DELIVERY UNIT PLAN DASHBOARD - MORRISTON

PLAN

Enabling Objective	# Actions	Milestones on Track (%)			
		Q1	Q2	Q3	Q4
Partnerships for Improving Health & Wellbeing	0	0			
Co-production & Health Literacy	0	0			
Digitally Enabled Health & Wellbeing	0	0			
Best Value Outcomes from high Quality Care	85	38%			
Partnerships for Care	0	0			
Excellent Staff	7	28%			
Digitally Enabled Care	0	0			
Outstanding Research, Innovation, Education & Learning	3	66%			

Key Actions	Quarter - On Track			
	Q1	Q2	Q3	Q4
Continue to explore a range of options to reduce the medical bed deficit in Morriston Hospital				
Integrated plan for surgery which includes theatre staffing/anaesthetics/surgeon/bed and trolley capacity				
Development of a business case for a hybrid theatre and 2nd MRI scanner and SDMU/SSS wrap around - capital				
Major Trauma Unit				
Implement the agreed medical take model for Swansea				
Development of a clear out of hours model (Hospital 24/7) for Morriston Hospital and a GI bleed rota for Swansea and Neath population				
Regional/South Wales Developments				

QUALITY

	Measure	HB Target	18/19	Performance				
					Q1	Q2	Q3	Q4
HCAIs	C.difficile (15% reduction)	151 (cuml)	TBC	Actual				
				Profile	6	5	6	6
	S.aureus bacteraemia (10% reduction)	151 (cuml)	TBC	Actual				
				Profile	3	3	3	4
	E.cole bacteraemia (5% reduction)	452 (cuml)	TBC	Actual				
				Profile	6	4	6	5
	Klebsiella spp. Bacteraemia (5% reduction)	116 (cuml)	TBC	Actual				
				Profile	2	5	4	3
	Pseudomonas aeruginosa bacteraemia (5% reduction)	32 (cuml)	TBC	Actual				
				Profile	1	0	1	1
Patient Exp.	Serious Incidents (closed& delt with) <60Wrk Days	80%	0%*	Actual				
				Profile	80%	80%	80%	80%
	Complaints response <30days	80%	97%	Actual				
				Profile	80%	80%	80%	80%
	Friends and Family Test - would recommend	90%	94%	Actual				
				Profile	90%	90%	90%	90%

PERFORMANCE

	Measure	HB Target	18/19	Performance				
					Q1	Q2	Q3	Q4
USC	4hr A&E %	86%	TBC	Actual	63%			
				Profile	73%	73%	82%	82%
	12hr A&E %	180	TBC	Actual	644			
				Profile	273	238	211	180
	Handover %	145	TBC	Actual	681			
				Profile	201	200	241	145
Stroke	Admission <4 hrs	84%	TBC	Actual	57%			
				Profile	78%	80%	82%	84%
Cancer	31 days %	98%	TBC	Actual	82% draft			
				Profile	98%	98%	98%	98%
	62 days %	94%	TBC	Actual	76% draft			
				Profile	89%	87%	87%	94%
RTT	OP >26 Weeks	0	TBC	Actual	155			
				Profile	0	0	0	0
	>36 Weeks	1,921	TBC	Actual	2,198			
				Profile	2,125	2,098	2,135	1,921

WORKFORCE

Measure	HB Target	18/19	Performance				
				Q1	Q2	Q3	Q4
PADR	85%	68.73%	Actual	64%			
			Profile	72%	77%	80%	85%
Sickness Absecnce	5%	6.03%	Actual	6.13% (May-			
			Profile	Reducing Long term Sickness by 0.5%			
Statutory & Mandatory Training	85%	70.06	Actual	72%			
			Profile	78%	85%	85%	85%

FINANCE

Measures	HB Target	18/19	Performance				
				Q1	Q2	Q3	Q4
Financial Position	TBC	TBC	Actual				
			Profile	TBC	TBC	TBC	TBC
Savings Identification	TBC	TBC	Actual				
			Profile	TBC	TBC	TBC	TBC
Savings Delivery	TBC	TBC	Actual				
			Profile	TBC	TBC	TBC	TBC

