p>Of the 53,046 delayed follow-ups in May 2020, 6,378 had appointment dates and 46,668 were still waiting for an appointment. In addition, 24,880 were waiting 100%+ over target date in May 2020. This is a 27% increase when compared with April 2020.</p> <p>In May 2020, the overall size of the follow-up waiting list reduced by 1.3% compared with April 2020 (from 123,082 to 121,434).</p>	<p><b>Delayed follow-ups: Planned Care specialties</b></p> <p><b>Delayed follow-ups: Number of patients waiting over target date</b></p>

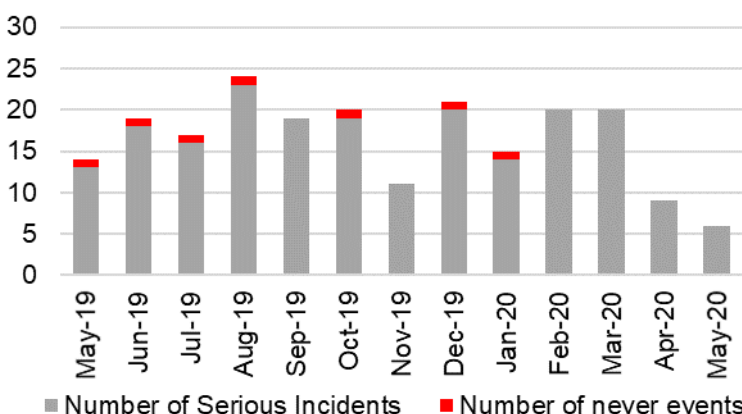
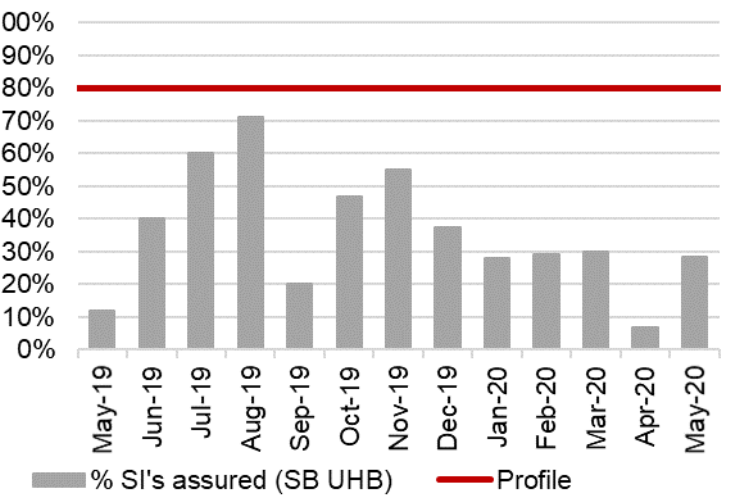
## 6. QUALITY AND SAFETY INDICATORS

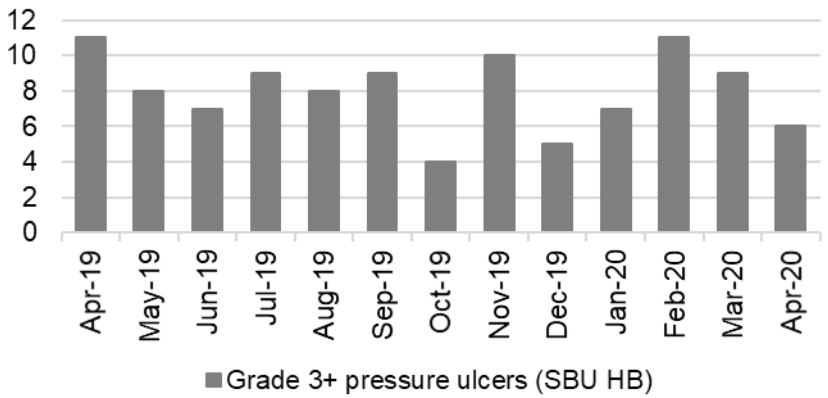
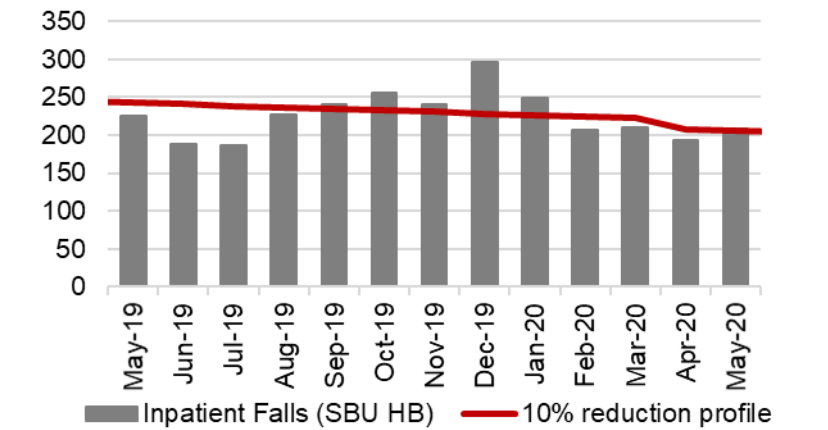
This section of the report provides further detail on key quality and safety measures.

This section of the report provides further detail on key quality and safety measures.																														
Description	Current Performance	Trend																												
<b>Healthcare Acquired Infections (HCAI) - E.coli bacteraemia-</b> <i>Number of laboratory confirmed E.coli bacteraemia cases</i>	<ul style="list-style-type: none"><li>14 cases of <i>E. coli</i> bacteraemia were identified in April 2020, of which 6 were hospital acquired and 8 were community acquired.</li><li>Cumulative cases from April to May 2020 is 43% less than the equivalent period of 2019/20.</li></ul>	<p><b>Number of healthcare acquired E.coli bacteraemia cases</b></p> <table><thead><tr><th>Month</th><th>Number E.Coli cases (SBU)</th></tr></thead><tbody><tr><td>May-19</td><td>22</td></tr><tr><td>Jun-19</td><td>29</td></tr><tr><td>Jul-19</td><td>35</td></tr><tr><td>Aug-19</td><td>22</td></tr><tr><td>Sep-19</td><td>23</td></tr><tr><td>Oct-19</td><td>25</td></tr><tr><td>Nov-19</td><td>15</td></tr><tr><td>Dec-19</td><td>32</td></tr><tr><td>Jan-20</td><td>33</td></tr><tr><td>Feb-20</td><td>31</td></tr><tr><td>Mar-20</td><td>23</td></tr><tr><td>Apr-20</td><td>14</td></tr><tr><td>May-20</td><td>14</td></tr></tbody></table>	Month	Number E.Coli cases (SBU)	May-19	22	Jun-19	29	Jul-19	35	Aug-19	22	Sep-19	23	Oct-19	25	Nov-19	15	Dec-19	32	Jan-20	33	Feb-20	31	Mar-20	23	Apr-20	14	May-20	14
Month	Number E.Coli cases (SBU)																													
May-19	22																													
Jun-19	29																													
Jul-19	35																													
Aug-19	22																													
Sep-19	23																													
Oct-19	25																													
Nov-19	15																													
Dec-19	32																													
Jan-20	33																													
Feb-20	31																													
Mar-20	23																													
Apr-20	14																													
May-20	14																													
<b>Healthcare Acquired Infections (HCAI)- S.aureus bacteraemia-</b> <i>Number of laboratory confirmed S.aureus bacteraemias (MRSA &amp; MSSA) cases</i>	<ul style="list-style-type: none"><li>There were 6 cases of <i>Staph. aureus</i> bacteraemia in May 2020, of which 2 were hospital acquired and 4 were community acquired.</li><li>Cumulative cases from April to May 2020 is 36% less than the equivalent period of 2019/20.</li></ul>	<p><b>Number of healthcare acquired S.aureus bacteraemia cases</b></p> <table><thead><tr><th>Month</th><th>Number of S.Aureus cases (SBU)</th></tr></thead><tbody><tr><td>May-19</td><td>11</td></tr><tr><td>Jun-19</td><td>11</td></tr><tr><td>Jul-19</td><td>17</td></tr><tr><td>Aug-19</td><td>7</td></tr><tr><td>Sep-19</td><td>8</td></tr><tr><td>Oct-19</td><td>13</td></tr><tr><td>Nov-19</td><td>11</td></tr><tr><td>Dec-19</td><td>11</td></tr><tr><td>Jan-20</td><td>13</td></tr><tr><td>Feb-20</td><td>8</td></tr><tr><td>Mar-20</td><td>9</td></tr><tr><td>Apr-20</td><td>10</td></tr><tr><td>May-20</td><td>6</td></tr></tbody></table>	Month	Number of S.Aureus cases (SBU)	May-19	11	Jun-19	11	Jul-19	17	Aug-19	7	Sep-19	8	Oct-19	13	Nov-19	11	Dec-19	11	Jan-20	13	Feb-20	8	Mar-20	9	Apr-20	10	May-20	6
Month	Number of S.Aureus cases (SBU)																													
May-19	11																													
Jun-19	11																													
Jul-19	17																													
Aug-19	7																													
Sep-19	8																													
Oct-19	13																													
Nov-19	11																													
Dec-19	11																													
Jan-20	13																													
Feb-20	8																													
Mar-20	9																													
Apr-20	10																													
May-20	6																													

