



Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	21st December 2021	Agenda Item	2.1
Report Title	Integrated Performance Report		
Report Author	Meghann Protheroe, Head of Performance		
Report Sponsor	Darren Griffiths, Director of Finance and Performance		
Presented by	Darren Griffiths, Director of Finance and Performance		
Freedom of Information	Open		
Purpose of the Report	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 (November 2021) in delivering key local performance measures as well as the national measures outlined in the NHS Wales Delivery Framework.		
Key Issues	<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.</p> <p>Historically Welsh Government publish a revised NHS Wales Delivery Framework on an annual basis. In 2021/22 a new Single Outcomes Framework for Health and Social Care was due to be published however, development of the framework was delayed due to the COVID19 pandemic. The updated National Delivery Framework 2021/22 was published in October 2021, with the updated framework measures being presented at the November 2021 Management Board meeting. Full updates outlined within the Delivery Framework will be reflected in the December 2021 Integrated Performance Report. The intention of the updated integrated framework measures is to demonstrate how patients and populations are better off through the delivery of services and allowing a different balance across our traditional services.</p> <p>The Health Board continues to refine the organisation’s annual plan and develop recovery trajectories. Trajectories for recovery of unscheduled care and cancer performance were submitted for discussion at the September Performance and Finance Committee. Performance against these trajectories continue to be measured.</p> <p>Key high level issues to highlight this month are as follows:</p> <p>2021/22 Delivery Framework COVID19- The number of new cases of COVID19 has seen an decrease in November 2021, with 8,247 new cases being</p>		

reported in-month. The occupancy rate of confirmed COVID patients in general medical and critical care beds remains at a low rate, however figures are slowly increasing in early December 2021.

Unscheduled Care- Demand for emergency department care within Swansea Bay University (SBU) Health Board increased from January 2021 to June 2021 but has since then been on modest reduction trajectory. Attendances have decreased in October 2021 to 10,138 from 10,737 in October 2021. The Health Board’s performance against the 4-hour measure improved from 71.96% in October 2021 to 73.46% in November 2021 and correspondingly the number of patients waiting over 12 hours in Accident and Emergency (A&E) decreased in month also.

Revised trajectories will be discussed at the Health Board for adoption in relation to UEC, Cancer and Planned Care.

Planned Care- November 2021 saw a 2% in-month increase in the number of patients waiting over 26 weeks for a new outpatient appointment. Additionally, the number of patients waiting over 36 weeks increased by 1.8% to 37,064. There has been an increase in the number of referrals received by secondary care in November 2021 up 7% to 11,238 on October 2021. Therapy waiting times have increased in November 2021 to 629 from 414 in October.

Cancer- Both September 2021 and October 2021 saw 62% performance against the Single Cancer Pathway measure of patients receiving definitive treatment within 62 days (measure reported a month in arrears). The backlog of patients waiting over 63 days has decreased in November 2021 to under 600 for the first time since June 2021.

Mental Health- performance against the Mental Health Measures continues to be maintained. All Welsh Government targets were achieved in September 2021. Psychological therapies within 26 weeks continue to be maintained at 100%.

Child and Adolescent Mental Health Services (CAMHS)- Access times for crisis performance has improved by 2% to 97% in October 2021. Neurodevelopmental Disorders (NDD) access times within 26 weeks continues to be a challenge, with performance the same in both September 2021 and October 2021 at 34% against a target of 80%. The committee will receive a separate update report on CAMHS at the meeting.

Specific Action Required	Information	Discussion	Assurance	Approval
	✓		✓	

<p>Recommendations</p>	<p>Members are asked to:</p> <ul style="list-style-type: none"> • NOTE the Health Board performance against key measures and targets. • NOTE the actions being taken to improve performance: - <ul style="list-style-type: none"> ○ Care home beds have been commissioned to support the move of clinically optimised patients from acute beds ○ Virtual Ward recruitment progressing well and service being established to take case load ○ Further financial resource agreed to support cancer recovery ○ Work has started on the development of Enfys ward at Morriston to enable establishment of Ambulatory Emergency Care Centre ○ Extending therapies and clinical services to be more consistent over 7 days of the week ○ Hot clinic slots developed for patients who require care/assessment but can come back to a scheduled slot next day ○ Both UEC and cancer performance remain under escalation as part of the Health Board's performance escalation framework. ○ 26 theatre sessions moved from Morriston to Singelton and a further 26 being considered before Christmas ○ Insourcing contract range being extended to include further specialties including gynaecology ○ Trajectories have been reviewed and may change subject to Board approval.
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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 NHS Wales Delivery Framework and local quality & safety measures.

2. BACKGROUND

In 2021/22, a Single Outcomes Framework for Health and Social Care was due to be published but was delayed due to the COVID19 pandemic. Welsh Government has confirmed that during 2021/22 the Single Outcomes Framework will be developed for adoption in 2022/23 and that the 2020/21 measures will be rolled over into 2021/22.

The NHS Wales Delivery Framework sets out measures under the quadruple aims which the performance of the Health Board is measured. The 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

The Health Board's performance reports have traditionally been structured according to the aims within the NHS Delivery Framework however, the focus for NHS Wales reporting has shifted to harm management as a consequence of the COVID-19 pandemic. In order to improve the Health Board's visibility of measuring and managing harm, the structure of this report has been aligned with the four quadrants of harm as set out in the NHS Wales COVID-19 Operating Framework. The harm quadrants are illustrated in the following diagram.

Harm from Covid itself	Harm from overwhelmed NHS and social care system
Harm from reduction in non-Covid activity	Harm from wider societal actions/lockdown

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. A number of local COVID-19 specific measures have been included in this iteration of the performance report.

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 performance report until operational pressures significantly ease. Despite a reduction in the narrative contained within this report, considerable work has been undertaken to include additional measures that aid in describing how the healthcare systems has changed as a result of the pandemic.

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.

5. RECOMMENDATION

Members are asked to:

- **NOTE** the Health Board performance against key measures and targets.
- **NOTE** the actions being taken to improve performance: -
 - Care home beds have been commissioned to support the move of clinically optimised patients from acute beds
 - Virtual Ward recruitment progressing well and service being established to take case load
 - Further financial resource agreed to support cancer recovery
 - Work has started on the development of Enfy's ward at Morriston to enable establishment of Ambulatory Emergency Care Centre
 - Extending therapies and clinical services to be more consistent over 7 days of the week
 - Hot clinic slots developed for patients who require care/assessment but can come back to a scheduled slot next day
 - Both UEC and cancer performance remain under escalation as part of the Health Board's performance escalation framework.
 - 26 theatre sessions moved from Morriston to Singelton and a further 26 being considered before Christmas
 - Insourcing contract range being extended to include further specialties including gynaecology
 - Trajectories have been reviewed and may change subject to Board approval.

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		
A number of indicators monitor progress in relation to Workforce, such as Sickness and Personal Development Review rates. Specific issues relating to staffing are also addressed individually in 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.
- **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 Service Groups 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 Service Group leads are key in identifying performance issues and identifying actions to take forward.

Report History	The last iteration of the Integrated Performance Report was presented to Performance & Finance Committee in November 2021. This is a routine monthly report.
Appendices	Appendix 1: Integrated Performance Report



Appendix 1- Integrated Performance Report December 2021



CONTENTS PAGE

	Page number(s):
1. <u>OVERVIEW</u>	11-14
• <u>Key movements</u>	
• <u>Areas under escalation</u>	
2. <u>QUADRANTS OF HARM SUMMARY</u>	15
3. <u>HARM QUADRANT- HARM FROM COVID ITSELF</u>	16
3.1 Updates on key measures:	
• <u>COVID testing</u>	18
• <u>COVID related staff absence</u>	19
4. <u>HARM QUADRANT- HARM FROM OVERWHELMED NHS AND SOCIAL CARE SYSTEM</u>	
4.1 <u>Unscheduled care overview</u>	19-20
4.2 Updates on key measures:	
• <u>Unscheduled Care</u>	21-28
• <u>Fractured Neck of femur</u>	29-30
• <u>Healthcare Acquired Infections</u>	31-33
• <u>Pressure Ulcers</u>	33
• <u>Serious incidents</u>	34
• <u>Inpatient Falls</u>	35
• <u>Discharge Summaries</u>	35
• <u>Crude Mortality</u>	36
• <u>Workforce</u>	37
5. <u>HARM QUADRANT- HARM FROM REDUCTION IN NON-COVID ACTIVITY</u>	
5.1 <u>Primary and Community Care overview</u>	38
5.2 <u>Planned Care Overview</u>	39-40
5.3 Updates on key measures:	
• <u>Planned Care</u>	41-46

	Page number(s):
<ul style="list-style-type: none"> • <u>Cancer</u> • <u>Follow-up appointments</u> • <u>Patient Experience</u> • <u>Complaints</u> 	47-49 50 51 52
6. HARM QUADRANT- HARM FROM WIDER SOCIETAL ACTIONS/ LOCKDOWN	
6.1 <u>Immunisations and Vaccinations overview</u>	53
6.2 <u>Mental Health Overview</u>	54
6.3 Updates on key measures:	
<ul style="list-style-type: none"> • <u>Adult Mental Health</u> • <u>Child and Adolescent Mental Health</u> 	55 56
7. <u>FINANCE</u>	57-59
8. <u>APPENDIX 2: INTEGRATED PERFORMANCE DASHBOARD</u>	60-63

1. OVERVIEW

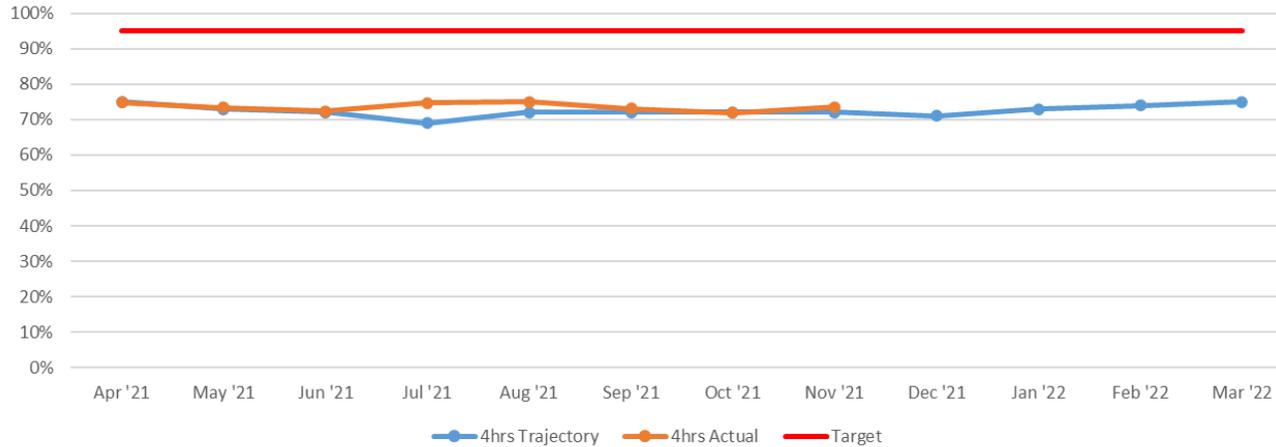
The following summarises the key successes, along with the priorities, risks and threats to achievement of the quality, access and workforce standards.

Successes	Concerns
<p>572,174 Total vaccinations undertaken (12.12.21)</p> <p style="text-align: center;">↓</p> <p>Reduction in A&E attendances</p>	<p style="text-align: center;">↑</p> <p>Increase in no. elective procedures cancelled due to lack of beds</p> <p style="text-align: right;">0% CAMHS patients started therapeutic intervention within 28 days</p>
<p style="text-align: center;">100% MH&LD patients waited less than 26 weeks for psychological therapy (performing above the nation 95% target)</p>	<p style="text-align: center;">629 (52%↑) Patients on Therapies W/L, waiting > 14 weeks</p>
<p style="text-align: center;">↓</p> <p>Reduction in number of Pressure ulcers reported</p> <p style="text-align: right;">1,055 (17%↓) Waits in A&E over 12 hours</p>	<p style="text-align: center;">268 (13%↑) Medically fit patients</p> <p style="text-align: right;">37,064 (1.8%↑) Increase in patients waiting > 36 weeks</p>
<p style="text-align: center;">129,255 (1.8%↓) Patients waiting for a follow-up outpatient appointment</p>	<p style="text-align: center;">↑</p> <p>Increase in total size of waiting list</p>
<p style="text-align: center;">52.0% (8%↑) Red calls responded to within 8 minutes</p> <p style="text-align: right;">584 (9.6%↓) USC backlog over 63 days</p>	<p style="text-align: center;">1 Never Event reported</p> <p style="text-align: right;">438 Podiatry patients waiting > 14 weeks</p>

HARM FROM OVERWHELMED NHS AND SOCIAL CARE SYSTEM UNSCHEDULED CARE – PERFORMANCE ESCALATION UPDATES

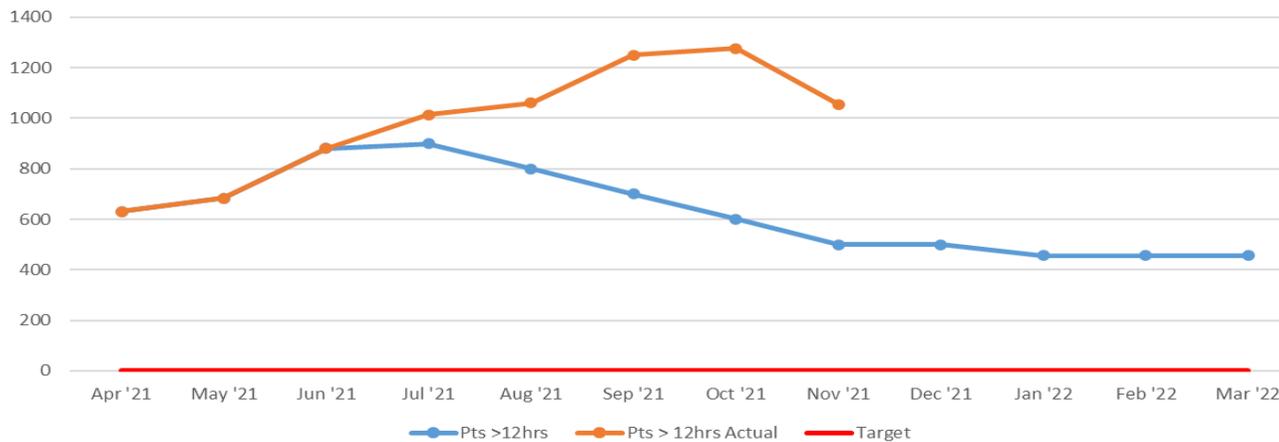
1. Submitted recover trajectory for A&E 4hr performance

SBUHB 4hr Performance 2021-22



2. Submitted recovery trajectory for A&E 12-hour performance

Patients > 12 hours Performance 2021-22



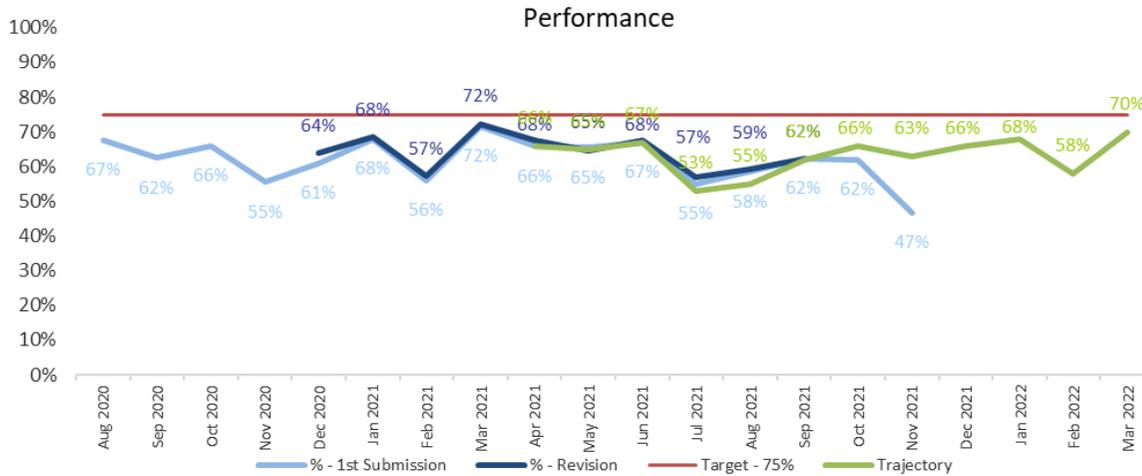
1. In November 2021, the 4 hour Emergency department (ED) performance level was 73.46%, which is slightly above the outlined trajectory.

2. The 12-hour performance trajectory shows a consistent reduction in patients in the coming months. November 2021 saw the 12-hour performance improve after months of steady decline. It is still significantly above projected levels, however.

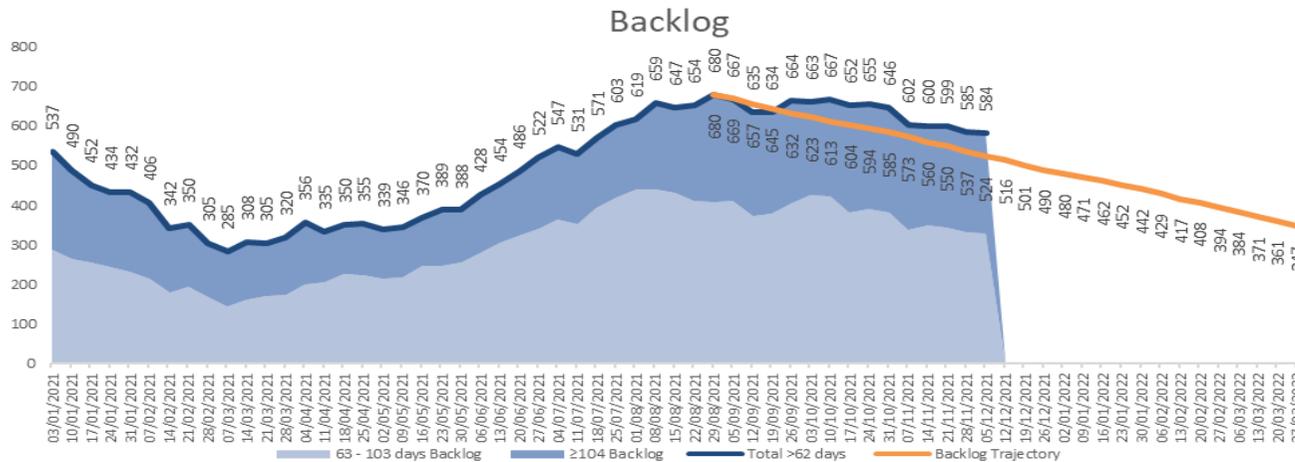
A detailed recovery plan outlining key actions was shared in the September 2021 PFC agenda.

HARM FROM REDUCTION IN NON-COVID ACTIVITY CANCER SERVICES – PERFORMANCE ESCALATION UPDATES

1. SCP performance trajectory



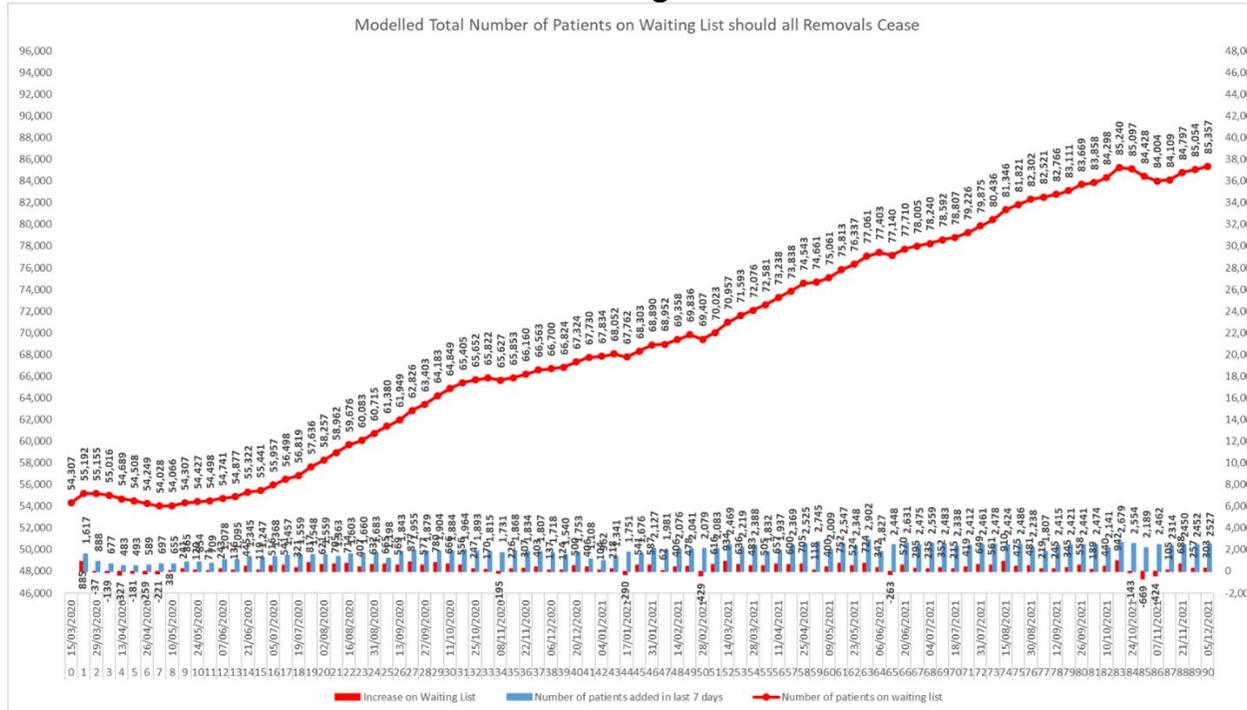
2. Proposed backlog improvements to support SCP performance



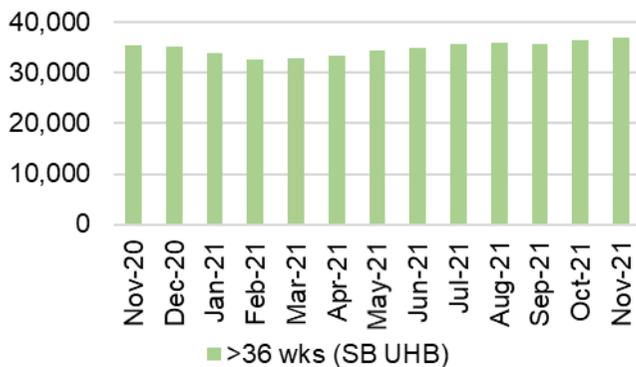
1. SCP performance in October 2021 was 62% which was below the outlined trajectory of 66%. November 2021 performance is still in draft format and takes 30 days to validate from the month end.
2. Shows the weekly breakdown of the backlog reduction against the proposed trajectories. There are a few key service areas who are off target against their trajectories, however the backlog is beginning to show a reduction.

HARM FROM REDUCTION IN NON-COVID ACTIVITY PLANNED CARE

1. Total waiting list movement



2. Number of patients waiting over 36 weeks



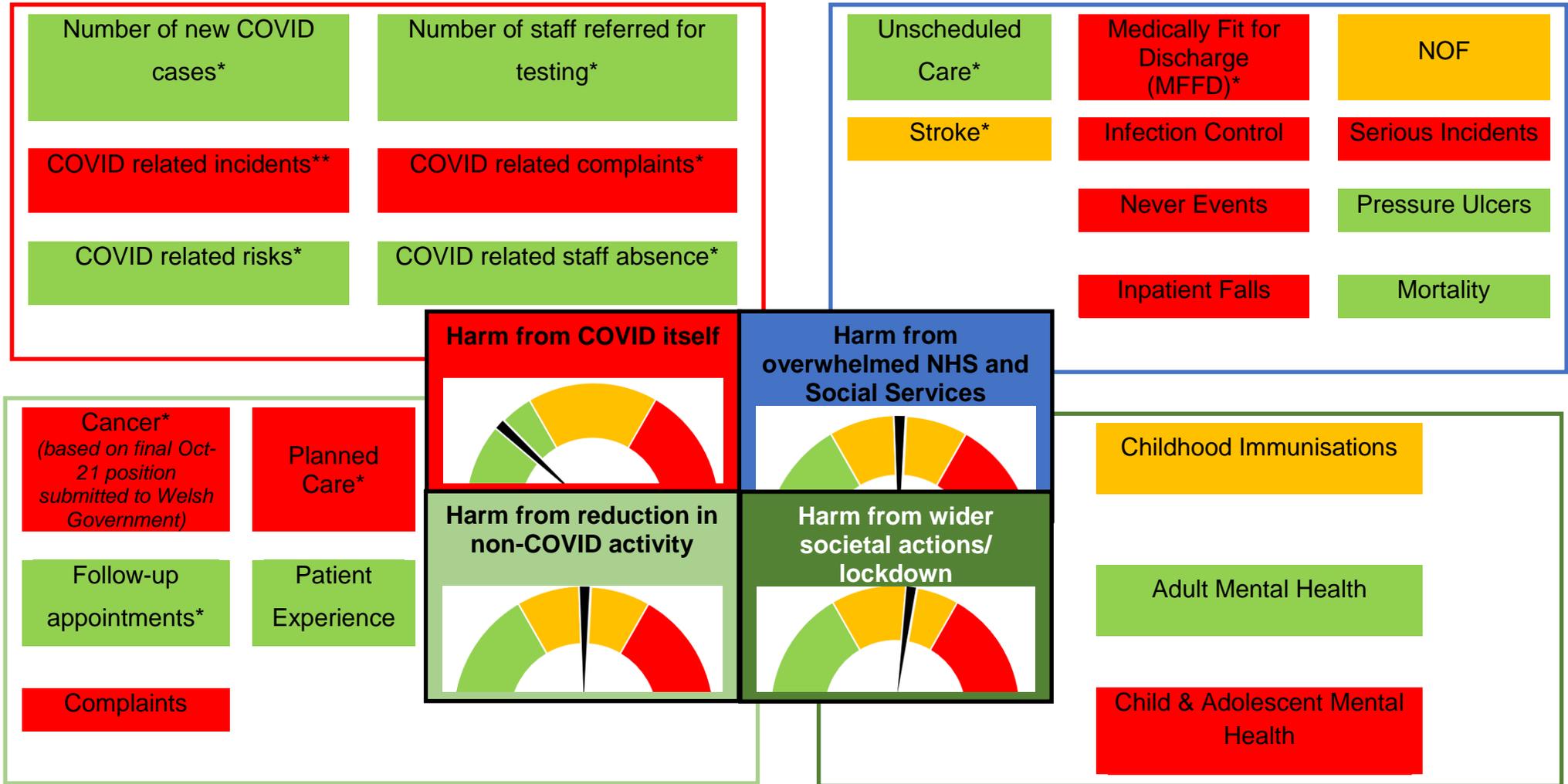
1. The chart shows the total waiting list movement since March 2020. Each data point is a weekly marker. The chart shows that the total number of patients on the list has increased in recent weeks, after reducing for a short period.

This measure is not yet under escalation but is an important area for Committee consideration and is included for information.

2. This chart shows the number of patients waiting over 36 weeks for either an outpatient appointment, a diagnostic test, a follow up or treatment. Whilst there was a reduction in numbers in March 2021, figures are now consistently increasing.

1. QUADRANTS OF HARM SUMMARY

The following is a summary of all the key performance indicators included in this report.



NB- RAG status is against national or local target
 ** Data not available

*RAG status based on in-month movement in the absence of local profiles

3.1 HARM FROM COVID ITSELF

Chart 1: Number of new COVID19 cases

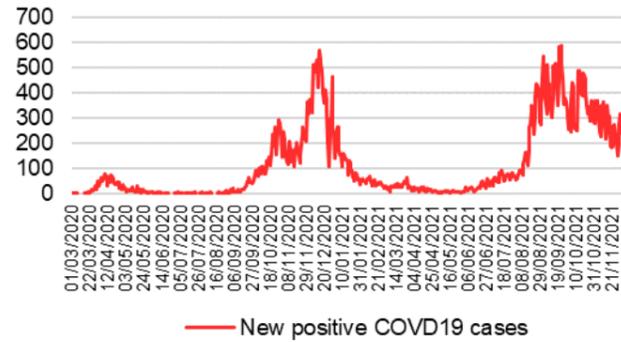


Chart 2: Number of new COVID19 cases (cumulative)

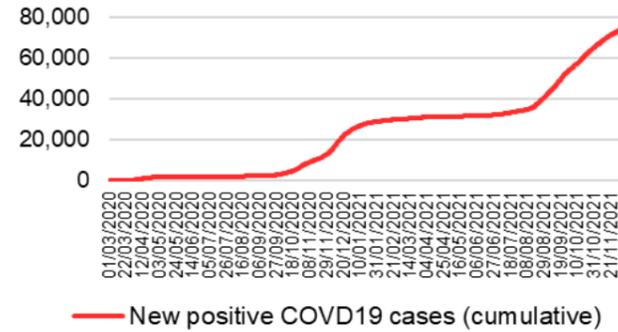


Chart 3: Number of COVID19 tests completed and positivity rate

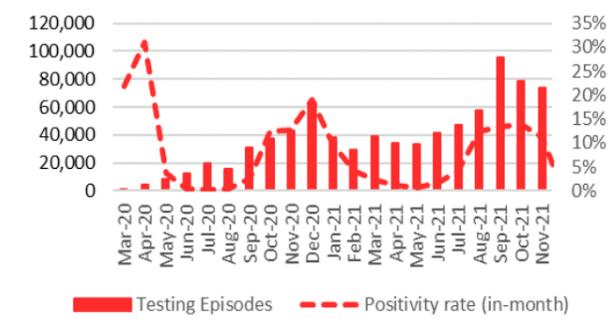


Chart 4: Number of staff referred for Antigen testing

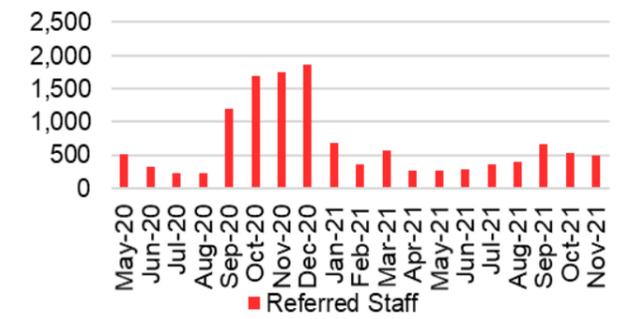


Chart 5: Outcome of staff COVID19/ antigen tests

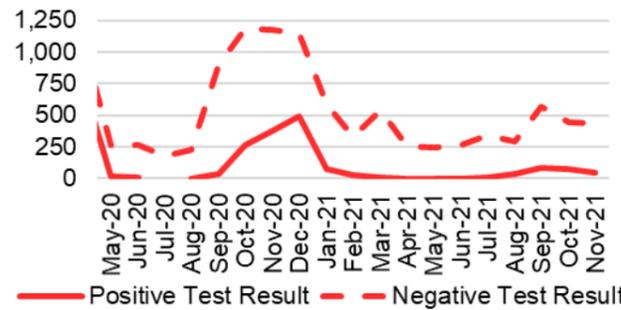


Chart 6: Number of COVID19 related incidents

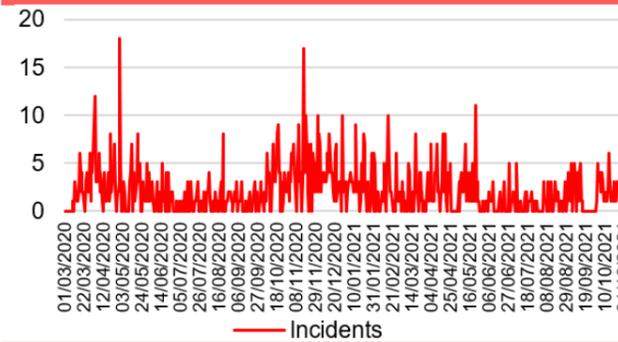


Chart 7: Number of COVID19 related serious incidents

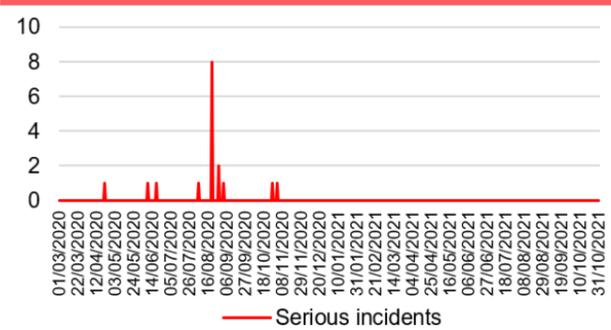


Chart 8: Number of COVID19 related complaints

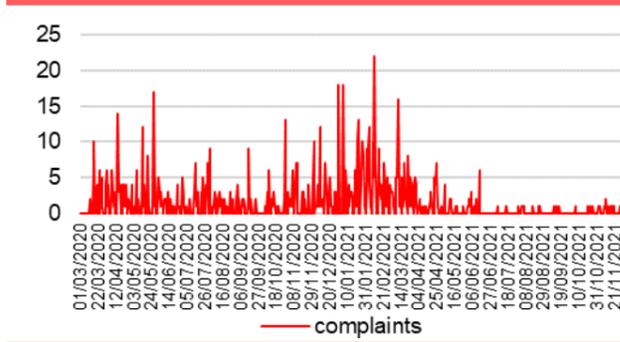


Chart 9: Number of COVID19 related risks

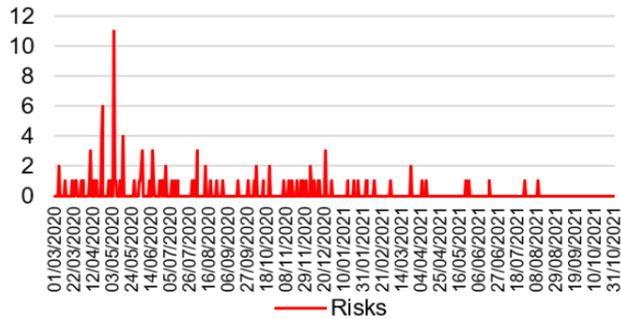


Chart 10: Number of staff self-isolating (asymptomatic)