*March 2019 position

DELIVERY UNIT PLAN DASHBOARD - NEATH PORT TALBOT

PLAN

Enabling Objective	# Actions	Milestones on Track (%)			
		Q1	Q2	Q3	Q4
Partnerships for Improving Health & Wellbeing	0	0			
Co-production & Health Literacy	1	100%			
Digitally Enabled Health & Wellbeing	0	0			
Best Value Outcomes from high Quality Care	20	60%			
Partnerships for Care	0	0			
Excellent Staff	0	0			
Digitally Enabled Care	0	0			
Outstanding Research, Innovation, Education & Learning	0	0			

Key Actions	Quarter - On Track			
	Q1	Q2	Q3	Q4
To develop medication management through the whole hospital system. Providing support to the patient flow				
Unscheduled Care - MIU structure				
Expand the Physiotherapy role at the front door to support initial outreach follow up in the community to maintain admission avoidance				
Paediatric OT providing education sessions to carers and all stake holders around the child-Empowering parents/ carers/ teaching staff. (Funding identified for				
Develop Business Case to implement of Foodwise in Pregnancy across the HB				

QUALITY

Measure		HB Target	18/19	Performance				
					Q1	Q2	Q3	Q4
HCAIs	C.difficile (15% reduction)	151 (cuml)	TBC	Actual				
				Profile	0	0	1	1
	S.aureus bacteraemia (10% reduction)	151 (cuml)	TBC	Actual				
				Profile	0	0	1	0
	E.cole bacteraemia (5% reduction)	452 (cuml)	TBC	Actual				
				Profile	1	1	2	0
	Klebsiella spp. Bacteraemia (5% reduction)	116 (cuml)	TBC	Actual				
				Profile	0	0	0	0
	Pseudomonas aeruginosa bacteraemia (5% reduction)	32 (cuml)	TBC	Actual				
				Profile	0	0	0	0
Patient Exp.	Serious Incidents (closed& delt with) <60Wrk Days	80%	50%*	Actual				
				Profile	80%	80%	80%	80%
	Complaints response <30days	80%	85%	Actual				
				Profile	80%	80%	80%	80%
	Friends and Family Test - would recommend	90%	99%	Actual				
				Profile	90%	90%	90%	90%

PERFORMANCE

Measure		HB Target	18/19	Performance				
					Q1	Q2	Q3	Q4
USC	4hr A&E %	86%	TBC	Actual	97%			
				Profile	99%	99%	99%	99%
	12hr A&E %	180	TBC	Actual	0			
				Profile	0	0	0	0
	Handover %	145	TBC	Actual				
				Profile		0	0	0
RTT	OP >26 Weeks	0	TBC	Actual	0			
				Profile	0	0	0	0
	>36 Weeks	1,921	TBC	Actual	0			
				Profile	0	0	0	0

WORKFORCE

Measure	HB Target	18/19	Performance				
				Q1	Q2	Q3	Q4
PADR	85%	81.84%	Actual	77%			
			Profile	75%	80%	85%	90%
Sickness Absence	5%	5.45%	Actual	5.41%			
			Profile	5.0%	4.80%	4.60%	4.30%
Statutory & Mandatory Training	85%	83.91%	Actual	86%			
			Profile	75%	80%	85%	90%

FINANCE

Measures	HB Target	18/19	Performance				
				Q1	Q2	Q3	Q4
Financial Position	TBC	TBC	Actual				
			Profile	TBC	TBC	TBC	TBC
Savings Identification	TBC	TBC	Actual				
			Profile	TBC	TBC	TBC	TBC
Savings Delivery	TBC	TBC	Actual				
			Profile	TBC	TBC	TBC	TBC

*March 2019 position

DELIVERY UNIT PLAN DASHBOARD - MENTAL HEALTH & LEARNING DISABILITIES

PLAN

Enabling Objective	# Actions	Milestones on Track (%)			
		Q1	Q2	Q3	Q4
Partnerships for Improving Health & Wellbeing	2	100%			
Co-production & Health Literacy	6	50%			
Digitally Enabled Health & Wellbeing	1	100%			
Best Value Outcomes from high Quality Care	26	53%			
Partnerships for Care	2	50%			
Excellent Staff	4	75%			
Digitally Enabled Care	1	0%			
Outstanding Research, Innovation, Education & Learning	1	100%			

Key Actions	Quarter - On Track			
	Q1	Q2	Q3	Q4
Reconsideration of service model for Older People's Mental Health in patient care with local authorities as a result of boundary change				
Development of Suicide prevention action plan for the NPT and Swansea areas with key partners				
Development of common LD service model and modenisation plan in partnership with 3 health Boards and 7 local authorities .				
Implementation of the Adult Mental Health Strategic framework				
Development of Adult Acute Business case to replace the not fit for purpose estate still in use at Cefn Coed Hospital				
Interim solution to reprovide Psychiatric Intensive Care Unit.				