Description	Current Performance	Trend																												
<b>Healthcare Acquired Infections (HCAI)- C.difficile-</b> <i>Number of laboratory confirmed C.difficile cases</i>	<ul style="list-style-type: none"><li>There were 16 <i>Clostridium difficile</i> toxin positive cases in May 2020, of which 6 were hospital acquired and 10 were community acquired.</li><li>Cumulative cases from April to May 2020 is 93% more than the equivalent period of 2019/20 (27 in 2020/21 compared with 14 in 2019/20).</li></ul>	<b>Number of healthcare acquired C.difficile cases</b>  <table><caption>Number of healthcare acquired C.difficile cases (SBU)</caption><thead><tr><th>Month</th><th>Number of C.Diff cases (SBU)</th></tr></thead><tbody><tr><td>May-19</td><td>11</td></tr><tr><td>Jun-19</td><td>10</td></tr><tr><td>Jul-19</td><td>13</td></tr><tr><td>Aug-19</td><td>10</td></tr><tr><td>Sep-19</td><td>10</td></tr><tr><td>Oct-19</td><td>19</td></tr><tr><td>Nov-19</td><td>17</td></tr><tr><td>Dec-19</td><td>11</td></tr><tr><td>Jan-20</td><td>11</td></tr><tr><td>Feb-20</td><td>15</td></tr><tr><td>Mar-20</td><td>8</td></tr><tr><td>Apr-20</td><td>11</td></tr><tr><td>May-20</td><td>16</td></tr></tbody></table>	Month	Number of C.Diff cases (SBU)	May-19	11	Jun-19	10	Jul-19	13	Aug-19	10	Sep-19	10	Oct-19	19	Nov-19	17	Dec-19	11	Jan-20	11	Feb-20	15	Mar-20	8	Apr-20	11	May-20	16
Month	Number of C.Diff cases (SBU)																													
May-19	11																													
Jun-19	10																													
Jul-19	13																													
Aug-19	10																													
Sep-19	10																													
Oct-19	19																													
Nov-19	17																													
Dec-19	11																													
Jan-20	11																													
Feb-20	15																													
Mar-20	8																													
Apr-20	11																													
May-20	16																													
<b>Healthcare Acquired Infections (HCAI)- Klebsiella sp-</b> <i>Number of laboratory confirmed Klebsiella sp cases</i>	<ul style="list-style-type: none"><li>There were 6 cases of Klebsiella sp in May 2020, of which 4 were hospital acquired and 2 were community acquired.</li><li>Cumulative cases from April to May 2020 is 20% more than the equivalent period of 2019/20.</li></ul>	<b>Number of healthcare acquired Klebsiella cases</b>  <table><caption>Number of healthcare acquired Klebsiella cases (SBU)</caption><thead><tr><th>Month</th><th>Number of Klebsiella cases (SBU)</th></tr></thead><tbody><tr><td>May-19</td><td>5</td></tr><tr><td>Jun-19</td><td>11</td></tr><tr><td>Jul-19</td><td>5</td></tr><tr><td>Aug-19</td><td>11</td></tr><tr><td>Sep-19</td><td>9</td></tr><tr><td>Oct-19</td><td>4</td></tr><tr><td>Nov-19</td><td>8</td></tr><tr><td>Dec-19</td><td>6</td></tr><tr><td>Jan-20</td><td>8</td></tr><tr><td>Feb-20</td><td>3</td></tr><tr><td>Mar-20</td><td>7</td></tr><tr><td>Apr-20</td><td>6</td></tr><tr><td>May-20</td><td>6</td></tr></tbody></table>	Month	Number of Klebsiella cases (SBU)	May-19	5	Jun-19	11	Jul-19	5	Aug-19	11	Sep-19	9	Oct-19	4	Nov-19	8	Dec-19	6	Jan-20	8	Feb-20	3	Mar-20	7	Apr-20	6	May-20	6
Month	Number of Klebsiella cases (SBU)																													
May-19	5																													
Jun-19	11																													
Jul-19	5																													
Aug-19	11																													
Sep-19	9																													
Oct-19	4																													
Nov-19	8																													
Dec-19	6																													
Jan-20	8																													
Feb-20	3																													
Mar-20	7																													
Apr-20	6																													
May-20	6																													

