



**GIG
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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	23rd November 2021	Agenda Item	3.1
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 (October 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 increase in October 2021, with 10,918 new cases being reported</p>		

	<p>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.</p> <p>Unscheduled Care- Demand for emergency department care within Swansea Bay University (SBU) Health Board has steadily increased since January 2021. Attendances have decreased slightly in October 2021 to 10,737 from 11,157 in September 2021. The Health Board's performance against the 4-hour measure deteriorated from 73.09% in September 2021 to 71.96% in October 2021 and the number of patients waiting over 12 hours in Accident and Emergency (A&E) continues to increase.</p> <p>Planned Care- October 2021 saw a 2% in-month increase in the number of patients waiting over 26 weeks for a new outpatient appointment. In October 2021, there were 36,420 patients waiting over 36 weeks which is a 2% in-month decrease from September 2021. The total waiting list size continues to increase, however November is showing a projected total waiting list reduction. There has been a reduction in the number of referrals received by secondary care in October 2021. Therapy waiting times have increased in October 2021, however some therapy services have maintained a nil breach position (i.e. Occupational Therapy).</p> <p>Cancer- September 2021 saw 62% performance against the Single Cancer Pathway measure of patients receiving definitive treatment within 62 days. The backlog of patients waiting over 63 days has decreased in October 2021, with a further reduction projected for November 2021. October's figures are in the process of being validated at the time of writing this report.</p> <p>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%.</p> <p>Child and Adolescent Mental Health Services (CAMHS)- Access times for crisis performance has deteriorated to 95% in September 2021 against the 100% target. Neurodevelopmental Disorders (NDD) access times within 26 weeks continues to be a challenge, with performance decreasing in September 2021 to 34% against a target of 80%.</p>			
Specific Action Required	Information	Discussion	Assurance	Approval
	✓		✓	
Recommendations	<p>Members are asked to:</p> <ul style="list-style-type: none"> • NOTE the Health Board performance against key measures and targets. 			

	<ul style="list-style-type: none"> • 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 to commence 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
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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 to commence 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

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 October 2021. This is a routine monthly report.
Appendices	Appendix 1: Integrated Performance Report



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Appendix 1- Integrated Performance Report November 2021



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1. OVERVIEW

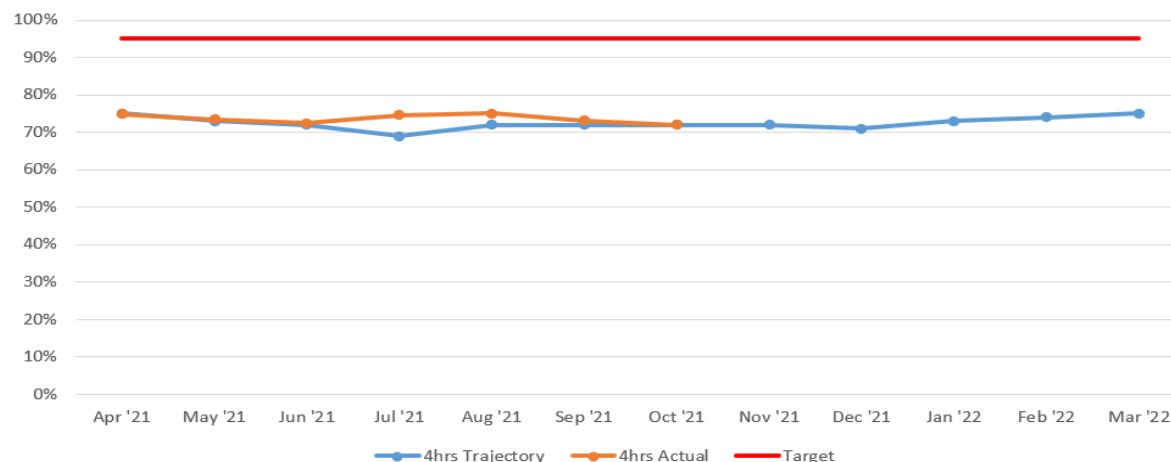
The following summarises the key successes, along with the priorities, risks and threats to achievement of the quality, access and workforce standards.

Successes	Concerns
<p>566,926 Total vaccinations undertaken (14.11.21)</p> <p>↓ Reduction in A%E attendances</p> <p>100% MH&LD patients waited less than 26 weeks for psychological therapy (performing above the nation 95% target)</p> <p>↑ Increase in the NDD waiting list performance</p> <p>0 Never Events reported</p> <p>12.5%(↓) Reduction in number of medically fit patients</p> <p>↓ Number of elective admission</p> <p>0.9%↓ Staff sickness as a result of Covid-19.</p>	<p>↑ Significant increase in no. elective procedures cancelled due to lack of beds</p> <p>95% ↓ CAMHS patients received assessment within 48 hours</p> <p>414 (22.7%↑) Patients on Therapies W/L, waiting > 14 weeks</p> <p>8.41% (0.82%↑) In-month increase in staff sickness numbers</p> <p>24,483 (2%↑) Increase in patients waiting > 26 weeks</p> <p>↑ Increase in total size of waiting list</p> <p>131,554 (0.45%↑) Patients waiting for a follow-up outpatient appointment</p> <p>229(16.6% ↑) SLT 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