QUALITY

Measure		HB Target	18/19	Performance				
					Q1	Q2	Q3	Q4
HCAIs	C.difficile (15% reduction)	151 (cuml)	TBC	Actual				
				Profile	0	0	0	0
	S.aureus bacteraemia (10% reduction)	151 (cuml)	TBC	Actual				
				Profile	0	0	0	0
	E.cole bacteraemia (5% reduction)	452 (cuml)	TBC	Actual				
				Profile	0	0	0	0
	Klebsiella spp. Bacteraemia (5% reduction)	116 (cuml)	TBC	Actual				
				Profile	0	0	0	0
	Pseudomonas aeruginosa bacteraemia (5% reduction)	32 (cuml)	TBC	Actual				
				Profile	0	0	0	0
Patient Exp.	Serious Incidents (closed& delt with) <60Wrk Days	80%	0%*	Actual				
				Profile	80%	80%	80%	80%
	Complaints response <30days	80%	96%	Actual				
				Profile	80%	80%	80%	80%
	Friends and Family Test - would recommend	90%	73%	Actual				
				Profile	90%	90%	90%	90%

PERFORMANCE

Measure		HB Target	18/19	Performance				
					Q1	Q2	Q3	Q4
LPMHSS	Assessment <=28 days	80%	TBC	Actual	96% (May-19)			
				Profile	92%	92%	93%	93%
	Intervention <=28 days	80%	TBC	Actual	95%(May-19)			
				Profile	84%	84%	86%	86%
CTP	People with Care Plan	90%	TBC	Actual	89% (May-19)			
				Profile	90%	90%	90%	90%
HI Psych Therapy	<= 26 weeks	100%	TBC	Actual	100%			
				Profile	95%	98%	100%	100%
Psychiatric Liaison	ED <= 4 hours	100%	TBC	Actual				
				Profile	90%	92%	97%	100%
	Ward <=48 hours	100%	TBC	Actual				
				Profile	85%	90%	95%	100%
OP	<=10 weeks	100%	TBC	Actual				
				Profile	100%	100%	100%	100%
DTOC	Number of Patients	TBC	TBC	Actual	33			
				Profile	TBC	TBC	TBC	TBC
	Number of Days	TBC	TBC	Actual	2827			
				Profile	TBC	TBC	TBC	TBC
CDAT	Assessment <=20 days	100%	TBC	Actual	100%			
				Profile	100%	100%	100%	100%

WORKFORCE

Measure	HB Target	18/19	Performance				
				Q1	Q2	Q3	Q4
PADR	85%	74.42%	Actual	67%			
			Profile	80%	81.50%	83%	85%
Sickness Absecnce	5%	6.17%	Actual	6.24%			
			Profile	5.73%	5.63%	5.53%	5.43%
Statutory & Mandatory Training	85%	80.73%	Actual	82%			
			Profile	80%	81.50%	83%	85%

FINANCE

Measures	HB Target	18/19	Performance				
				Q1	Q2	Q3	Q4
Financial Position	TBC	TBC	Actual				
			Profile	TBC	TBC	TBC	TBC
Savings Identification	TBC	TBC	Actual				
			Profile	TBC	TBC	TBC	TBC
Savings Delivery	TBC	TBC	Actual				
			Profile	TBC	TBC	TBC	TBC

*March 2019 position

DELIVERY UNIT PLAN DASHBOARD - SINGLETON

GIG
CYMRU
NHS
WALES
Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board

PLAN

Enabling Objective	# Actions	Milestones on Track (%)			
		Q1	Q2	Q3	Q4
Partnerships for Improving Health & Wellbeing	0				
Co-production & Health Literacy	0				
Digitally Enabled Health & Wellbeing	0				
Best Value Outcomes from high Quality Care	94	46%			
Partnerships for Care	1	0%			
Excellent Staff	6	33%			
Digitally Enabled Care	24	37%			
Outstanding Research, Innovation, Education & Learning	1	100%			