Description	Current Performance	Trend																												
<b>Healthcare Acquired Infections (HCAI)- Aeruginosa-</b> <i>Number of laboratory confirmed Aeruginosa cases</i>	<ul style="list-style-type: none"><li>There were 5 cases of <i>P.Aeruginosa</i> bacteraemia in May 2020, of which 3 were hospital acquired and 2 were community acquired.</li><li>Cumulative cases from April to May 2020 is 17% more than the equivalent period of 2019/20.</li></ul>	<b>Number of healthcare acquired Pseudomonas cases</b> <table><thead><tr><th>Month</th><th>Number of Pseudomonas cases (SBU)</th></tr></thead><tbody><tr><td>May-19</td><td>3</td></tr><tr><td>Jun-19</td><td>6</td></tr><tr><td>Jul-19</td><td>1</td></tr><tr><td>Aug-19</td><td>4</td></tr><tr><td>Sep-19</td><td>2</td></tr><tr><td>Oct-19</td><td>1</td></tr><tr><td>Nov-19</td><td>1</td></tr><tr><td>Dec-19</td><td>2</td></tr><tr><td>Jan-20</td><td>3</td></tr><tr><td>Feb-20</td><td>1</td></tr><tr><td>Mar-20</td><td>1</td></tr><tr><td>Apr-20</td><td>2</td></tr><tr><td>May-20</td><td>5</td></tr></tbody></table> <p>■ Number of Pseudomonas cases (SBU)</p>	Month	Number of Pseudomonas cases (SBU)	May-19	3	Jun-19	6	Jul-19	1	Aug-19	4	Sep-19	2	Oct-19	1	Nov-19	1	Dec-19	2	Jan-20	3	Feb-20	1	Mar-20	1	Apr-20	2	May-20	5
Month	Number of Pseudomonas cases (SBU)																													
May-19	3																													
Jun-19	6																													
Jul-19	1																													
Aug-19	4																													
Sep-19	2																													
Oct-19	1																													
Nov-19	1																													
Dec-19	2																													
Jan-20	3																													
Feb-20	1																													
Mar-20	1																													
Apr-20	2																													
May-20	5																													
<b>30 day response rate for concerns-</b> <i>Percentage of concerns that have received a final reply or an interim reply up to and including 30 working days from the date the concern was first received by the organisation</i>	<ul style="list-style-type: none"><li>The overall Health Board rate for responding to concerns within 30 working days was 48% in March 2020 against the Welsh Government target of 75% and Health Board target of 80%.</li><li>Performance in March 2020 ranged from 40% in Morriston Delivery Unit to 100% in Neath Port Talbot Delivery Unit.</li></ul>	<b>Response rate for concerns within 30 days</b> <table><thead><tr><th>Month</th><th>Response rate (%)</th></tr></thead><tbody><tr><td>Mar-19</td><td>80%</td></tr><tr><td>Apr-19</td><td>85%</td></tr><tr><td>May-19</td><td>82%</td></tr><tr><td>Jun-19</td><td>85%</td></tr><tr><td>Jul-19</td><td>80%</td></tr><tr><td>Aug-19</td><td>82%</td></tr><tr><td>Sep-19</td><td>85%</td></tr><tr><td>Oct-19</td><td>82%</td></tr><tr><td>Nov-19</td><td>75%</td></tr><tr><td>Dec-19</td><td>72%</td></tr><tr><td>Jan-20</td><td>82%</td></tr><tr><td>Feb-20</td><td>75%</td></tr><tr><td>Mar-20</td><td>48%</td></tr></tbody></table> <p>▨ 30 day response rate (ABMU up to March 2019) — Profile</p>	Month	Response rate (%)	Mar-19	80%	Apr-19	85%	May-19	82%	Jun-19	85%	Jul-19	80%	Aug-19	82%	Sep-19	85%	Oct-19	82%	Nov-19	75%	Dec-19	72%	Jan-20	82%	Feb-20	75%	Mar-20	48%
Month	Response rate (%)																													
Mar-19	80%																													
Apr-19	85%																													
May-19	82%																													
Jun-19	85%																													
Jul-19	80%																													
Aug-19	82%																													
Sep-19	85%																													
Oct-19	82%																													
Nov-19	75%																													
Dec-19	72%																													
Jan-20	82%																													
Feb-20	75%																													
Mar-20	48%																													

Description	Current Performance	Trend																																																																						
<b>Serious Incidents-</b> <i>Of the serious incidents due for assurance, the percentage which were assured within the agreed timescales</i>	<ul style="list-style-type: none"><li>• The Health Board reported 6 Serious Incidents for the month of May 2020 to Welsh Government.</li><li>• The last Never Event reported was on 13<sup>th</sup> January 2020.</li><li>• In May 2020, performance against the 80% target of submitting closure forms within 60 working days was 28.5%. Of the 7 closure forms due to be submitted to Welsh Government in May 2020, only 2 were submitted on time (28.5%). The 2 closed forms were from Singleton Service Delivery Unit. The following is a breakdown of the 5 forms that were not submitted within target.</li></ul> <p>Missed Closures</p> <ul style="list-style-type: none"><li>○ Corporate IT = 1</li><li>○ Mental Health= 1</li><li>○ Singleton = 3</li></ul>	<div><p><b>Number of serious incidents and never events</b></p><table><caption>Number of serious incidents and never events</caption><thead><tr><th>Month</th><th>Number of Serious Incidents</th><th>Number of never events</th></tr></thead><tbody><tr><td>May-19</td><td>13</td><td>1</td></tr><tr><td>Jun-19</td><td>18</td><td>1</td></tr><tr><td>Jul-19</td><td>16</td><td>1</td></tr><tr><td>Aug-19</td><td>23</td><td>1</td></tr><tr><td>Sep-19</td><td>19</td><td>0</td></tr><tr><td>Oct-19</td><td>19</td><td>1</td></tr><tr><td>Nov-19</td><td>11</td><td>0</td></tr><tr><td>Dec-19</td><td>20</td><td>1</td></tr><tr><td>Jan-20</td><td>14</td><td>1</td></tr><tr><td>Feb-20</td><td>20</td><td>0</td></tr><tr><td>Mar-20</td><td>20</td><td>0</td></tr><tr><td>Apr-20</td><td>9</td><td>0</td></tr><tr><td>May-20</td><td>6</td><td>0</td></tr></tbody></table></div> <div><p><b>% of serious incidents closed within 60 days</b></p><table><caption>% of serious incidents closed within 60 days</caption><thead><tr><th>Month</th><th>% SI's assured (SB UHB)</th></tr></thead><tbody><tr><td>May-19</td><td>12%</td></tr><tr><td>Jun-19</td><td>40%</td></tr><tr><td>Jul-19</td><td>60%</td></tr><tr><td>Aug-19</td><td>72%</td></tr><tr><td>Sep-19</td><td>20%</td></tr><tr><td>Oct-19</td><td>48%</td></tr><tr><td>Nov-19</td><td>55%</td></tr><tr><td>Dec-19</td><td>38%</td></tr><tr><td>Jan-20</td><td>28%</td></tr><tr><td>Feb-20</td><td>30%</td></tr><tr><td>Mar-20</td><td>30%</td></tr><tr><td>Apr-20</td><td>8%</td></tr><tr><td>May-20</td><td>28%</td></tr></tbody></table></div>	Month	Number of Serious Incidents	Number of never events	May-19	13	1	Jun-19	18	1	Jul-19	16	1	Aug-19	23	1	Sep-19	19	0	Oct-19	19	1	Nov-19	11	0	Dec-19	20	1	Jan-20	14	1	Feb-20	20	0	Mar-20	20	0	Apr-20	9	0	May-20	6	0	Month	% SI's assured (SB UHB)	May-19	12%	Jun-19	40%	Jul-19	60%	Aug-19	72%	Sep-19	20%	Oct-19	48%	Nov-19	55%	Dec-19	38%	Jan-20	28%	Feb-20	30%	Mar-20	30%	Apr-20	8%	May-20	28%
	Month	Number of Serious Incidents	Number of never events																																																																					
May-19	13	1																																																																						
Jun-19	18	1																																																																						
Jul-19	16	1																																																																						
Aug-19	23	1																																																																						
Sep-19	19	0																																																																						
Oct-19	19	1																																																																						
Nov-19	11	0																																																																						
Dec-19	20	1																																																																						
Jan-20	14	1																																																																						
Feb-20	20	0																																																																						
Mar-20	20	0																																																																						
Apr-20	9	0																																																																						
May-20	6	0																																																																						
Month	% SI's assured (SB UHB)																																																																							
May-19	12%																																																																							
Jun-19	40%																																																																							
Jul-19	60%																																																																							
Aug-19	72%																																																																							
Sep-19	20%																																																																							
Oct-19	48%																																																																							
Nov-19	55%																																																																							
Dec-19	38%																																																																							
Jan-20	28%																																																																							
Feb-20	30%																																																																							
Mar-20	30%																																																																							
Apr-20	8%																																																																							
May-20	28%																																																																							

Description	Current Performance	Trend
<p><b>Number of pressure ulcers</b>  <i>Total number of grade 3, grade 4 and unstageable pressure ulcers developed in hospital and in the community</i></p>	<ul style="list-style-type: none"> <li>• In April 2020, there were 47 cases of healthcare acquired pressure ulcers, of which 34 were community acquired and 13 were hospital acquired.</li> <li>• The number of grade 3+ pressure ulcers in April 2020 was 6, of which 4 were community acquired and 2 was hospital acquired.</li> </ul>	<p><b>Total number of grade 3+ hospital and community acquired Pressure Ulcers (PU)</b></p>  <p>■ Grade 3+ pressure ulcers (SBU HB)</p>
<p><b>Inpatient Falls</b>  <i>The total number of inpatient falls</i></p>	<ul style="list-style-type: none"> <li>• The number of Falls reported via Datix web for Swansea Bay UHB was 209 in May 2020, which is an increase from 193 reported in April 2020.</li> <li>• The Health Board has agreed a targeted action to reduce Falls by 10%.</li> </ul>	<p><b>Number of inpatient Falls</b></p>  <p>■ Inpatient Falls (SBU HB) — 10% reduction profile</p>

## 7. WORKFORCE UPDATES AND ACTIONS

This section of the report provides further detail on key workforce measures.