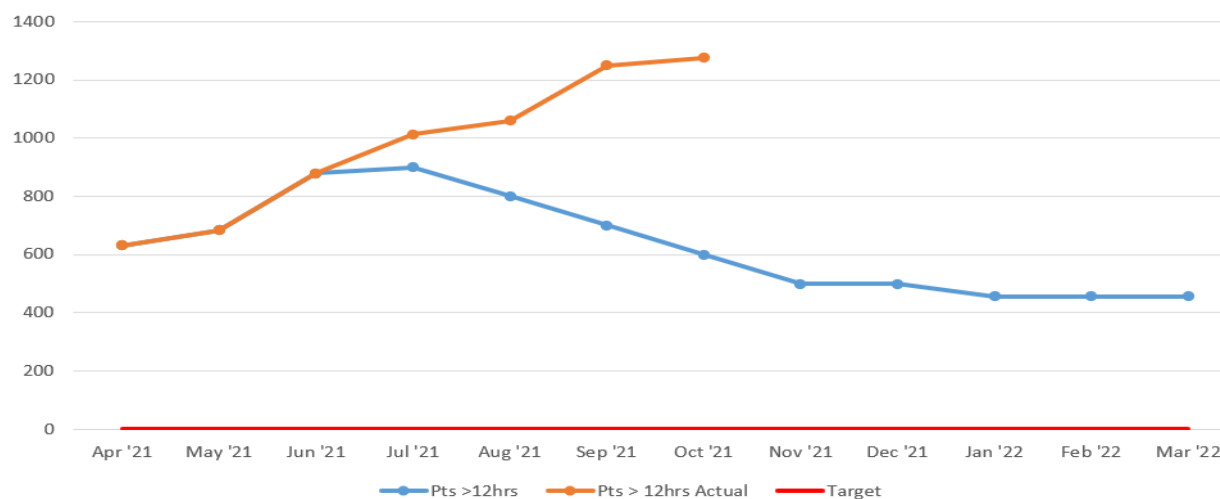
SBUHB 4hr Performance 2021-22



1. In October 2021, the 4 hour Emergency department (ED) performance level was 72%, which is in line with the outlined trajectory.

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

Patients > 12 hours Performance 2021-22

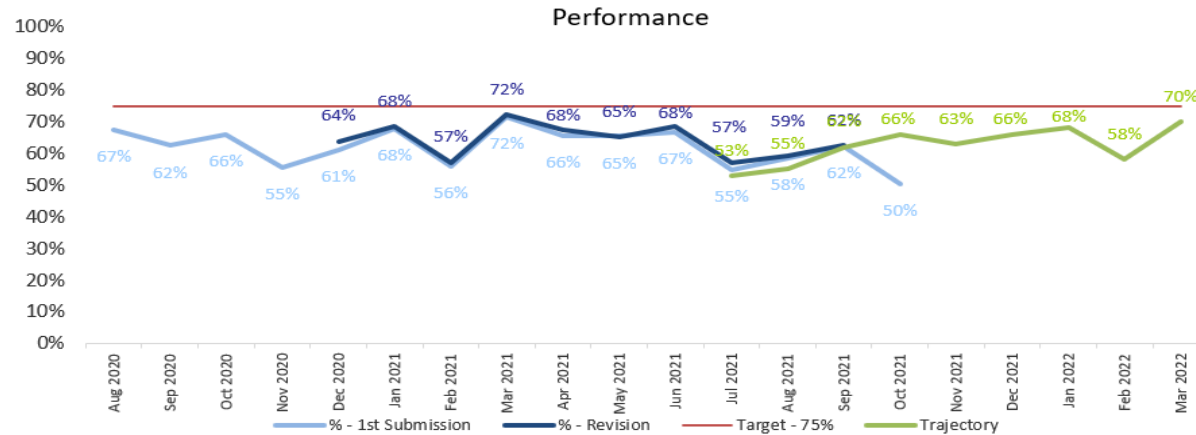


2. The 12-hour performance trajectory shows a consistent reduction in patients in the coming months, however 12-hour performance continues to decline and is significantly above projected levels.

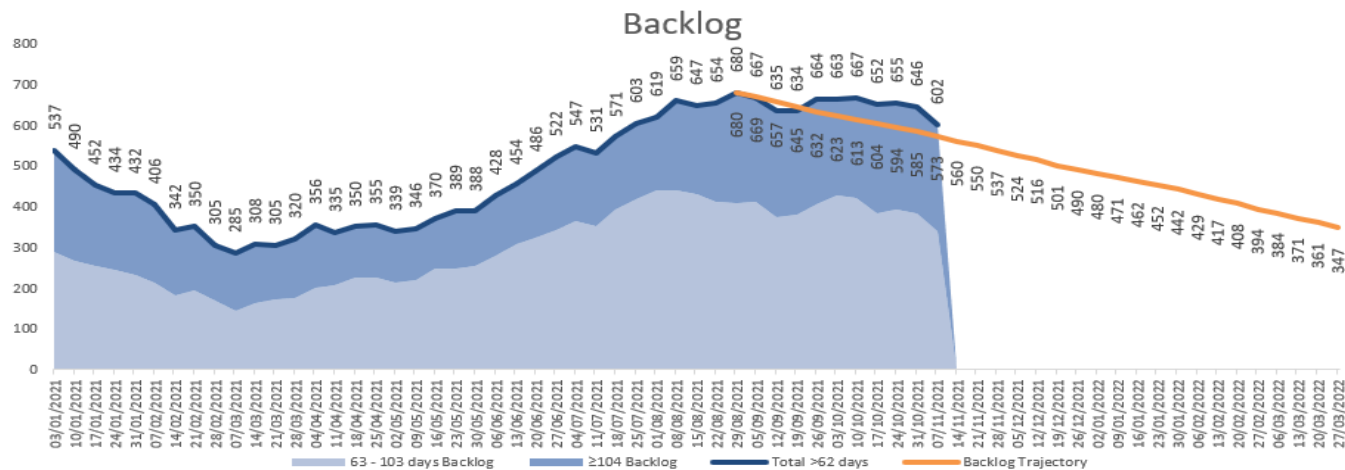
A detailed recovery plan outlining key actions was shared in the September 2021 PFC agenda.