Key Actions	Quarter - On Track			
	Q1	Q2	Q3	Q4
Implementation of Front Door Redesign Action Plan within SDU.	🟧			
Reduce DToCs and Medically Fit for Discharge patients year on year from the 2018/19 baseline.	🟩			
ABMU outpatient Improvement Plan Singleton Outpatient Improvement Plan	🟩			
Implement the recommendations of the new Capita report regarding our surgical services strategy	🟧			
Delivery Transitional Care Unit.	🟩			
Ddelivery Cancer Strategy Improvements and Single Cancer Pathways	🟩			

QUALITY

Measure		HB Target	18/19	Performance				
					Q1	Q2	Q3	Q4
HCAIs	C.difficile (15% reduction)	151 (cuml)	TBC	Actual				
				Profile	3	1	2	1
	S.aureus bacteraemia (10% reduction)	151 (cuml)	TBC	Actual				
				Profile	1	2	2	1
	E.cole bacteraemia (5% reduction)	452 (cuml)	TBC	Actual				
				Profile	4	4	2	1
	Klebsiella spp. Bacteraemia (5% reduction)	116 (cuml)	TBC	Actual				
				Profile	2	1	2	1
	Pseudomonas aeruginosa bacteraemia (5% reduction)	32 (cuml)	TBC	Actual				
				Profile	0	0	1	1
Patient Exp.	Serious Incidents (closed& delt with) <60Wrk Days	80%	*40%	Actual				
				Profile	80%	80%	80%	80%
	Complaints response <30days	80%	86%	Actual				
				Profile	80%	80%	80%	80%
	Friends and Family Test - would recommend	90%	94%	Actual				
				Profile	90%	90%	90%	90%

PERFORMANCE

Measure		HB Target	18/19	Performance				
					Q1	Q2	Q3	Q4
USC	4hr A&E %	86%	TBC	Actual	MIU not open			
				Profile	99%	99%	99%	99%
	12hr A&E %	180	TBC	Actual	MIU not open			
				Profile	0	0	0	0
	Handover %	145	TBC	Actual	40			
				Profile	0	0	0	0
Cancer	31 days %	98%	TBC	Actual	90% *draft*			
				Profile	98%	98%	98%	98%
	62 days %	94%	TBC	Actual	72% *draft*			
				Profile	89%	87%	87%	94%
RTT	OP >26 Weeks	0	TBC	Actual	142			
				Profile	0	0	0	0
	>36 Weeks	1,921	TBC	Actual	120			
				Profile	0	0	0	0

WORKFORCE

Measure	HB Target	18/19	Performance				
				Q1	Q2	Q3	Q4
PADR	85%	70.97%	Actual	70%			
			Profile	70%	75%	80%	85%
Sickness Absence	5%	6.07%	Actual	6.1%			
			Profile	5%	5%	5%	5%
Statutory & Mandatory Training	85%	76.54%	Actual	78%			
			Profile	70%	75%	80%	85%

FINANCE

Measures	HB Target	18/19	Performance				
				Q1	Q2	Q3	Q4
Financial Position	TBC	TBC	Actual				
			Profile	TBC	TBC	TBC	TBC
Savings Identification	TBC	TBC	Actual				
			Profile	TBC	TBC	TBC	TBC
Savings Delivery	TBC	TBC	Actual				
			Profile	TBC	TBC	TBC	TBC

*March 2019 position

DELIVERY UNIT PLAN DASHBOARD - PRIMARY & COMMUNITY SERVICES

PLAN

Enabling Objective	# Actions	Milestones on Track (%)			
		Q1	Q2	Q3	Q4
Partnerships for Improving Health & Wellbeing	3	0%			
Co-production & Health Literacy	8	86%			
Digitally Enabled Health & Wellbeing	1	0%			
Best Value Outcomes from high Quality Care	71	45%			
Partnerships for Care	0				
Excellent Staff	1	100%			
Digitally Enabled Care	0				
Outstanding Research, Innovation, Education & Learning	1	100%			