Description	Current Performance	Trend																		
<b>Staff sickness rates-</b> <i>Percentage of sickness absence rate of staff</i>	<ul style="list-style-type: none"> <li>Our in-month performance has improved from 7.03% in March 2020 to 6.65% in April 2020.</li> <li>The 12-month rolling performance to the end of April 2020 increased from 6.31% in March 2020 to 9.92% in April 2020.</li> <li>The following table provides the top 5 absence reasons by full time equivalent (FTE) days lost</li> </ul> <table> <tr> <th>Absence Reason</th><th>FTE Days Lost</th><th>%</th></tr> <tr> <td>Anxiety/ stress/ depression/ other psychiatric illnesses</td><td>9,495.64</td><td>27.7%</td></tr> <tr> <td>Chest &amp; respiratory problems</td><td>7,580.64</td><td>22.1%</td></tr> <tr> <td>Infectious diseases</td><td>5,375.61</td><td>15.7%</td></tr> <tr> <td>Other musculoskeletal problems</td><td>2,330.36</td><td>6.8%</td></tr> <tr> <td>Other known causes - not elsewhere classified</td><td>1,659.45</td><td>4.8%</td></tr> </table>	Absence Reason	FTE Days Lost	%	Anxiety/ stress/ depression/ other psychiatric illnesses	9,495.64	27.7%	Chest & respiratory problems	7,580.64	22.1%	Infectious diseases	5,375.61	15.7%	Other musculoskeletal problems	2,330.36	6.8%	Other known causes - not elsewhere classified	1,659.45	4.8%	<p><b>% of full time equivalent (FTE) days lost to sickness absence (12 month rolling)</b></p> <p>Legend:</p> <ul style="list-style-type: none"> <li>% sickness rate (12 month rolling)</li> <li>% sickness rate (in-month)</li> </ul>
Absence Reason	FTE Days Lost	%																		
Anxiety/ stress/ depression/ other psychiatric illnesses	9,495.64	27.7%																		
Chest & respiratory problems	7,580.64	22.1%																		
Infectious diseases	5,375.61	15.7%																		
Other musculoskeletal problems	2,330.36	6.8%																		
Other known causes - not elsewhere classified	1,659.45	4.8%																		

## 8. FINANCE UPDATES

This section of the report provides further detail on key workforce measures.

Description	Current Performance	Trend															
Revenue Financial Position – expenditure incurred against revenue resource limit	<ul style="list-style-type: none"><li>The reported revenue financial position for May 2020 is an in-month overspend of £10.233m, resulting in a cumulative overspend of £15.629m.</li><li>The overspend is made up of three key elements :<ul style="list-style-type: none"><li>Operational overspend – the Health Board had a planned deficit forecast of £24.4m, which is £2.033m per month. The in-month operational position was £2.101m.</li><li>Savings Delivery – the Health Board plan included the delivery of £23m of savings. The ability to progress the planned savings has been impacted by COVID-19. The impact in May is £1.480m.</li><li>COVID-19 net cost impact – during May the Health Board incurred additional costs of COVID-19 of £8.709m which were partially offset by reduced expenditure particularly in planned care services and also slippage against planned investments and funding. This resulted in a net additional cost of COVID-19 of £6.652m.</li></ul></li></ul>	<div>HEALTH BOARD FINANCIAL PERFORMANCE 2020/21</div> <table><thead><tr><th>Month</th><th>Operational Position (£'000)</th><th>Savings Delivery (£'000)</th><th>Net COVID Impact (£'000)</th><th>Total (£'000)</th></tr></thead><tbody><tr><td>M1</td><td>2,118</td><td>1,749</td><td>1,529</td><td>5,396</td></tr><tr><td>M2</td><td>2,101</td><td>1,480</td><td>6,652</td><td>10,233</td></tr></tbody></table> <p>Legend: Operational Position (Blue), Savings Delivery (Purple), Net COVID Impact (Green)</p>	Month	Operational Position (£'000)	Savings Delivery (£'000)	Net COVID Impact (£'000)	Total (£'000)	M1	2,118	1,749	1,529	5,396	M2	2,101	1,480	6,652	10,233
	Month	Operational Position (£'000)	Savings Delivery (£'000)	Net COVID Impact (£'000)	Total (£'000)												
M1	2,118	1,749	1,529	5,396													
M2	2,101	1,480	6,652	10,233													



Description	Current Performance	Trend
<b>Workforce Spend – workforce expenditure profile</b>	<ul style="list-style-type: none"> <li>The workforce costs increased by over £3m in May compared to April.</li> <li>Around £0.5m of this can be attributed bank holiday enhancement impacts.</li> <li>The remaining £2.5m is attributed to the COVID response, with these additional costs evenly distributed between additional staff recruitment including the use of students and the additional costs incurred for substantive staff through overtime and additional hours payments.</li> </ul>	<p>Variable Pay Expenditure This Year and Last Year</p>
<b>Capital Financial Position – expenditure incurred against capital resource limit</b>	<ul style="list-style-type: none"> <li>The forecast outturn capital position for 2020/21 is an overspend of £7.487m.</li> <li>The forecast outturn includes latest estimates for COVID expenditure across our surge capacity, Field Hospitals and new ways of working, including home working.</li> </ul>	<p>Capital- Cumulative performance to plan</p>



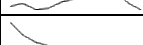


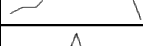
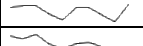
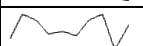


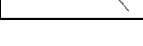



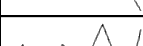


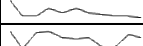
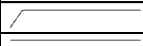

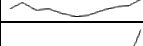


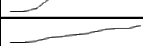

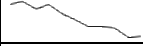

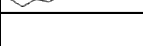
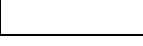

Description	Current Performance	Trend																																							
<p><b>PSPP</b> – pay 95% of Non-NHS invoices within 30 days of receipt of goods or valid invoice</p>	<ul style="list-style-type: none"> <li>The number of invoices paid within 30 days in May was slightly below the 95% target, with in month performance being 94.33%.</li> <li>Whilst still below 95% the May performance was significantly above the April performance of 87.86% leading to an increase in the cumulative compliance to 90.73%.</li> <li>The main issue affecting the May performance was a delay in the payment of nurse bank invoices, with 41 invoices being paid outside the compliance deadline. These invoices had a number of queries associated with them, with responses to the queries being delayed due to the impact on the nurse bank team of COVID-19.</li> </ul>	<p><b>Percentage of non-NHS invoices paid within 30 days of receipt of goods or valid invoice</b></p> <table border="1"> <caption>PSPP Performance Data</caption> <thead> <tr> <th>Month</th> <th>In Month PSPP (%)</th> <th>Cumulative PSPP (%)</th> </tr> </thead> <tbody> <tr> <td>April</td> <td>87.86</td> <td>87.86</td> </tr> <tr> <td>May</td> <td>94.33</td> <td>90.73</td> </tr> <tr> <td>June</td> <td></td> <td></td> </tr> <tr> <td>July</td> <td></td> <td></td> </tr> <tr> <td>August</td> <td></td> <td></td> </tr> <tr> <td>September</td> <td></td> <td></td> </tr> <tr> <td>October</td> <td></td> <td></td> </tr> <tr> <td>November</td> <td></td> <td></td> </tr> <tr> <td>December</td> <td></td> <td></td> </tr> <tr> <td>January</td> <td></td> <td></td> </tr> <tr> <td>February</td> <td></td> <td></td> </tr> <tr> <td>March</td> <td></td> <td></td> </tr> </tbody> </table>	Month	In Month PSPP (%)	Cumulative PSPP (%)	April	87.86	87.86	May	94.33	90.73	June			July			August			September			October			November			December			January			February			March		
Month	In Month PSPP (%)	Cumulative PSPP (%)																																							
April	87.86	87.86																																							
May	94.33	90.73																																							
June																																									
July																																									
August																																									
September																																									
October																																									
November																																									
December																																									
January																																									
February																																									
March																																									

APPENDIX 1: INTEGRATED PERFORMANCE DASHBOARD

The following dashboard provides an overview of the Health Board’s performance against all NHS Wales Delivery Framework measures and key local measures.