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

1. SCP performance trajectory



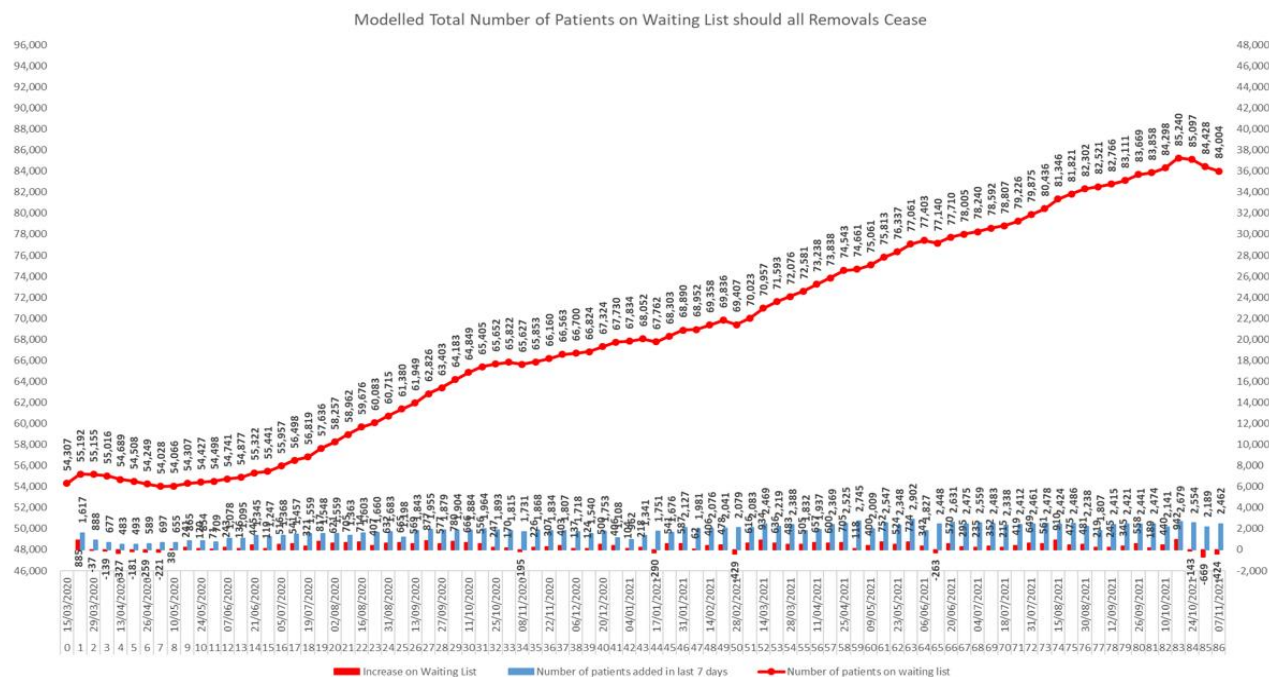
2. Proposed backlog improvements to support SCP performance



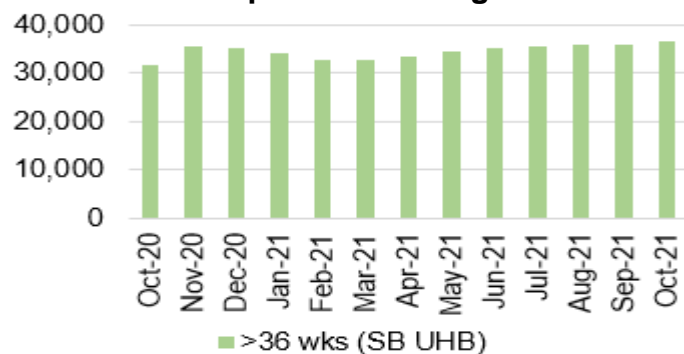
1. SCP performance in September 2021 was in line with the trajectory at 62%. October 2021 performance is still in draft format and takes 30 days to validate from the month end.

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.

1. Total waiting list movement



2. Number of patients waiting over 36 weeks



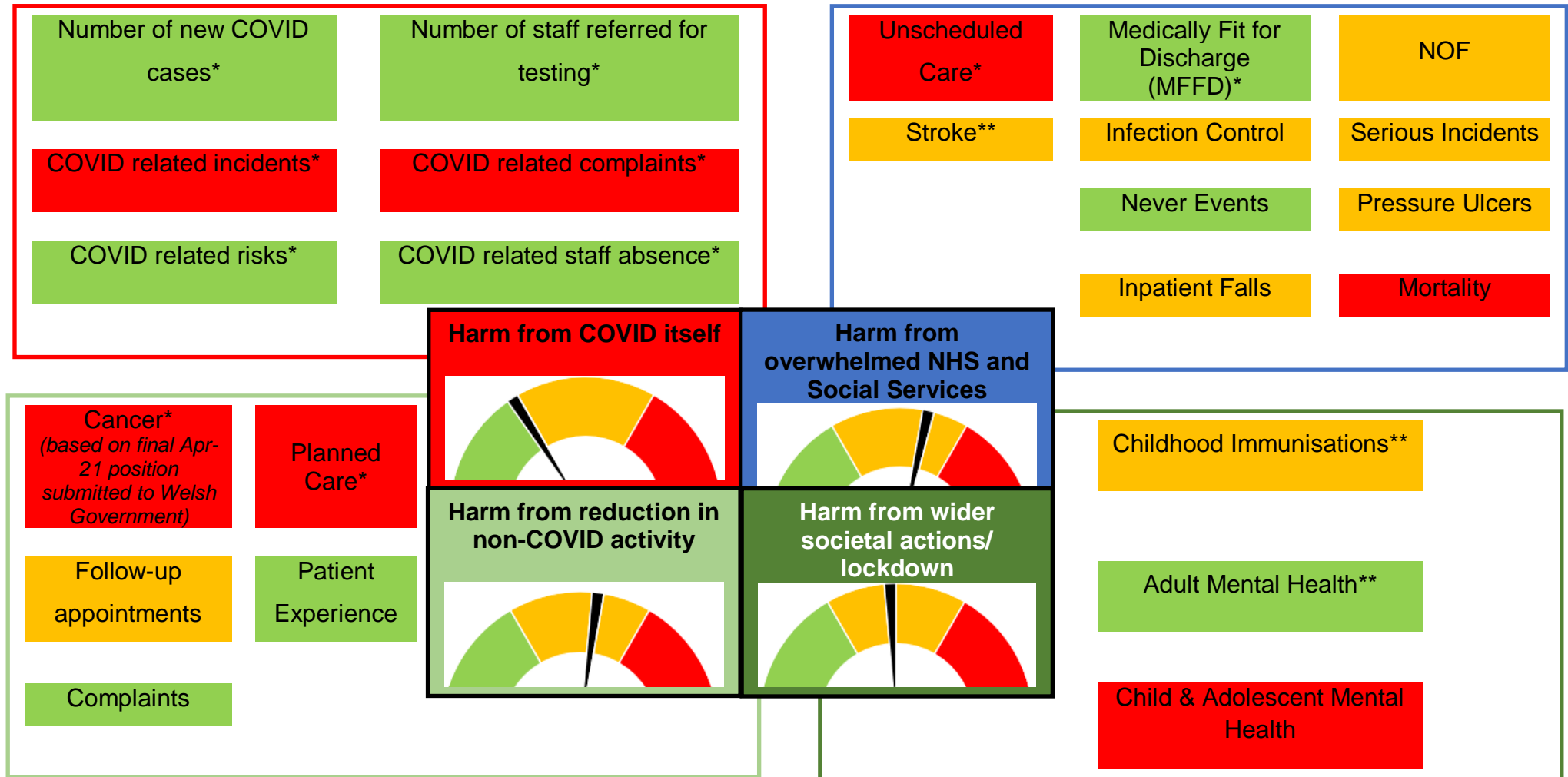
1. The chart shows the total waiting list movement since March 2020. Each data point is a weekly marker. The chart shows that the total number of patients on the list has reduced in recent weeks. Initial analysis indicates a large proportion of the reduction is a result of validation taking place in the Gynaecology service.