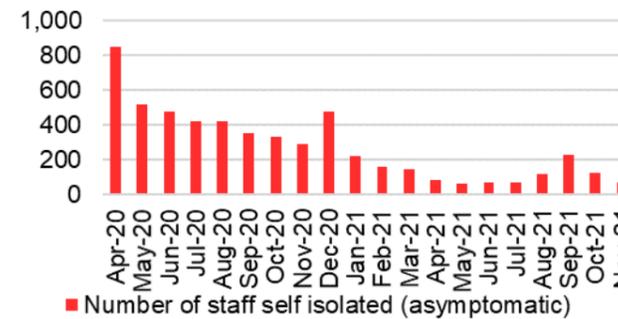


Chart 11: Number of staff self isolating (symptomatic)

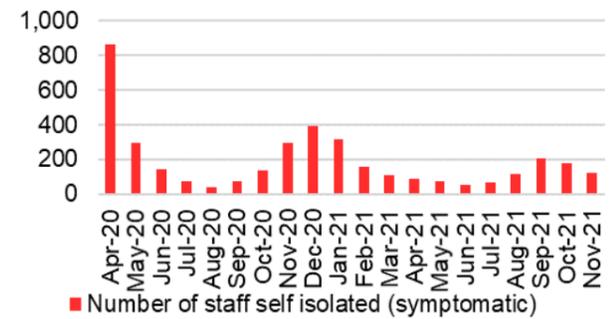


Chart 12: % staff sickness

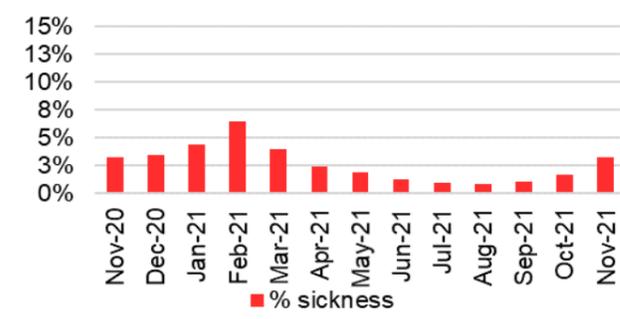


Chart 13: Bed Occupancy for suspected and confirmed COVID19 cases

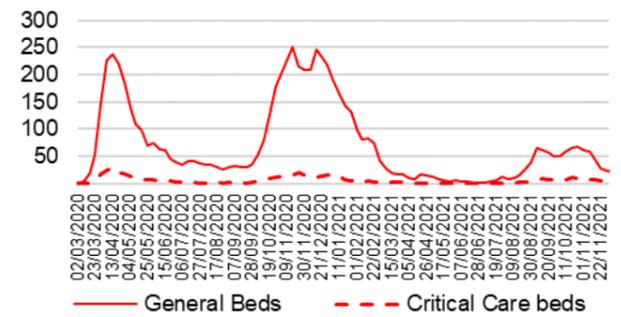


Chart 14: Number of hospital deaths with any mention of COVID19



Chart 15: Number of weekly registered deaths with any mention of COVID19 (ONS data)

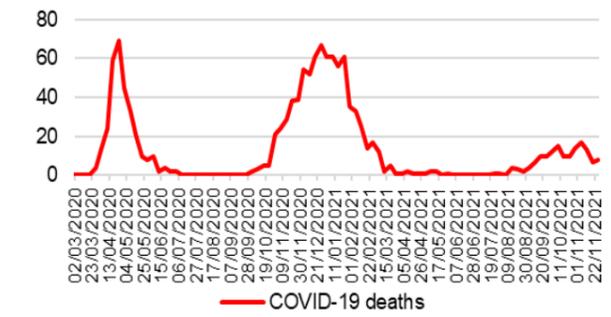
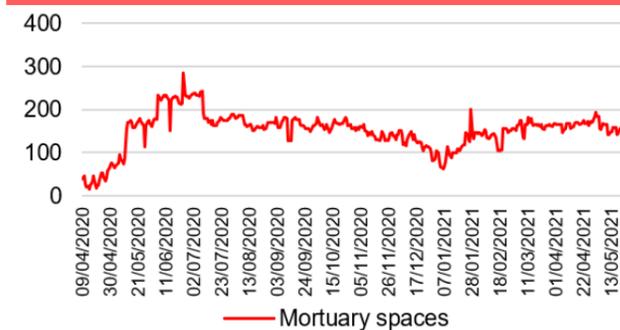


Chart 16: Number of mortuary spaces



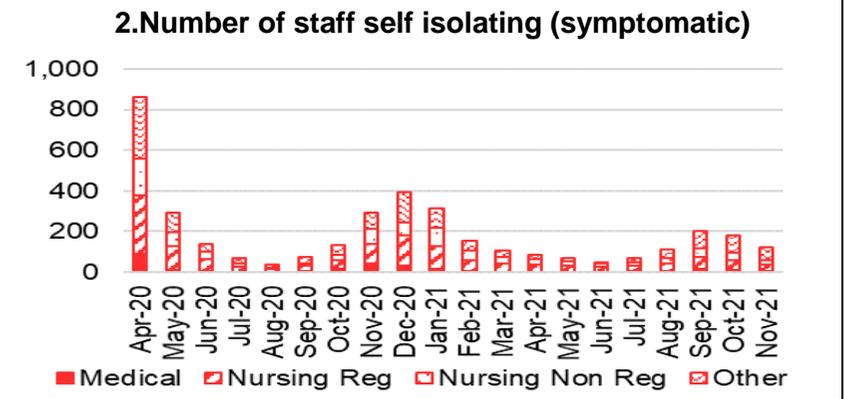
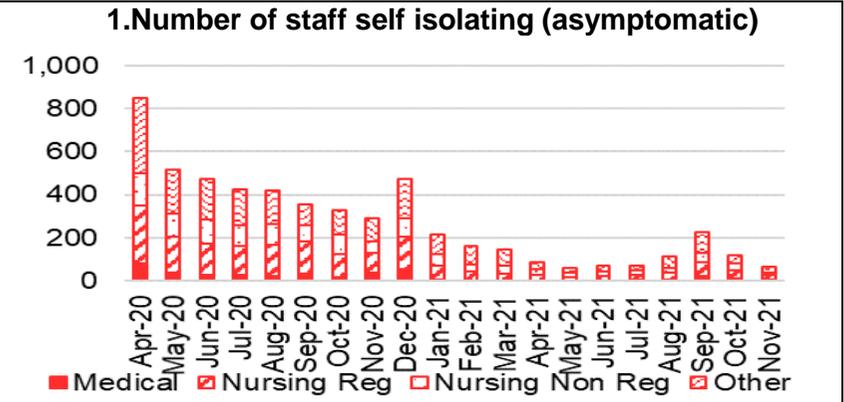
3.1 Updates on key measures

COVID TESTING																																																																																																																
Description	Current Performance	Trend																																																																																																														
<p>1. Number of new COVID19 cases in Swansea Bay population area</p>	<p>1. Number of new COVID cases In November 2021, there were an additional 8,247 positive cases recorded bringing the cumulative total to 73,354 in Swansea Bay since March 2020.</p>	<p>1. Number of new COVID19 cases for Swansea Bay population</p> <table border="1"> <caption>Estimated data for 1. Number of new COVID19 cases for Swansea Bay population</caption> <thead> <tr> <th>Month</th> <th>New positive COVID19 cases</th> </tr> </thead> <tbody> <tr><td>Mar-20</td><td>0</td></tr> <tr><td>Apr-20</td><td>1,000</td></tr> <tr><td>May-20</td><td>0</td></tr> <tr><td>Jun-20</td><td>0</td></tr> <tr><td>Jul-20</td><td>0</td></tr> <tr><td>Aug-20</td><td>0</td></tr> <tr><td>Sep-20</td><td>500</td></tr> <tr><td>Oct-20</td><td>4,500</td></tr> <tr><td>Nov-20</td><td>5,500</td></tr> <tr><td>Dec-20</td><td>12,000</td></tr> <tr><td>Jan-21</td><td>3,500</td></tr> <tr><td>Feb-21</td><td>1,000</td></tr> <tr><td>Mar-21</td><td>500</td></tr> <tr><td>Apr-21</td><td>0</td></tr> <tr><td>May-21</td><td>0</td></tr> <tr><td>Jun-21</td><td>500</td></tr> <tr><td>Jul-21</td><td>1,500</td></tr> <tr><td>Aug-21</td><td>7,000</td></tr> <tr><td>Sep-21</td><td>13,000</td></tr> <tr><td>Oct-21</td><td>11,000</td></tr> <tr><td>Nov-21</td><td>8,247</td></tr> </tbody> </table>	Month	New positive COVID19 cases	Mar-20	0	Apr-20	1,000	May-20	0	Jun-20	0	Jul-20	0	Aug-20	0	Sep-20	500	Oct-20	4,500	Nov-20	5,500	Dec-20	12,000	Jan-21	3,500	Feb-21	1,000	Mar-21	500	Apr-21	0	May-21	0	Jun-21	500	Jul-21	1,500	Aug-21	7,000	Sep-21	13,000	Oct-21	11,000	Nov-21	8,247																																																																		
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<p>2. Number of staff referred for Antigen testing</p>	<p>2. Staff referred for Antigen testing The cumulative number of staff referred for COVID testing between March 2020 and November 2021 is 14,969 of which 16% have been positive (Cumulative total).</p>	<p>2. Outcome of staff referred for Antigen testing</p> <table border="1"> <caption>Estimated data for 2. Outcome of staff referred for Antigen testing</caption> <thead> <tr> <th>Month</th> <th>Positive</th> <th>Negative</th> <th>In Progress</th> <th>Unknown/blank</th> </tr> </thead> <tbody> <tr><td>Mar-20</td><td>0</td><td>200</td><td>0</td><td>0</td></tr> <tr><td>Apr-20</td><td>1,800</td><td>200</td><td>0</td><td>0</td></tr> <tr><td>May-20</td><td>0</td><td>400</td><td>0</td><td>0</td></tr> <tr><td>Jun-20</td><td>0</td><td>200</td><td>0</td><td>0</td></tr> <tr><td>Jul-20</td><td>0</td><td>100</td><td>0</td><td>0</td></tr> <tr><td>Aug-20</td><td>0</td><td>100</td><td>0</td><td>0</td></tr> <tr><td>Sep-20</td><td>0</td><td>1,100</td><td>0</td><td>0</td></tr> <tr><td>Oct-20</td><td>0</td><td>1,500</td><td>0</td><td>0</td></tr> <tr><td>Nov-20</td><td>0</td><td>1,500</td><td>0</td><td>0</td></tr> <tr><td>Dec-20</td><td>0</td><td>1,800</td><td>0</td><td>0</td></tr> <tr><td>Jan-21</td><td>0</td><td>600</td><td>0</td><td>0</td></tr> <tr><td>Feb-21</td><td>0</td><td>300</td><td>0</td><td>0</td></tr> <tr><td>Mar-21</td><td>0</td><td>500</td><td>0</td><td>0</td></tr> <tr><td>Apr-21</td><td>0</td><td>200</td><td>0</td><td>0</td></tr> <tr><td>May-21</td><td>0</td><td>200</td><td>0</td><td>0</td></tr> <tr><td>Jun-21</td><td>0</td><td>200</td><td>0</td><td>0</td></tr> <tr><td>Jul-21</td><td>0</td><td>300</td><td>0</td><td>0</td></tr> <tr><td>Aug-21</td><td>0</td><td>200</td><td>0</td><td>0</td></tr> <tr><td>Sep-21</td><td>0</td><td>600</td><td>0</td><td>0</td></tr> <tr><td>Oct-21</td><td>0</td><td>400</td><td>0</td><td>0</td></tr> <tr><td>Nov-21</td><td>0</td><td>400</td><td>0</td><td>0</td></tr> </tbody> </table>	Month	Positive	Negative	In Progress	Unknown/blank	Mar-20	0	200	0	0	Apr-20	1,800	200	0	0	May-20	0	400	0	0	Jun-20	0	200	0	0	Jul-20	0	100	0	0	Aug-20	0	100	0	0	Sep-20	0	1,100	0	0	Oct-20	0	1,500	0	0	Nov-20	0	1,500	0	0	Dec-20	0	1,800	0	0	Jan-21	0	600	0	0	Feb-21	0	300	0	0	Mar-21	0	500	0	0	Apr-21	0	200	0	0	May-21	0	200	0	0	Jun-21	0	200	0	0	Jul-21	0	300	0	0	Aug-21	0	200	0	0	Sep-21	0	600	0	0	Oct-21	0	400	0	0	Nov-21	0	400	0	0
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COVID RELATED STAFF ABSENCE

Description	Current Performance	Trend
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<p>Staff absence due to COVID19</p> <p>1. Number of staff self-isolating (asymptomatic)</p> <p>2. Number of staff self isolating (symptomatic)</p> <p>3. % staff sickness</p>	<p>The following data is based on the mid-month position and broken down into the categories requested by Welsh Government.</p> <p>1. & 2. Number of staff self-isolating (asymptomatic and symptomatic) Between October and November 2021, the number of staff self-isolating (asymptomatic) reduced from 120 to 65 and the number of staff self-isolating (symptomatic) reduced from 180 to 120. In November 2021, "other staff" had the largest number of self-isolating staff who are asymptomatic and the largest number of self-isolating staff who are symptomatic.</p> <p>3. % Staff sickness The percentage of staff sickness absence due to COVID19 has decreased from 2.3% in October 2021 to 1.4% in November 2021.</p>
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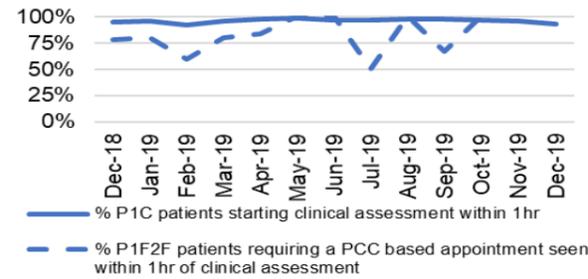
3. % staff sickness

	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21
Medical	2.8%	2.5%	4.0%	3.2%	7.3%	8.3%	2.2%	0.7%	0.4%	0.3%	0.2%	0.5%	0.9%	1.3%	3.6%	2.4%	1.2%
Nursing Reg	4.0%	4.0%	4.4%	3.8%	4.7%	7.4%	4.3%	2.3%	1.9%	1.6%	1.2%	1.1%	1.4%	1.8%	3.1%	2.2%	1.3%
Nursing Non Reg	5.5%	5.2%	4.2%	6.0%	6.5%	7.3%	7.0%	3.9%	3.1%	2.4%	1.9%	1.8%	1.8%	2.3%	4.3%	3.1%	1.6%
Other	2.9%	2.7%	2.0%	2.5%	3.0%	5.4%	3.1%	2.2%	1.7%	0.8%	0.6%	0.6%	0.7%	1.6%	2.9%	2.0%	1.4%
All	3.6%	3.5%	3.2%	3.5%	4.4%	6.5%	4.0%	2.4%	1.9%	1.3%	1.0%	0.9%	1.1%	1.7%	3.2%	2.3%	1.4%

HARM FROM OVERWHELMED NHS AND SOCIAL CARE SYSTEM

4.1 Unscheduled Care- Overview

Chart 1: GP Out of Hours/ 111



Service continues to experience issues with data reporting. It is anticipated that up to date accurate data will be available shortly.

Chart 2: % red calls responded to within 8 minutes

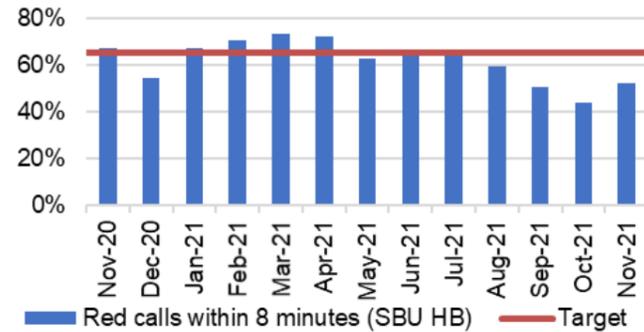


Chart 3: Number of ambulance handovers over 1 hour

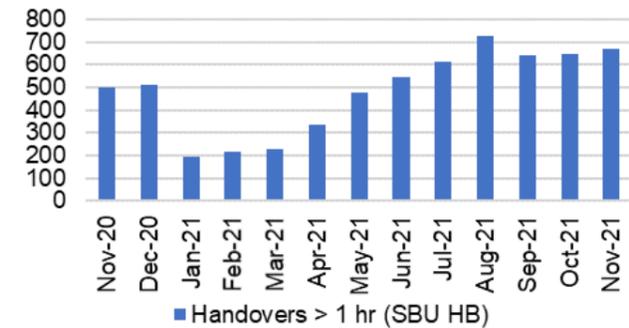


Chart 4: Lost hours- notification to ambulance handover over 15 minutes

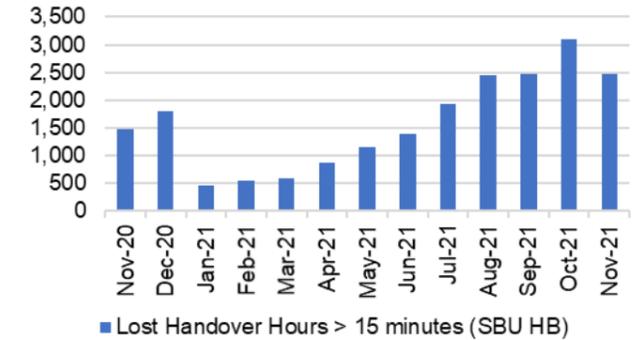


Chart 5: A&E Attendances

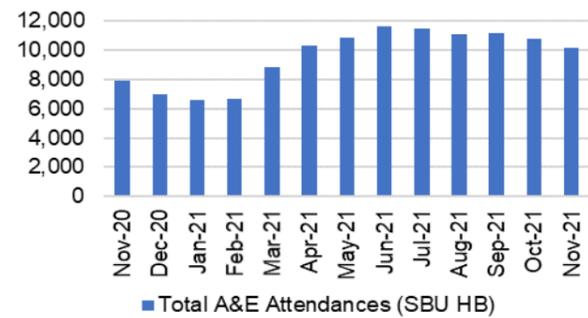


Chart 6: % patients who spend less than 4 hours in A&E

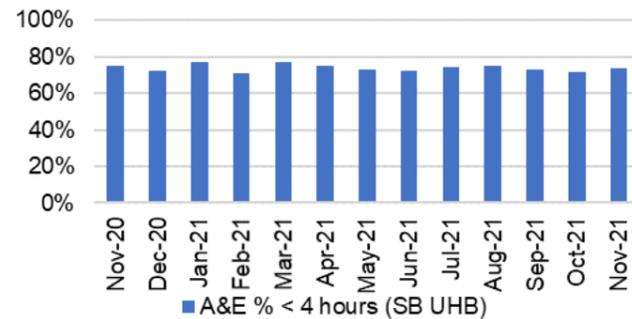


Chart 7: Number of patients waiting over 12 hours in A&E

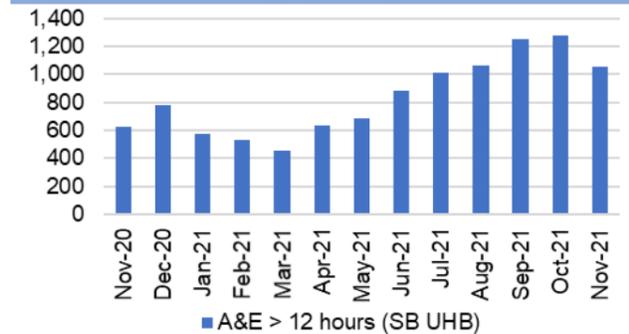


Chart 8: Number of emergency admissions

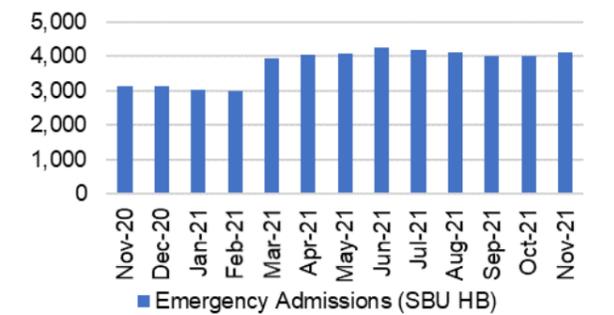


Chart 9: Elective procedures cancelled due to lack of beds

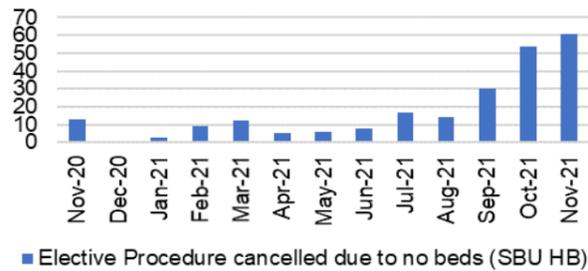


Chart 10: Number of clinically optimised patients

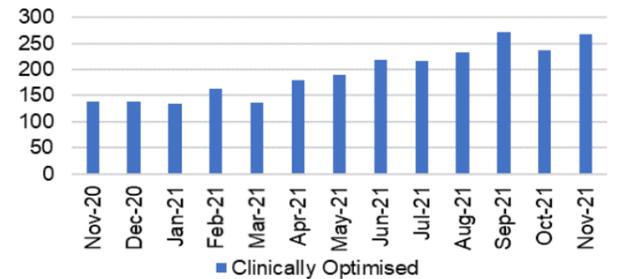


Chart 11: Delay reason for clinically optimised patients

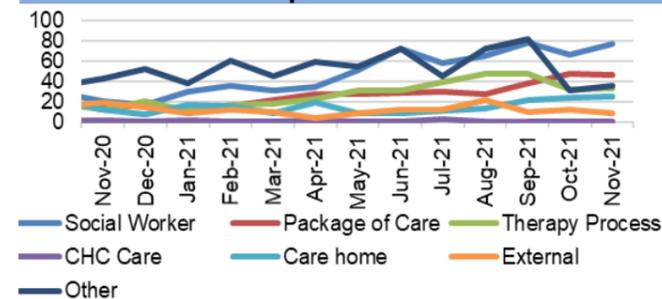


Chart 12: Average lost bed days (per day)

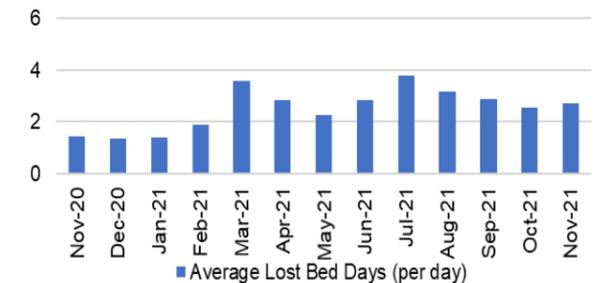


Chart 13: % of patients (> 60 years) who presented with a hip fracture that received an orthogeriatrician assessment within 72 hours

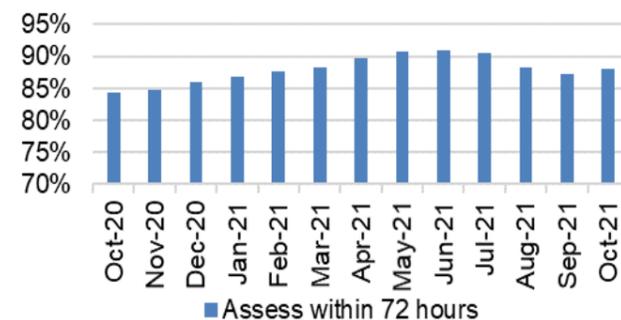


Chart 14: Direct admission to Acute Stroke Unit within 4 hours

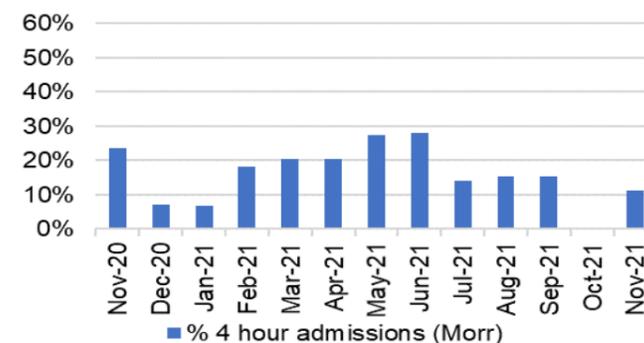


Chart 15: % of stroke patients receiving CT scan with 1 hour

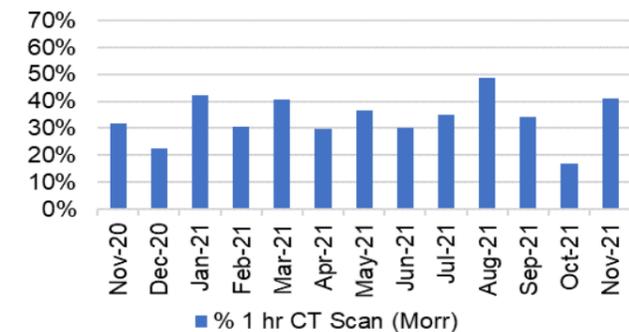
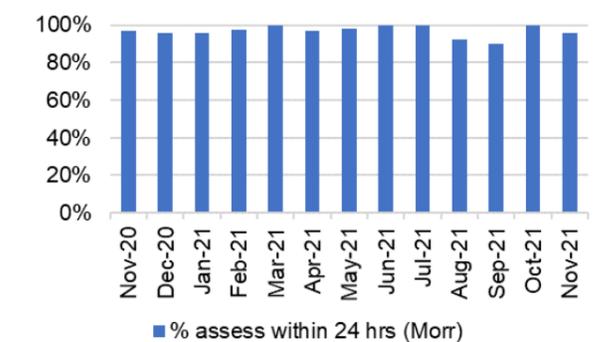


Chart 16: % stroke patients receiving consultant assessment within 24 hours



Unscheduled Care Overview (November 2021)

Primary Care Access		Ambulance	Emergency Department	
97% (→) GP practices open during daily core hours	88% (→) GP practices offering appointments between 5pm-6:30pm	52.0% (8%↑) Red calls responded to with 8 minutes	10,138 (6%↓) A&E attendances	73.46% (1.5%↑) Waits in A&E under 4 hours
93% (3%↓) % 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>)	100% (33%↑) % 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>Oct-19</i>)	670 (3%↑) Ambulance handovers over 1 hour	1,055 (17%↓) Waits in A&E over 12 hours	1,739 (6%↓) Patients admitted from A&E
		3,266 (19%↓) Amber calls		
		478 (15%↓) Red calls		
Emergency Activity		Patient Flow		
4,107 (2%↑) Emergency Inpatient Admissions	309 (-14%↓) (<i>Jun-21</i>) Emergency Theatre Cases	13 (19%↓) (<i>Mar-20</i>) Mental Health DTOCs * Data collection temporarily suspended	60 (13%↓) (<i>Mar-20</i>) Non-Mental Health DTOCs * Data collection temporarily suspended	
368 (15%↑) (<i>Jun-21</i>) Trauma theatre cases	61 (13%↑) Elective procedures cancelled due to no beds		268 (13%↑) Medically fit patients	