QUADRUPLE AIM 1: People in Wales have improved health and well-being with better prevention and self-management																					
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Performance Trend	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20
Childhood Immunisation & breastfeeding	% of babies who are exclusively breastfed at 10 days old	National			Annual ↑															New measure for 2020/21- awaiting data	
	% children who received 3 doses of the hexavalent '6 in 1' vaccine by age 1	National	Q4 19/20	96%	95%					96%			96%			96%			96%		
	% of children who received 2 doses of the MMR vaccine by age 5	National	Q4 19/20	83%	95%					93%			93%			92%			83%		
	% of adult smokers who make a quit attempt via smoking cessation services	National	Jan-20	2.4%	5% annual target	4.2%	✗		0.5%	0.8%	1.0%	1.3%	1.5%	1.7%	1.9%	2.1%	2.4%				
	% of those smokers who are co-validated as quit at 4 weeks	National	Q2 19/20	55.3%	40% annual target	40.0%	✓			56%			55%								
Alcohol	European age standardised rate of alcohol attributed hospital admissions for individuals resident in Wales	National	Q2 19/20	425.9	4 quarter ↓					451.0			438.1			405.8					
	% of people who have been referred to health board services who have completed treatment for alcohol abuse	National			4 quarter ↑															New measure for 2020/21- awaiting data	
Influenza	% uptake of influenza among 65 year olds and over	National	Mar-20	68.0%	75%									49.3%	62.0%	66.2%	68.7%	68.0%	68.0%	Data collection restarts October 2020	
	% uptake of influenza among under 65s in risk groups	National	Mar-20	43.4%	55%									14.7%	32.0%	39.2%	42.8%	43.4%	43.4%		
	% uptake of influenza among pregnant women	National	2018/19	86.1%	75%																
	% uptake of influenza among children 2 to 3 years old	National	Mar-20	50.3%										0.8%	24.0%	42.1%	48.2%	50.3%	50.3%		
	% uptake of influenza among healthcare workers	National	Mar-20	58.7%	60%									42.0%	55.0%	56.0%	58.7%	58.7%	58.7%		
Screening services	Uptake of screening for bowel cancer	National	2018/19	57.0%	60%				2018/19= 57.0% (data relates to ABMU, awaiting disaggregation of SBU data)												
	Uptake of screening for breast cancer	National	2019	72.8%	70%				2019= 72.8% (data relates to ABMU, awaiting disaggregation of SBU data)												
	Uptake of screening for cervical cancer	National	2018/19	72.1%	80%				2018/19= 72.1% (data relates to ABMU, awaiting disaggregation of SBU data)												
Mental Health	% residents in receipt of secondary MH services (all ages) who have a valid care and treatment plan (CTP)	National	Apr-20	93%	90%	90%	✓		89%	89%	88%	91%	92%	92%	92%	91%	93%	92%	91%	93%	
	% of people with dementia in Wales age 65 years or over who are diagnosed (registered on a GP QOF register)	National	2018/19	59.4%	Annual ↑				2018/09= 59.4%												

QUADRUPLE AIM 2: People in Wales have better quality and more accessible health and social care services, enabled by digital and supported by engagement																					
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Performance Trend	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20
Hepatitis C	Number of patients with Hepatitis C who have successfully completed their course of treatment in the reporting year	National			HB target TBC															New measure for 2020/21- awaiting data	
Primary Care	% of GP practices that have achieved all standards set out in the National Access Standards for in-hours GMS	National			100%															New measure for 2020/21- awaiting data	
	% of children regularly accessing NHS primary dental care within 24 hours	National			4 quarter ↑															New measure for 2020/21- awaiting data	
	% 111 patients prioritised as P1CH that started their definitive clinical assessment within 1 hour of their initial call being answered	National	Jun-19	97%	90%				98%	97%	97%										
Unscheduled Care	% of emergency responses to red calls arriving within (up to and including) 8 minutes	National	May-20	75%	65%	65%	✓		74%	75%	71%	71%	67%	66%	59%	62%	67%	69%	69%	70%	75%
	Number of ambulance handovers over one hour	National	May-20	20	0				647	721	594	632	778	827	821	868	848	704	462	61	20
	Handover hours lost over 15 minutes	Local	May-20	125					1,933	2,381	1,574	1,751	2,432	2,778	3,212	3,361	3,545	2,247	1,623	209	125
	% of patients who spend less than 4 hours in all major and minor emergency care (i.e. A&E) facilities from arrival until admission, transfer or discharge	National	May-20	83%	95%				76%	75%	75%	74%	71%	71%	73%	71%	72%	74%	73%	78%	83%
	Number of patients who spend 12 hours or more in all hospital major and minor care facilities from arrival until admission, transfer or discharge	National	May-20	97	0				602	644	642	740	939	890	927	1,018	1,038	783	557	131	97
	% of survival within 30 days of emergency admission for a hip fracture	National	Dec-19	83.6%	12 month ↑				77.6%	86.0%	77.8%	82.4%	75.4%	95.6%	75.6%	83.6%					