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

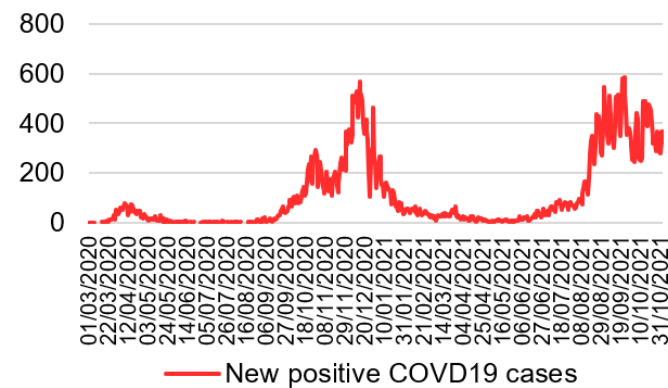


Chart 2: Number of new COVID19 cases (cumulative)

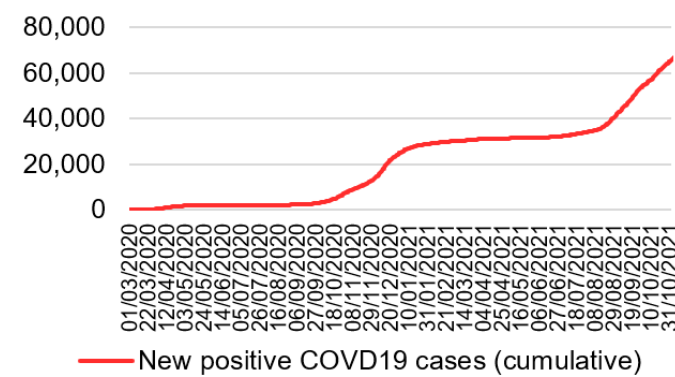


Chart 3: Number of COVID19 tests completed and positivity rate

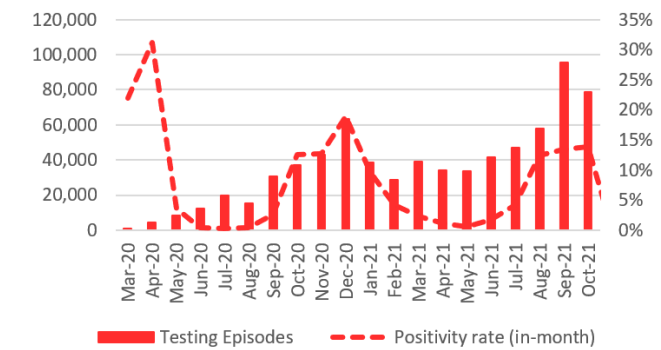


Chart 4: Number of staff referred for Antigen testing

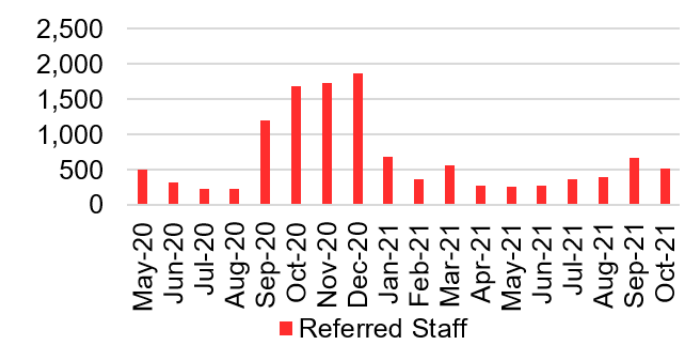


Chart 5: Outcome of staff COVID19/ antigen tests

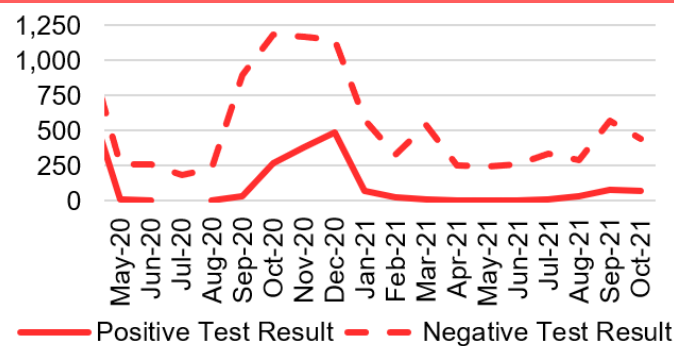