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

4.2 Updates on key measures

UNSCHEDULED CARE																																																																																																																																										
Description	Current Performance																																																																																																																																									
<p>Ambulance responses</p> <p>1. The percentage of emergency responses to red calls arriving within (up to and including) 8 minutes.</p> <p>2. The number of ambulance calls by category.</p> <p>3. The percentage of emergency responses to red calls arriving within 8 minutes (last 90 days)</p>	<p>Ambulance red call response times were consistently above 65% in 2020/21 with the exception of December 2020 where performance reduced to 54.1%. In November 2021, there was an in month increase to 52.0% but is still below the 65% target. In November 2021, the number of green calls reduced by 13%, amber calls reduced by 19%, and red calls reduced by 15% compared with September 2021.</p>																																																																																																																																									
	<p style="text-align: center;">Trend</p> <div style="display: flex; justify-content: space-around;"> <div style="width: 45%;"> <p>1. % of red calls responded to within 8 minutes</p> <table border="1"> <caption>1. % of red calls responded to within 8 minutes</caption> <thead> <tr> <th>Month</th> <th>Red calls within 8 minutes (SBU HB)</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>Nov-20</td><td>65%</td><td>65%</td></tr> <tr><td>Dec-20</td><td>54.1%</td><td>65%</td></tr> <tr><td>Jan-21</td><td>65%</td><td>65%</td></tr> <tr><td>Feb-21</td><td>68%</td><td>65%</td></tr> <tr><td>Mar-21</td><td>72%</td><td>65%</td></tr> <tr><td>Apr-21</td><td>70%</td><td>65%</td></tr> <tr><td>May-21</td><td>62%</td><td>65%</td></tr> <tr><td>Jun-21</td><td>65%</td><td>65%</td></tr> <tr><td>Jul-21</td><td>62%</td><td>65%</td></tr> <tr><td>Aug-21</td><td>58%</td><td>65%</td></tr> <tr><td>Sep-21</td><td>50%</td><td>65%</td></tr> <tr><td>Oct-21</td><td>42%</td><td>65%</td></tr> <tr><td>Nov-21</td><td>52%</td><td>65%</td></tr> </tbody> </table> </div> <div style="width: 45%;"> <p>2. Number of ambulance call responses</p> <table border="1"> <caption>2. Number of ambulance call responses</caption> <thead> <tr> <th>Month</th> <th>Red calls</th> <th>Amber calls</th> <th>Green calls</th> </tr> </thead> <tbody> <tr><td>Nov-20</td><td>~500</td><td>~3,500</td><td>~1,000</td></tr> <tr><td>Dec-20</td><td>~500</td><td>~3,500</td><td>~1,000</td></tr> <tr><td>Jan-21</td><td>~500</td><td>~3,000</td><td>~1,000</td></tr> <tr><td>Feb-21</td><td>~500</td><td>~3,000</td><td>~1,000</td></tr> <tr><td>Mar-21</td><td>~500</td><td>~3,500</td><td>~1,000</td></tr> <tr><td>Apr-21</td><td>~500</td><td>~3,500</td><td>~1,000</td></tr> <tr><td>May-21</td><td>~500</td><td>~4,000</td><td>~1,000</td></tr> <tr><td>Jun-21</td><td>~500</td><td>~3,500</td><td>~1,000</td></tr> <tr><td>Jul-21</td><td>~500</td><td>~3,500</td><td>~1,000</td></tr> <tr><td>Aug-21</td><td>~500</td><td>~4,000</td><td>~1,000</td></tr> <tr><td>Sep-21</td><td>~500</td><td>~4,000</td><td>~1,000</td></tr> <tr><td>Oct-21</td><td>~500</td><td>~4,500</td><td>~1,000</td></tr> <tr><td>Nov-21</td><td>~500</td><td>~3,500</td><td>~1,000</td></tr> </tbody> </table> </div> </div>	Month	Red calls within 8 minutes (SBU HB)	Target	Nov-20	65%	65%	Dec-20	54.1%	65%	Jan-21	65%	65%	Feb-21	68%	65%	Mar-21	72%	65%	Apr-21	70%	65%	May-21	62%	65%	Jun-21	65%	65%	Jul-21	62%	65%	Aug-21	58%	65%	Sep-21	50%	65%	Oct-21	42%	65%	Nov-21	52%	65%	Month	Red calls	Amber calls	Green calls	Nov-20	~500	~3,500	~1,000	Dec-20	~500	~3,500	~1,000	Jan-21	~500	~3,000	~1,000	Feb-21	~500	~3,000	~1,000	Mar-21	~500	~3,500	~1,000	Apr-21	~500	~3,500	~1,000	May-21	~500	~4,000	~1,000	Jun-21	~500	~3,500	~1,000	Jul-21	~500	~3,500	~1,000	Aug-21	~500	~4,000	~1,000	Sep-21	~500	~4,000	~1,000	Oct-21	~500	~4,500	~1,000	Nov-21	~500	~3,500	~1,000																																							
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<p>3. % of red calls responded to within 8 minutes – HB total last 90 days</p> <table border="1"> <caption>3. % of red calls responded to within 8 minutes – HB total last 90 days</caption> <thead> <tr> <th>Date</th> <th>Total</th> <th>Mean</th> </tr> </thead> <tbody> <tr><td>09/09/2021</td><td>~60%</td><td>~50%</td></tr> <tr><td>11/09/2021</td><td>~80%</td><td>~50%</td></tr> <tr><td>13/09/2021</td><td>~40%</td><td>~50%</td></tr> <tr><td>15/09/2021</td><td>~50%</td><td>~50%</td></tr> <tr><td>17/09/2021</td><td>~50%</td><td>~50%</td></tr> <tr><td>19/09/2021</td><td>~60%</td><td>~50%</td></tr> <tr><td>21/09/2021</td><td>~40%</td><td>~50%</td></tr> <tr><td>23/09/2021</td><td>~40%</td><td>~50%</td></tr> <tr><td>25/09/2021</td><td>~65%</td><td>~50%</td></tr> <tr><td>27/09/2021</td><td>~40%</td><td>~50%</td></tr> <tr><td>29/09/2021</td><td>~85%</td><td>~50%</td></tr> <tr><td>01/10/2021</td><td>~50%</td><td>~50%</td></tr> <tr><td>03/10/2021</td><td>~30%</td><td>~50%</td></tr> <tr><td>05/10/2021</td><td>~15%</td><td>~50%</td></tr> <tr><td>07/10/2021</td><td>~45%</td><td>~50%</td></tr> <tr><td>09/10/2021</td><td>~55%</td><td>~50%</td></tr> <tr><td>11/10/2021</td><td>~65%</td><td>~50%</td></tr> <tr><td>13/10/2021</td><td>~40%</td><td>~50%</td></tr> <tr><td>15/10/2021</td><td>~45%</td><td>~50%</td></tr> <tr><td>17/10/2021</td><td>~50%</td><td>~50%</td></tr> <tr><td>19/10/2021</td><td>~35%</td><td>~50%</td></tr> <tr><td>21/10/2021</td><td>~40%</td><td>~50%</td></tr> <tr><td>23/10/2021</td><td>~30%</td><td>~50%</td></tr> <tr><td>25/10/2021</td><td>~50%</td><td>~50%</td></tr> <tr><td>27/10/2021</td><td>~60%</td><td>~50%</td></tr> <tr><td>29/10/2021</td><td>~30%</td><td>~50%</td></tr> <tr><td>31/10/2021</td><td>~55%</td><td>~50%</td></tr> <tr><td>02/11/2021</td><td>~65%</td><td>~50%</td></tr> <tr><td>04/11/2021</td><td>~60%</td><td>~50%</td></tr> <tr><td>06/11/2021</td><td>~20%</td><td>~50%</td></tr> <tr><td>08/11/2021</td><td>~75%</td><td>~50%</td></tr> <tr><td>10/11/2021</td><td>~30%</td><td>~50%</td></tr> <tr><td>12/11/2021</td><td>~55%</td><td>~50%</td></tr> <tr><td>14/11/2021</td><td>~30%</td><td>~50%</td></tr> <tr><td>16/11/2021</td><td>~50%</td><td>~50%</td></tr> <tr><td>18/11/2021</td><td>~45%</td><td>~50%</td></tr> <tr><td>20/11/2021</td><td>~75%</td><td>~50%</td></tr> <tr><td>22/11/2021</td><td>~55%</td><td>~50%</td></tr> <tr><td>24/11/2021</td><td>~40%</td><td>~50%</td></tr> <tr><td>26/11/2021</td><td>~75%</td><td>~50%</td></tr> <tr><td>28/11/2021</td><td>~45%</td><td>~50%</td></tr> <tr><td>30/11/2021</td><td>~60%</td><td>~50%</td></tr> <tr><td>02/12/2021</td><td>~35%</td><td>~50%</td></tr> <tr><td>04/12/2021</td><td>~75%</td><td>~50%</td></tr> <tr><td>06/12/2021</td><td>~40%</td><td>~50%</td></tr> </tbody> </table>	Date	Total	Mean	09/09/2021	~60%	~50%	11/09/2021	~80%	~50%	13/09/2021	~40%	~50%	15/09/2021	~50%	~50%	17/09/2021	~50%	~50%	19/09/2021	~60%	~50%	21/09/2021	~40%	~50%	23/09/2021	~40%	~50%	25/09/2021	~65%	~50%	27/09/2021	~40%	~50%	29/09/2021	~85%	~50%	01/10/2021	~50%	~50%	03/10/2021	~30%	~50%	05/10/2021	~15%	~50%	07/10/2021	~45%	~50%	09/10/2021	~55%	~50%	11/10/2021	~65%	~50%	13/10/2021	~40%	~50%	15/10/2021	~45%	~50%	17/10/2021	~50%	~50%	19/10/2021	~35%	~50%	21/10/2021	~40%	~50%	23/10/2021	~30%	~50%	25/10/2021	~50%	~50%	27/10/2021	~60%	~50%	29/10/2021	~30%	~50%	31/10/2021	~55%	~50%	02/11/2021	~65%	~50%	04/11/2021	~60%	~50%	06/11/2021	~20%	~50%	08/11/2021	~75%	~50%	10/11/2021	~30%	~50%	12/11/2021	~55%	~50%	14/11/2021	~30%	~50%	16/11/2021	~50%	~50%	18/11/2021	~45%	~50%	20/11/2021	~75%	~50%	22/11/2021	~55%	~50%	24/11/2021	~40%	~50%	26/11/2021	~75%	~50%	28/11/2021	~45%	~50%	30/11/2021	~60%	~50%	02/12/2021	~35%	~50%	04/12/2021	~75%	~50%	06/12/2021	~40%	~50%
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UNSCHEDULED CARE

Description

Current Performance

Ambulance handovers

1. The number of ambulance handovers over one hour

In November 2021, there were 670 ambulance to hospital handovers taking over 1 hour; this is a significant deterioration from 500 in November 2020, and is an in-month increase from October 2021. In October 2021, 655 handovers over 1 hour were attributed to Morriston Hospital and 15 were attributed to Singleton Hospital.

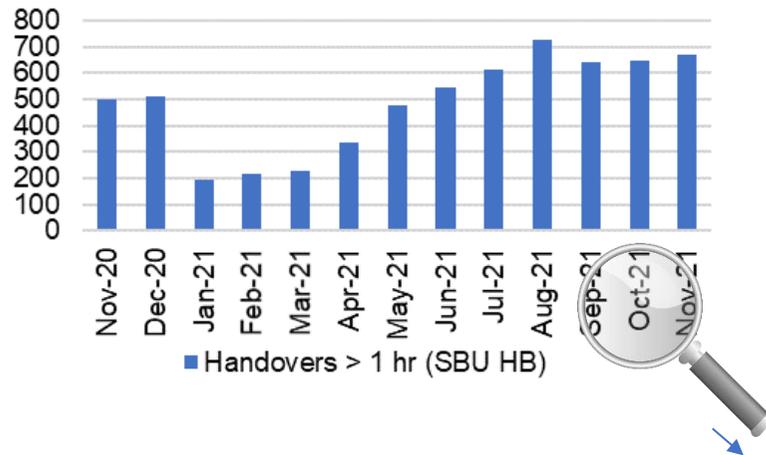
The number of handover hours lost over 15 minutes significantly increased from 1,474 in November 2020 to 2,461 in November 2021.

2. The number of ambulance handovers over one hour- Hospital level

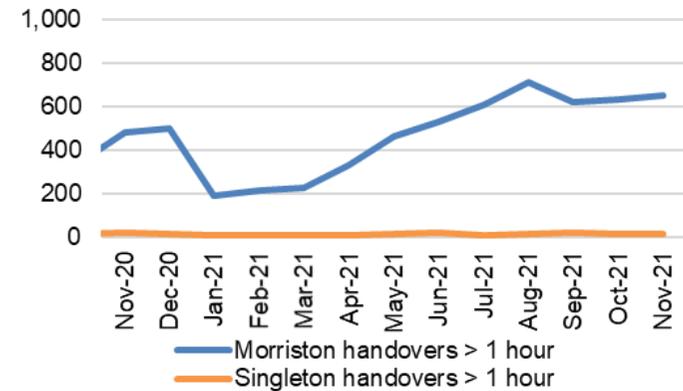
3. The number of ambulance handovers over one hour (last 90 days)

Trend

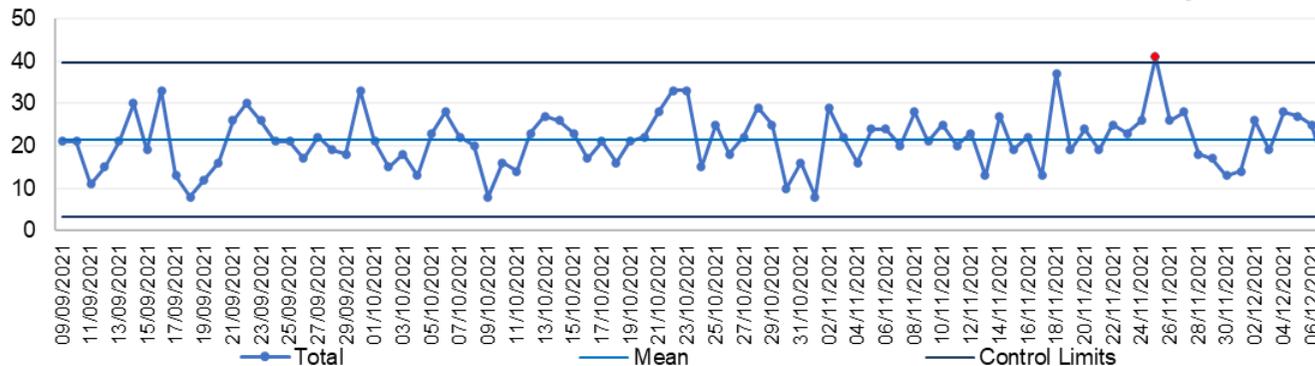
1. Number of ambulance handovers- HB total



2. Number of ambulance handovers over 1 hour- Hospital level



3. Number of ambulance handovers- HB total last 90 days



Symbol Key:

- ◆ Above or below control limits
- 8 or more points above or below the mean
- ▲ Arun of 6
- increasing or decreasing points

UNSCHEDULED CARE

Description

Current Performance

A&E Attendances

1. The number of attendances at emergency departments in the Health Board

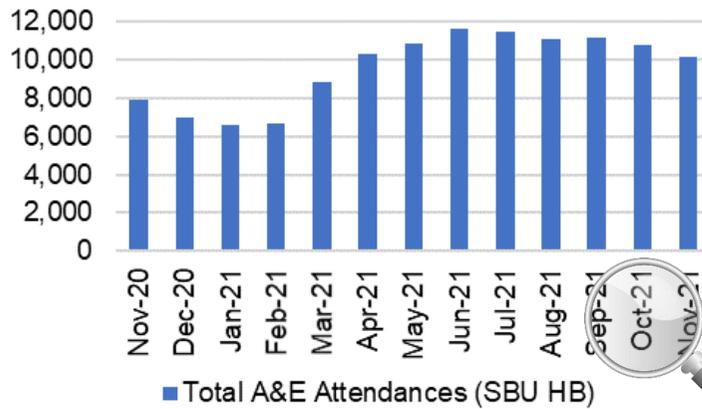
2. The number of attendances at emergency departments in the Health Board – Hospital level

3. The number of attendances at emergency departments in the Health Board (last 90 days)

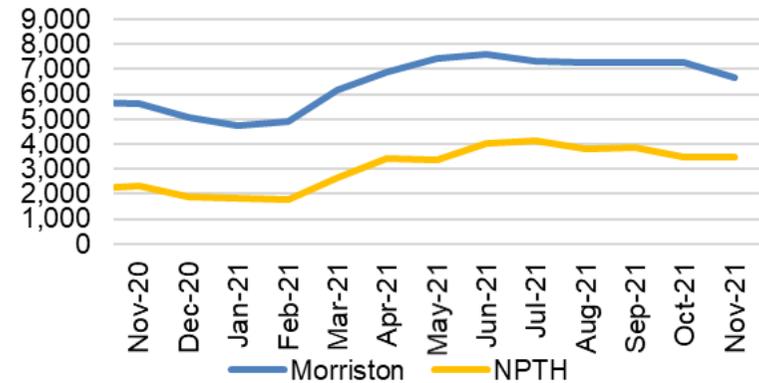
ED/MIU attendances significantly reduced in April 2020 during the COVID19 first wave but have been steadily increasing month on month until September 2020 when attendances started to reduce. In November 2021, there were 10,138 A&E attendances, this is 27.6% more than November 2020 and 0.4% less than November 2019.

Trend

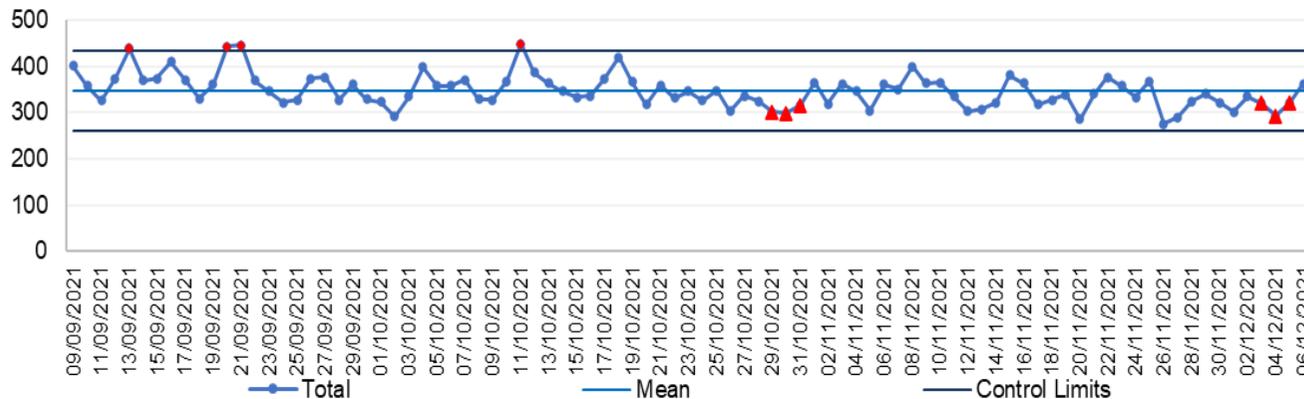
1. Number of A&E attendances- HB total



2. Number of A&E attendances- Hospital level



3. Number of A&E attendances -HB total last 90 days



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UNSCHEDULED CARE

Description

Current Performance

A&E waiting times

1. % of patients who spend less than 4 hours in all major and minor emergency care facilities from arrival until admission, transfer or discharge

2. % of patients who spend less than 4 hours in A&E- Hospital level

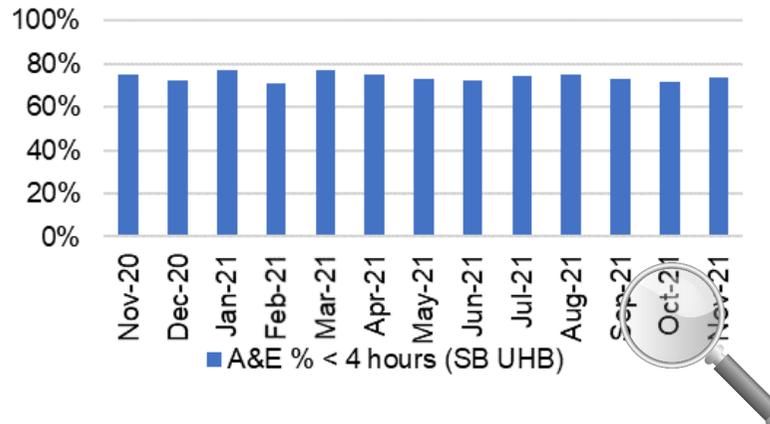
3. % of patients who spend less than 4 hours in A&E (last 90 days)

The Health Board's performance against the 4-hour measure improved from 71.96% in October 2021 to 73.46% in November 2021.

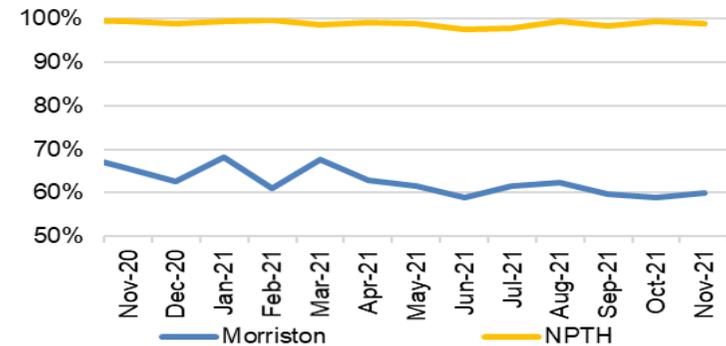
Neath Port Talbot Hospital Minor Injuries Unit (MIU) continues to achieve (and exceed) the national target of 95% achieving 99.00% in November 2021. Morriston Hospital's performance improved from 58.80% in October 2021 to 60.04% in November 2021.

Trend

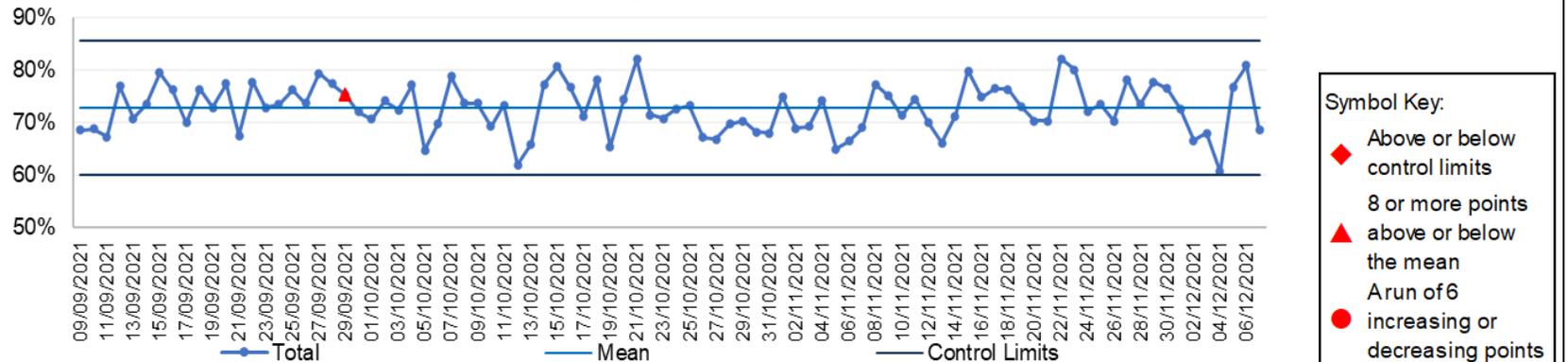
1. % Patients waiting under 4 hours in A&E- HB total



2. % Patients waiting under 4 hours in A&E- Hospital level



3. % Patients waiting under 4 hours in A&E- HB total last 90 days



UNSCHEDULED CARE

Description

Current Performance

A&E waiting times

In November 2021, performance against the 12-hour measure improved compared with October 2021, decreasing from 1,276 to 1,055.

1. Number of patients who spend 12 hours or more in A&E

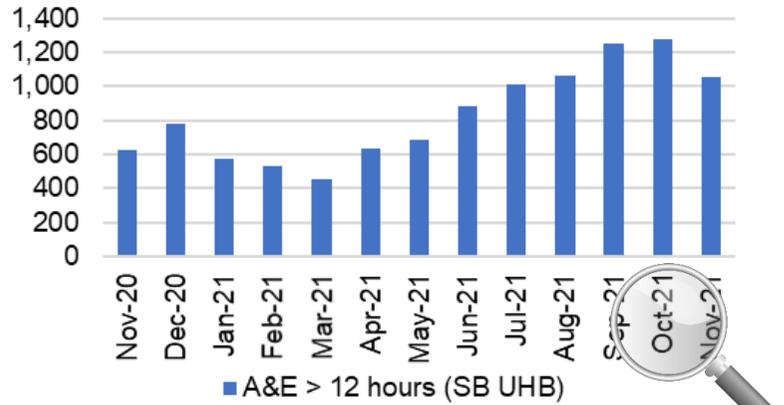
1,054 patients waiting over 12 hours in November 2021 were in Morriston Hospital, with 1 patient waiting over 12 hours in Neath Port Talbot Hospital. This is an increase of 429 compared to November 2020.

2. Number of patients who spend 12 hours or more in A&E- Hospital level

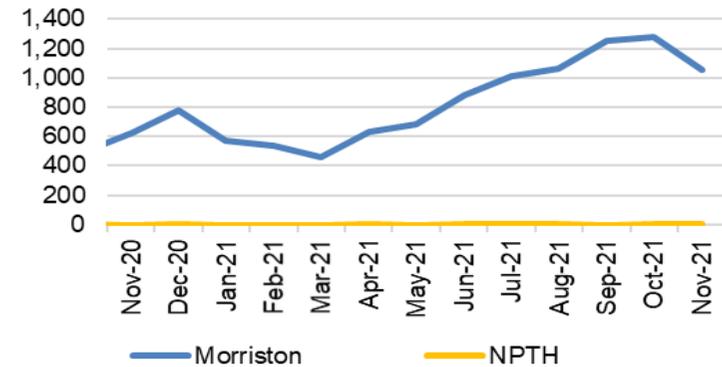
3. Number of patients who spend 12 hours or more in A&E (last 90 days)

Trend

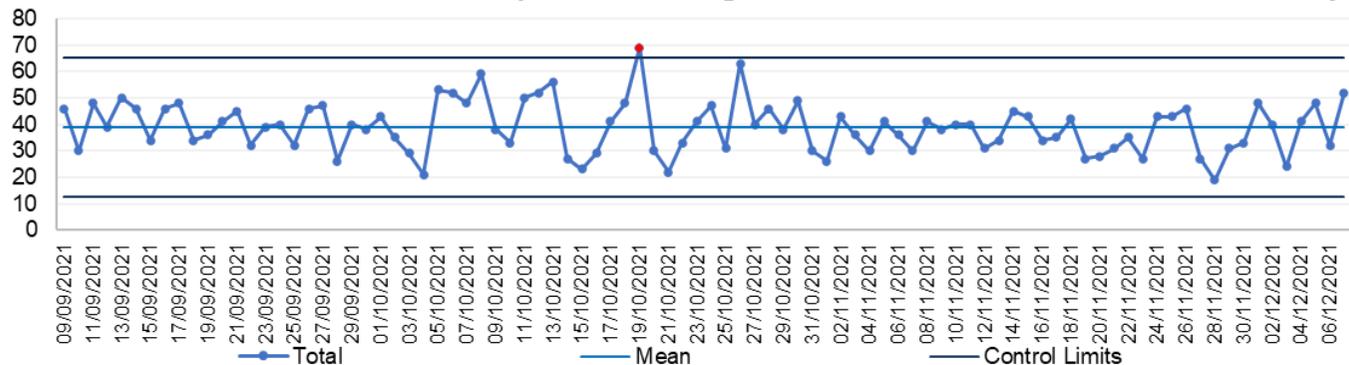
1. Number of patients waiting over 12 hours in A&E- HB total



2. Number of patients waiting over 12 hours in A&E- Hospital level



3. Number of patients waiting over 12 hours in A&E – HB total last 90 days



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UNSCHEDULED CARE

Description

Current Performance

Emergency admissions

In November 2021, there were 4,107 emergency admissions across the Health Board, which is an increase of 88 from October 2021 and 30% more than November 2020.

1. The number of emergency inpatient admissions

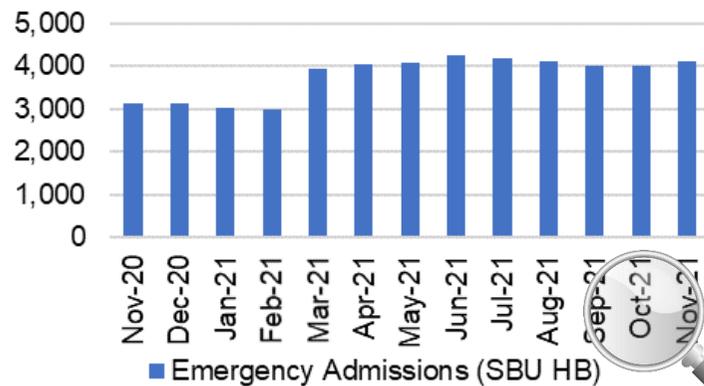
Morriston Hospital saw the largest in-month increase, with 117 more admissions (from 3,137 in October 2021 to 3,254).

2. The number of emergency inpatient admissions- Hospital level

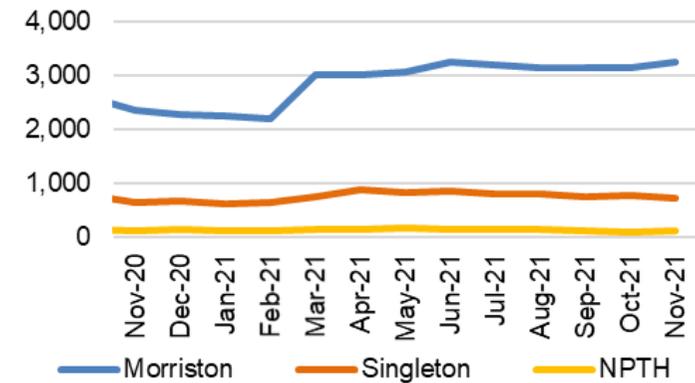
3. The number of emergency inpatient admissions (last 90 days)

Trend

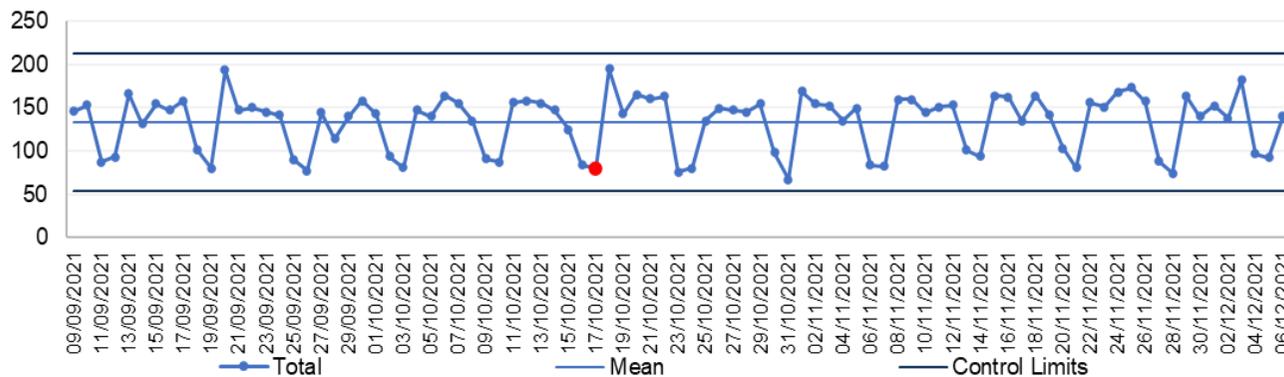
1. Number of emergency admissions- HB total



2. Number of emergency admissions- Hospital level



3. Number of emergency admissions- HB total last 90 days



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UNSCHEDULED CARE

Description

Current Performance

Critical Care-Delayed Transfers of Care (DTC)-Morrison Hospital

In November 2021, there were a total of 60 admissions into the Intensive Care Unit (ICU) in Morrison Hospital. During the COVID19 first wave in April and May 2020, the amount of delayed discharges and average lost bed days significantly reduced and this downward trend was also evident in the second wave starting in November 2020 but not to the extent of the first wave. However, in November 2021, delayed discharges saw an increase to 1965.25 hours, with the average lost bed days also increasing to 2.73 per day. The percentage of patients delayed over 24 hours decreased from 54.17% in October 2021 to 50.00% in November 2021.

1. Total Critical Care delayed discharges (hours)

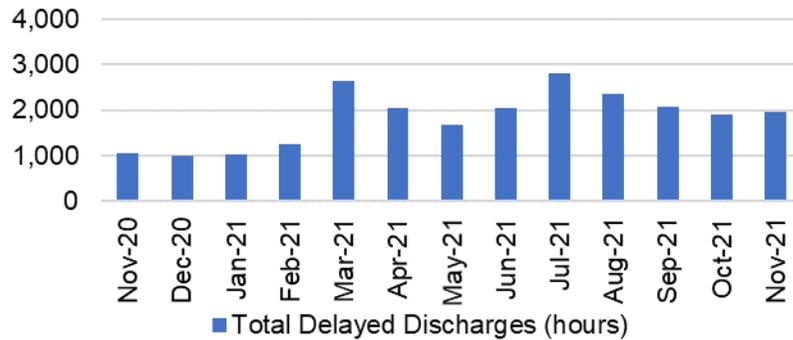
2. Average lost bed days per day

3. Percentage of patients delayed:

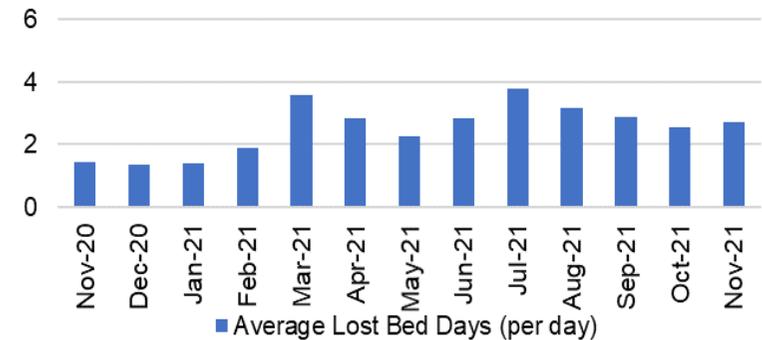
- Up to 8 hours
- Between 8 and 24 hours
- Over 24 hours

Trend

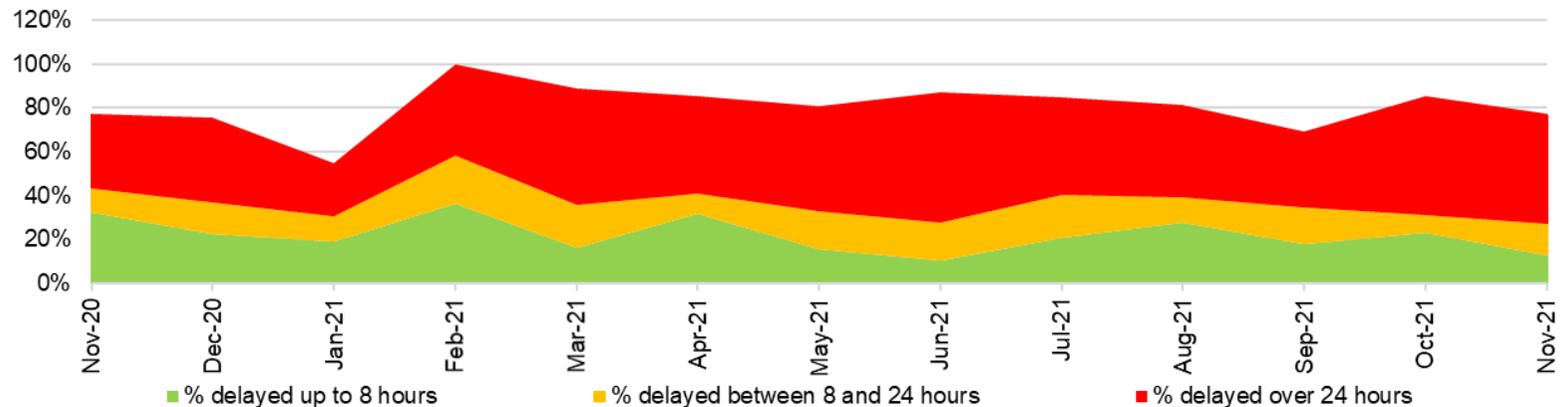
1. Total Critical Care delayed discharges (hours)



2. Average lost bed days per day



3. Percentage of Critical Care patients delayed



UNSCHEDULED CARE

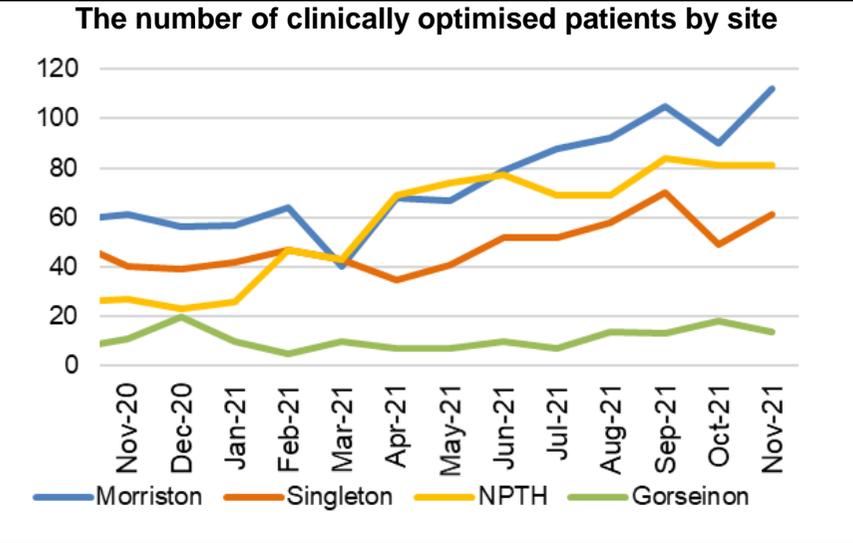
Description	Current Performance	Trend
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Clinically Optimised
The number of patients waiting at each site in the Health Board that are clinically optimised

In November 2021, there were on average 268 patients who were deemed clinically optimised but were still occupying a bed in one of the Health Board's Hospitals.