QUADRUPLE AIM 2: People in Wales have better quality and more accessible health and social care services, enabled by digital and supported by engagement																					
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Performance Trend	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20
Unscheduled Care	% of emergency responses to red calls arriving within (up to and including) 8 minutes	National	May-20	75%	65%	65%	✔		74%	75%	71%	71%	67%	66%	59%	62%	67%	69%	69%	70%	75%
	Number of ambulance handovers over one hour	National	May-20	20	0				647	721	594	632	778	827	821	868	848	704	462	61	20
	Handover hours lost over 15 minutes	Local	May-20	125					1,933	2,381	1,574	1,751	2,432	2,778	3,212	3,361	3,545	2,247	1,623	209	125
	% of patients who spend less than 4 hours in all major and minor emergency care (i.e. A&E) facilities from arrival until admission, transfer or discharge	National	May-20	83%	95%				76%	75%	75%	74%	71%	71%	73%	71%	72%	74%	73%	78%	83%
	Number of patients who spend 12 hours or more in all hospital major and minor care facilities from arrival until admission, transfer or discharge	National	May-20	97	0				602	644	642	740	939	890	927	1,018	1,038	783	557	131	97
	% of survival within 30 days of emergency admission for a hip fracture	National	Dec-19	83.6%	12 month ↑				77.6%	86.0%	77.8%	82.4%	75.4%	95.6%	75.6%	83.6%					
Stroke	Direct admission to Acute Stroke Unit (<4 hrs)	National	Feb-20	61.8%	56.3%	83%	✗		55%	57%	57%	42%	29%	55%	55%	39%	24%	62%			
	CT Scan (<1 hrs) (local)	Local	Feb-20	38.2%		56%	✗		56%	52%	59%	48%	42%	47%	49%	44%	43%	38%			
	Assessed by a Stroke Specialist Consultant Physician (< 24 hrs)	National	Feb-20	97.1%	83.9%	95%	✔		93%	100%	98%	95%	95%	94%	98%	100%	90%	97%			
	Thrombolysis door to needle <= 45 mins	Local	Feb-20	0.0%	12 month ↑	40%	✗		17%	0%	40%	27%	0%	0%	0%	20%	0%	0%			
	% compliance against the therapy target of an average of 16.1 minutes if speech and language therapist input per stroke patient	National	Feb-20	28.2%	12 month ↑				47%	41%	48%	48%	50%	49%	45%	38%	33%	28%			
	% of stroke patients who receive a 6 month follow-up assessment	National	Q2 19/20	45%	Qtr on qtr ↑								45%								
Cancer	% of patients newly diagnosed with cancer, not via the urgent route, that started definitive treatment within (up to and including) 31 days of diagnosis (regardless of referral route)	National	May-20	82.0%	98%				91%	94%	91%	93%	91%	98%	95%	92%	99%	93%	87%	97%	82%
	% of patients newly diagnosed with cancer, via the urgent suspected cancer route, that started definitive treatment within (up to and including) 62 days receipt of referral	National	May-20	86.0%	95%				80%	81%	76%	84%	86%	84%	86%	92%	86%	78%	73%	81%	86%
	% of patients starting definitive treatment within 62 days from point of suspicion (with adjustments)	National	May-20	70.0%	12 month ↑				67.8%	73.1%	69.0%	68.0%	73.0%	70.0%	71.0%	77.0%	71%	66%	76%	71%	70%
Radiotherapy waiting times	Scheduled (21 Day Target)	Local	May-20	46.0%	80%		✗		41.0%	39.0%	62.0%	40.0%	46.0%	54.0%	50.0%	43.0%	34.0%	28.0%	56.0%	49.0%	46.0%
	Scheduled (28 Day Target)	Local	May-20	84.0%	100%		✗		72.0%	75.0%	87.0%	81.0%	72.0%	73.0%	75.0%	63.0%	60.0%	58.0%	77.0%	86.0%	84.0%
	Urgent SC (7 Day Target)	Local	May-20	33.0%	80%		✗		75.0%	52.0%	52.0%	62.0%	56.0%	62.0%	56.0%	53.0%	50.0%	52.0%	48.0%	45.0%	33.0%
	Urgent SC (14 Day Target)	Local	May-20	83.0%	100%		✗		96.0%	76.0%	93.0%	95.0%	89.0%	86.0%	88.0%	79.0%	79.0%	92.0%	89.0%	91.0%	83.0%
	Emergency (within 1 day)	Local	May-20	100.0%	80%		✔		93.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	Emergency (within 2 days)	Local	May-20	100.0%	100%		✔		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	Elective Delay (21 Day Target)	Local	May-20	83.0%	80%		✔		52.0%	61.0%	52.0%	46.0%	46.0%	30.0%	38.0%	35.0%	58.0%	56.0%	84.0%	76.0%	83.0%
	Elective Delay (28 Day Target)	Local	May-20	100.0%	100%		✔		65.0%	80.0%	61.0%	65.0%	48.0%	38.0%	44.0%	58.0%	68.0%	73.0%	94.0%	88.0%	100.0%
Planned Care	Number of patients waiting > 8 weeks for a specified diagnostics	National	May-20	8,346	0				401	295	261	344	294	223	226	569	628	424	1,407	5,788	8,346
	Number of patients waiting > 14 weeks for a specified therapy	National	May-20	982	0				0	0	0	1	0	1	0	0	0	1	51	387	982
	% of patients waiting < 26 weeks for treatment	National	May-20	64.2%	95%				88.1%	88.0%	87.8%	86.4%	85%	84%	84%	83%	82%	82%	80%	72%	64%
	Number of patients waiting > 26 weeks for outpatient appointment	Local	May-20	9,300	0				323	297	479	925	1,039	1,152	1,120	1,305	1,453	1,306	2,055	5,499	9,300
	Number of patients waiting > 36 weeks for treatment	National	May-20	10,247	0				2,104	2,318	2,690	3,263	3,565	4,256	4,587	5,141	5,623	5,729	6,509	8,355	10,247
	The number of patients waiting for a follow-up outpatient appointment	National	May-20	121,434	20% reduction by March 2021	121,518	✔		136,216	137,057	135,400	134,363	132,054	131,471	130,648	131,263	131,090	128,674	125,708	123,082	121,434
	The number of patients waiting for a follow-up outpatients appointment who are delayed over 100%	National	May-20	24,880		17,649	✗		25,703	26,545	24,398	25,758	23,537	21,778	20,498	20,579	19,969	17,747	18,258	19,538	24,880
	% of R1 ophthalmology patient pathways waiting within target date or within 25% beyond target date for an outpatient appointment	National	Apr-20	69.9%	95%				64.3%	62.4%	64.4%	63.6%	65.7%	69.5%	70.8%	71.6%	75.9%	78.5%	76.2%	69.9%	
Self harm	Rate of hospital admissions with any mention of intentional self-harm of children and young people (aged 10-24 years)	National	2018/19	3.34	Annual ↓				2018/19= 3.34												