Chart 6: Number of COVID19 related incidents

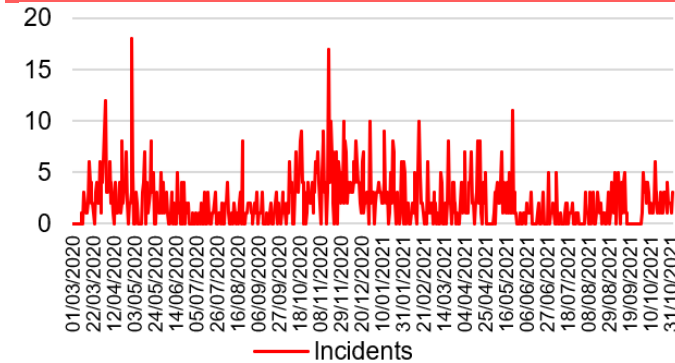


Chart 7: Number of COVID19 related serious incidents

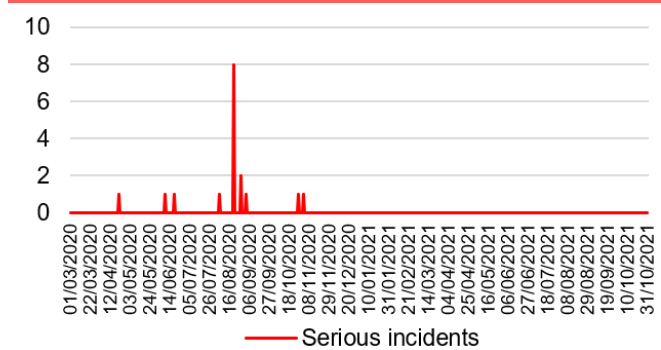


Chart 8: Number of COVID19 related complaints

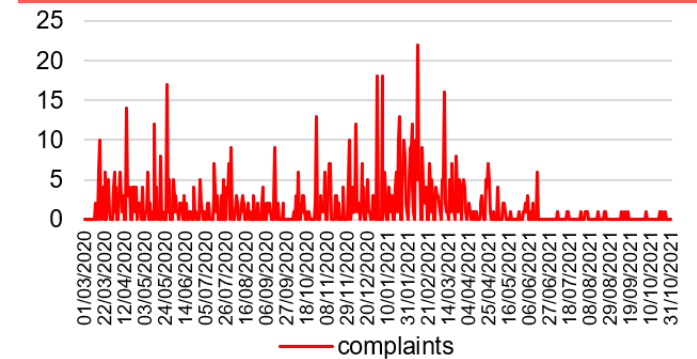


Chart 9: Number of COVID19 related risks

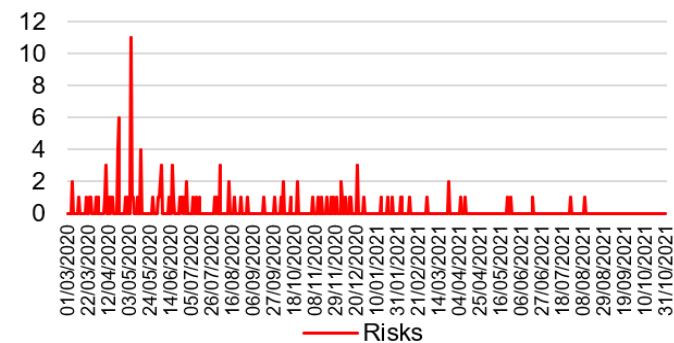


Chart 10: Number of staff self-isolating (asymptomatic)

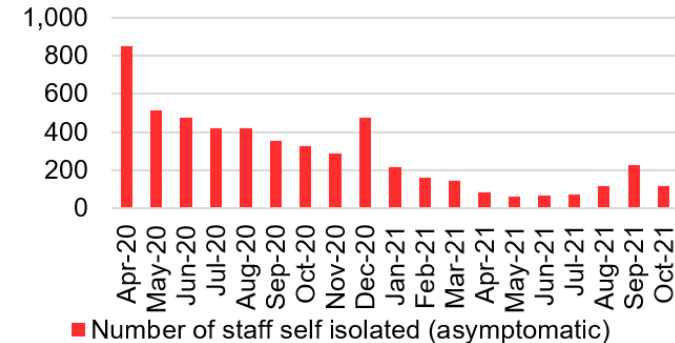


Chart 11: Number of staff self isolating (symptomatic)