The number of medically/ discharge fit patients returned to the average that was seen in quarter 3 for 2021/21 in March 2021, after a significant increase in February 2021. October 2021 saw the first decrease in numbers, but there has been an increase to 268 in November 2021 from 238 in October 2021.

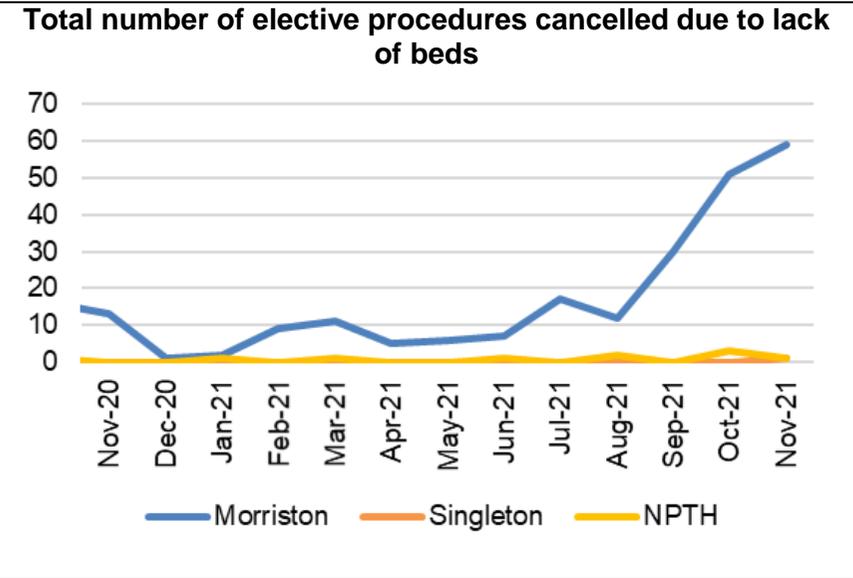
In November 2021, Morriston Hospital had the largest proportion of clinically optimised patients with 112, followed by Neath Port Talbot Hospital with 81.



Elective procedures cancelled due to lack of beds
The number of elective procedure cancelled across the hospital where the main cancellation reasons was lack of beds

In November 2021, there were 61 elective procedures cancelled due to lack of beds on the day of surgery. This is 48 more cancellations than in November 2020 and 7 more than October 2021.

59 of the cancelled procedures were attributed to Morriston Hospital, with 1 attributed to Singleton Hospital and 1 attributed to Neath Port Talbot Hospital.



FRACTURED NECK OF FEMUR (#NOF)

Description	Current Performance	Trend
<p>Fractured Neck of Femur (#NOF)</p> <p>1. Prompt orthogeriatric assessment- % patients receiving an assessment by a senior geriatrician within 72 hours of presentation</p> <p>2. Prompt surgery - % patients undergoing surgery the day following presentation with hip fracture</p> <p>3. NICE compliant surgery - % of operations consistent with the recommendations of NICE CG124</p> <p>4. Prompt mobilisation after surgery - % patients out of bed (standing or hoisted) by the day after operation</p>	<ol style="list-style-type: none"> Prompt orthogeriatric assessment- In October 2021, 88.0% of patients in Morryston hospital received an assessment by a senior geriatrician within 72 hours. This is 3.6% more than in October 2020. Prompt surgery- In October 2021, 57.7% of patients had surgery the day following presentation with a hip fracture. This is an improvement from October 2020 which was 51.0% NICE compliant surgery- 69.9% of operations were consistent with the NICE recommendations in October 2021. This is 0.2% less than in October 2020. In October 2021, Morryston was below the all-Wales average of 71.6%. Prompt mobilisation- In October 2021, 71.1% of patients were out of bed the day after surgery. This is 5.2% less than in October 2020. 	<div style="text-align: center;"> <p>1. Prompt orthogeriatric assessment</p> </div> <div style="text-align: center;"> <p>2. Prompt surgery</p> </div> <div style="text-align: center;"> <p>3. NICE compliant Surgery</p> </div> <div style="text-align: center;"> <p>4. Prompt mobilisation</p> </div>

FRACTURED NECK OF FEMUR (#NOF)

Description	Current Performance	Trend																																																																																																																																																																								
<p>5. <i>Not delirious when tested- % patients (<4 on 4AT test) when tested in the week after operation</i></p> <p>6. <i>Return to original residence- % patients discharged back to original residence, or in that residence at 120 day follow-up</i></p> <p>7. <i>30 day mortality rate</i></p>	<p>5. Not delirious when tested- 76.8% of patients were not delirious in the week after their operation in October 2021. This is an improvement of 6.3% compared with October 2020.</p> <p>6. Return to original residence- 66.1% of patients in September 2021 were discharged back to their original residence. This is 11.2% less than in September 2020.</p> <p>7. 30 day mortality rate- In January 2021 the mortality rate for Morriston Hospital was 7.5% which is 0.5% less than January 2020. The mortality rate in Morriston Hospital in January 2021 is higher than the all-Wales average of 6.9% but lower than the national average of 7.6%.</p> <p>* Updated data is currently not available, but is being reviewed.</p>	<p>5. Not delirious when tested</p> <table border="1"> <thead> <tr> <th>Month</th> <th>Morrison (%)</th> <th>All-Wales (%)</th> <th>Eng, Wal & N. 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HEALTHCARE ACQUIRED INFECTIONS

Description	Current Performance	Trend																												
<p>Healthcare Acquired Infections (HCAI) - E.coli bacteraemia- <i>Number of laboratory confirmed E.coli bacteraemia cases</i></p>	<ul style="list-style-type: none"> • 22 cases of <i>E. coli</i> bacteraemia were identified in November 2021, of which 5 were hospital acquired and 17 were community acquired. • Cumulative cases from April 2021 to November 2021 are 23.5% higher than the equivalent period in 2020/21. (205 in 2021/22 compared with 166 in 2020/21). 	<p style="text-align: center;">Number of healthcare acquired E.coli bacteraemia cases</p> <table border="1"> <caption>Number of healthcare acquired E.coli bacteraemia cases (SBU)</caption> <thead> <tr> <th>Month</th> <th>Number of Cases</th> </tr> </thead> <tbody> <tr><td>Nov-20</td><td>16</td></tr> <tr><td>Dec-20</td><td>12</td></tr> <tr><td>Jan-21</td><td>18</td></tr> <tr><td>Feb-21</td><td>17</td></tr> <tr><td>Mar-21</td><td>28</td></tr> <tr><td>Apr-21</td><td>32</td></tr> <tr><td>May-21</td><td>26</td></tr> <tr><td>Jun-21</td><td>28</td></tr> <tr><td>Jul-21</td><td>23</td></tr> <tr><td>Aug-21</td><td>34</td></tr> <tr><td>Sep-21</td><td>21</td></tr> <tr><td>Oct-21</td><td>19</td></tr> <tr><td>Nov-21</td><td>22</td></tr> </tbody> </table> <p style="text-align: center;">■ Number E.Coli cases (SBU)</p>	Month	Number of Cases	Nov-20	16	Dec-20	12	Jan-21	18	Feb-21	17	Mar-21	28	Apr-21	32	May-21	26	Jun-21	28	Jul-21	23	Aug-21	34	Sep-21	21	Oct-21	19	Nov-21	22
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<p>Healthcare Acquired Infections (HCAI)- S.aureus bacteraemia- <i>Number of laboratory confirmed S.aureus bacteraemias (MRSA & MSSA) cases</i></p>	<ul style="list-style-type: none"> • There were 4 cases of Staph. aureus bacteraemia in November 2021, of which 1 was hospital acquired and 3 were community acquired. • Cumulative cases from April 2021 to November 2021 are 14.1% higher than the equivalent period in 2020/21 (97 in 2021/22 compared with 85 in 2020/21). 	<p style="text-align: center;">Number of healthcare acquired S.aureus bacteraemia cases</p> <table border="1"> <caption>Number of healthcare acquired S.aureus bacteraemia cases (SBU)</caption> <thead> <tr> <th>Month</th> <th>Number of Cases</th> </tr> </thead> <tbody> <tr><td>Nov-20</td><td>13</td></tr> <tr><td>Dec-20</td><td>9</td></tr> <tr><td>Jan-21</td><td>9</td></tr> <tr><td>Feb-21</td><td>9</td></tr> <tr><td>Mar-21</td><td>11</td></tr> <tr><td>Apr-21</td><td>13</td></tr> <tr><td>May-21</td><td>15</td></tr> <tr><td>Jun-21</td><td>7</td></tr> <tr><td>Jul-21</td><td>11</td></tr> <tr><td>Aug-21</td><td>12</td></tr> <tr><td>Sep-21</td><td>17</td></tr> <tr><td>Oct-21</td><td>18</td></tr> <tr><td>Nov-21</td><td>4</td></tr> </tbody> </table> <p style="text-align: center;">■ Number of S.Aureus cases (SBU)</p>	Month	Number of Cases	Nov-20	13	Dec-20	9	Jan-21	9	Feb-21	9	Mar-21	11	Apr-21	13	May-21	15	Jun-21	7	Jul-21	11	Aug-21	12	Sep-21	17	Oct-21	18	Nov-21	4
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HEALTHCARE ACQUIRED INFECTIONS

Description	Current Performance	Trend																												
Healthcare Acquired Infections (HCAI)- C.difficile- Number of laboratory confirmed C.difficile cases	<ul style="list-style-type: none"> There were 20 <i>Clostridium difficile</i> toxin positive cases in November 2021, of which 10 were hospital acquired and 10 were community acquired. Cumulative cases from April 2021 to November 2021 are 11.3% more than the equivalent period of 2020/21 (138 in 2021/22 compared with 124 in 2020/21). 	<p style="text-align: center;">Number of healthcare acquired C.difficile cases</p> <table border="1" style="display: none;"> <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>Nov-20</td><td>10</td></tr> <tr><td>Dec-20</td><td>9</td></tr> <tr><td>Jan-21</td><td>3</td></tr> <tr><td>Feb-21</td><td>11</td></tr> <tr><td>Mar-21</td><td>12</td></tr> <tr><td>Apr-21</td><td>20</td></tr> <tr><td>May-21</td><td>12</td></tr> <tr><td>Jun-21</td><td>12</td></tr> <tr><td>Jul-21</td><td>23</td></tr> <tr><td>Aug-21</td><td>22</td></tr> <tr><td>Sep-21</td><td>14</td></tr> <tr><td>Oct-21</td><td>15</td></tr> <tr><td>Nov-21</td><td>20</td></tr> </tbody> </table> <p style="text-align: center;">■ Number of C.diff cases (SBU)</p>	Month	Number of C.diff cases (SBU)	Nov-20	10	Dec-20	9	Jan-21	3	Feb-21	11	Mar-21	12	Apr-21	20	May-21	12	Jun-21	12	Jul-21	23	Aug-21	22	Sep-21	14	Oct-21	15	Nov-21	20
Month	Number of C.diff cases (SBU)																													
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Healthcare Acquired Infections (HCAI)- Klebsiella sp- Number of laboratory confirmed Klebsiella sp cases	<ul style="list-style-type: none"> There were 7 cases of Klebsiella sp in November 2021, of which 2 were hospital acquired and 5 were community acquired. Cumulative cases from April 2021 to November 2021 are 11.4% higher than the equivalent period in 2020/21 (68 in 2021/22 compared with 61 in 2020/21). 	<p style="text-align: center;">Number of healthcare acquired Klebsiella cases</p> <table border="1" style="display: none;"> <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>Nov-20</td><td>11</td></tr> <tr><td>Dec-20</td><td>12</td></tr> <tr><td>Jan-21</td><td>13</td></tr> <tr><td>Feb-21</td><td>6</td></tr> <tr><td>Mar-21</td><td>10</td></tr> <tr><td>Apr-21</td><td>9</td></tr> <tr><td>May-21</td><td>5</td></tr> <tr><td>Jun-21</td><td>12</td></tr> <tr><td>Jul-21</td><td>3</td></tr> <tr><td>Aug-21</td><td>8</td></tr> <tr><td>Sep-21</td><td>11</td></tr> <tr><td>Oct-21</td><td>13</td></tr> <tr><td>Nov-21</td><td>7</td></tr> </tbody> </table> <p style="text-align: center;">■ Number of Klebsiella cases (SBU)</p>	Month	Number of Klebsiella cases (SBU)	Nov-20	11	Dec-20	12	Jan-21	13	Feb-21	6	Mar-21	10	Apr-21	9	May-21	5	Jun-21	12	Jul-21	3	Aug-21	8	Sep-21	11	Oct-21	13	Nov-21	7
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HEALTHCARE ACQUIRED INFECTIONS

Description	Current Performance	Trend																												
Healthcare Acquired Infections (HCAI)- Aeruginosa- <i>Number of laboratory confirmed Aeruginosa cases</i>	<ul style="list-style-type: none"> There were 3 cases of <i>P.Aeruginosa</i> in November 2021, all of which were hospital acquired. Cumulative cases from April 2021 to November 2021 are 6.6% less than the equivalent period in 2020/21. 	<p>Number of healthcare acquired Pseudomonas cases</p> <table border="1"> <caption>Number of healthcare acquired Pseudomonas cases</caption> <thead> <tr> <th>Month</th> <th>Number of Pseudomonas cases (SBU)</th> </tr> </thead> <tbody> <tr><td>Nov-20</td><td>2</td></tr> <tr><td>Dec-20</td><td>1</td></tr> <tr><td>Jan-21</td><td>1</td></tr> <tr><td>Feb-21</td><td>1</td></tr> <tr><td>Mar-21</td><td>1</td></tr> <tr><td>Apr-21</td><td>3</td></tr> <tr><td>May-21</td><td>1</td></tr> <tr><td>Jun-21</td><td>2</td></tr> <tr><td>Jul-21</td><td>1</td></tr> <tr><td>Aug-21</td><td>2</td></tr> <tr><td>Sep-21</td><td>2</td></tr> <tr><td>Oct-21</td><td>0</td></tr> <tr><td>Nov-21</td><td>3</td></tr> </tbody> </table>	Month	Number of Pseudomonas cases (SBU)	Nov-20	2	Dec-20	1	Jan-21	1	Feb-21	1	Mar-21	1	Apr-21	3	May-21	1	Jun-21	2	Jul-21	1	Aug-21	2	Sep-21	2	Oct-21	0	Nov-21	3
Month	Number of Pseudomonas cases (SBU)																													
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PRESSURE ULCERS

Description	Current Performance	Trend																																																								
Number of pressure ulcers <i>1. Total number of pressure ulcers developed in hospital and in the community</i> <i>2. Rate of pressure ulcers per 100,000 admissions</i>	<ol style="list-style-type: none"> In October 2021 there were 74 cases of healthcare acquired pressure ulcers, 32 of which were community acquired and 42 were hospital acquired. There were 8 grade 3+ pressure ulcers in October 2021, of which 7 were community acquired and 1 was hospital acquired. The rate per 100,000 admissions decreased from 955 in September 2021 to 613 in October 2021. 	<p>Total number of hospital and community acquired Pressure Ulcers (PU) and rate per 100,000 admissions</p> <table border="1"> <caption>Total number of hospital and community acquired Pressure Ulcers (PU) and rate per 100,000 admissions</caption> <thead> <tr> <th>Month</th> <th>Pressure Ulcers (Community)</th> <th>Pressure Ulcers (Hospital)</th> <th>Rate per 100,00 admissions</th> </tr> </thead> <tbody> <tr><td>Oct-20</td><td>95</td><td>70</td><td>955</td></tr> <tr><td>Nov-20</td><td>70</td><td>40</td><td>850</td></tr> <tr><td>Dec-20</td><td>85</td><td>60</td><td>1000</td></tr> <tr><td>Jan-21</td><td>70</td><td>50</td><td>850</td></tr> <tr><td>Feb-21</td><td>70</td><td>45</td><td>850</td></tr> <tr><td>Mar-21</td><td>60</td><td>35</td><td>650</td></tr> <tr><td>Apr-21</td><td>90</td><td>65</td><td>950</td></tr> <tr><td>May-21</td><td>70</td><td>55</td><td>850</td></tr> <tr><td>Jun-21</td><td>70</td><td>50</td><td>850</td></tr> <tr><td>Jul-21</td><td>90</td><td>60</td><td>950</td></tr> <tr><td>Aug-21</td><td>85</td><td>55</td><td>850</td></tr> <tr><td>Sep-21</td><td>105</td><td>70</td><td>955</td></tr> <tr><td>Oct-21</td><td>70</td><td>40</td><td>613</td></tr> </tbody> </table>	Month	Pressure Ulcers (Community)	Pressure Ulcers (Hospital)	Rate per 100,00 admissions	Oct-20	95	70	955	Nov-20	70	40	850	Dec-20	85	60	1000	Jan-21	70	50	850	Feb-21	70	45	850	Mar-21	60	35	650	Apr-21	90	65	950	May-21	70	55	850	Jun-21	70	50	850	Jul-21	90	60	950	Aug-21	85	55	850	Sep-21	105	70	955	Oct-21	70	40	613
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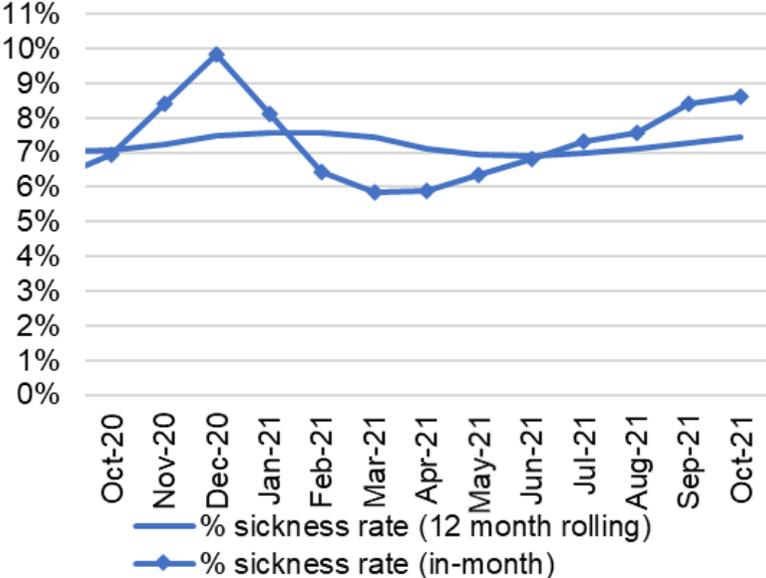
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<p>Serious Incidents-</p> <p>1. The number of serious incidents</p> <p>2. The number of Never Events</p> <p>3. Of the serious incidents due for assurance, the percentage which were assured within the agreed timescales</p>	<p>1. The Health Board reported 8 Serious Incidents for the month of November 2021 to Welsh Government. The breakdown of incidents in November 2021 are set out below:</p> <ul style="list-style-type: none"> - Morryston – 6 - Singleton – 1 - Primary, Community and Therapies – 1 <p>2. There was one new Never Event reported in November 2021 for Morryston Hospital which relates to a surgical prosthesis event.</p> <p>3. In November 2021, performance against the 80% target of submitting closure forms within 60 working days was 0% as the one closure form in Morryston due to be submitted to Welsh Government, was not submitted on time.</p>	<p>1. and 2. Number of serious incidents and never events</p> <table border="1"> <caption>1. and 2. 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>Nov-20</td><td>17</td><td>1</td></tr> <tr><td>Dec-20</td><td>12</td><td>0</td></tr> <tr><td>Jan-21</td><td>4</td><td>0</td></tr> <tr><td>Feb-21</td><td>5</td><td>0</td></tr> <tr><td>Mar-21</td><td>4</td><td>0</td></tr> <tr><td>Apr-21</td><td>4</td><td>0</td></tr> <tr><td>May-21</td><td>6</td><td>0</td></tr> <tr><td>Jun-21</td><td>6</td><td>1</td></tr> <tr><td>Jul-21</td><td>1</td><td>0</td></tr> <tr><td>Aug-21</td><td>5</td><td>0</td></tr> <tr><td>Sep-21</td><td>5</td><td>0</td></tr> <tr><td>Oct-21</td><td>4</td><td>0</td></tr> <tr><td>Nov-21</td><td>8</td><td>1</td></tr> </tbody> </table> <p>3. % of serious incidents closed within 60 days</p> <table border="1"> <caption>3. % of serious incidents closed within 60 days</caption> <thead> <tr> <th>Month</th> <th>% SI's assured</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>Nov-20</td><td>0%</td><td>80%</td></tr> <tr><td>Dec-20</td><td>5%</td><td>80%</td></tr> <tr><td>Jan-21</td><td>0%</td><td>80%</td></tr> <tr><td>Feb-21</td><td>10%</td><td>80%</td></tr> <tr><td>Mar-21</td><td>0%</td><td>80%</td></tr> <tr><td>Apr-21</td><td>0%</td><td>80%</td></tr> <tr><td>May-21</td><td>0%</td><td>80%</td></tr> <tr><td>Jun-21</td><td>0%</td><td>80%</td></tr> <tr><td>Jul-21</td><td>35%</td><td>80%</td></tr> <tr><td>Aug-21</td><td>0%</td><td>80%</td></tr> <tr><td>Sep-21</td><td>0%</td><td>80%</td></tr> <tr><td>Oct-21</td><td>0%</td><td>80%</td></tr> <tr><td>Nov-21</td><td>0%</td><td>80%</td></tr> </tbody> </table> <p>* 0% compliance in November 2020 and January, March, April, May, June, August, October and November 2021</p>	Month	Number of Serious Incidents	Number of never events	Nov-20	17	1	Dec-20	12	0	Jan-21	4	0	Feb-21	5	0	Mar-21	4	0	Apr-21	4	0	May-21	6	0	Jun-21	6	1	Jul-21	1	0	Aug-21	5	0	Sep-21	5	0	Oct-21	4	0	Nov-21	8	1	Month	% SI's assured	Target	Nov-20	0%	80%	Dec-20	5%	80%	Jan-21	0%	80%	Feb-21	10%	80%	Mar-21	0%	80%	Apr-21	0%	80%	May-21	0%	80%	Jun-21	0%	80%	Jul-21	35%	80%	Aug-21	0%	80%	Sep-21	0%	80%	Oct-21	0%	80%	Nov-21	0%	80%
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INPATIENT FALLS																														
Description	Current Performance	Trend																												
Inpatient Falls <i>The total number of inpatient falls</i>	<ul style="list-style-type: none"> The number of Falls reported via Datix web for Swansea Bay UHB was 213 in November 2021. This is 13.7% less than November 2020 where 247 falls were recorded. 	<p style="text-align: center;">Number of inpatient Falls</p> <table border="1"> <caption>Data for Number of inpatient Falls</caption> <thead> <tr> <th>Month</th> <th>Inpatient falls</th> </tr> </thead> <tbody> <tr><td>Nov-20</td><td>247</td></tr> <tr><td>Dec-20</td><td>247</td></tr> <tr><td>Jan-21</td><td>200</td></tr> <tr><td>Feb-21</td><td>175</td></tr> <tr><td>Mar-21</td><td>170</td></tr> <tr><td>Apr-21</td><td>175</td></tr> <tr><td>May-21</td><td>230</td></tr> <tr><td>Jun-21</td><td>170</td></tr> <tr><td>Jul-21</td><td>190</td></tr> <tr><td>Aug-21</td><td>195</td></tr> <tr><td>Sep-21</td><td>205</td></tr> <tr><td>Oct-21</td><td>240</td></tr> <tr><td>Nov-21</td><td>213</td></tr> </tbody> </table>	Month	Inpatient falls	Nov-20	247	Dec-20	247	Jan-21	200	Feb-21	175	Mar-21	170	Apr-21	175	May-21	230	Jun-21	170	Jul-21	190	Aug-21	195	Sep-21	205	Oct-21	240	Nov-21	213
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DISCHARGE SUMMARIES																														
Description	Current Performance	Trend																												
Discharge Summaries <i>Percentage of discharge summaries approved and sent to patients' doctor following discharge</i>	<p>The latest data shows that in November 2021, the percentage of completed discharge summaries was 63%.</p> <p>In November 2021, compliance ranged from 51% in Singleton Hospital to 79% in Mental Health & Learning Disabilities.</p>	<p style="text-align: center;">% discharge summaries approved and sent</p> <table border="1"> <caption>Data for % discharge summaries approved and sent</caption> <thead> <tr> <th>Month</th> <th>% of completed discharge summaries</th> </tr> </thead> <tbody> <tr><td>Nov-20</td><td>65%</td></tr> <tr><td>Dec-20</td><td>58%</td></tr> <tr><td>Jan-21</td><td>65%</td></tr> <tr><td>Feb-21</td><td>62%</td></tr> <tr><td>Mar-21</td><td>63%</td></tr> <tr><td>Apr-21</td><td>62%</td></tr> <tr><td>May-21</td><td>65%</td></tr> <tr><td>Jun-21</td><td>68%</td></tr> <tr><td>Jul-21</td><td>61%</td></tr> <tr><td>Aug-21</td><td>61%</td></tr> <tr><td>Sep-21</td><td>67%</td></tr> <tr><td>Oct-21</td><td>60%</td></tr> <tr><td>Nov-21</td><td>63%</td></tr> </tbody> </table>	Month	% of completed discharge summaries	Nov-20	65%	Dec-20	58%	Jan-21	65%	Feb-21	62%	Mar-21	63%	Apr-21	62%	May-21	65%	Jun-21	68%	Jul-21	61%	Aug-21	61%	Sep-21	67%	Oct-21	60%	Nov-21	63%
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CRUDE MORTALITY																																																																								
Description	Current Performance	Trend																																																																						
Crude Mortality Rate	<p>October 2021 reports the crude mortality rate for the Health Board at 1.03%, the same as reported for September 2021.</p> <p>A breakdown by Hospital for October 2021:</p> <ul style="list-style-type: none"> • Morriston – 1.71% • Singleton – 0.54% • NPT – 0.10% 	<p>Crude hospital mortality rate by Hospital (74 years of age or less)</p> <p>The chart displays four data series: Morriston Hospital (blue), Singleton Hospital (orange), NPT Hospital (yellow), and HB Total (grey). The x-axis shows months from Oct-20 to Oct-21. Morriston Hospital consistently has the highest mortality rate, peaking at approximately 2.0% in Feb-21. Singleton Hospital maintains a rate between 0.5% and 0.6%. NPT Hospital has the lowest rate, around 0.1-0.2%. The HB Total rate fluctuates between 1.0% and 1.2%.</p> <table border="1"> <caption>Estimated data from the trend chart</caption> <thead> <tr> <th>Month</th> <th>Morriston Hospital (%)</th> <th>Singleton Hospital (%)</th> <th>NPT Hospital (%)</th> <th>HB Total (%)</th> </tr> </thead> <tbody> <tr><td>Oct-20</td><td>1.6</td><td>0.5</td><td>0.2</td><td>1.0</td></tr> <tr><td>Nov-20</td><td>1.8</td><td>0.5</td><td>0.2</td><td>1.1</td></tr> <tr><td>Dec-20</td><td>1.9</td><td>0.5</td><td>0.2</td><td>1.1</td></tr> <tr><td>Jan-21</td><td>2.0</td><td>0.5</td><td>0.2</td><td>1.2</td></tr> <tr><td>Feb-21</td><td>2.0</td><td>0.5</td><td>0.2</td><td>1.2</td></tr> <tr><td>Mar-21</td><td>1.8</td><td>0.5</td><td>0.2</td><td>1.1</td></tr> <tr><td>Apr-21</td><td>1.7</td><td>0.5</td><td>0.2</td><td>1.0</td></tr> <tr><td>May-21</td><td>1.7</td><td>0.5</td><td>0.2</td><td>1.0</td></tr> <tr><td>Jun-21</td><td>1.7</td><td>0.5</td><td>0.2</td><td>1.0</td></tr> <tr><td>Jul-21</td><td>1.7</td><td>0.5</td><td>0.2</td><td>1.0</td></tr> <tr><td>Aug-21</td><td>1.7</td><td>0.5</td><td>0.2</td><td>1.0</td></tr> <tr><td>Sep-21</td><td>1.7</td><td>0.5</td><td>0.2</td><td>1.0</td></tr> <tr><td>Oct-21</td><td>1.7</td><td>0.5</td><td>0.2</td><td>1.0</td></tr> </tbody> </table>	Month	Morriston Hospital (%)	Singleton Hospital (%)	NPT Hospital (%)	HB Total (%)	Oct-20	1.6	0.5	0.2	1.0	Nov-20	1.8	0.5	0.2	1.1	Dec-20	1.9	0.5	0.2	1.1	Jan-21	2.0	0.5	0.2	1.2	Feb-21	2.0	0.5	0.2	1.2	Mar-21	1.8	0.5	0.2	1.1	Apr-21	1.7	0.5	0.2	1.0	May-21	1.7	0.5	0.2	1.0	Jun-21	1.7	0.5	0.2	1.0	Jul-21	1.7	0.5	0.2	1.0	Aug-21	1.7	0.5	0.2	1.0	Sep-21	1.7	0.5	0.2	1.0	Oct-21	1.7	0.5	0.2	1.0
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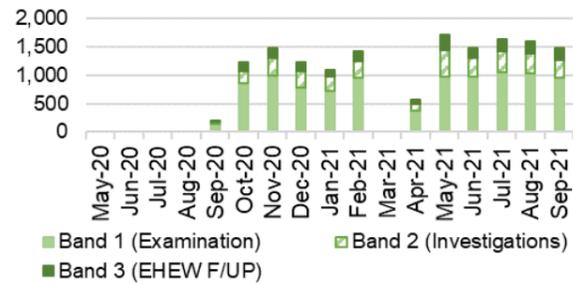
WORKFORCE