QUADRUPLE AIM 2: People in Wales have better quality and more accessible health and social care services, enabled by digital and supported by engagement																						
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Performance Trend	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	
CAMHS	% of urgent assessments undertaken within 48 hours from receipt of referral (Crisis)	Local	Apr-20	100.0%		100%	✔		100%	96%	100%	98%	100%	100%	98%	100%	100%	100%	94%	100%		
	% Patients with Neurodevelopmental Disorders (NDD) receiving a Diagnostic Assessment within 26 weeks	National	Apr-20	34.7%	80%	80%	✘		44%	41%	47%	39%	38%	38%	36%	36%	28%	35%	38%	35%		
	% Patients waiting less than 28 days for a first outpatient appointment for Child and Adolescent Mental Health	National	Apr-20	44.4%	80%	80%	✘		0%	0%	0%	63%	98%	99%	77%	69%	87%	0%	67%	44%		
	P-CAMHS - % of Routine Assessment by CAMHS undertaken within 28 days from receipt of referral	National	Mar-20	14%		80%	✘		3%	3%	8%	12%	32%	63%	17%	4%	0%	0%	14%			
	P-CAMHS - % of therapeutic interventions started within 28 days following assessment by LPMHSS	National	Mar-20	94%		80%	✔		92%	93%	93%	89%	87%	100%	100%	100%	94%	100%	94%			
	S-CAMHS - % of Health Board residents in receipt of CAMHS to have a valid Care and Treatment Plan (CTP)	National	Apr-20	99.2%		90%	✔		99%	98%	99%	99%	100%	100%	100%	100%	100%	99%	99%	99%		
	S-CAMHS - % of Routine Assessment by SCAMHS undertaken within 28 days from receipt of referral	Local	Apr-20	46.2%		80%	✘		75%	76%	59%	64%	98%	98%	82%	69%	87%	93%	75%	46%		
Mental Health	% of mental health assessments undertaken within (up to and including) 28 days from the date of receipt of referral (over 18 years of age)	National	Apr-20	99.0%	80%	80%	✔		97%	97%	97%	98%	98%	98%	97%	98%	93%	97%	97%	99%		
	% of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS (over 18 years of age)	National	Apr-20	97.0%	80%	80%	✔		98%	100%	99%	93%	96%	97%	90%	92%	89%	94%	97%	97%		
	% patients waiting < 26 weeks to start a psychological therapy in Specialist Adult Mental Health	National	Apr-20	93.4%	95%	95%	✘		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	93%		
DTCs	Number of mental health HB DTCs	National	Mar-20	13	12 month ↓	27	✔		23	27	20	18	19	22	22	22	23	16	13			
	Number of non-mental health HB DTCs	National	Mar-20	60	12 month ↓	50	✘		67	70	61	69	69	76	61	53	52	69	60			
infection control	Cumulative cases of E.coli bacteraemias per 100k pop	National	May-20	40.9	<67		✔		75.9	79.9	84.0	81.7	81.2	80.8	76.3	78.6	80.8	82.5	81.4	40.9	40.9	
	Number of E.Coli bacteraemia cases (Hospital)		May-20	6					7	7	14	9	5	10	5	12	15	8	6	6		
	Number of E.Coli bacteraemia cases (Community)			8					15	22	21	13	18	15	10	20	18	16	15	8	8	
	Total number of E.Coli bacteraemia cases			14					22	29	35	22	23	25	15	32	33	31	23	14	14	
	Cumulative cases of S.aureus bacteraemias per 100k pop		May-20	23.0	<20		✘		37.2	36.3	40.8	37.5	34.9	35.6	35.4	35.2	35.6	34.8	34.2	31.5	23.0	
	Number of S.aureus bacteraemias cases (Hospital)		May-20	2					8	6	8	4	3	11	8	7	6	6	4	4	2	
	Number of S.aureus bacteraemias cases (Community)			4					3	5	9	3	5	2	3	4	7	2	5	6	4	
	Total number of S.aureus bacteraemias cases			6					11	11	17	7	8	13	11	11	13	8	9	10	6	
	Cumulative cases of C.difficile per 100k pop		May-20	40.0	<26		✘		21.7	24.9	27.0	27.7	29.3	33.4	35.8	35.6	35.3	36.5	35.4	33.4	40.0	
	Number of C.difficile cases (Hospital)		May-20	6					8	6	9	5	8	13	13	7	6	11	5	9	6	
	Number of C.difficile cases (Community)			10					3	4	4	5	2	6	4	4	5	4	3	2	10	
	Total number of C.difficile cases			16					11	10	13	10	10	19	17	11	11	15	8	11	16	
	Cumulative cases of Klebsiella per 100k pop		May-20	18.2					15.5	21.8	20.3	22.1	23.6	22.0	22.3	21.9	22.1	21.0	21.1	18.2	18.2	
	Number of Klebsiella cases (Hospital)		May-20	4					4	7	1	8	7	4	4	4	7	2	4	1	4	
	Number of Klebsiella cases (Community)			2					1	4	4	3	2	0	4	2	1	1	3	5	2	
	Total number of Klebsiella cases			6					5	11	5	11	9	4	8	6	8	3	7	6	6	
	Cumulative cases of Aeruginosa per 100k pop		May-20	12.1					9.3	12.5	10.0	10.4	9.8	8.8	8.1	7.9	8.0	7.6	7.2	6.1	12.1	
	Number of Aeruginosa cases (Hospital)		May-20	3					1	2	1	2	2	1	1	1	2	1	1	2	3	
	Number of Aeruginosa cases (Community)			2					2	4	0	2	0	0	0	1	1	0	0	0	2	
	Total number of Aeruginosa cases			5					3	6	1	4	2	1	1	2	3	1	1	2	5	
	Hand Hygiene Audits - compliance with WHO 5 moments	Local	May-20	99%		95%	✔		98%	97%	97%	96%	96%	97%	97%	96%	97%	93%	99%	98%	99%	
Antimicrobial Audits	% indication for antibiotic documented on medication chart	Local	Jan-20	90%		95%	✘		87.0%		91.0%		87.0%		92.0%		90.0%					
	% stop or review date documented on medication chart		Jan-20	57%		95%	✘		52.0%		54.0%		63.0%		51.0%							
	% of antibiotics prescribed on stickers		Jan-20	81%		95%	✘		61.0%		81.0%		81.0%		86.0%		81.0%					
	% appropriate antibiotic prescriptions choice		Jan-20	97%		95%	✔		98.0%		97.0%		96.0%		99.0%		97.0%					
	% of patients receiving antibiotics for >7 days		Jan-20	12%		<20%	✔		8.0%		11.0%		15.0%		10.0%		12.0%					
	% of patients receiving surgical prophylaxis for > 24 hours		Jan-20	33%		<20%	✘		6.0%		18.0%		40.0%		50.0%		33.0%					
	% of patients receiving IV antibiotics > 72 hours		Jan-20	57%		<30%	✘		35.0%		46.0%		41.0%		48.0%		57.0%					



QUADRUPLE AIM 3: People in Wales have better quality and more accessible health and social care services, enabled by digital and supported by engagement																					
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Performance Trend	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20
Patient experience	Average rating given by the public (age 16+) for the overall satisfaction with health services in Wales	National	2018/19	6.4	Annual ↑				2018/19= 6.4												
	% of adults (age 16+) who reported that they were very satisfied or fairly satisfied about the care that they received at their GP/family doctor	National	2018/19	93.7%	Annual ↑				2018/19= 93.7%												
	% of adults (age 16+) who reported that they were very satisfied or fairly satisfied about the care that they received at an NHS hospital (Local)	Local	2018/19	92.9%	Annual ↑				2018/19= 92.9%												
	Number of friends and family surveys completed	Local	May-20	247		12 month ↑	✗		3,800	3,726	4,259	4,082	2,441	3,918	3,564	2,476	3,187	3,014	1,720	150	247
	% of who would recommend and highly recommend	Local	May-20	92%		90%	✓		96%	96%	96%	94%	95%	94%	95%	95%	95%	95%	95%	90%	92%
	% of all-Wales surveys scoring 9 out of 10 on overall satisfaction	Local	May-20	100%		90%	✓		81%	79%	77%	81%	85%	83%	83%	83%	86%	81%	90%	95%	100%
Workforce	Overall staff engagement score – scale score method	National	2018	3.81	Improvement				2018= 3.81												
	% of headcount by organisation who have had a PADR/medical appraisal in the previous 12 months (excluding doctors and dentists in training)	National	May-20	63%	85%	85%	✗		70%	70%	71%	71%	71%	67%	69%	70%	72%	74%	72%	68%	63%
	% staff who undertook a performance appraisal who agreed it helped them improve how they do their job	National	2018	55%	Improvement				2018= 55%												
	% compliance for all completed Level 1 competency with the Core Skills and Training Framework	National	May-20	80%	85%	85%	✗		75%	75%	77%	78%	78%	79%	80%	80%	81%	82%	83%	82%	80%
	% workforce sickness and absent (12 month rolling)	National	Apr-20	9.92%	12 month ↓				6.00%	6.03%	6.01%	5.99%	5.98%	6.04%	6.05%	6.09%	6.15%	6.18%	6.31%	9.92%	
	% staff who would be happy with the standards of care provided by their organisation if a friend or relative needed treatment	National	2018	72%	Improvement				2018= 72%												
Complaints	Number of new formal complaints received	Local	May-20	54		12 month ↓ trend	✓		95	118	138	114	110	159	137	87	142	113	92	37	54
	% concerns that had final reply (Reg 24)/interim reply (Reg 26) within 30 working days of concern received	National	Mar-20	48%	75%	80%	✗		83%	85%	81%	84%	85%	83%	76%	75%	83%	76%	48%		
	% of acknowledgements sent within 2 working days	Local	May-20	100%		100%	✓		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