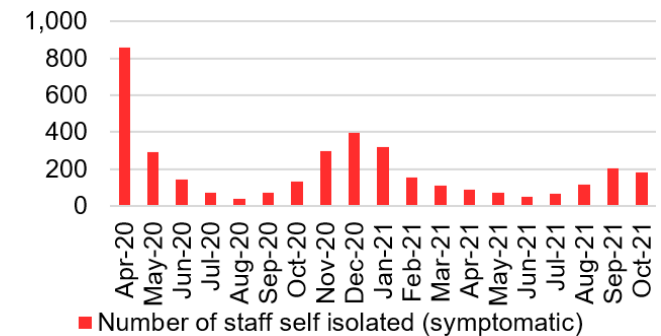


Chart 12: % staff sickness

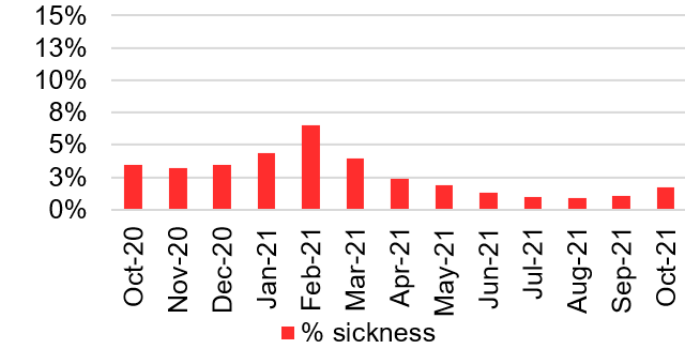


Chart 13: Bed Occupancy for suspected and confirmed COVID19 cases

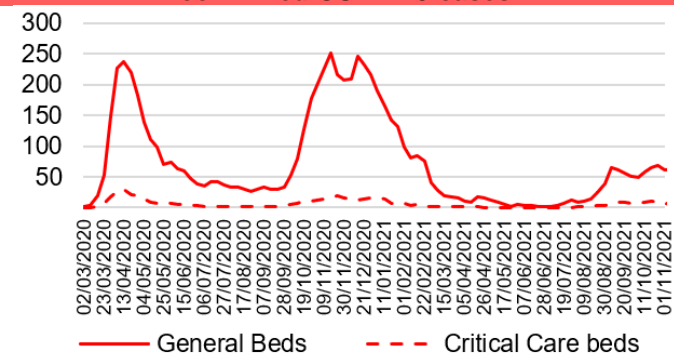


Chart 14: Number of hospital deaths with any mention of COVID19



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

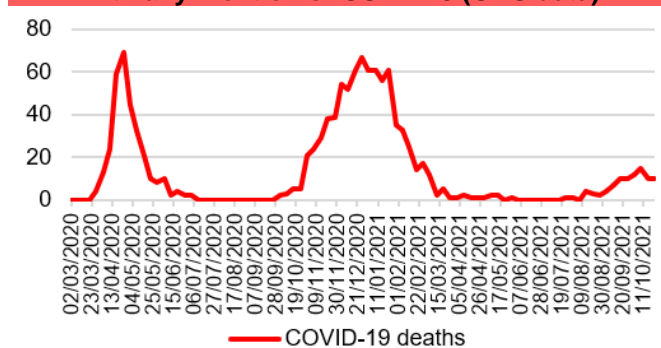
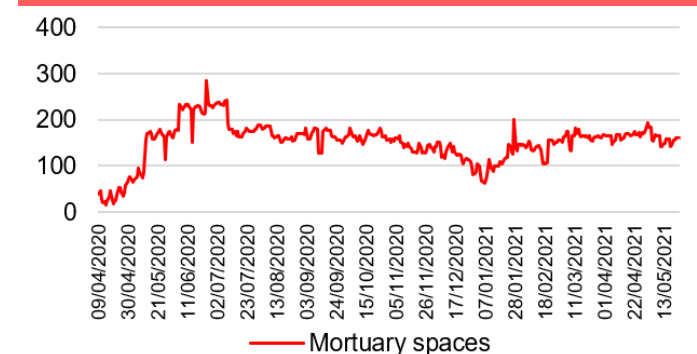


Chart 16: Number of mortuary spaces



3.1 Updates on key measures

COVID TESTING		
Description	Current Performance	Trend
<p><i>1. Number of new COVID19 cases in Swansea Bay population area</i></p>	<p>1. Number of new COVID cases In October 2021, there were an additional 10,918 positive cases recorded bringing the cumulative total to 65,131 in Swansea Bay since March 2020.</p>	<p>1. Number of new COVID19 cases for Swansea Bay population</p> <p>■ New positive COVID19 cases</p>
	<p>3. Staff referred for Antigen testing The cumulative number of staff referred for COVID testing between March 2020 and October 2021 is 14,475 of which 16% have been positive (Cumulative total).</p>	<p>2. Outcome of staff referred for Antigen testing</p> <p>■ Positive ■ Negative ■ In Progress ■ Unknown/blank</p>

Current Performance		Trend																																																																																																					
Staff absence due to COVID19	The following data is based on the mid-month position and broken down into the categories requested by Welsh Government.																																																																																																						
	1. & 2. Number of staff self-isolating (asymptomatic and symptomatic) Between September and October 2021, the number of staff self-isolating (asymptomatic) reduced from 227 to 120 and the number of staff self-isolating (symptomatic) reduced from 204 to 180. In October 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.	1.Number of staff self isolating (asymptomatic) 																																																																																																					
	3. % Staff sickness The percentage of staff sickness absence due to COVID19 has decreased from 3.2% in September 2021 to 2.3% in October 2021.	2.Number of staff self isolating (symptomatic) 																																																																																																					
		3.% staff sickness <table><tr><th></th><th>Jul-20</th><th>Aug-20</th><th>Sep-20</th><th>Oct-20</th><th>Nov-20</th><th>Dec-20</th><th>Jan-21</th><th>Feb-21</th><th>Mar-21</th><th>Apr-21</th><th>May-21</th><th>Jun-21</th><th>Jul-21</th><th>Aug-21</th><th>Sep-21</th><th>Oct-21</th></tr><tr><td>Medical</td><td>2.8%</td><td>2.5%</td><td>4.0%</td><td>3.2%</td><td>7.3%</td><td>8.3%</td><td>2.2%</td><td>0.7%</td><td>0.4%</td><td>0.3%</td><td>0.2%</td><td>0.5%</td><td>0.9%</td><td>1.3%</td><td>3.6%</td><td>2.4%</td></tr><tr><td>Nursing Reg</td><td>4.0%</td><td>4.0%</td><td>4.4%</td><td>3.8%</td><td>4.7%</td><td>7.4%</td><td>4.3%</td><td>2.3%</td><td>1.9%</td><td>1.6%</td><td>1.2%</td><td>1.1%</td><td>1.4%</td><td>1.8%</td><td>3.1%</td><td>2.2%</td></tr><tr><td>Nursing Non Reg</td><td>5.5%</td><td>5.2%</td><td>4.2%</td><td>6.0%</td><td>6.5%</td><td>7.3%</td><td>7.0%</td><td>3.9%</td><td>3.1%</td><td>2.4%</td><td>1.9%</td><td>1.8%</td><td>1.8%</td><td>2.3%</td><td>4.3%</td><td>3.1%</td></tr><tr><td>Other</td><td>2.9%</td><td>2.7%</td><td>2.0%</td><td>2.5%</td><td>3.0%</td><td>5.4%</td><td>3.1%</td><td>2.2%</td><td>1.7%</td><td>0.8%</td><td>0.6%</td><td>0.6%</td><td>0.7%</td><td>1.6%</td><td>2.9%</td><td>2.0%</td></tr><tr><td>All</td><td>3.6%</td><td>3.5%</td><td>3.2%</td><td>3.5%</td><td>4.4%</td><td>6.5%</td><td>4.0%</td><td>2.4%</td><td>1.9%</td><td>1.3%</td><td>1.0%</td><td>0.9%</td><td>1.1%</td><td>1.7%</td><td>3.2%</td><td>2.3%</td></tr></table>		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	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%	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%	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%	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%	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%
	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																																																																																							
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HARM FROM OVERWHELMED NHS AND SOCIAL CARE SYSTEM