Description	Current Performance	Trend																																																												
<p>Staff sickness rates- <i>Percentage of sickness absence rate of staff</i></p>	<ul style="list-style-type: none"> Our in-month performance deteriorated from 8.41% in September 2021 to 8.64% in October 2021. The 12-month rolling performance deteriorated from 7.29% in September 2021 to 7.44% in October 2021. The following table provides the top 5 absence reasons by full time equivalent (FTE) days lost in October 2021. <table border="1" data-bbox="517 703 1200 1294"> <thead> <tr> <th>Absence Reason</th> <th>FTE Days Lost</th> <th>%</th> </tr> </thead> <tbody> <tr> <td>Anxiety/ stress/ depression/ other psychiatric illnesses</td> <td>9,140.57</td> <td>29.5%</td> </tr> <tr> <td>Chest & respiratory problems</td> <td>3,821.13</td> <td>12.3%</td> </tr> <tr> <td>Infectious diseases</td> <td>2,996.01</td> <td>9.7%</td> </tr> <tr> <td>Other musculoskeletal problems</td> <td>2,745.06</td> <td>8.9%</td> </tr> <tr> <td>Other known causes - not elsewhere classified</td> <td>1,977.14</td> <td>6.4%</td> </tr> </tbody> </table>	Absence Reason	FTE Days Lost	%	Anxiety/ stress/ depression/ other psychiatric illnesses	9,140.57	29.5%	Chest & respiratory problems	3,821.13	12.3%	Infectious diseases	2,996.01	9.7%	Other musculoskeletal problems	2,745.06	8.9%	Other known causes - not elsewhere classified	1,977.14	6.4%	<p align="center">% of full time equivalent (FTE) days lost to sickness absence (12 month rolling and in-month)</p>  <table border="1" data-bbox="1263 408 2029 986"> <caption>Estimated data for Staff Sickness Rates Trend</caption> <thead> <tr> <th>Month</th> <th>% sickness rate (12 month rolling)</th> <th>% sickness rate (in-month)</th> </tr> </thead> <tbody> <tr><td>Oct-20</td><td>7.0%</td><td>7.0%</td></tr> <tr><td>Nov-20</td><td>7.2%</td><td>8.4%</td></tr> <tr><td>Dec-20</td><td>7.5%</td><td>10.0%</td></tr> <tr><td>Jan-21</td><td>7.5%</td><td>8.0%</td></tr> <tr><td>Feb-21</td><td>7.5%</td><td>6.5%</td></tr> <tr><td>Mar-21</td><td>7.2%</td><td>5.8%</td></tr> <tr><td>Apr-21</td><td>7.0%</td><td>5.8%</td></tr> <tr><td>May-21</td><td>6.8%</td><td>6.5%</td></tr> <tr><td>Jun-21</td><td>6.8%</td><td>7.0%</td></tr> <tr><td>Jul-21</td><td>7.0%</td><td>7.5%</td></tr> <tr><td>Aug-21</td><td>7.2%</td><td>7.8%</td></tr> <tr><td>Sep-21</td><td>7.3%</td><td>8.4%</td></tr> <tr><td>Oct-21</td><td>7.4%</td><td>8.6%</td></tr> </tbody> </table>	Month	% sickness rate (12 month rolling)	% sickness rate (in-month)	Oct-20	7.0%	7.0%	Nov-20	7.2%	8.4%	Dec-20	7.5%	10.0%	Jan-21	7.5%	8.0%	Feb-21	7.5%	6.5%	Mar-21	7.2%	5.8%	Apr-21	7.0%	5.8%	May-21	6.8%	6.5%	Jun-21	6.8%	7.0%	Jul-21	7.0%	7.5%	Aug-21	7.2%	7.8%	Sep-21	7.3%	8.4%	Oct-21	7.4%	8.6%
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HARM FROM REDUCTION IN NON-COVID ACTIVITY

5.1 Primary and Community Care Overview

Chart 1: Number of patients receiving care from Eye Health Examination Wales (EHEW)



No claims submitted between April and August 2020

Chart 5: Number and percentage of adult dental patients re-attending NHS Primary Dental Care between 6-9 months

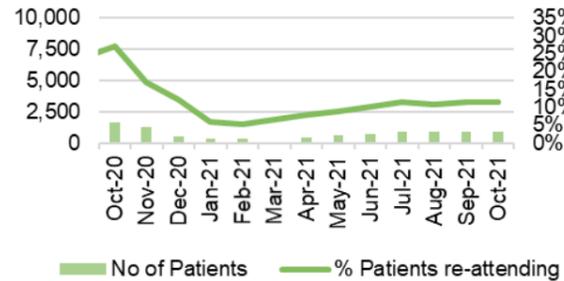


Chart 2: Common Ailment Scheme - Number of consultations provided

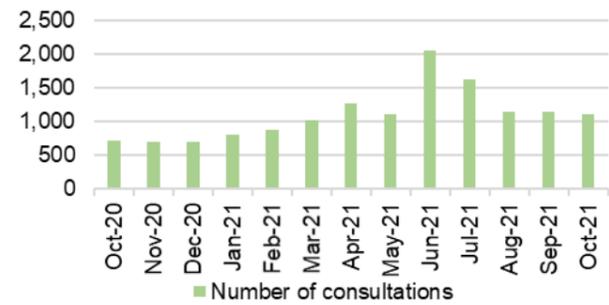


Chart 3: Urgent Dental Centre- Total episodes of patient care

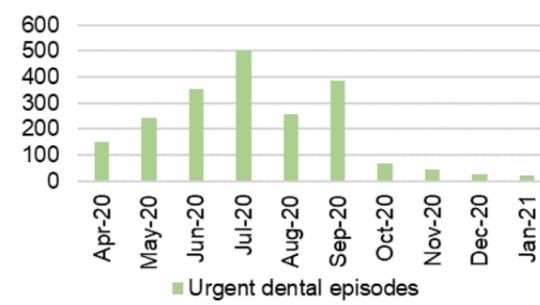


Chart 4: General Dental Practice activity- Total number of telephone calls received

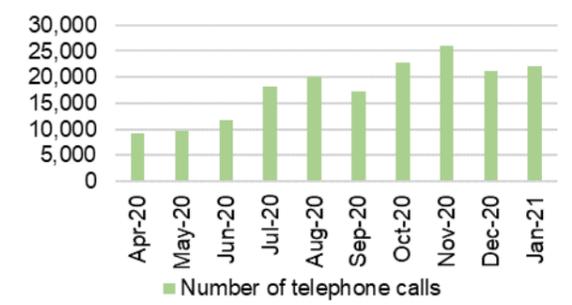


Chart 6: Pregnancy Advisory Service- Referral to appointment within 5 days and treatment within 10 days

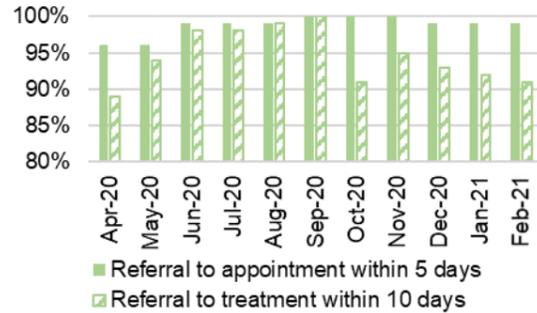


Chart 7: Sexual health services- Attendances at sexual health ambulance

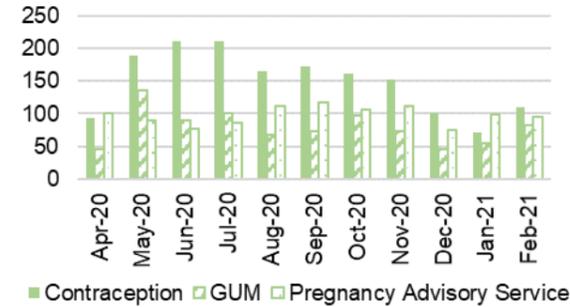


Chart 8: Sexual health services- Patient outcomes

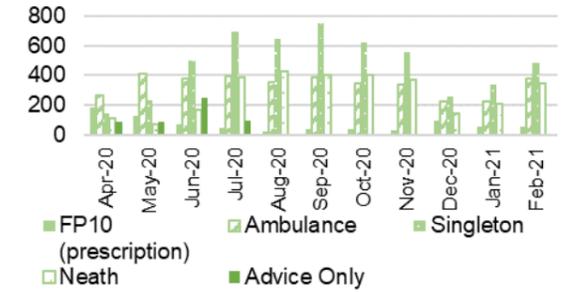


Chart 9: District Nursing- Number of patients on caseload

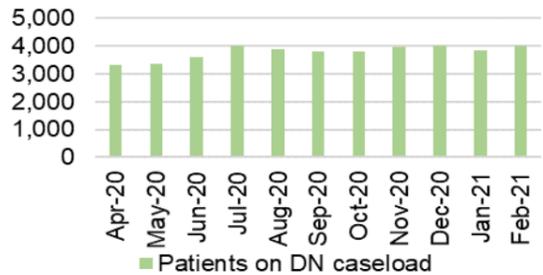


Chart 10: District Nursing- Total number of contacts

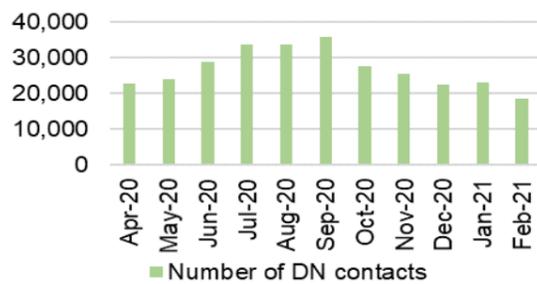


Chart 11: Community wound clinic- Number of attendances and number of home visits

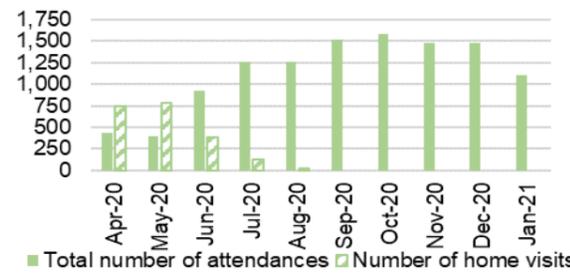


Chart 12: Community wound clinic- Number of assessments by location

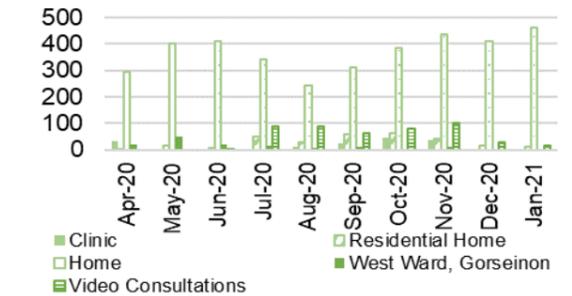


Chart 13: % of patients with a RTT (referral to stage 1) of 26 weeks or less for Restorative Dentistry

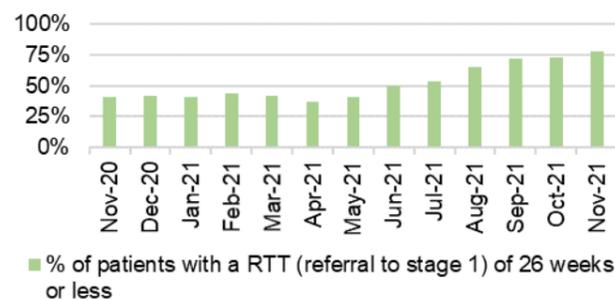


Chart 14: Audiology- Number of remote consultations

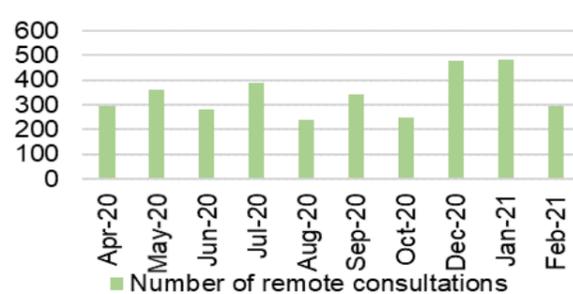


Chart 15: Audiology- Total number of patients waiting > 14 weeks

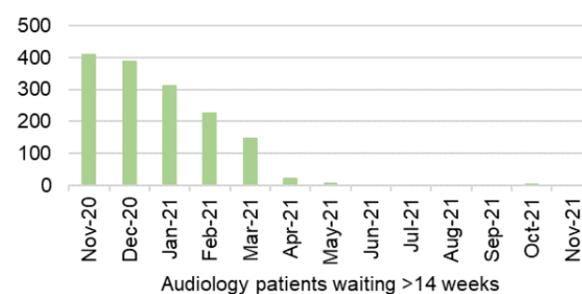
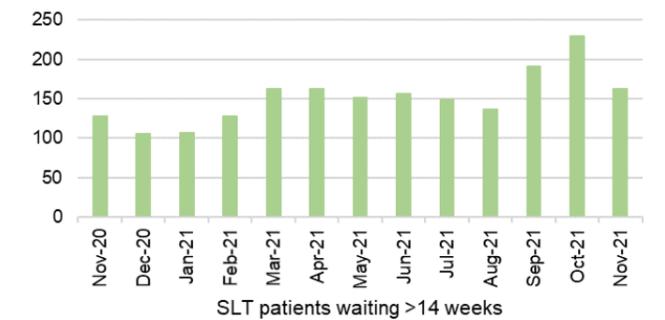


Chart 16: Speech & Language Therapy- Number of patients waiting > 14 weeks



Harm from reduction in non-Covid activity

5.2 Planned Care Overview

Chart 1: Number of GP Referrals into secondary care

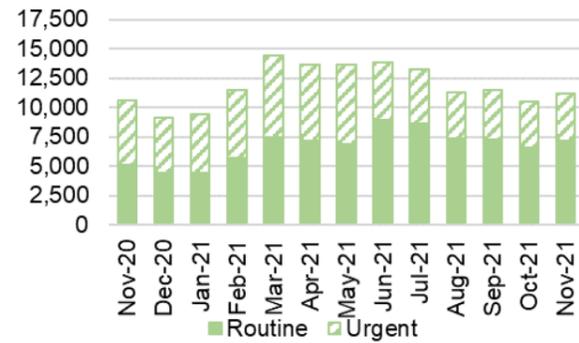


Chart 2: Number of patients waiting over 26 weeks for an outpatient appointment

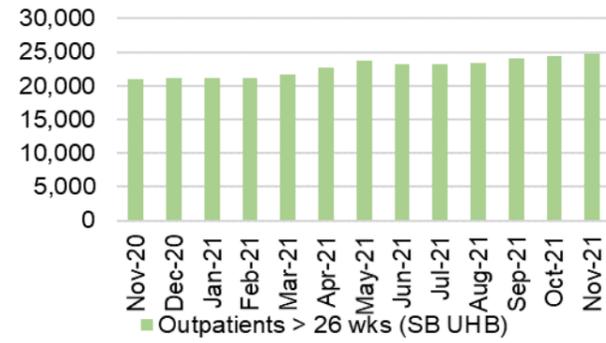


Chart 3: Number of patients waiting over 36 weeks for treatment

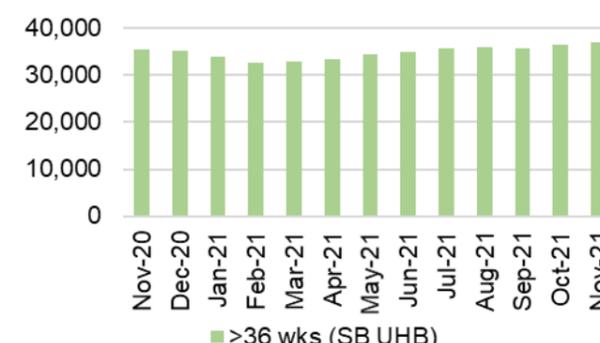


Chart 4: % patients waiting less than 26 weeks from referral to treatment

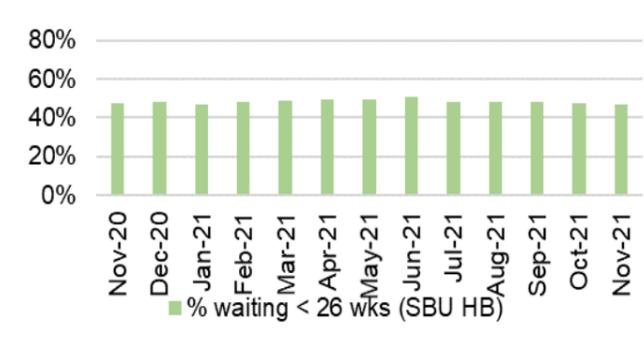


Chart 5: Number of patients waiting for reportable diagnostics over 8 weeks

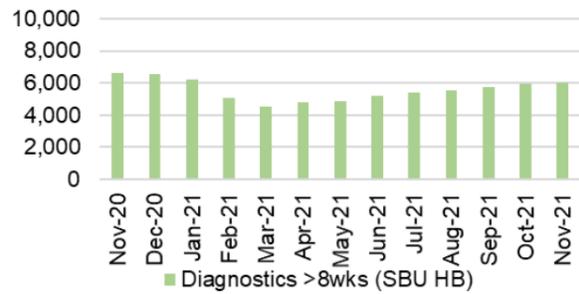


Chart 6: Number of patients waiting for reportable Cardiac diagnostics over 8 weeks

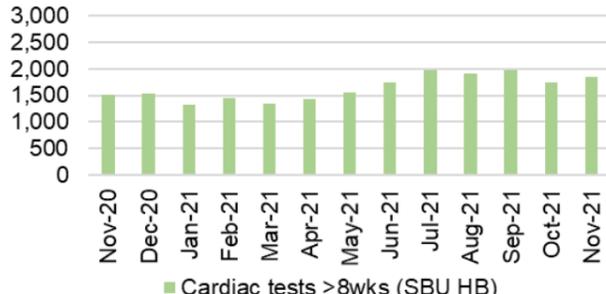


Chart 7: Number of patients waiting more than 14 weeks for Therapies

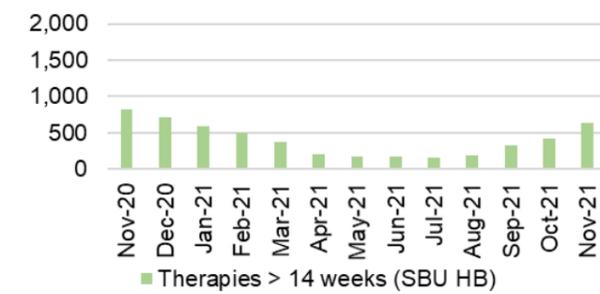


Chart 8: Cancer referrals

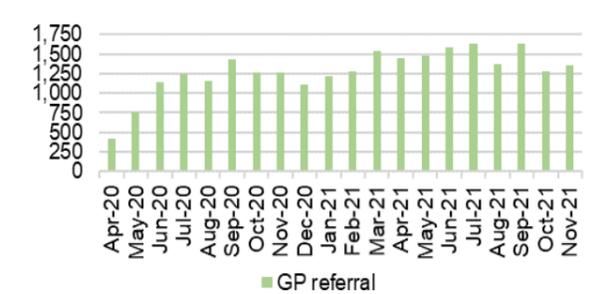


Chart 9: Single Cancer Pathway- % of patients starting definitive treatment within 62 days from point of suspicion

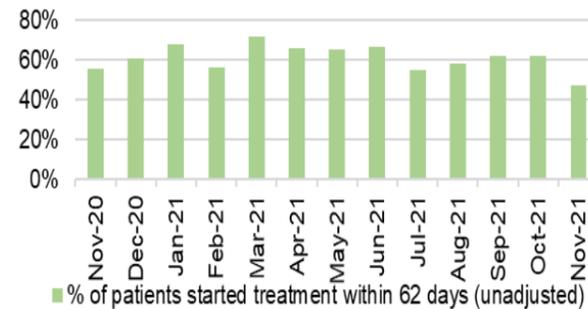


Chart 10: Number of new cancer patients starting definitive treatment

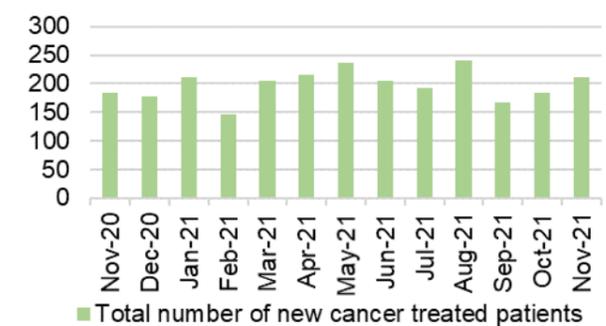


Chart 11: Single Cancer Pathway backlog- patients waiting over 63 days

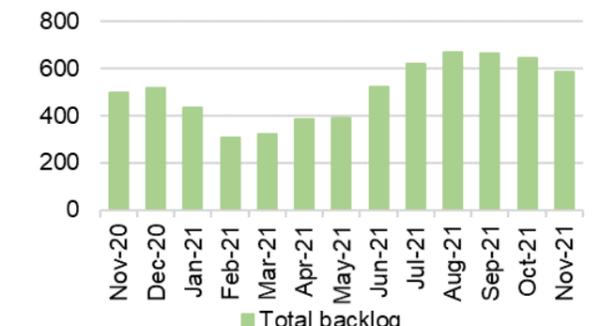


Chart 12: Number of patients waiting for an outpatient follow-up who are delayed past their target date

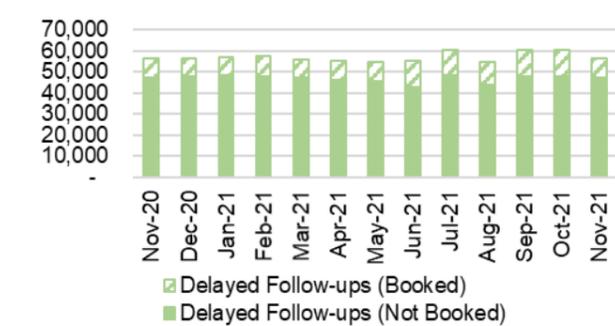


Chart 13: Number of patients without a documented clinical review date

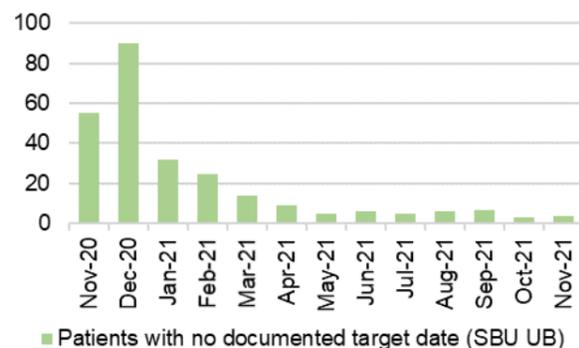


Chart 14: Ophthalmology patients without an allocated health risk factor

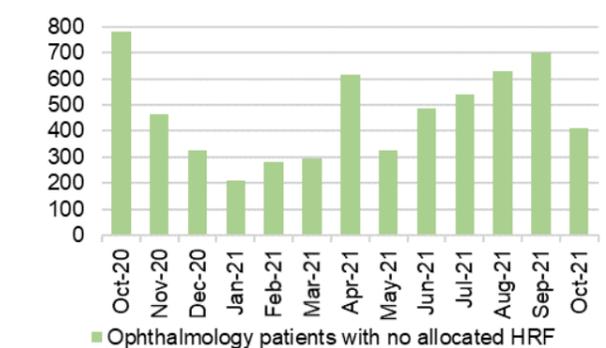


Chart 15: Total number of patients on the follow-up waiting list

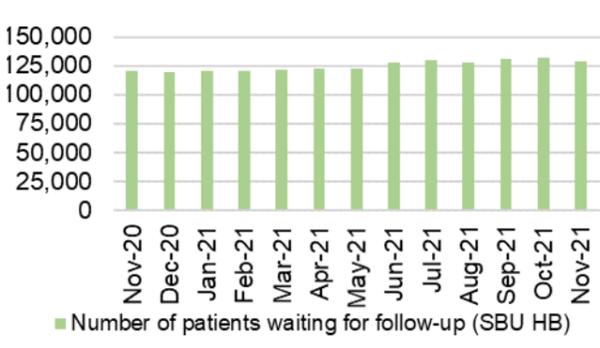
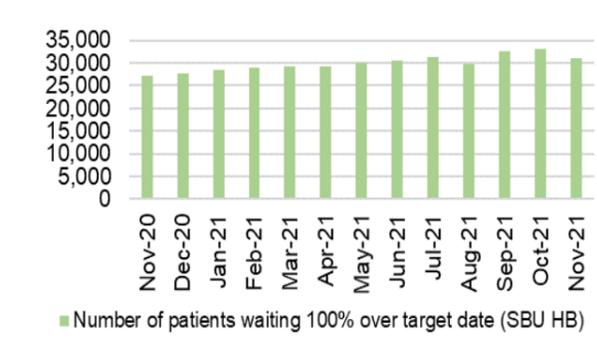


Chart 16: Number of patients delayed by over 100%



Planned Care- Overview (October 2021)

Demand	Waiting Times		
11,238 (7%↑) Total GP referrals	24,752 (2%↑) Patients waiting over 26 weeks for a new outpatient appointment	37,064 (1.8%↑) Patients waiting over 36 weeks for treatment	27,728 (1%↑) Patients waiting over 52 weeks for treatment
7,199 (9%↑) Routine GP referrals	46.8% (0.7%↓) Patients waiting under 26 weeks from referral to treatment	6,008 (1%↑) Patients waiting over 8 weeks for all reportable diagnostics	1,856 (6.4%↑) Patients waiting over 8 weeks for Cardiac diagnostics only
4,039 (4%↑) Urgent GP referrals	629 (29%↑) Patients waiting over 14 weeks for reportable therapies	129,255 (1.8%↓) Patients waiting for a follow-up outpatient appointment	30,946 (6.6%↓) Patients waiting for a follow-up outpatients appointment who are delayed over 100%

Cancer
1,684 (7%↓) Number of USC referrals received
584 (9.6%↓) USC backlog over 63 days
47% (14.9%↓) <i>draft Nov '21</i> Patients starting first definitive cancer treatment within 62 days

Theatre Efficiencies
67% (1%↑) Theatre utilisation rate
48% (2%↓) % of theatres sessions finishing early
43% (3%↓) % of theatres sessions starting late
38% (4%↓) Operations cancelled on the day

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

5.3 Updates on key measures

PLANNED CARE	
Description	Current Performance
<p>Referrals and shape of the waiting list</p> <p>1. GP Referrals <i>The number of Stage 1 additions per week</i></p> <p>2. Stage 1 additions <i>The number of new patients that have been added to the outpatient waiting list</i></p> <p>3. Size of the waiting list <i>Total number of patients on the waiting list by stage as at December 2019</i></p> <p>4. Size of the waiting list <i>Total number of patients on the waiting list by stage as at November 2021</i></p>	<p>The number of GP referrals and additions to the outpatient waiting list has increased each month since May 2020, this is reflected in the reduction in the size of the waiting list in April 2020 and subsequent increase every month since May 2020. November 2021 has seen an increase in referral figures. Since September 2020 the number of referrals and additions appeared to stabilise but then started to increase again from January 2021. Chart 4 shows the shape of the current waiting list, there are currently 9,749 patients waiting over 104 weeks at all stages. Chart 3 shows the waiting list as at December 2019 as this reflects a typical monthly snapshot of the waiting list prior to the COVID19 pandemic.</p>
	Trend
	<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <p>1. Number of GP referrals received by SBU Health Board</p> <p>Legend: GP Referrals (routine) (solid green), GP Referrals (urgent) (dashed green)</p> </div> <div style="width: 48%;"> <p>2. Number of stage 1 additions per week</p> <p>Legend: Additions to outpatients (stage 1) waiting list (solid green)</p> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 48%;"> <p>3. Total size of the waiting list and movement (December 2019)</p> <p>Legend: STAGE 1 (blue), STAGE 2 (orange), STAGE 3 (grey), STAGE 4 (yellow), STAGE 5 (dark blue)</p> </div> <div style="width: 48%;"> <p>4. Total size of the waiting list and movement</p> <p>Additions to list continue to rise</p> <p>Legend: STAGE 1 (blue), STAGE 2 (orange), STAGE 3 (grey), STAGE 4 (yellow), STAGE 5 (dark blue)</p> </div> </div>

PLANNED CARE

Description

Current Performance

Outpatient waiting times

1. Number of patients waiting more than 26 weeks for an outpatient appointment (stage 1)- Health Board Total

2. Number of patients waiting more than 26 weeks for an outpatient appointment (stage 1)- Hospital Level

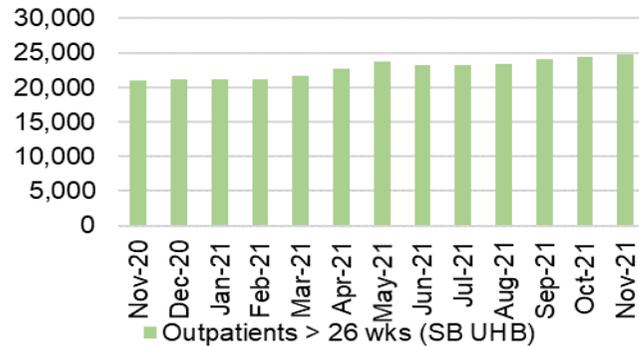
3. Patients waiting over 26 weeks for an outpatient appointment by specialty

4. Outpatient activity undertaken

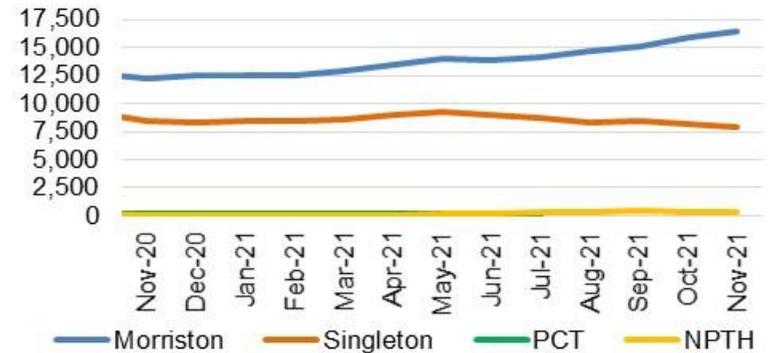
The number of patients waiting over 26 weeks for a first outpatient appointment is still a challenge. November 2021 saw an in-month increase in the number of patients waiting over 26 weeks for an outpatient appointment. The number of breaches increased from 24,483 in October 2021 to 24,752 in November 2021. Ophthalmology has the largest proportion of patients waiting over 26 weeks for an outpatient appointment closely followed by Orthopaedics and ENT. The number of outpatient attendances has significantly reduced since February 2020 due to COVID19. Chart 4 shows that the number of attendances started to increase from April 2021 before remaining steady for a period and then increasing again in November 2021.