Key Actions	Quarter - On Track			
	Q1	Q2	Q3	Q4
Work with partners to delive Neighbourhood Approach.				
Wellness Centre				
Roll out the Whole System Transformation programme model (Cwmtawe) to all 8 Clusters				
The development of Cluster Plans and implementation of pace setter projects in line with cluster priorities.				
Reduce reliance on face to face ophthalmology outpatient appointments				
Increase access to general dental services				

QUALITY

Measure		HB Target	18/19	Performance (Community/Hospital)				
					Q1	Q2	Q3	Q4
HCAIs	C.difficile (15% reduction)	151 (cuml)	TBC	Actual				
				Profile	3/0	3/0	3/0	3/0
	S.aureus bacteraemia (10% reduction)	151 (cuml)	TBC	Actual				
				Profile	8/0	5/1	9/0	6/0
	E.cole bacteraemia (5% reduction)	452 (cuml)	TBC	Actual				
				Profile	26/0	30/0	24/0	32/0
	Klebsiella spp. Bacteraemia (5% reduction)	116 (cuml)	TBC	Actual				
				Profile	2/0	5/0	5/0	5/0
	Pseudomonas aeruginosa bacteraemia (5% reduction)	32 (cuml)	TBC	Actual				
				Profile	2/0	2/0	1/0	2/0
Patient Exp.	Serious Incidents (closed& delt with) <60Wrk Days	80%	50%*	Actual				
				Profile	80%	80%	80%	80%
	Complaints response <30days	80%	75%	Actual				
				Profile	80%	80%	80%	80%
	Friends and Family Test - would recommend	90%	99%	Actual				
				Profile	90%	90%	90%	90%

PERFORMANCE

	Measure	HB Target	18/19	Performance				
					Q1	Q2	Q3	Q4
Planned Care	Outpatients waiting >26wks	TBC	TBC	Actual	0			
				Profile	0	TBC	TBC	TBC
	Treatment waits >36 wks	TBC	TBC	Actual	0			
				Profile	0	TBC	TBC	TBC
	Therapy waits >14 weeks	TBC	TBC	Actual	0			
				Profile	0	TBC	TBC	TBC
Access	% GPs open core hrs /within 1hr	TBC	TBC	Actual	96%			
				Profile	TBC	TBC	TBC	TBC
	% Gp daily appt 5-6.30pm	TBC	TBC	Actual	86%			
				Profile	TBC	TBC	TBC	TBC
	%pop reg accessing dental care	TBC	TBC	Actual	62% (Dec-18)			
				Profile	TBC	TBC	TBC	TBC

WORKFORCE

Measure	HB Target	18/19	Performance				
				Q1	Q2	Q3	Q4
PADR	85%	77.95%	Actual	80%			
			Profile	80%	82%	83%	85%
Sickness Absecnce	5%	5.40%	Actual	5.4%			
			Profile	5.28%	5.15%	5.08%	5.00%
Statutory & Mandatory Training	85%	84.98%	Actual	86%			
			Profile	85%	85%	85%	85%

FINANCE

Measures	HB Target	18/19	Performance				
				Q1	Q2	Q3	Q4
Financial Position	TBC	TBC	Actual				
			Profile	TBC	TBC	TBC	TBC
Savings Identification	TBC	TBC	Actual				
			Profile	TBC	TBC	TBC	TBC
Savings Delivery	TBC	TBC	Actual				
			Profile	TBC	TBC	TBC	TBC

*March 2019 position

Unit Actions					
	Morr	**Sngltn**	**NPT**	**MHLD**	**PCS**
Unit Plans					
• Confirm via email sign off of plans by DU lead	✓	✓	✓	✓	
Dashboards					
• Complete workforce measure profiles	✓	✓	✓	✓	
• Review and amend key actions as appropriate	✓	✓	✓	✓	
• Performance Profiles for MH to be completed	N/A	N/A	N/A	✓	N/A
• Performance Profiles for PCS to be completed	N/A	N/A	N/A	N/A	

Notes

HB end of year position to be confirmed on release of final Q4 Perfomrance Report

Financial targets and profiles to be confirmed on completion of financial plan 2019/20