4.1 Unscheduled Care- Overview

Chart 1: GP Out of Hours/ 111

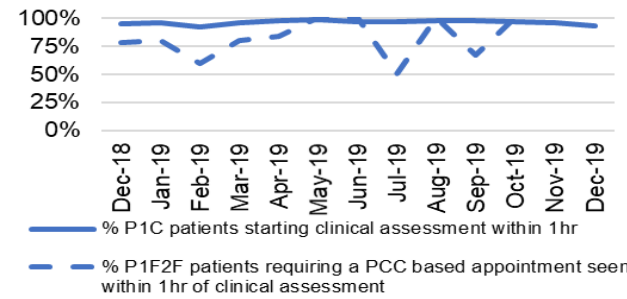


Chart 2: % red calls responded to within 8 minutes

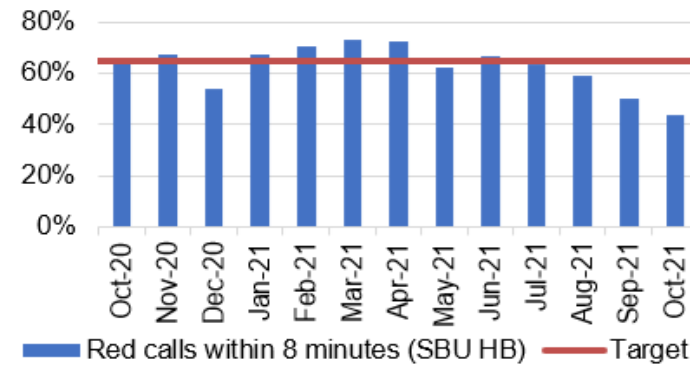


Chart 3: Number of ambulance handovers over 1 hour

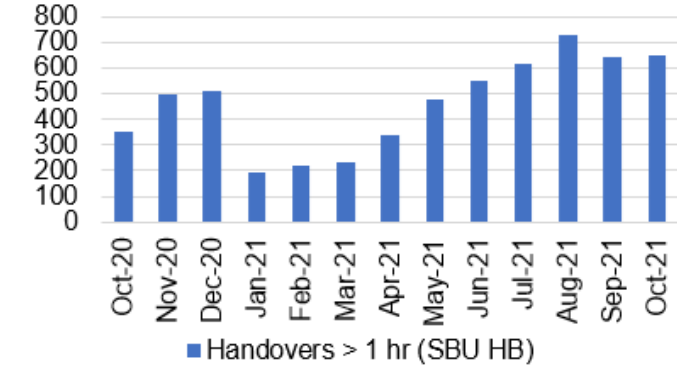


Chart 4: Lost hours- notification to ambulance handover over 15 minutes

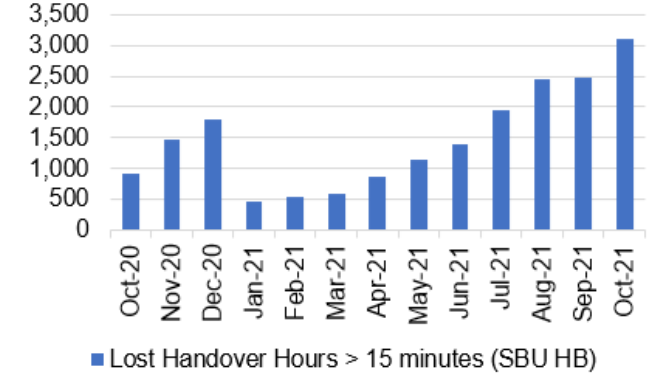


Chart 5: A&E Attendances

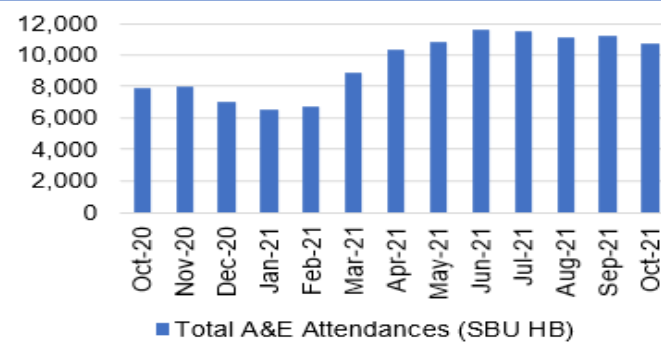


Chart 6: % patients who spend less than 4 hours in A&E

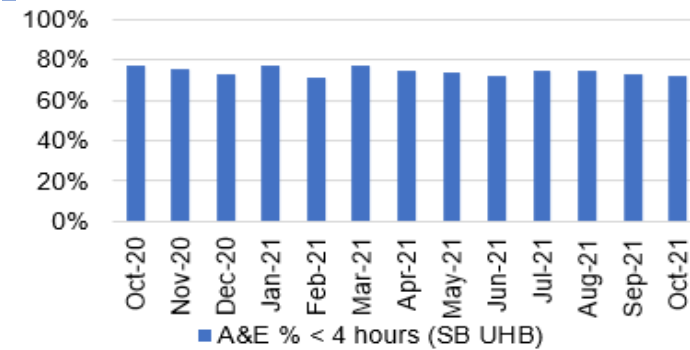


Chart 7: Number of patients waiting over 12 hours in A&E

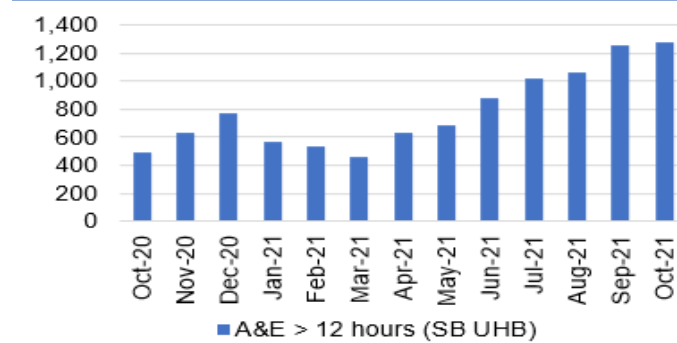


Chart 8: Number of emergency admissions

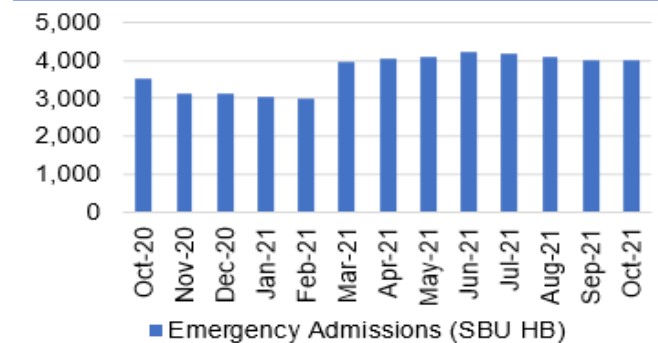