Trend

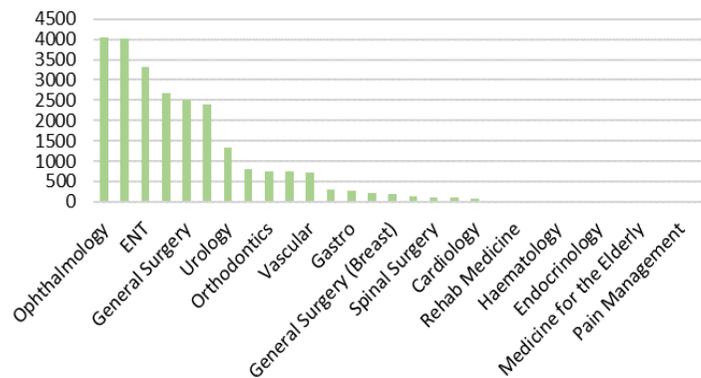
1. Number of stage 1 over 26 weeks- HB total



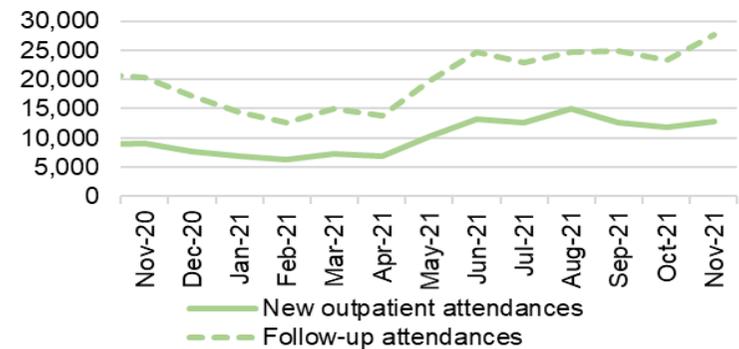
2. Number of stage 1 over 26 weeks- Hospital level



3. Patients waiting over 26 weeks for an outpatient appointment by specialty as at November 2021



4. Outpatient activity undertaken



**Please note – reporting measures changed from June 2021 – Using power BI platform

PLANNED CARE

Description	Current Performance
<p>Patients waiting over 36 weeks for treatment</p> <p>1. Number of patients waiting more than 36 weeks for treatment and the number of elective patients admitted for treatment- Health Board Total</p> <p>2. Number of patients waiting more than 36 weeks for treatment and the number of elective patients admitted for treatment- Hospital level</p> <p>3. Number of elective admissions</p>	<p>The number of patients waiting longer than 36 weeks from referral to treatment has increased every month since the first wave of COVID19 in March 2020. December 2020 was the first month in 2020 that saw an in-month reduction and this trend continued into January and February 2021 however, the number of breaches increased again from March 2021. In November 2021, there was 37,064 patients waiting over 36 weeks which is a 1.8% in-month increase from October 2021. 27,728 of the 37,064 were waiting over 52 weeks in November 2021.</p>
	<p align="center">Trend</p>
	<div style="display: flex; justify-content: space-between;"> <div data-bbox="526 507 1220 949"> <p>1. Number of patients waiting over 36 weeks- HB total</p> <p align="center">■ >36 wks (SB UHB)</p> </div> <div data-bbox="1288 507 2072 949"> <p>2. Number of patients waiting over 36 weeks- Hospital level</p> <p align="center">— Morriston — Singleton — PCT — NPTH</p> </div> </div> <div style="margin-top: 20px;"> <p>3. Number of elective admissions</p> <p align="center">— Admitted elective patients</p> </div>

PLANNED CARE																																																																								
Description	Current Performance																																																																							
<p>Total waiting times <i>Percentage of patients waiting less than 26 weeks from referral to treatment</i></p>	<p>Throughout 2019/20 the overall percentage of patients waiting less than 26 weeks from referral to treatment ranged between 80% and 88%. Whereas, throughout the Covid19 pandemic in 2020/21 the percentage ranged between 41% and 72%.</p> <p>In November 2021, 46.8% of patients were waiting under 26 weeks from referral to treatment, which is a reduction from October 2021.</p>	<p>Percentage of patient waiting less than 26 weeks</p> <table border="1"> <caption>Percentage of patient waiting less than 26 weeks</caption> <thead> <tr> <th>Month</th> <th>Morriston</th> <th>Singleton</th> <th>PCT</th> <th>NPTH</th> </tr> </thead> <tbody> <tr><td>Nov-20</td><td>40%</td><td>48%</td><td>38%</td><td>88%</td></tr> <tr><td>Dec-20</td><td>40%</td><td>48%</td><td>40%</td><td>92%</td></tr> <tr><td>Jan-21</td><td>40%</td><td>48%</td><td>40%</td><td>90%</td></tr> <tr><td>Feb-21</td><td>40%</td><td>48%</td><td>42%</td><td>88%</td></tr> <tr><td>Mar-21</td><td>40%</td><td>48%</td><td>40%</td><td>90%</td></tr> <tr><td>Apr-21</td><td>40%</td><td>48%</td><td>38%</td><td>90%</td></tr> <tr><td>May-21</td><td>40%</td><td>48%</td><td>45%</td><td>85%</td></tr> <tr><td>Jun-21</td><td>40%</td><td>48%</td><td>55%</td><td>82%</td></tr> <tr><td>Jul-21</td><td>40%</td><td>48%</td><td>65%</td><td>80%</td></tr> <tr><td>Aug-21</td><td>40%</td><td>48%</td><td>75%</td><td>78%</td></tr> <tr><td>Sep-21</td><td>40%</td><td>48%</td><td>78%</td><td>75%</td></tr> <tr><td>Oct-21</td><td>40%</td><td>48%</td><td>75%</td><td>72%</td></tr> <tr><td>Nov-21</td><td>43%</td><td>48%</td><td>80%</td><td>72%</td></tr> </tbody> </table>	Month	Morriston	Singleton	PCT	NPTH	Nov-20	40%	48%	38%	88%	Dec-20	40%	48%	40%	92%	Jan-21	40%	48%	40%	90%	Feb-21	40%	48%	42%	88%	Mar-21	40%	48%	40%	90%	Apr-21	40%	48%	38%	90%	May-21	40%	48%	45%	85%	Jun-21	40%	48%	55%	82%	Jul-21	40%	48%	65%	80%	Aug-21	40%	48%	75%	78%	Sep-21	40%	48%	78%	75%	Oct-21	40%	48%	75%	72%	Nov-21	43%	48%	80%	72%
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<p>Ophthalmology waiting times <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>	<p>In October 2021, 48.6% 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, there was a continuous downward trend in performance in 2020/21, however performance seems to be improving slightly in 2021/22.</p>	<p>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</p> <table border="1"> <caption>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</caption> <thead> <tr> <th>Month</th> <th>% of R1 ophthalmology patient pathways waiting within target date or within 25% beyond target date for an outpatient appointment</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>Oct-20</td><td>45%</td><td>100%</td></tr> <tr><td>Nov-20</td><td>48%</td><td>100%</td></tr> <tr><td>Dec-20</td><td>45%</td><td>100%</td></tr> <tr><td>Jan-21</td><td>45%</td><td>100%</td></tr> <tr><td>Feb-21</td><td>45%</td><td>100%</td></tr> <tr><td>Mar-21</td><td>45%</td><td>100%</td></tr> <tr><td>Apr-21</td><td>45%</td><td>100%</td></tr> <tr><td>May-21</td><td>45%</td><td>100%</td></tr> <tr><td>Jun-21</td><td>45%</td><td>100%</td></tr> <tr><td>Jul-21</td><td>45%</td><td>100%</td></tr> <tr><td>Aug-21</td><td>45%</td><td>100%</td></tr> <tr><td>Sep-21</td><td>45%</td><td>100%</td></tr> <tr><td>Oct-21</td><td>48.6%</td><td>100%</td></tr> </tbody> </table>	Month	% of R1 ophthalmology patient pathways waiting within target date or within 25% beyond target date for an outpatient appointment	Target	Oct-20	45%	100%	Nov-20	48%	100%	Dec-20	45%	100%	Jan-21	45%	100%	Feb-21	45%	100%	Mar-21	45%	100%	Apr-21	45%	100%	May-21	45%	100%	Jun-21	45%	100%	Jul-21	45%	100%	Aug-21	45%	100%	Sep-21	45%	100%	Oct-21	48.6%	100%																												
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THEATRE EFFICIENCY

Description	Current Performance	Trend																																																																																																																																																										
<p>Theatre Efficiency</p> <p><i>1. Theatre Utilisation Rates</i></p> <p><i>2. % of theatre sessions starting late</i></p> <p><i>3. % of theatre sessions finishing early</i></p> <p><i>4. % of theatre sessions cancelled at short notice (<28 days)</i></p> <p><i>5. % of operations cancelled on the day</i></p>	<p>In November 2021 the Theatre Utilisation rate was 67%. This is an in-month increase of 1% and a 7% decrease compared to November 2020.</p> <p>43% of theatre sessions started late in November 2021. This is a decline from 39% in November 2020.</p> <p>In November 2021, 48% of theatre sessions finished early. This is 2% lower than figures seen in both October 2021 November 2020.</p> <p>7% of theatre sessions were cancelled at short notice in November 2021. This is a reduction of 2% from October 2021 and is the same as reported in November 2020.</p> <p>Of the operations cancelled in November 2021 (580), 38% of them were cancelled on the day. This is a reduction from 42% in October 2021 and a 2% increase from October 2020.</p>	<p align="center">1. Theatre Utilisation Rates</p> <table border="1"> <caption>1. Theatre Utilisation Rates (SBU HB)</caption> <thead> <tr><th>Month</th><th>Utilisation Rate (%)</th></tr> </thead> <tbody> <tr><td>Nov-20</td><td>70</td></tr> <tr><td>Dec-20</td><td>58</td></tr> <tr><td>Jan-21</td><td>62</td></tr> <tr><td>Feb-21</td><td>70</td></tr> <tr><td>Mar-21</td><td>72</td></tr> <tr><td>Apr-21</td><td>78</td></tr> <tr><td>May-21</td><td>75</td></tr> <tr><td>Jun-21</td><td>72</td></tr> <tr><td>Jul-21</td><td>68</td></tr> <tr><td>Aug-21</td><td>65</td></tr> <tr><td>Sep-21</td><td>70</td></tr> <tr><td>Oct-21</td><td>62</td></tr> <tr><td>Nov-21</td><td>67</td></tr> </tbody> </table> <p align="center">2. and 3. % theatre sessions starting late/finishing</p> <table border="1"> <caption>2. and 3. % theatre sessions starting late/finishing</caption> <thead> <tr><th>Month</th><th>Late Starts (%)</th><th>Early Finishes (%)</th></tr> </thead> <tbody> <tr><td>Nov-20</td><td>45</td><td>45</td></tr> <tr><td>Dec-20</td><td>42</td><td>45</td></tr> <tr><td>Jan-21</td><td>40</td><td>45</td></tr> <tr><td>Feb-21</td><td>45</td><td>45</td></tr> <tr><td>Mar-21</td><td>45</td><td>40</td></tr> <tr><td>Apr-21</td><td>40</td><td>45</td></tr> <tr><td>May-21</td><td>45</td><td>45</td></tr> <tr><td>Jun-21</td><td>45</td><td>45</td></tr> <tr><td>Jul-21</td><td>45</td><td>45</td></tr> <tr><td>Aug-21</td><td>45</td><td>45</td></tr> <tr><td>Sep-21</td><td>45</td><td>45</td></tr> <tr><td>Oct-21</td><td>45</td><td>50</td></tr> <tr><td>Nov-21</td><td>45</td><td>48</td></tr> </tbody> </table> <p align="center">4.% theatre sessions cancelled at short notice (<28 days)</p> <table border="1"> <caption>4.% theatre sessions cancelled at short notice (<28 days)</caption> <thead> <tr><th>Month</th><th>Morriston (%)</th><th>NPTH (%)</th><th>Singleton (%)</th></tr> </thead> <tbody> <tr><td>Nov-20</td><td>10</td><td>15</td><td>10</td></tr> <tr><td>Dec-20</td><td>20</td><td>40</td><td>10</td></tr> <tr><td>Jan-21</td><td>15</td><td>55</td><td>10</td></tr> <tr><td>Feb-21</td><td>5</td><td>10</td><td>10</td></tr> <tr><td>Mar-21</td><td>10</td><td>10</td><td>10</td></tr> <tr><td>Apr-21</td><td>10</td><td>10</td><td>10</td></tr> <tr><td>May-21</td><td>5</td><td>10</td><td>10</td></tr> <tr><td>Jun-21</td><td>10</td><td>10</td><td>10</td></tr> <tr><td>Jul-21</td><td>10</td><td>10</td><td>10</td></tr> <tr><td>Aug-21</td><td>15</td><td>10</td><td>10</td></tr> <tr><td>Sep-21</td><td>10</td><td>10</td><td>10</td></tr> <tr><td>Oct-21</td><td>10</td><td>10</td><td>10</td></tr> <tr><td>Nov-21</td><td>10</td><td>10</td><td>10</td></tr> </tbody> </table> <p align="center">5. % of operations cancelled on the day</p> <table border="1"> <caption>5. % of operations cancelled on the day</caption> <thead> <tr><th>Month</th><th>% operations cancelled on the day</th></tr> </thead> <tbody> <tr><td>Nov-20</td><td>35</td></tr> <tr><td>Dec-20</td><td>35</td></tr> <tr><td>Jan-21</td><td>40</td></tr> <tr><td>Feb-21</td><td>45</td></tr> <tr><td>Mar-21</td><td>45</td></tr> <tr><td>Apr-21</td><td>45</td></tr> <tr><td>May-21</td><td>35</td></tr> <tr><td>Jun-21</td><td>40</td></tr> <tr><td>Jul-21</td><td>40</td></tr> <tr><td>Aug-21</td><td>40</td></tr> <tr><td>Sep-21</td><td>45</td></tr> <tr><td>Oct-21</td><td>45</td></tr> <tr><td>Nov-21</td><td>40</td></tr> </tbody> </table>	Month	Utilisation Rate (%)	Nov-20	70	Dec-20	58	Jan-21	62	Feb-21	70	Mar-21	72	Apr-21	78	May-21	75	Jun-21	72	Jul-21	68	Aug-21	65	Sep-21	70	Oct-21	62	Nov-21	67	Month	Late Starts (%)	Early Finishes (%)	Nov-20	45	45	Dec-20	42	45	Jan-21	40	45	Feb-21	45	45	Mar-21	45	40	Apr-21	40	45	May-21	45	45	Jun-21	45	45	Jul-21	45	45	Aug-21	45	45	Sep-21	45	45	Oct-21	45	50	Nov-21	45	48	Month	Morriston (%)	NPTH (%)	Singleton (%)	Nov-20	10	15	10	Dec-20	20	40	10	Jan-21	15	55	10	Feb-21	5	10	10	Mar-21	10	10	10	Apr-21	10	10	10	May-21	5	10	10	Jun-21	10	10	10	Jul-21	10	10	10	Aug-21	15	10	10	Sep-21	10	10	10	Oct-21	10	10	10	Nov-21	10	10	10	Month	% operations cancelled on the day	Nov-20	35	Dec-20	35	Jan-21	40	Feb-21	45	Mar-21	45	Apr-21	45	May-21	35	Jun-21	40	Jul-21	40	Aug-21	40	Sep-21	45	Oct-21	45	Nov-21	40
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<p>Diagnostics waiting times <i>The number of patients waiting more than 8 weeks for specified diagnostics</i></p>	<p>In November 2021, there was an increase in the number of patients waiting over 8 weeks for specified diagnostics. It increased from 5,939 in October 2021 to 6,008 in November 2021.</p> <p>The following is a breakdown for the 8-week breaches by diagnostic test for November 2021:</p> <ul style="list-style-type: none"> • Endoscopy= 2,804 • Cardiac tests= 1,856 • Cystoscopy= 13 	<p>Number of patients waiting longer than 8 weeks for diagnostics</p> <table border="1"> <caption>Estimated data for Diagnostics Trend Chart</caption> <thead> <tr> <th>Month</th> <th>Cardiac tests</th> <th>Endoscopy</th> <th>Other diagnostics (inc. radiology)</th> </tr> </thead> <tbody> <tr><td>Nov-20</td><td>1,500</td><td>2,000</td><td>3,000</td></tr> <tr><td>Dec-20</td><td>1,500</td><td>2,200</td><td>2,500</td></tr> <tr><td>Jan-21</td><td>1,300</td><td>2,200</td><td>2,500</td></tr> <tr><td>Feb-21</td><td>1,300</td><td>2,000</td><td>1,500</td></tr> <tr><td>Mar-21</td><td>1,300</td><td>2,000</td><td>1,200</td></tr> <tr><td>Apr-21</td><td>1,400</td><td>2,000</td><td>1,200</td></tr> <tr><td>May-21</td><td>1,500</td><td>2,000</td><td>1,100</td></tr> <tr><td>Jun-21</td><td>1,600</td><td>2,000</td><td>1,300</td></tr> <tr><td>Jul-21</td><td>1,700</td><td>2,000</td><td>1,400</td></tr> <tr><td>Aug-21</td><td>1,600</td><td>2,000</td><td>1,500</td></tr> <tr><td>Sep-21</td><td>1,600</td><td>2,200</td><td>1,500</td></tr> <tr><td>Oct-21</td><td>1,700</td><td>2,500</td><td>1,400</td></tr> <tr><td>Nov-21</td><td>1,856</td><td>2,804</td><td>1,348</td></tr> </tbody> </table>	Month	Cardiac tests	Endoscopy	Other diagnostics (inc. radiology)	Nov-20	1,500	2,000	3,000	Dec-20	1,500	2,200	2,500	Jan-21	1,300	2,200	2,500	Feb-21	1,300	2,000	1,500	Mar-21	1,300	2,000	1,200	Apr-21	1,400	2,000	1,200	May-21	1,500	2,000	1,100	Jun-21	1,600	2,000	1,300	Jul-21	1,700	2,000	1,400	Aug-21	1,600	2,000	1,500	Sep-21	1,600	2,200	1,500	Oct-21	1,700	2,500	1,400	Nov-21	1,856	2,804	1,348
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<p>Therapy waiting times <i>The number of patients waiting more than 14 weeks for specified therapies</i></p>	<p>In November 2021 there were 629 patients waiting over 14 weeks for specified Therapies.</p> <p>The breakdown for the breaches in November 2021 are:</p> <ul style="list-style-type: none"> • Podiatry = 438 • Speech & Language Therapy= 162 • Dietetics = 22 • Physiotherapy = 7 	<p>Number of patients waiting longer than 14 weeks for therapies</p> <table border="1"> <caption>Estimated data for Therapy Trend Chart</caption> <thead> <tr> <th>Month</th> <th>Occ Therapy/ LD (MH)</th> <th>Occ Therapy (exc. MH)</th> <th>Audiology</th> <th>Dietetics</th> <th>Phsyio</th> <th>Podiatry</th> </tr> </thead> <tbody> <tr><td>Nov-20</td><td>100</td><td>100</td><td>100</td><td>50</td><td>20</td><td>100</td></tr> <tr><td>Dec-20</td><td>100</td><td>100</td><td>100</td><td>50</td><td>20</td><td>100</td></tr> <tr><td>Jan-21</td><td>100</td><td>100</td><td>100</td><td>50</td><td>20</td><td>100</td></tr> <tr><td>Feb-21</td><td>100</td><td>100</td><td>100</td><td>50</td><td>20</td><td>100</td></tr> <tr><td>Mar-21</td><td>100</td><td>100</td><td>100</td><td>50</td><td>20</td><td>100</td></tr> <tr><td>Apr-21</td><td>100</td><td>100</td><td>100</td><td>50</td><td>20</td><td>100</td></tr> <tr><td>May-21</td><td>100</td><td>100</td><td>100</td><td>50</td><td>20</td><td>100</td></tr> <tr><td>Jun-21</td><td>100</td><td>100</td><td>100</td><td>50</td><td>20</td><td>100</td></tr> <tr><td>Jul-21</td><td>100</td><td>100</td><td>100</td><td>50</td><td>20</td><td>100</td></tr> <tr><td>Aug-21</td><td>100</td><td>100</td><td>100</td><td>50</td><td>20</td><td>100</td></tr> <tr><td>Sep-21</td><td>100</td><td>100</td><td>100</td><td>50</td><td>20</td><td>100</td></tr> <tr><td>Oct-21</td><td>100</td><td>100</td><td>100</td><td>50</td><td>20</td><td>100</td></tr> <tr><td>Nov-21</td><td>100</td><td>100</td><td>100</td><td>50</td><td>20</td><td>438</td></tr> </tbody> </table>	Month	Occ Therapy/ LD (MH)	Occ Therapy (exc. MH)	Audiology	Dietetics	Phsyio	Podiatry	Nov-20	100	100	100	50	20	100	Dec-20	100	100	100	50	20	100	Jan-21	100	100	100	50	20	100	Feb-21	100	100	100	50	20	100	Mar-21	100	100	100	50	20	100	Apr-21	100	100	100	50	20	100	May-21	100	100	100	50	20	100	Jun-21	100	100	100	50	20	100	Jul-21	100	100	100	50	20	100	Aug-21	100	100	100	50	20	100	Sep-21	100	100	100	50	20	100	Oct-21	100	100	100	50	20	100	Nov-21	100	100	100	50	20	438
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<p>Cancer demand and shape of the waiting list</p> <p>1. Number of Urgent Suspected Cancer (USC) referrals received</p>	<p>The number of Urgent Suspected Cancer (USC) referrals significantly reduced between March and April 2020, however there has been an upward trend since May 2020.</p> <p>The shape of the waiting list shows that there is a significant “wave” of patients that are likely to breach in the near future, there is also an increased number of referrals being received in comparison with previous years.</p>	<p>1. Number of USC referrals</p> <table border="1"> <caption>1. Number of USC referrals</caption> <thead> <tr> <th>Month</th> <th>Number of USC referrals</th> </tr> </thead> <tbody> <tr><td>Dec-20</td><td>1340</td></tr> <tr><td>Jan-21</td><td>1475</td></tr> <tr><td>Feb-21</td><td>1594</td></tr> <tr><td>Mar-21</td><td>1932</td></tr> <tr><td>Apr-21</td><td>1880</td></tr> <tr><td>May-21</td><td>1871</td></tr> <tr><td>Jun-21</td><td>2014</td></tr> <tr><td>Jul-21</td><td>2062</td></tr> <tr><td>Aug-21</td><td>1740</td></tr> <tr><td>Sep-21</td><td>1980</td></tr> <tr><td>Oct-21</td><td>1802</td></tr> <tr><td>Nov-21</td><td>1684</td></tr> </tbody> </table>	Month	Number of USC referrals	Dec-20	1340	Jan-21	1475	Feb-21	1594	Mar-21	1932	Apr-21	1880	May-21	1871	Jun-21	2014	Jul-21	2062	Aug-21	1740	Sep-21	1980	Oct-21	1802	Nov-21	1684																
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<p>2. Source of suspicion for patients on Single Cancer Pathway (SCP)</p>	<p>Gastroenterology referrals are assigned to the tumour site ‘Other’ on receipt of referral, where possible this is refined to Upper or Lower GI as investigations are initiated and the suspected tumour site becomes clearer to trackers.</p>	<p>2. Source of suspicion for patients starting cancer treatment</p> <table border="1"> <caption>2. Source of suspicion for patients starting cancer treatment</caption> <thead> <tr> <th>Month</th> <th>Total Referrals</th> </tr> </thead> <tbody> <tr><td>Apr-20</td><td>~400</td></tr> <tr><td>May-20</td><td>~800</td></tr> <tr><td>Jun-20</td><td>~1200</td></tr> <tr><td>Jul-20</td><td>~1300</td></tr> <tr><td>Aug-20</td><td>~1200</td></tr> <tr><td>Sep-20</td><td>~1500</td></tr> <tr><td>Oct-20</td><td>~1300</td></tr> <tr><td>Nov-20</td><td>~1300</td></tr> <tr><td>Dec-20</td><td>~1200</td></tr> <tr><td>Jan-21</td><td>~1300</td></tr> <tr><td>Feb-21</td><td>~1400</td></tr> <tr><td>Mar-21</td><td>~1600</td></tr> <tr><td>Apr-21</td><td>~1700</td></tr> <tr><td>May-21</td><td>~1800</td></tr> <tr><td>Jun-21</td><td>~1800</td></tr> <tr><td>Jul-21</td><td>~1900</td></tr> <tr><td>Aug-21</td><td>~1500</td></tr> <tr><td>Sep-21</td><td>~1800</td></tr> <tr><td>Oct-21</td><td>~1600</td></tr> <tr><td>Nov-21</td><td>~1600</td></tr> </tbody> </table>	Month	Total Referrals	Apr-20	~400	May-20	~800	Jun-20	~1200	Jul-20	~1300	Aug-20	~1200	Sep-20	~1500	Oct-20	~1300	Nov-20	~1300	Dec-20	~1200	Jan-21	~1300	Feb-21	~1400	Mar-21	~1600	Apr-21	~1700	May-21	~1800	Jun-21	~1800	Jul-21	~1900	Aug-21	~1500	Sep-21	~1800	Oct-21	~1600	Nov-21	~1600
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CANCER

Description	Current Performance	Trend																												
<p>Single Cancer Pathway Percentage of patients starting first definitive cancer treatment within 62 days from point of suspicion (regardless of the referral route)</p>	<p>November 2021 figures will be finalised on the 30th December 2021. Draft figures indicate a possible achievement of 47% of patients starting treatment within 62 days of the suspicion of cancer first being raised (unadjusted pathway). The number of patients treated in November 2021 is outlined below by tumour site (draft figures).</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th>Tumour Site</th> <th>Breaches</th> <th>Tumour Site</th> <th>Breaches</th> </tr> </thead> <tbody> <tr> <td>Urological</td> <td>16</td> <td>Upper GI</td> <td>8</td> </tr> <tr> <td>Head and Neck</td> <td>14</td> <td>Gynaecological</td> <td>11</td> </tr> <tr> <td>Lower GI</td> <td>13</td> <td>Haematological</td> <td>4</td> </tr> <tr> <td>Lung</td> <td>8</td> <td>Sarcoma</td> <td>1</td> </tr> <tr> <td>Breast</td> <td>20</td> <td>Brain/CNS</td> <td>0</td> </tr> <tr> <td>Skin</td> <td>15</td> <td></td> <td></td> </tr> </tbody> </table>	Tumour Site	Breaches	Tumour Site	Breaches	Urological	16	Upper GI	8	Head and Neck	14	Gynaecological	11	Lower GI	13	Haematological	4	Lung	8	Sarcoma	1	Breast	20	Brain/CNS	0	Skin	15			<p style="text-align: center;">Percentage of patients starting first definitive cancer treatment within 62 days from point of suspicion (regardless of the referral route)</p>
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<p>Single Cancer Pathway backlog The number of patients with an active wait status of more than 63 days</p>	<p>Late November 2021 backlog by tumour site:</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th>Tumour Site</th> <th>63 - 103 days</th> <th>≥104 days</th> </tr> </thead> <tbody> <tr><td>Acute Leukaemia</td><td>0</td><td>0</td></tr> <tr><td>Brain/CNS</td><td>1</td><td>0</td></tr> <tr><td>Breast</td><td>15</td><td>19</td></tr> <tr><td>Children's cancer</td><td>0</td><td>0</td></tr> <tr><td>Gynaecological</td><td>35</td><td>16</td></tr> <tr><td>Haematological</td><td>9</td><td>8</td></tr> <tr><td>Head and neck</td><td>10</td><td>6</td></tr> <tr><td>Lower Gastrointestinal</td><td>141</td><td>110</td></tr> <tr><td>Lung</td><td>21</td><td>5</td></tr> <tr><td>Other</td><td>1</td><td>1</td></tr> <tr><td>Sarcoma</td><td>3</td><td>1</td></tr> <tr><td>Skin(c)</td><td>11</td><td>5</td></tr> <tr><td>Upper Gastrointestinal</td><td>21</td><td>21</td></tr> <tr><td>Urological</td><td>60</td><td>64</td></tr> <tr><td>Grand Total</td><td>328</td><td>256</td></tr> </tbody> </table>	Tumour Site	63 - 103 days	≥104 days	Acute Leukaemia	0	0	Brain/CNS	1	0	Breast	15	19	Children's cancer	0	0	Gynaecological	35	16	Haematological	9	8	Head and neck	10	6	Lower Gastrointestinal	141	110	Lung	21	5	Other	1	1	Sarcoma	3	1	Skin(c)	11	5	Upper Gastrointestinal	21	21	Urological	60	64	Grand Total	328	256	<p style="text-align: center;">Number of patients with a wait status of more than 53 days</p>
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CANCER

Description	Current Performance	Trend
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USC First Outpatient Appointments
The number of patients at first outpatient appointment stage by days waiting

To date, early December 2021 figures show total wait volumes have decreased by 10%, which can be attributed to a change in the data recording following the introduction of a new category of patients who are first reviewed in a 'diagnostic one stop' outpatient appointment.

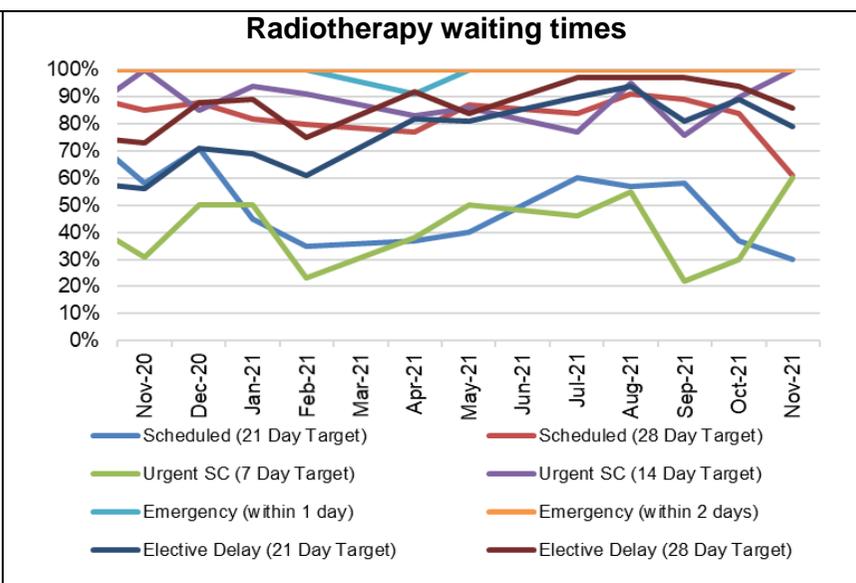
The number of patients waiting for a first outpatient appointment (by total days waiting) – Early December 2021

FIRST OPA	28-Nov	05-Dec	% change
Acute Leukaemia	0	0	0%
Brain/CNS	0	0	0%
Breast	6	0	-100%
Children's Cancer	0	0	0%
Gynaecological	74	109	47%
Haematological	3	4	33%
Head and Neck	70	69	-1%
Lower GI	48	28	-42%
Lung	7	5	-29%
Other	128	59	-54%
Sarcoma	15	13	-13%
Skin	117	110	-6%
Upper GI	17	31	82%
Urological	16	24	50%
Total	501	452	-10%

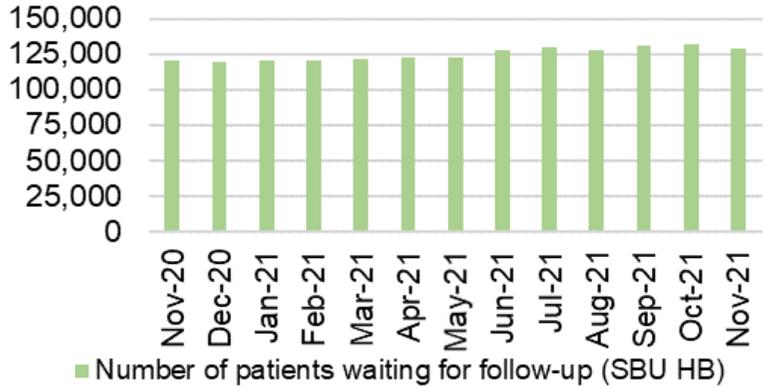
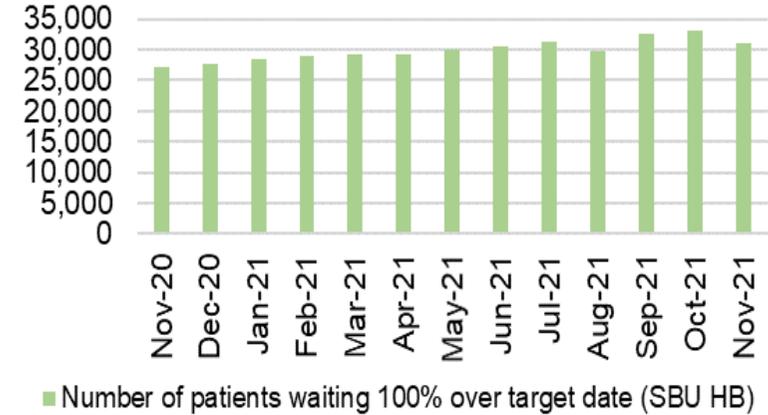
Radiotherapy waiting times
The percentage of patients receiving radiotherapy treatment

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.