QUADRUPLE AIM 4: Wales has a higher value health and social care system that has demonstrated rapid improvement and innovation, enabled by data and focused on outcomes																					
SBU																					
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Performance Trend	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20
Incidents & Risks	Of the serious incidents due for assurance, the % which were assured within the agreed timescales	National	May-20	29%	90%	80%	✗		12%	40%	60%	71%	20%	47%	55%	38%	28%	29%	30%	7%	29%
	Number of new Never Events	National	May-20	0	0	0	✓		1	1	1	1	0	1	0	1	1	0	0	0	0
	Number of risks with a score greater than 20	Local	May-20	101		12 month ↓	✗		66	75	81	88	103	104	105	109	111	114	108	109	101
	Number of risks with a score greater than 16	Local	May-20	193		12 month ↓	✗		151	162	164	175	197	204	200	202	205	204	198	202	193
	Number of Safeguarding Adult referrals relating to Health Board staff/ services	Local	Mar-20	8		Monitor			9	8	2	6	5	19	6	4	5	6	8	New measures in the process of being agreed	
	Number of Safeguarding Children Incidents	Local	May-20	4		Monitor			10	6	7	6	3	5	13	8	13	7	3	5	4
Pressure Ulcers	Number of pressure ulcers acquired in hospital	Local	Apr-20	13		12 month ↓	✗		16	13	18	14	9	20	22	24	30	41	31	13	
	Number of pressure ulcers developed in the community		Apr-20	34		12 month ↓	✗		33	23	33	37	25	29	31	24	26	25	39	34	
	Total number of pressure ulcers		Apr-20	47		12 month ↓	✗		49	36	51	51	34	49	53	48	56	66	70	47	
	Number of grade 3+ pressure ulcers acquired in hospital		Apr-20	2		12 month ↓	✗		2	1	2	0	1	2	2	2	2	3	1	2	
	Number of grade 3+ pressure ulcers acquired in community		Apr-20	4		12 month ↓	✓		6	6	7	8	8	2	8	3	5	8	8	4	
	Total number of grade 3+ pressure ulcers		Apr-20	6		12 month ↓	✓		8	7	9	8	9	4	10	5	7	11	9	6	
Inpatient Falls	Number of Inpatient Falls	Local	May-20	209		12 month ↓	✗		226	189	186	227	241	255	240	297	249	207	210	193	209

QUADRUPLE AIM 4: Wales has a higher value health and social care system that has demonstrated rapid improvement and innovation, enabled by data and focused on outcomes																						
		SBU																				
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Performance Trend	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	
HAT	Number of potentially preventable hospital acquired thromboses (HAT)	National	Q2 19/20	0	4 quarter ↓			.	2		0											
NEWS	% patients with completed NEWS scores & appropriate responses actioned	Local	May-20	94%		98%	✗		98.3%	95.8%	95.3%	96.8%	96.0%	94.5%	93.7%	96.4%	97.7%	95.17%	91.9%	92.0%	93.9%	
Research	Number of Health and Care Research Wales clinical research portfolio studies	National	Q4 19/20	102	10% annual ↑	102	✓			27			57			84			102			
	Number of Health and Care Research Wales commercially sponsored studies		Q4 19/20	36	5% annual ↑	37	✗			5			26			31			36			
	Number of patients recruited in Health and Care Research Wales clinical research portfolio studies		Q4 19/20	1,505	10% annual ↑	2,081	✗			491			618			1,109			1,505			
	Number of patients recruited in Health and Care Research Wales commercially sponsored studies		Q4 19/20	205	5% annual ↑	138	✓			86			93			179			205			
Mortality	% of universal mortality reviews (UMRs) undertaken within 28 days of a death	Local	Apr-20	98%	95%	95%	✓		97.8%	99.4%	98.6%	100.0%	100.0%	95.9%	100.0%	98.5%	98.4%	100.0%	95.7%	98.4%		
	Stage 2 mortality reviews required	Local	Apr-20	10					13	13	13	9	9	17	9	15	16	8	9	10		
	% stage 2 mortality reviews completed	Local	Feb-20	44%		100%	✗		84.6%	92.9%	71.4%	60.0%	89.0%	64.7%	78.0%	67.0%	75.0%	44.4%				
	Crude hospital mortality rate (74 years of age or less)	National	Apr-20	0.80%	12 month ↓				0.75%	0.75%	0.76%	0.76%	0.77%	0.77%	0.78%	0.79%	0.71%	0.72%	0.75%	0.80%		
	% of deaths scrutinised by a medical examiner	National				Qtr on qtr ↑															New measure for 2020/21- awaiting data	
Treatment Fund	All new medicines must be made available no later than 2 months after NICE and AWMMSG appraisals	National	Q3 19/20	98.6%	100%	100%	✗			98.5%			98.5%			98.6%						
Prescribing	Total antibacterial items per 1,000 STAR-PUs	National	Q3 19/20	336.5	4 quarter ↓					294.0			279.1			336.5						
	Patients aged 65 years or over prescribed an antipsychotic	National	Q3 19/20	1,474	qtr on qtr ↓					1,433			1,470			1,474						
	Number of women of child bearing age prescribed valproate as a % of all women of child bearing age	National			Quarter on quarter ↓																New measure for 2020/21- awaiting data	
	Opioid average daily quantities per 1,000 patients	National	Q3 19/20	4,409	4 quarter ↓					4,451			4,486			4,409						
	Biosimilar medicines prescribed as % of total 'reference' product plus biosimilar	National	Q2 19/20	80.0%	Quarter on quarter ↑								80.0%									
	Fluroquinolone, cephalosporin, clindamycin and co-amoxiclav items per 1,000 patients	Local	Q3 19/20	13.6	4 quarter ↓					13.9			13.3			13.6						
Primary Care	% adult dental patients in the health board population re-attending NHS primary dental care between 6 and 9 months	National	Q3 19/20	32.1%	4 quarter ↓					32.2%			32.2%			32.1%						
Critical Care	% critical care bed days lost to delayed transfer of care	National	Q3 19/20	21.3%	Quarter on quarter ↓					31.3%						21.3%						
Postponed operations	Number of procedures postponed either on the day or the day before for specified non-clinical reasons	National	Jan-20	3,354	> 5% annual ↓						3,288	3,174			3,308	3,313	3,354					
Agency spend	Agency spend as a % of the total pay bill	National			HB target TBC																New measure for 2020/21- awaiting data	
Coding	% of episodes clinically coded within 1 month of discharge	Local	Apr-20	94%	95%	95%	✗		96%	96%	96%	96%	96%	96%	93%	95%	96%	95%	94%	94%		
	% of clinical coding accuracy attained in the NWIS national clinical coding accuracy audit programme	National	2019/20	91%	Annual ↑				2019/20= 91.4%													
E-TOC	% of completed discharge summaries (total signed and sent)	Local	May-20	63%		100%	✗		68.0%	69.0%	64.0%	63.0%	61.0%	63.0%	63.0%	65.0%	66.0%	67.0%	68%	61%	63%	
DNAs	% of patients who did not attend a new outpatient appointment	Local	May-20	3.7%	12 month ↓				6.7%	6.2%	6.5%	6.6%	6.5%	6.6%	6.7%	7.4%	6.5%	6.0%	5.6%	4.8%	3.7%	
	% of patients who did not attend a follow-up outpatient appointment	Local	May-20	3.4%	12 month ↓				7.6%	7.4%	7.9%	7.5%	8.0%	7.9%	7.5%	8.0%	7.7%	6.9%	6.5%	4.4%	3.4%	
Theatre Efficiencies	Theatre Utilisation rates	Local	May-20	11.0%		90%			69%	72%	66%	56%	67%	69%	70%	56%	63%	66%	35%	6%	11%	
	% of theatre sessions starting late	Local	May-20	42.6%		<25%			43%	44%	42%	38%	43%	42%	51%	46%	44%	43%	38%	45%	43%	
	% of theatre sessions finishing early	Local	May-20	45.0%		<20%			42%	39%	40%	38%	43%	38%	41%	43%	41%	42%	40%	43%	45%	