Measure	Target	Nov-21
Scheduled (21 Day Target)	80%	30%
Scheduled (28 Day Target)	100%	61%
Urgent SC (7 Day Target)	80%	60%
Urgent SC (14 Day Target)	100%	100%
Emergency (within 1 day)	80%	100%
Emergency (within 2 days)	100%	100%
Elective Delay (21 Day Target)	80%	79%
Elective Delay (28 Day Target)	100%	86%



FOLLOW-UP APPOINTMENTS

Description	Current Performance	Trend																																																								
<p>Follow-up appointments</p> <p><i>1. The total number of patients on the follow-up waiting list</i></p> <p><i>2. The number of patients waiting 100% over target for a follow-up appointment</i></p>	<p>In November 2021, the overall size of the follow-up waiting list decreased by 2,299 patients compared with October 2021 (from 131,554 to 129,255).</p> <p>In November 2021, there was a total of 56,618 patients waiting for a follow-up past their target date. This is an in-month improvement of 6.3% (from 60,447 in October 2021 to 56,618).</p> <p>Of the 56,618 delayed follow-ups in November 2021, 9,136 had appointment dates and 47,482 were still waiting for an appointment.</p> <p>In addition, 30,946 patients were waiting 100%+ over target date in November 2021. This is a 6.6% decrease when compared with October 2021.</p>	<p>1. Total number of patients waiting for a follow-up</p>  <table border="1"> <caption>1. Total number of patients waiting for a follow-up (SBU HB)</caption> <thead> <tr> <th>Month</th> <th>Number of patients</th> </tr> </thead> <tbody> <tr><td>Nov-20</td><td>125,000</td></tr> <tr><td>Dec-20</td><td>125,000</td></tr> <tr><td>Jan-21</td><td>125,000</td></tr> <tr><td>Feb-21</td><td>125,000</td></tr> <tr><td>Mar-21</td><td>125,000</td></tr> <tr><td>Apr-21</td><td>125,000</td></tr> <tr><td>May-21</td><td>125,000</td></tr> <tr><td>Jun-21</td><td>125,000</td></tr> <tr><td>Jul-21</td><td>125,000</td></tr> <tr><td>Aug-21</td><td>125,000</td></tr> <tr><td>Sep-21</td><td>125,000</td></tr> <tr><td>Oct-21</td><td>131,554</td></tr> <tr><td>Nov-21</td><td>129,255</td></tr> </tbody> </table> <p>2. Delayed follow-ups: Number of patients waiting 100% over target</p>  <table border="1"> <caption>2. Delayed follow-ups: Number of patients waiting 100% over target (SBU HB)</caption> <thead> <tr> <th>Month</th> <th>Number of patients</th> </tr> </thead> <tbody> <tr><td>Nov-20</td><td>27,000</td></tr> <tr><td>Dec-20</td><td>27,000</td></tr> <tr><td>Jan-21</td><td>27,000</td></tr> <tr><td>Feb-21</td><td>27,000</td></tr> <tr><td>Mar-21</td><td>27,000</td></tr> <tr><td>Apr-21</td><td>27,000</td></tr> <tr><td>May-21</td><td>27,000</td></tr> <tr><td>Jun-21</td><td>27,000</td></tr> <tr><td>Jul-21</td><td>27,000</td></tr> <tr><td>Aug-21</td><td>27,000</td></tr> <tr><td>Sep-21</td><td>27,000</td></tr> <tr><td>Oct-21</td><td>30,447</td></tr> <tr><td>Nov-21</td><td>30,946</td></tr> </tbody> </table>	Month	Number of patients	Nov-20	125,000	Dec-20	125,000	Jan-21	125,000	Feb-21	125,000	Mar-21	125,000	Apr-21	125,000	May-21	125,000	Jun-21	125,000	Jul-21	125,000	Aug-21	125,000	Sep-21	125,000	Oct-21	131,554	Nov-21	129,255	Month	Number of patients	Nov-20	27,000	Dec-20	27,000	Jan-21	27,000	Feb-21	27,000	Mar-21	27,000	Apr-21	27,000	May-21	27,000	Jun-21	27,000	Jul-21	27,000	Aug-21	27,000	Sep-21	27,000	Oct-21	30,447	Nov-21	30,946
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PATIENT EXPERIENCE

Description	Current Performance	Trend
<p>Patient experience</p> <p>1. Number of friends and family surveys completed</p> <p>2. Percentage of patients/ service users who would recommend and highly recommend</p>	<ul style="list-style-type: none"> Health Board Friends & Family patient satisfaction level in November 2021 was 94% and 3,194 surveys were completed. <ul style="list-style-type: none"> Singleton/ Neath Port Talbot Hospitals Service Group completed 1,602 surveys in November 2021, with a recommended score of 94%. Morrison Hospital completed 1,131 surveys in November 2021, with a recommended score of 93%. Primary & Community Care completed 360 surveys for November 2021, with a recommended score of 94%. The Mental Health Service Group completed 36 surveys for November 2021, with a recommended score of 97%. 	<p>1. Number of friends and family surveys completed</p> <p>2. % of patients/ service users who would recommend and highly recommend</p> <p>* Data not available for April 2021. Neath Port Talbot included in Singleton's figures from May 2021</p>

COMPLAINTS

Description	Current Performance	Trend												
<p>Patient concerns</p> <p><i>1. Number of formal complaints received</i></p> <p><i>2. 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></p>	<p>1. In September 2021, the Health Board received 115 formal complaints; this is equal to the number seen in August 2021.</p> <p>Since the COVID19 outbreak began in March 2020, the monthly number of complaints received has been significantly low. The numbers have gradually increased each month and numbers are now consistent with those seen pre-Covid.</p> <p>2. The overall Health Board rate for responding to concerns within 30 working days was 75% in September 2021, against the Welsh Government target of 75% and Health Board target of 80%.</p> <p>Below is a breakdown of performance against the 30-day response target:</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr style="background-color: #d9ead3;"> <th style="width: 70%;"></th> <th style="width: 30%;">30 day response rate</th> </tr> </thead> <tbody> <tr> <td>Neath Port Talbot Hospital</td> <td style="text-align: center;">50%</td> </tr> <tr> <td>Morrison Hospital</td> <td style="text-align: center;">84%</td> </tr> <tr> <td>Mental Health & Learning Disabilities</td> <td style="text-align: center;">92%</td> </tr> <tr> <td>Primary, Community and Therapies</td> <td style="text-align: center;">73%</td> </tr> <tr> <td>Singleton Hospital</td> <td style="text-align: center;">52%</td> </tr> </tbody> </table>		30 day response rate	Neath Port Talbot Hospital	50%	Morrison Hospital	84%	Mental Health & Learning Disabilities	92%	Primary, Community and Therapies	73%	Singleton Hospital	52%	<div style="margin-bottom: 20px;"> <p>1. Number of formal complaints received</p> <p style="font-size: small; text-align: center;"> ■ MH & LD ■ Morrison Hospital ■ NPT Hospital ■ PCCS ■ Singleton Hospital </p> </div> <div> <p>2. Response rate for concerns within 30 days</p> <p style="font-size: small; text-align: center;"> ■ Health Board Total — HB Profile </p> </div>
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HARM FROM WIDER SOCIETAL ACTIONS/LOCKDOWN

6.1 Vaccinations and Immunisations

Chart 1: % children who received 3 doses of the hexavalent '6 in 1' vaccine and MenB2 vaccine by age 1



Chart 2: % children who received PCV2 vaccine and Rotavirus vaccine by age 1

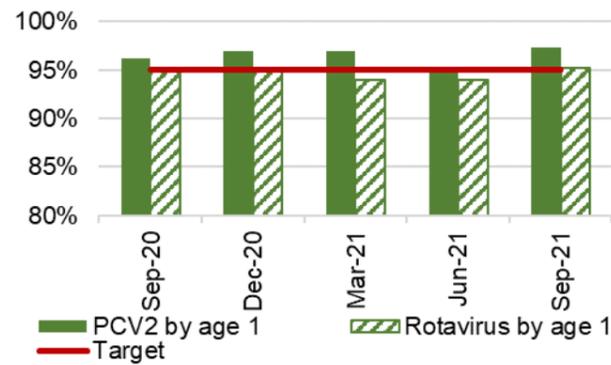


Chart 3: % children who received MMR1 vaccine and PCVf3 vaccine by age 2

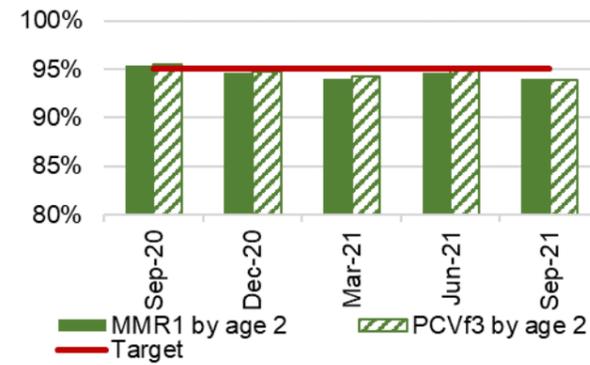


Chart 4: % children who received MenB4 vaccine and Hib/MenC vaccine by age 2

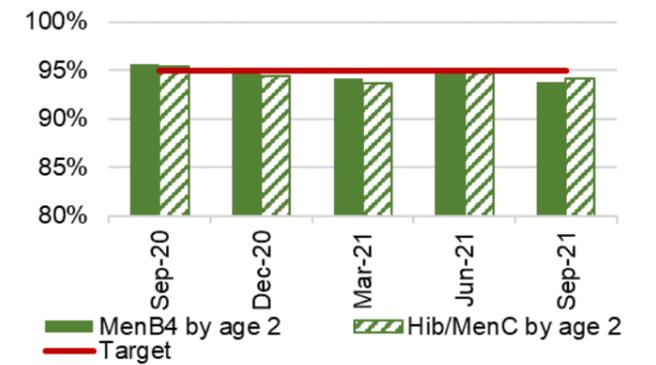


Chart 5: % children who are up to date in schedule by age 4

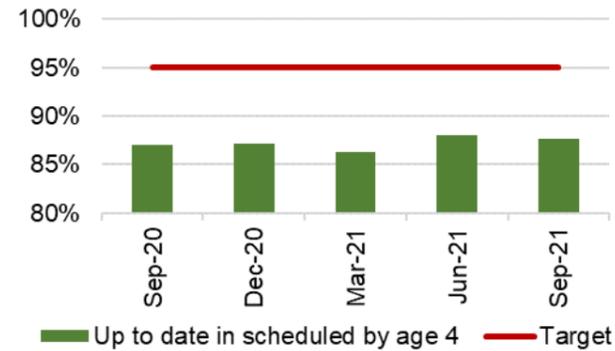


Chart 6: % children who received 2 doses of the MMR vaccine and 4 in 1 vaccine by age 5

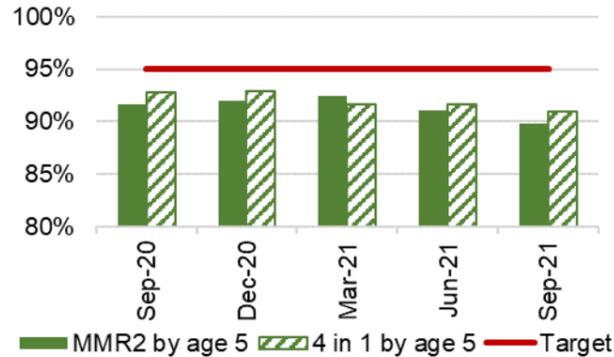


Chart 7: % children who received MMR vaccine and teenage booster by age 16

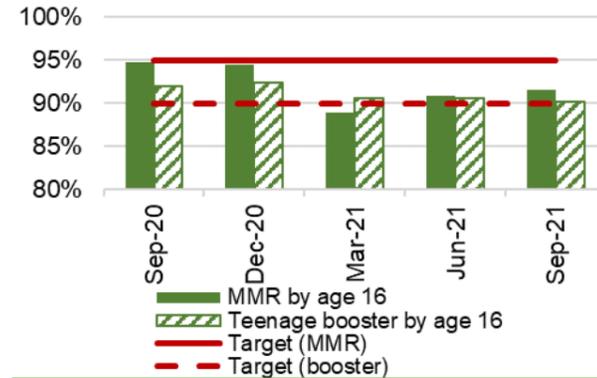


Chart 8: % children who received MenACWY vaccine by age 16

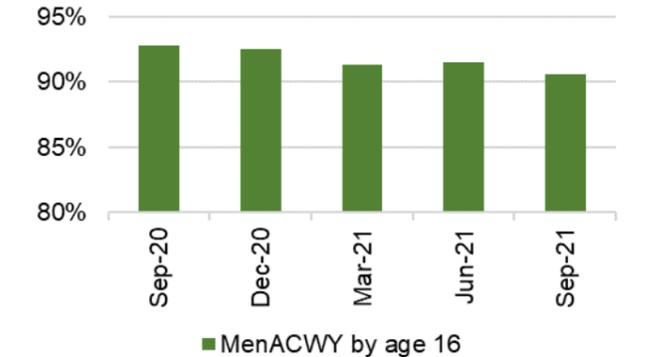
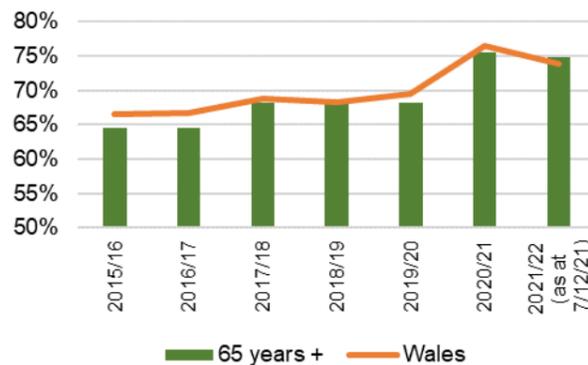
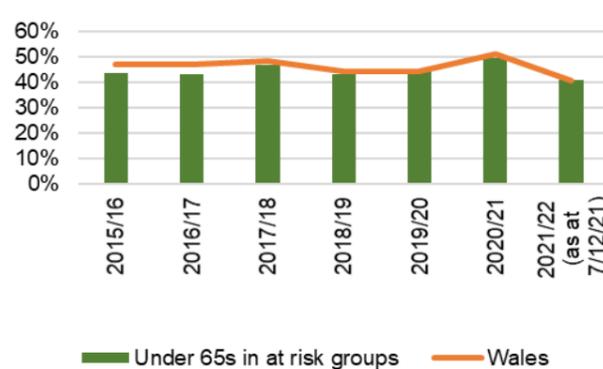


Chart 9: Influenza uptake for amongst 65 year olds and over



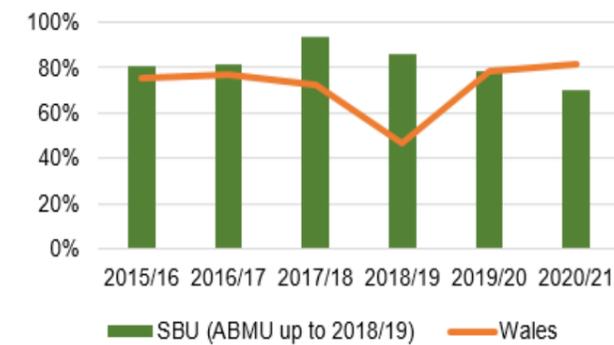
Data prior to April 2019 relates to Abertawe Bro Morgannwg University Health Board

Chart 10: Influenza uptake for amongst under 65s in risk groups



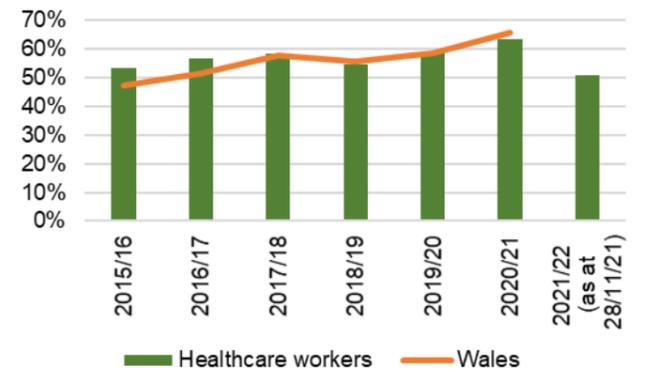
Data prior to April 2019 relates to Abertawe Bro Morgannwg University Health Board

Chart 11: Influenza uptake for amongst pregnant women



Data prior to April 2019 relates to Abertawe Bro Morgannwg University Health Board. 2020/21 data not available

Chart 12: Influenza uptake for amongst healthcare workers



Data prior to April 2019 relates to Abertawe Bro Morgannwg University Health Board. 2020/21 all-Wales data not yet available

HARM FROM WIDER SOCIETAL ACTIONS/LOCKDOWN

6.2 Mental Health Overview

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

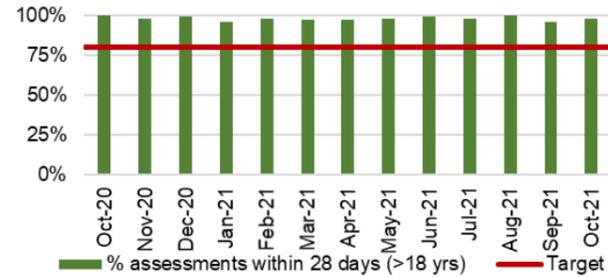


Chart 2: % of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS

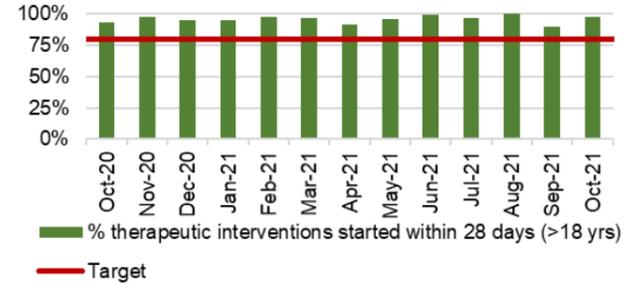


Chart 3: % of health board residents in receipt of secondary mental health services (all ages) who have a valid care and treatment plan

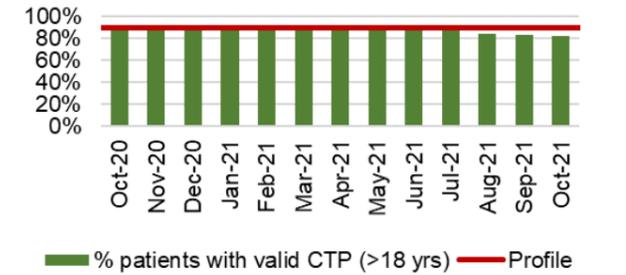


Chart 4: % of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health

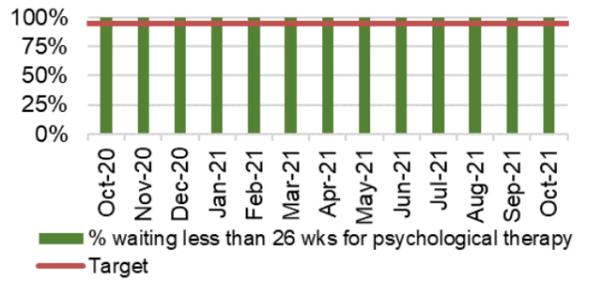


Chart 5: 95% of those admitted 0900-2100 will receive a gate-keeping assessment by the CRHTS prior to admission

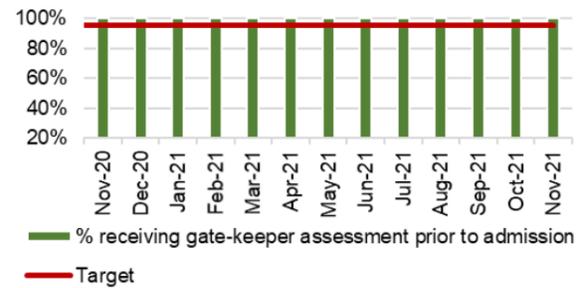


Chart 6: 100% of those admitted without a gate keeping assessment will receive a follow up assessment by CRHTS within 24hrs of admission

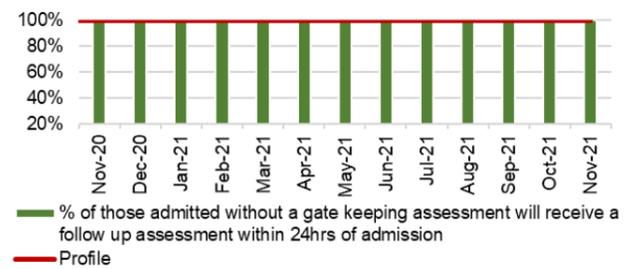


Chart 7: % of patients waiting under 14 weeks for Therapies



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

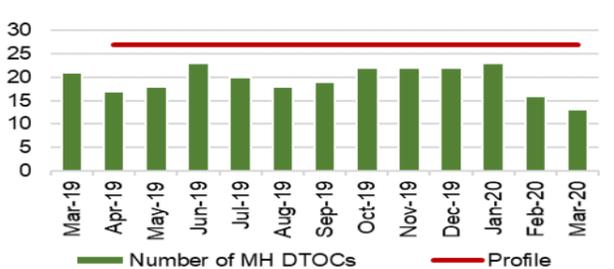


Chart 9: Number of patients detained under the Mental Health Act as a percentage of all admissions

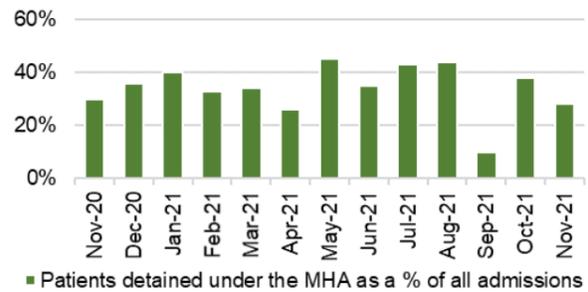


Chart 10: Number of patients subject to Deprivation of Liberty Safeguards (DOLS)

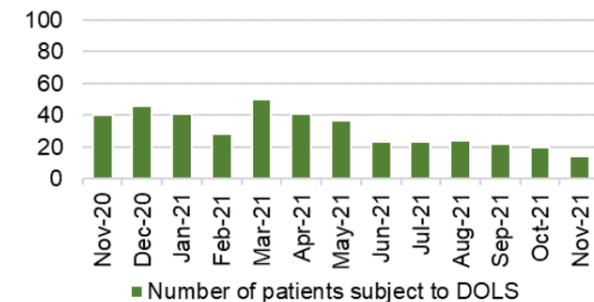


Chart 11: Number of Serious Incidents

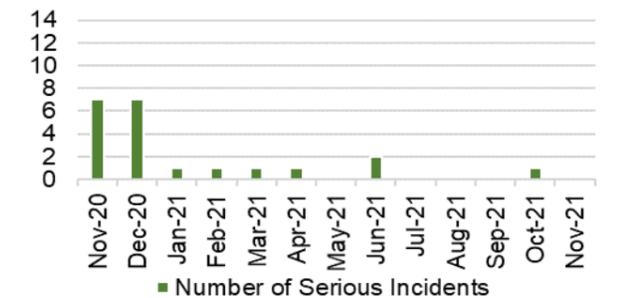
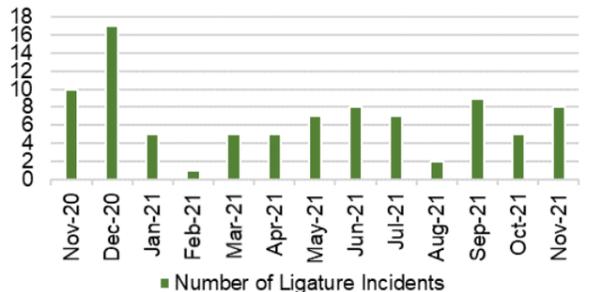


Chart 12: Number of ligature incidents



Child & Adolescent Mental Health Services (CAMHS)

Chart 13: Urgent assessments undertaken within 48 hours from receipt of referral

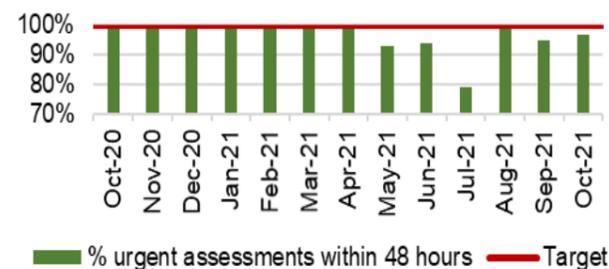


Chart 14: Neuro-developmental disorder assessment and intervention received within 26 weeks

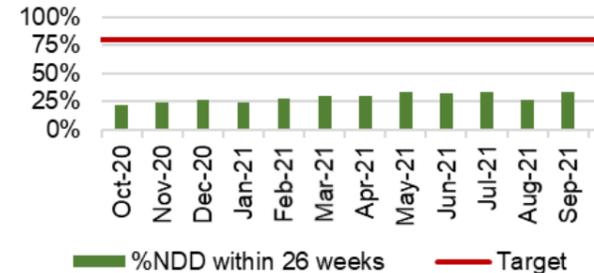


Chart 15: Assessment and intervention within 28 days

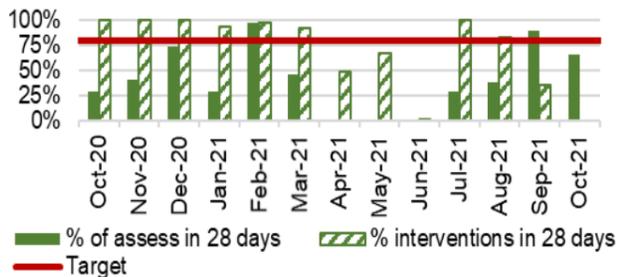
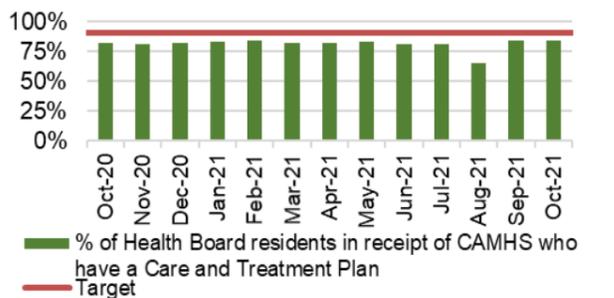


Chart 16: % of residents with a Care and Treatment Plan



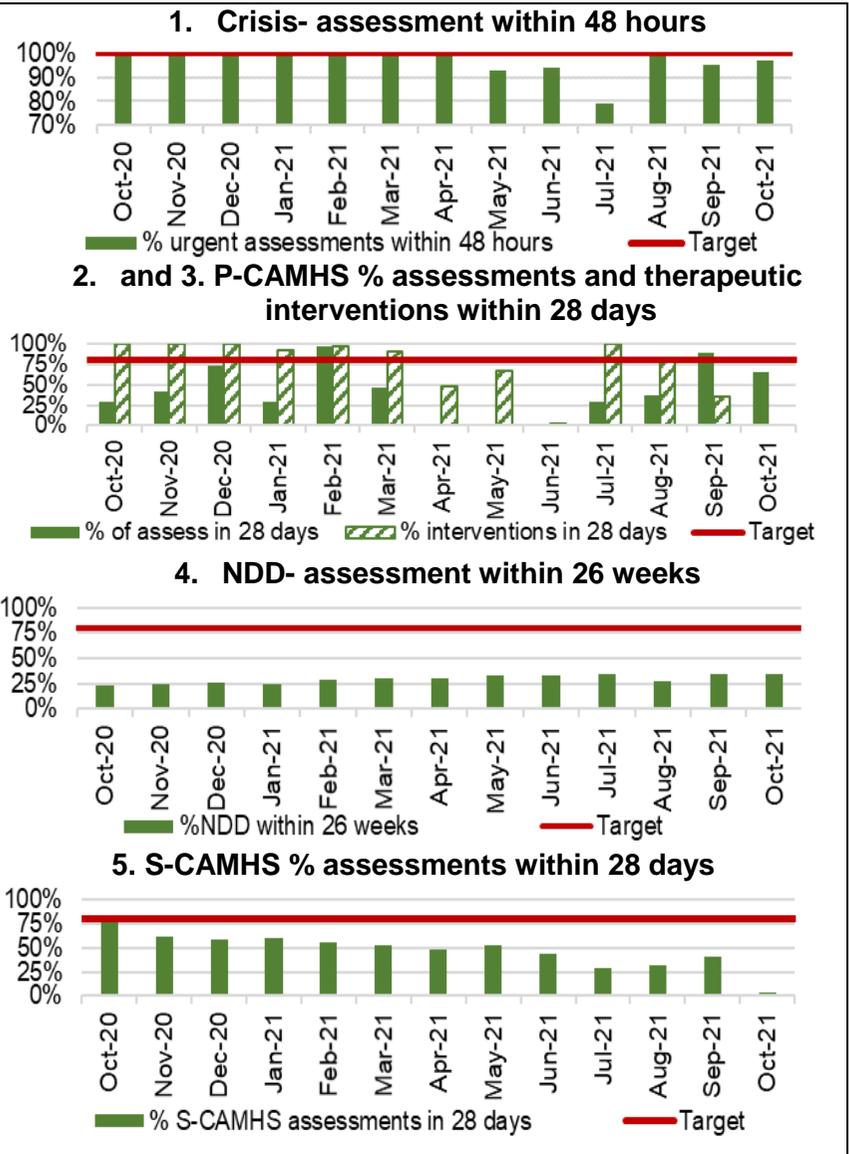
6.3 Updates on key measures

ADULT MENTAL HEALTH		
Description	Current Performance	Trend
<p>Adult Mental Health Measures:</p> <p>1. % of MH assessments undertaken within 28 days from the date of receipt of referral (18 years and over)</p>	<p>1. In October 2021, 97.8% of assessments were undertaken within 28 days of referral for patients 18 years and over.</p>	<p>1. % Mental Health assessments undertaken within 28 days from receipt of referral</p> <p>Legend: % assessments within 28 days (>18 yrs), Target</p>
<p>2. % of therapeutic interventions started within 28 days following an assessment by LPMHSS (18 years and over)</p>	<p>2. In October 2021, the percentage of therapeutic interventions started within 28 days following an assessment by the Local Primary Mental Health Support Service (LPMHSS) was 98%.</p>	<p>2. % Mental Health therapeutic interventions started within 28 days following LPMHSS assessment</p> <p>Legend: % therapeutic interventions started within 28 days (>18 yrs), Target</p>
<p>3. % of health board residents in receipt of secondary mental health services who have a valid Care and Treatment Plan (CTP) (18 years and over)</p>	<p>3. 83% of residents in receipt of secondary care mental health services had a valid Care and Treatment Plan in October 2021.</p>	<p>3. % residents with a valid Care and Treatment Plan (CTP)</p> <p>Legend: % patients with valid CTP (>18 yrs), Profile</p>
<p>4. % of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health</p>	<p>4. In October 2021, 100% of patients waited less than 26 weeks for psychological therapy. This was above the national target of 95%.</p>	<p>4. % waiting less than 26 weeks for Psychology Therapy</p> <p>Legend: % waiting less than 26 wks for psychological therapy, Target</p>

CHILD & ADOLESCENT MENTAL HEALTH (CAMHS)

Description	Current Performance	Trend
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1. Crisis - % Urgent Assessment by CAMHS undertaken within 48 Hours from receipt of referral	1. In October 2021, 97% of CAMHS patients received an assessment within 48 hours.
2. Primary CAMHS (P-CAMHS) - % Routine Assessment by CAMHS undertaken within 28 days from receipt of referral	2. 65% of routine assessments were undertaken within 28 days from referral in October 2021 against a target of 80%.
3. Primary CAMHS (P-CAMHS) - % Therapeutic interventions started within 28 days following assessment by LPMHSS	3. 0% of therapeutic interventions were started within 28 days following assessment by LPMHSS in October 2021.
4. NDD - % Neurodevelopmental Disorder patients receiving a Diagnostic Assessment within 26 weeks	4. 34% of NDD patients received a diagnostic assessment within 26 weeks in October 2021 against a target of 80%.
5. Specialist CAMHS (S-CAMHS) - % Routine Assessment by SCAMHS undertaken within 28 days from receipt of referral	5. 3% of routine assessments by SCAMHS were undertaken within 28 days in October 2021.



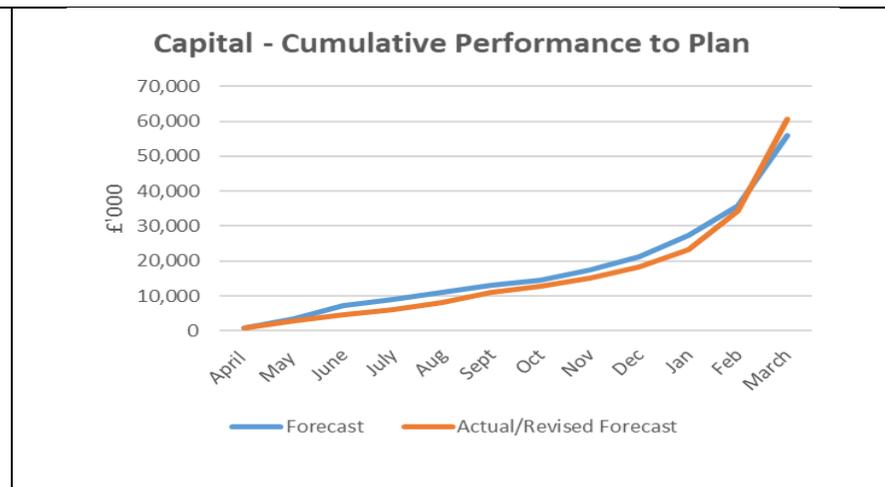
8. FINANCE UPDATES

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

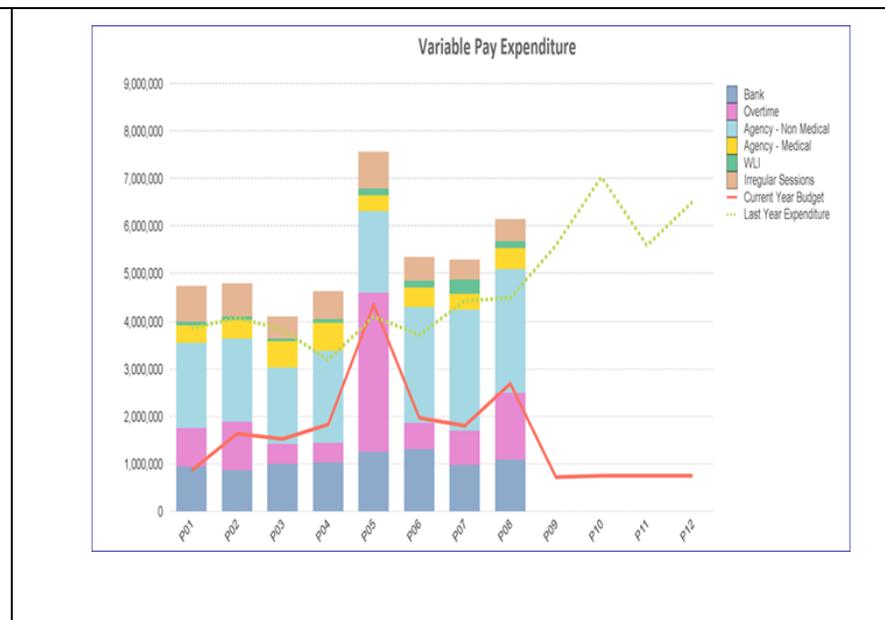
Description	Current Performance	Trend																																																				
<p>Revenue Financial Position – expenditure incurred against revenue resource limit</p>	<ul style="list-style-type: none"> The Health Board’s annual plan produces a forecast deficit for 2021/22 of £42.077m. This includes £17.672m impact on savings delivery from 2020/21. The £42.077m forecast deficit equates to an expected monthly overspend of £3.506m. The Health Board was advised by WG to anticipate non-recurrent funding to support the 2020/21 savings impact and this reduces the HB forecast to £24.405m, which equates to an expected monthly overspend of £2.034m. This was reflected in the May position. The Health Board has reported a cumulative overspend of £15.687m against a forecast position of £16.270m. 	<table border="1"> <caption>HEALTH BOARD FINANCIAL PERFORMANCE 2021/22</caption> <thead> <tr> <th>Month</th> <th>Operational Position (£'000)</th> <th>Forecast Position (£'000)</th> <th>Target Overspend (£'000)</th> </tr> </thead> <tbody> <tr><td>M1</td><td>3,541</td><td></td><td>3,506</td></tr> <tr><td>M2</td><td>564</td><td></td><td>3,506</td></tr> <tr><td>M3</td><td>1,976</td><td></td><td>2,034</td></tr> <tr><td>M4</td><td>1,973</td><td></td><td>2,034</td></tr> <tr><td>M5</td><td>2,131</td><td></td><td>2,034</td></tr> <tr><td>M6</td><td>1,821</td><td></td><td>2,034</td></tr> <tr><td>M7</td><td>1,875</td><td></td><td>2,034</td></tr> <tr><td>M8</td><td>1,805</td><td></td><td>2,034</td></tr> <tr><td>M9</td><td></td><td>1,829</td><td>2,034</td></tr> <tr><td>M10</td><td></td><td>2,284</td><td>2,034</td></tr> <tr><td>M11</td><td></td><td>2,316</td><td>2,034</td></tr> <tr><td>M12</td><td></td><td>2,290</td><td>2,034</td></tr> </tbody> </table>	Month	Operational Position (£'000)	Forecast Position (£'000)	Target Overspend (£'000)	M1	3,541		3,506	M2	564		3,506	M3	1,976		2,034	M4	1,973		2,034	M5	2,131		2,034	M6	1,821		2,034	M7	1,875		2,034	M8	1,805		2,034	M9		1,829	2,034	M10		2,284	2,034	M11		2,316	2,034	M12		2,290	2,034
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Description	Current Performance	Trend
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Capital Financial Position – expenditure incurred against capital resource limit	<ul style="list-style-type: none"> The forecast outturn capital position for 2021/22 is an overspend of £4.715m. Allocations are anticipated from Welsh Government which will balance this position. There are several All Wales Capital schemes reported to Welsh Government as high/medium risk. Any schemes where risks are reported are being closely monitored and discussed at the Capital Review progress meetings with Welsh Government. The reported forecast outturn position assumes that £0.552m of disposal income will be received.
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Workforce Spend – workforce expenditure profile	<ul style="list-style-type: none"> The pay budgets are underspent by £6.56m after 8 months. Funding has been allocated to : <ul style="list-style-type: none"> support additional costs associated with COVID, funding of the overtime holiday pay arrears which were paid in August and again in November. These payments are driving the increases in overtime payments (pink) in P05 and P08 on the variable pay expenditure graph. the application of funding for the 2021/22 pay award, which was implemented with arrears in September. Variable pay remains high, this reflects operational pressures, increasing sickness levels and recovery actions. The Health Board is incurring around £3m of additional pay costs per month related to COVID response and recovery, in addition to the TTP and vaccination costs.
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Description	Current Performance	Trend																																							
<p>PSPP – pay 95% of Non-NHS invoices within 30 days of receipt of goods or valid invoice</p>	<ul style="list-style-type: none"> The Health Board failed to deliver this target in 2020/21, with the target only being met on three of the twelve months. There was a very positive start to the financial year, with the target being met in the first six months, with a cumulative achievement of 96.07% for the first six months. However, October saw a significant reduction in compliance with the target and this has continued in November, with both months at 91.3%. This has resulted in a cumulative achievement of 95%. The key area of impact is nurse agency invoices where the volume of invoices has increased significantly and service pressures are impacting on the timeliness of the sign off of shifts to allow invoices to be processed. Additional resource has been secured to support the processing process, which is starting to show benefit, however it is likely to impact on PSPP performance both in month and cumulatively for a number of months. There are also failures in achievement related to receipting of goods and authorisation of invoices, these are being reviewed to identify specific areas of concern and any training or resource requirements. 	<p>Percentage of non-NHS invoices paid within 30 days of receipt of goods or valid invoice</p> <table border="1"> <caption>PSPP Target Data</caption> <thead> <tr> <th>Month</th> <th>PSPP In Month (%)</th> <th>PSPP Cumulative (%)</th> </tr> </thead> <tbody> <tr><td>M1</td><td>95.5</td><td>95.5</td></tr> <tr><td>M2</td><td>97.0</td><td>96.2</td></tr> <tr><td>M3</td><td>95.2</td><td>96.0</td></tr> <tr><td>M4</td><td>95.5</td><td>95.8</td></tr> <tr><td>M5</td><td>96.8</td><td>96.0</td></tr> <tr><td>M6</td><td>96.5</td><td>96.07</td></tr> <tr><td>M7</td><td>91.3</td><td>95.0</td></tr> <tr><td>M8</td><td>91.3</td><td>95.0</td></tr> <tr><td>M9</td><td></td><td></td></tr> <tr><td>M10</td><td></td><td></td></tr> <tr><td>M11</td><td></td><td></td></tr> <tr><td>M12</td><td></td><td></td></tr> </tbody> </table>	Month	PSPP In Month (%)	PSPP Cumulative (%)	M1	95.5	95.5	M2	97.0	96.2	M3	95.2	96.0	M4	95.5	95.8	M5	96.8	96.0	M6	96.5	96.07	M7	91.3	95.0	M8	91.3	95.0	M9			M10			M11			M12		
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APPENDIX 2: INTEGRATED PERFORMANCE DASHBOARD

Harm from Covid itself																									
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21		
COVID19 related measures	Number of new COVID19 cases	Local	Nov-21	8,247		Reduce					5,525	11,976	3,759	1,208	907	406	189	708	1,946	7,177	12,839	10,918	8,247		
	Number of staff referred for Antigen Testing	Local	Nov-21	14,969		Reduce					8,201	10,065	10,749	11,115	11,683	11,957	12,224	12,505	12,872	13,278	13,951	14,475	14,969		
	Number of staff awaiting results of COVID19 test	Local	Nov-21	0		Reduce					41 (as at 06/12/20)	99 (as at 05/01/21)	78 (as at 07/02/21)	69 (as at 06/03/21)	2 (as at 11/04/21)	0	0	0	0	0	0	0	0	0	
	Number of COVID19 related incidents	Local	Oct-21	0		Reduce					141	127	84	63	53	74	67	23	24	36	36	73			
	Number of COVID19 related serious incidents	Local	Oct-21	0		Reduce					1	0	0	0	0	0	0	0	0	0	0	0	0		
	Number of COVID19 related complaints	Local	Nov-21	14		Reduce					50	83	106	131	98	38	13	16	4	6	3	4	14		
	Number of COVID19 related risks	Local	Nov-21	0		Reduce					7	10	3	3	3	2	2	1	1	1	0	0	0		
	Number of staff self isolated (asymptomatic)	Local	Nov-21	65		Reduce					291	475	218	160	145	84	71	70	71	115	227	120	65		
	Number of staff self isolated (symptomatic)	Local	Nov-21	120		Reduce					294	394	316	156	108	87	71	50	67	114	204	180	120		
% sickness	Local	Nov-21	1.9%		Reduce					4.4%	6.5%	4.0%	2.4%	1.9%	1.9%	1.9%	0.9%	1.9%	1.9%	1.9%	1.9%	1.9%	1.9%		
Harm from overwhelmed NHS and social care system																									
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21		
Unscheduled Care	% of emergency responses to red calls arriving within (up to and including) 8 minutes	National	Nov-21	52%	65%	65%	✘	50% (Oct-21)	5th (Oct-21)		67%	54%	67%	70%	73%	72%	62%	67%	64%	59%	50%	44%	52%		
	Number of ambulance handovers over one hour	National	Nov-21	670	0			5,350 (Oct-21)	2nd (Oct-21)		500	510	195	219	231	337	477	547	616	726	642	648	670		
	Handover hours lost over 15 minutes	Local	Nov-21	2461							1,474	1,804	455	550	583	877	1,154	1,386	1,937	2,443	2,467	3,093	2,461		
	% 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	Nov-21	73%	95%			65% (Oct-21)	2nd (Oct-21)		75.4%	72.6%	77%	71%	77%	75%	73%	72%	75%	75%	73%	72%	73%		
	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	Nov-21	1055	0			9,484 (Oct-21)	4th (Oct-21)		626	776	570	534	457	631	684	880	1,014	1,060	1,250	1,276	1,055		
NOF	% of survival within 30 days of emergency admission for a hip fracture	National	Aug-21	86.7%	12 month ↑			85.9% (Aug-21)	4th (Aug-21)		67.9%	68.0%	65.3%	70.7%	59.6%	71.1%	72.1%	78.3%	84.8%	86.7%					
	% of patients (age 60 years and over) who presented with a hip fracture that received an orthogeriatrician assessment within 72 hours	National	Feb-21	87.0%	12 month ↑			66% (Sep-21)	2nd (Sep-21)		85.0%	86.0%	87.0%	88.0%	88.0%	90.0%	91.0%	91.0%	91.0%	88.0%	87.0%				
Stroke	Direct admission to Acute Stroke Unit (<4 hrs)	National	Nov-21	11%	54.0%			18.8% (Oct-21)	6th out of 6 organisations (Oct-21)		23.7%	7.1%	6.8%	18.2%	20.4%	20.3%	27.5%	28.3%	13.5%	15.4%	15.4%	0.0%	11.4%		
	CT Scan (<1 hrs) (local)	Local	Nov-21	41%							31.7%	22.7%	42.2%	30.6%	40.8%	29.7%	36.5%	29.6%	34.6%	48.7%	34.1%	16.7%	40.9%		
	Assessed by a Stroke Specialist Consultant Physician (< 24 hrs)	Local	Nov-21	96%							96.7%	95.5%	95.6%	97.2%	100.0%	96.9%	98.1%	100.0%	100.0%	92.3%	90.2%	100.0%	95.5%		
	Thrombolysis door to needle <= 45 mins	Local	Nov-21	9%							28.6%	0.0%	12.5%	0.0%	55.6%	25.0%	0.0%	33.3%	28.6%	20.0%	0.0%	0.0%	9.1%		
DTCs	% compliance against the therapy target of an average of 16.1 minutes if speech and language therapist input per stroke patient	National	Nov-21	54%	12 month ↑						65.1%	63.4%	65.7%	61.2%	55.9%	47.1%	39.7%	41.9%	45.4%	58.9%	58.6%	64.6%	54.4%		
	Number of mental health HB DTCs	National	Mar-20	13	12 month ↓	27	✔				DTC reporting temporarily suspended														
	Number of non-mental health HB DTCs	National	Mar-20	60	12 month ↓	50	✘				DTC reporting temporarily suspended														

Harm from overwhelmed NHS and social care system																									
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/Local Profile	Profile Status	Welsh Average/Total	SBU's all-Wales rank	Performance Trend	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21		
infection control	Cumulative cases of E.coli bacteraemias per 100k pop	National	Nov-21	80.5	<67		✘	72.49 (Oct-21)	4th (Oct-21)		63.8	60.7	60.0	59.8	61.9	99.8	88.9	89.4	89.4	90.5	86.4	82.2	80.5		
	Number of E.Coli bacteraemia cases (Hospital)		Nov-21	5								5	5	6	6	9	12	11	5	8	9	9	7	5	
	Number of E.Coli bacteraemia cases (Community)		Nov-21	17									11	7	12	11	19	20	15	23	15	25	12	12	17
	Total number of E.Coli bacteraemia cases		Nov-21	22									16	12	18	17	28	32	26	28	23	34	21	19	22
	Cumulative cases of S.aureus bacteraemias per 100k pop		Nov-21	37.2	<20		✘	26.72 (Oct-21)	6th (Oct-21)		32.7	31.7	31.6	31.4	31.6	40.5	44.5	37.0	36.0	35.5	38.3	40.6	37.2		
	Number of S.aureus bacteraemias cases (Hospital)		Nov-21	1									7	6	5	7	4	4	5	5	7	8	13	11	1
	Number of S.aureus bacteraemias cases (Community)		Nov-21	3									6	3	4	2	7	9	10	2	4	4	4	7	3
	Total number of S.aureus bacteraemias cases		Nov-21	4									13	9	9	9	11	13	15	7	11	12	17	18	4
	Cumulative cases of C.difficile per 100k pop		Nov-21	53.3	<25		✘	37.49 (Oct-21)	6th (Oct-21)		48.4	45.7	42.0	41.5	41.1	62.3	49.1	46.2	52.0	55.0	53.2	52.9	53.3		
	Number of C.difficile cases (Hospital)		Nov-21	10									8	6	3	9	7	15	7	6	16	20	9	10	10
	Number of C.difficile cases (Community)		Nov-21	10									2	3	0	2	5	5	6	7	2	5	5	10	
	Total number of C.difficile cases		Nov-21	20									10	9	3	11	12	20	12	12	23	22	14	15	20
	Cumulative cases of Klebsiella per 100k pop		Nov-21	26.5									23.4	24.9	26.4	25.8	26.2	28.1	21.5	26.7	0.0	22.6	24.5	27.1	26.5
	Number of Klebsiella cases (Hospital)		Nov-21	2									7	8	8	4	1	4	3	5	2	4	8	8	2
	Number of Klebsiella cases (Community)		Nov-21	5									4	4	5	2	9	5	2	7	1	4	3	5	5
	Total number of Klebsiella cases		Nov-21	7						64 (Oct-21)	6th (Oct-21)		11	12	13	6	10	9	5	12	3	8	11	13	7
	Cumulative cases of Aeruginosa per 100k pop		Nov-21	5.4									5.8	5.5	5.2	5.1	4.9	9.4	6.1	6.2	0.0	5.5	5.6	4.8	5.4
	Number of Aeruginosa cases (Hospital)		Nov-21	3									1	1	0	0	0	2	0	1	0	1	2	0	3
	Number of Aeruginosa cases (Community)		Nov-21	0									1	0	1	1	1	1	1	1	1	1	0	0	0
	Total number of Aeruginosa cases		Nov-21	2						22 (Oct-21)	1st (Oct-21)		2	1	1	1	1	3	1	2	1	2	2	0	3
Hand Hygiene Audits- compliance with WHO 5 moments	Local	Nov-21	92.2%	95%	95%	✘					97%	96%	95%	93%	97%	96%	98%	96%	95%	95%	96%	97%	92%		
Serious Incidents and risks	Of the serious incidents due for assurance, the % which were assured within the agreed timescales	National	Nov-21	0.0%	90%	80%	✘				0%	4%	0%	10%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	
	Number of new Never Events	National	Nov-21	1	0	0	✘					1	0	0	0	0	0	0	1	0	0	0	0	1	
	Number of risks with a score greater than 20	Local	Nov-21	121		12 month ↓	✓					138	146	148	140	142	132	127	113	104	105	114	118	121	
	Number of risks with a score greater than 16	Local	Nov-21	238		12 month ↓	✘					224	238	242	233	230	217	224	219	221	220	240	235	238	
Pressure Ulcers	Number of pressure ulcers acquired in hospital	Local	Oct-21	42		12 month ↓	✘				42	61	51	48	36	59	53	53	58	53	65	42			
	Number of pressure ulcers developed in the community		Oct-21	32		12 month ↓	✘					29	26	25	24	26	31	20	21	33	34	39	32		
	Total number of pressure ulcers		Oct-21	74		12 month ↓	✘					71	87	76	72	62	90	73	74	91	87	104	74		
	Number of grade 3+ pressure ulcers acquired in hospital		Oct-21	1		12 month ↓	✓						4	3	2	3	1	4	1	2	3	2	1	1	
	Number of grade 3+ pressure ulcers acquired in community		Oct-21	7		12 month ↓	✘						5	7	5	4	2	10	2	4	2	8	6	7	
	Total number of grade 3+ pressure ulcers		Oct-21	8		12 month ↓	✓						9	10	7	7	3	14	3	6	5	10	7	8	
Inpatient Falls	Number of Inpatient Falls	Local	Nov-21	213		12 month ↓	✘				247	247	203	177	171	176	228	174	193	198	207	240	213		
Mortality	% of universal mortality reviews (UMRs) undertaken within 28 days of a death	Local	Oct-21	97%	95%	95%	✓				98.1%	99.0%	100.0%	100.0%	97.6%	99.3%	98.0%	98.6%	97.6%	93.0%	98.0%	96.8%			
	Stage 2 mortality reviews required	Local	Oct-21	16								17	12	19	6	11	5	18	12	7	17	10	16		
	% stage 2 mortality reviews completed	Local	Jul-21	0.00%		100%	✘					35.7%	75.0%	36.8%					25.0%	42.9%					
NEWS	Crude hospital mortality rate (74 years of age or less)	National	Oct-21	1.03%	12 month ↓			1.35% (Sep-21)	4th (Sep-21)		1.01%	1.08%	1.14%	1.17%	1.17%	1.04%	1.04%	1.01%	1.03%	1.02%	1.03%	1.03%			
	% patients with completed NEWS scores & appropriate responses actioned	Local	Nov-21	92%		98%	✘					94.6%	98.5%	95.0%	96.3%	93.5%	97.4%	98.9%	95.0%	89.7%	91.7%	91.6%	93.8%	92.2%	
Coding	% of episodes clinically coded within 1 month of discharge	Local	Oct-21	92%	95%	95%	✘				93%	93%	95%	96%	96%	96%	96%	89%	90%	94%	90%	92%			
	% of completed discharge summaries (total signed and sent)	Local	Nov-21	63%		100%	✘					66%	59%	67%	63%	64%	63%	67%	69%	62%	68%	61%	63%		
Workforce	Agency spend as a % of the total pay bill	National	May-21	3.30%	12 month ↓			4.1% (May-21)	5th out of 10 organisations (May-20)		3.8%	5.4%	6.2%	4.9%	5.7%	4.4%	3.3%								
	Overall staff engagement score – scale score method	National	2020	75%	Improvement			75% (2020)	6th out of 10 organisations (2020)		2020 = 75%														
	% of headcount by organisation who have had a PADR/medical appraisal in the previous 12 months (excluding doctors and dentists in training)	National	Nov-21	55%	85%	85%	✘	60.0% (May-21)	8th out of 10 organisations (May-21)		56%	54%	52%	51%	53%	57%	60%	65%	60%	60%	58%	56%	55%		
	% compliance for all completed Level 1 competency with the Core Skills and Training Framework	National	Nov-21	80%	85%	85%	✘	78.8% (May-21)	6th out of 10 organisations (May-21)		80%	80%	80%	80%	80%	80%	80%	81%	81%	81%	81%	80%	80%	80%	
	% workforce sickness absence (12 month rolling)	National	Oct-21	7.44%	12 month ↓			5.68% (May-21)	9th out of 10 organisations (May-21)		7.23%	7.48%	7.57%	7.56%	7.44%	7.12%	6.93%	6.91%	6.99%	7.11%	7.29%	7.44%			
% staff who would be happy with the standards of care provided by their organisation if a friend or relative needed treatment	National	2020	67.1%	Improvement			67.8% (2020)	7th out of 10 organisations (2020)		2020 = 67.1%															

Harm from reduction in non-Covid activity																							
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/Local Profile	Profile Status	Welsh Average/Total	SBU's all-Wales rank	Performance Trend	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21
Primary Care	% adult dental patients in the health board population re-attending NHS primary dental care between 6 and 9 months	National	Oct-21	6.6%	4 quarter ↓			21.8% (Q3 20/21)	1st (Q3 20/21)		17.2%	12.0%	5.9%	5.3%	6.6%	7.8%	9.0%	10.2%	11.4%	11.0%	11.5%	11.4%	
Cancer	% of patients starting definitive treatment within 62 days from point of suspicion (without adjustments)	National	Nov-21 (Draft)	47.0%	12 month ↑			59.0% (Sep-21)	2nd out of 6 organisations (Sep-21)		55.4%	61.0%	67.9%	56.4%	71.6%	65.7%	65.4%	66.8%	55.0%	58.4%	62.2%	61.9%	47.0%
Radiotherapy waiting times	Scheduled (21 Day Target)	Local	Nov-21	30%	80%		✗				58%	71%	45%	35%	42%	37%	40%	31%	60%	57%	58%	37%	30%
	Scheduled (28 Day Target)	Local	Nov-21	61%	100%		✗				85%	88%	82%	80%	85%	77%	87%	70%	84%	91%	89%	84%	61%
	Urgent SC (7 Day Target)	Local	Nov-21	60%	80%		✗				31%	50%	50%	23%	41%	38%	50%	45%	46%	55%	22%	30%	60%
	Urgent SC (14 Day Target)	Local	Nov-21	100%	100%		✓				100%	85%	94%	91%	90%	83%	86%	87%	77%	95%	76%	90%	100%
	Emergency (within 1 day)	Local	Nov-21	100%	80%		✓				100%	100%	100%	100%	100%	91%	100%	100%	100%	100%	100%	100%	100%
	Emergency (within 2 days)	Local	Nov-21	100%	100%		✓				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
	Elective Delay (21 Day Target)	Local	Nov-21	79%	80%		✗				56%	71%	69%	61%	86%	82%	81%	91%	90%	94%	81%	89%	79%
	Elective Delay (28 Day Target)	Local	Nov-21	86%	100%		✗				73%	88%	89%	75%	93%	92%	84%	95%	97%	97%	97%	94%	86%
Planned Care	Number of patients waiting > 8 weeks for a specified diagnostics	National	Nov-21	6008	0			48,408 (Sep-21)	2nd (Sep-21)		6,610	6,579	6,239	5,087	4,554	4,804	4,842	5,230	5,425	5,523	5,732	5,939	6,008
	Number of patients waiting > 14 weeks for a specified therapy	National	Nov-21	629	0			5,798 (Sep-21)	2nd (Sep-21)		817	708	584	491	369	201	166	171	151	186	320	414	629
	% of patients waiting < 26 weeks for treatment	National	Nov-21	47%	95%			54.9% (Sep-21)	6th (Sep-21)		47.6%	48.0%	47.0%	47.9%	48.8%	49.1%	49.1%	50.7%	47.8%	48.3%	48.1%	47.4%	46.8%
	Number of patients waiting > 26 weeks for outpatient appointment	Local	Nov-21	24752	0						21,005	21,179	21,208	21,225	21,750	22,752	23,700	23,279	23,225	23,444	23,997	24,483	24,752
	Number of patients waiting > 36 weeks for treatment	National	Nov-21	37064	0			240,306 (Sep-21)	3rd (Sep-21)		35,387	35,126	33,991	32,719	32,874	33,395	34,447	35,040	35,583	35,999	35,711	36,420	37,064
	The number of patients waiting for a follow-up outpatient appointment	National	Nov-21	129,255	HB target TBC			779,662 (Oct-21)	5th (Oct-21)		120,874	119,963	119,999	120,882	121,403	122,303	123,088	127,444	130,208	127,391	130,963	131,554	129,255
	The number of patients waiting for a follow-up outpatients appointment who are delayed over 100%	National	Nov-21	30,946	HB target TBC			199,698 (Oct-21)	5th (Oct-21)		27,156	27,641	28,419	28,862	29,316	29,334	30,062	30,550	31,316	29,770	32,574	33,121	30,946
	% of R1 ophthalmology patient pathways waiting within target date or within 25% beyond target date for an outpatient appointment	National	Oct-21	49%	95%			63.2% (Oct-21)	6th (Oct-21)		48.4%	47.3%	46.7%	47.4%	47.7%	47.2%	46.7%	46.7%	46.3%	46.1%	47.9%	48.6%	
DNAs	% of patients who did not attend a new outpatient appointment	Local	Nov-21	7.0%	12 month ↓						6.6%	7.7%	7.1%	6.2%	5.6%	5.3%	5.7%	6.5%	6.5%	6.4%	7.2%	7.7%	7.0%
	% of patients who did not attend a follow-up outpatient appointment	Local	Nov-21	7.0%	12 month ↓						7.2%	8.2%	7.1%	6.2%	6.7%	6.1%	6.9%	5.5%	7.5%	7.5%	7.6%	7.8%	7.0%
Theatre Efficiencies	Theatre Utilisation rates	Local	Nov-21	67%		90%	✗				74%	59%	65%	73%	75%	80%	78%	77%	72%	69%	72%	66%	67%
	% of theatre sessions starting late	Local	Nov-21	43%		<25%	✗				39%	45%	40%	42%	40%	38%	43%	43%	44%	44%	42%	46%	43%
	% of theatre sessions finishing early	Local	Nov-21	48%		<20%	✗				50%	47%	44%	44%	48%	41%	45%	43%	48%	46%	46%	50%	48%
Postponed operations	Number of procedures postponed either on the day or the day before for specified non-clinical reasons	Local	Jan-21	1,200							1,677	1,509	1,200										
Treatment Fund	All new medicines must be made available no later than 2 months after NICE and AWMMSG appraisals	National	Q1 21/22	99.0%	100%	100%	✗	98.6% (Q1 21/22)	3rd out of 6 organisations (Q1 21/22)			98.9%			98.9%			99.0%					
Prescribing	Total antibacterial items per 1,000 STAR-PUs	National	Q2 21/22	249.7	4 quarter ↓			227.5 (Q2 21/22)	6th (Q2 21/22)			258.8			236.2			249.7					
	Patients aged 65 years or over prescribed an antipsychotic	National	Q1 21/22	1,641	Quarter on quarter ↓			10,221 (Q1 21/22)	5th (Q1 21/22)			1,482			1,442			1,641					
	Opioid average daily quantities per 1,000 patients	National	Q2 20/21	4,378	4 quarter ↓			4462.6 (Q1 21/22)	3rd (Q1 21/22)			4,567.7			4360.2			4,378.2					
	Biosimilar medicines prescribed as % of total 'reference' product plus biosimilar	National	Q1 21/22	79.9%	Quarter on quarter ↑			87.7% (Q1 21/22)	5th (Q1 21/22)			79.7%			80.10%			79.9%					
	Number of friends and family surveys completed	Local	Nov-21	3,194		12 month ↑	✓					787	584	678	798	1,050		4,590	3,297	1,912	2,075	2,025	2,733
Patient experience	% of who would recommend and highly recommend	Local	Nov-21	94%		90%	✓				84%	77%	79%	85%	87%		96%	97%	92%	92%	92%	92%	94%
	% of all-Wales surveys scoring 9 out of 10 on overall satisfaction	Local	Nov-21	93%		90%	✓				85%	65%	81%	94%	93%		92%	96%	95%	92%	96%	93%	93%
	Number of new formal complaints received	Local	Sep-21	115		12 month trend ↓	✗				103	83	78	94	117	100	115	159	139	115	115		
Complaints	% concerns that had final reply (Reg 24)/interim reply (Reg 26) within 30 working days of concern received	National	Sep-21	75%	75%	80%	✓	71.9% (Q3 20/21)	2nd (Q3 20/21)		82%	80%	71%	80%	81%	78%	78%	68%	69%	83%	75%		
	% of acknowledgements sent within 2 working days	Local	Sep-21	100%		100%	✓				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		

Harm from wider societal actions/lockdown																													
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/Local Profile	Profile Status	Welsh Average/Total	SBU's all-Wales rank	Performance Trend	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21						
Early years measures	% of babies who are exclusively breastfed at 10 days old	National	2020/21	35.6%	Annual ↑			36.8% (2020/21)	5th (2020/21)		2020/21 = 35.6%																		
	% children who received 3 doses of the hexavalent '6 in 1' vaccine by age 1	National	Q1 21/22	96.2%	95%			95.3% (Q1 21/22)	3rd (Q1 21/22)			96.7%			95.4%			95.7%			96.2%								
	% of children who received 2 doses of the MMR vaccine by age 5	National	Q1 21/22	89.8%	95%			91.7% (Q1 21/22)	4th (Q1 21/22)			92.0%			92.4%				91.1%			89.8%							
Alcohol	European age standardised rate of alcohol attributed hospital admissions for individuals resident in Wales	National	Q4 20/21	322.1	4 quarter ↓			356.6 (Q4 20/21)	2nd (Q4 20/21)			308.8			322.1														
	% of people who have been referred to health board services who have completed treatment for alcohol abuse	National	Q2 21/22	73.7%	4 quarter ↑			70.3% (Q2 21/22)	4th (Q2 21/22)			39.5%			45.5%				31.8%			73.7%							
Influenza	% uptake of influenza among 65 year olds and over	National	Nov-21	74.8%	75%			76.5% (Mar-21)	4th (Mar-21)		72.4%	74.8%	75.2%	75.4%	75.5%	Data collection restarts October 2021							58.7%	74.8%					
	% uptake of influenza among under 65s in risk groups	National	Nov-21	40.8%	55%			51.07% (Mar-21)	5th (Mar-21)		42.8%	47.2%	48.7%	49.4%	49.4%								26.0%	40.8%					
	% uptake of influenza among pregnant women	National	2020/21	69.8%	75%			78.5% (2019/20)	5th out of 10 organisations (2019/20)		2020/21 = 69.8%												Data not available						
	% uptake of influenza among children 2 to 3 years old	Local	Nov-21	37.7%	50%			56.3% (Mar-21)	5th (Mar-21)		48.8%	52.5%	53.2%	53.4%	53.4%								22.0%	37.7%					
	% uptake of influenza among healthcare workers	National	Nov-21	50.8%	60%			58.7% (2019/20)	7th out of 10 organisations (2019/20)		62.9%	63.0%	63.4%	63.4%	63.4%								48.6%	50.8%					
CAMHS	% of urgent assessments undertaken within 48 hours from receipt of referral (Crisis)	Local	Oct-21	97%		100%	✘				100%	100%	100%	100%	100%	100%	93%	94%	79%	100%	95%	97%							
	% Patients with Neurodevelopmental Disorders (NDD) receiving a Diagnostic Assessment within 26 weeks	National	Oct-21	34%	80%	80%	✘	35.4 (Sep-21)	6th (Sep-21)		24%	26%	24%	28%	30%	30%	33%	32%	34%	27%	34%	34%							
	% Patients waiting less than 28 days for a first outpatient appointment for CAMHS	National	Oct-21	40%	80%	80%	✘	27.9% (Oct-21)	4th (Oct-21)		88%	61%	53%	66%	63%	60%	61%	58%	41%	48%	40%	40%							
	P-CAMHS - % of Routine Assessment by CAMHS undertaken within 28 days from receipt of referral	National	Oct-21	65%	80%	80%	✘	44.2% (Sep-21)	2nd (Sep-21)		41%	73%	29%	97%	46%	0%	0%	0%	29%	37%	89%	65%							
	P-CAMHS - % of therapeutic interventions started within 28 days following assessment by LPMHSS	National	Oct-21	0%	80%	80%	✘	45.7% (Sep-21)	4th (Sep-21)		100%	100%	93%	97%	91%	49%	67%	1%	100%	82%	35%	0%							
	S-CAMHS - % of Routine Assessment by SCAMHS undertaken within 28 days from receipt of referral	Local	Oct-21	3%	80%	80%	✘				62%	58%	60%	56%	53%	48%	53%	44%	29%	32%	41%	3%							
	% residents in receipt of CAMHS to have a valid Care and Treatment Plan (CTP)	National	Oct-21	84%	90%	90%	✘	89.3% (Sep-21)	5th (Sep-21)		81%	82%	83%	84%	82%	82%	83%	81%	81%	65%	84%	84%							
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	Oct-21	98%	80%	80%	✓	65.4% (Sep-21)	1st (Sep-21)		98%	99%	96%	98%	97%	97%	98%	99%	98%	100%	96%	98%							
	% of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS (over 18 years of age)	National	Oct-21	98%	80%	80%	✓	75.0% (Sep-21)	4th (Sep-21)		98%	95%	95%	98%	97%	92%	96%	99%	97%	100%	90%	98%							
	% patients waiting < 26 weeks to start a psychological therapy in Specialist Adult Mental Health	National	Oct-21	100%	95%	95%	✓	72.2% (Sep-21)	1st (Sep-21)		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%							
	% residents in receipt of secondary MH services (all ages) who have a valid care and treatment plan (CTP)	National	Oct-21	83%	90%	90%	✘	85.8% (Sep-21)	6th (Sep-21)		91%	89%	91%	91%	91%	91%	92%	88%	88%	84%	84%	83%							
Self harm	Rate of hospital admissions with any mention of intentional self-harm of children and young people (aged 10-24 years)	National	2020/21	2.96	Annual ↓			3.54 (2020/21)	3rd (2020/21)		2020/21 = 2.96																		
Dementia	% of people with dementia in Wales age 65 years or over who are diagnosed (registered on a GP QOF register)	National	2019/20	56.3%	Annual ↑			53.1% (2019/20)	2nd (2019/20)																				