Chart 9: Elective procedures cancelled due to lack of beds

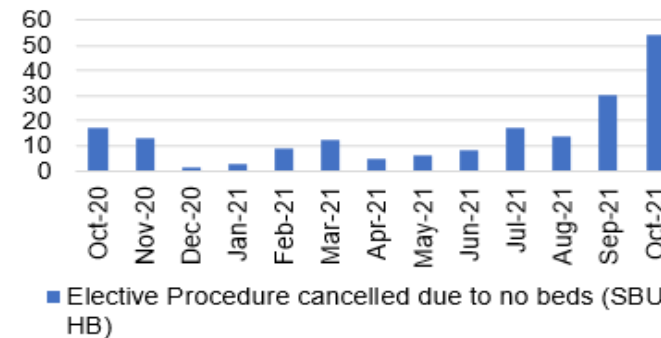


Chart 10: Number of clinically optimised patients

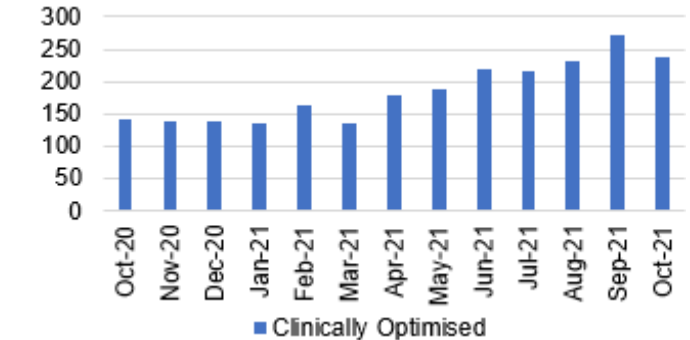


Chart 11: Delay reason for clinically optimised patients

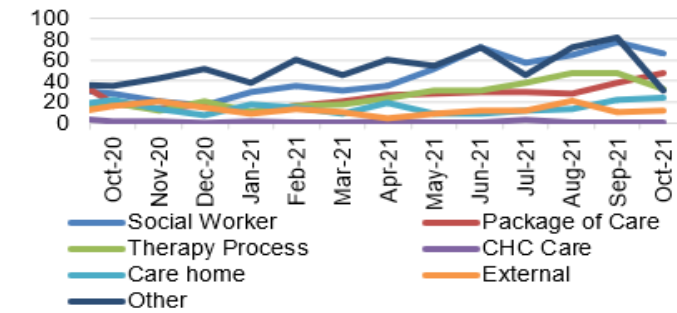


Chart 12: Average lost bed days (per day)

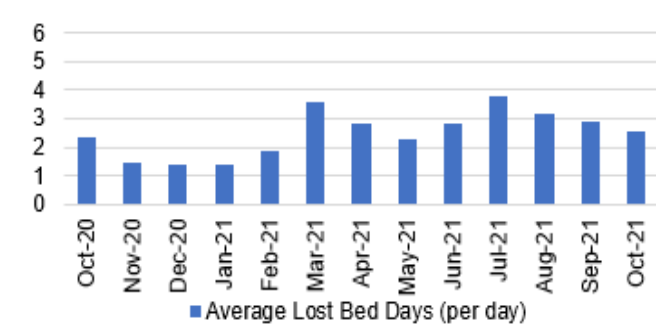


Chart 13: % of patients (> 60 years) who presented with a hip fracture that received an orthogeriatrician assessment within 72 hours

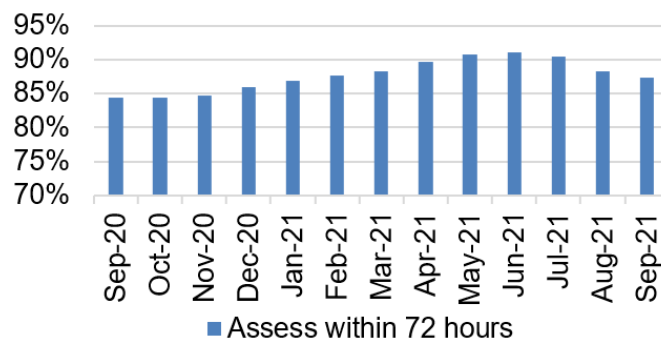


Chart 14: Direct admission to Acute Stroke Unit within 4 hours

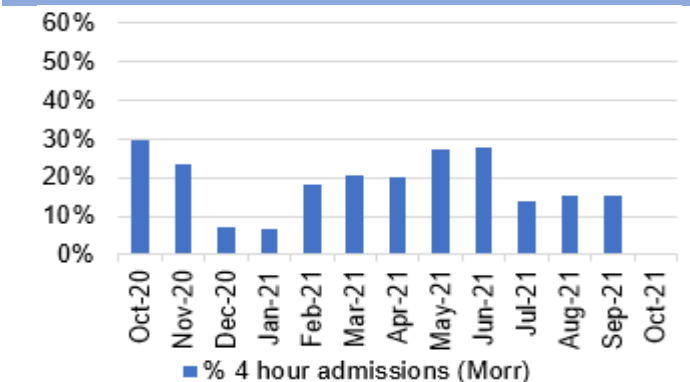


Chart 15: % of stroke patients receiving CT scan with 1 hour

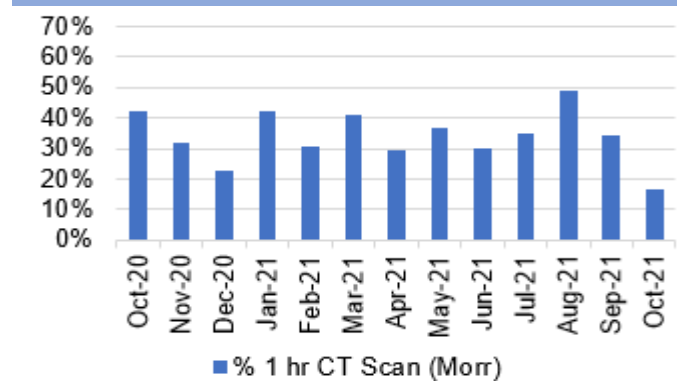
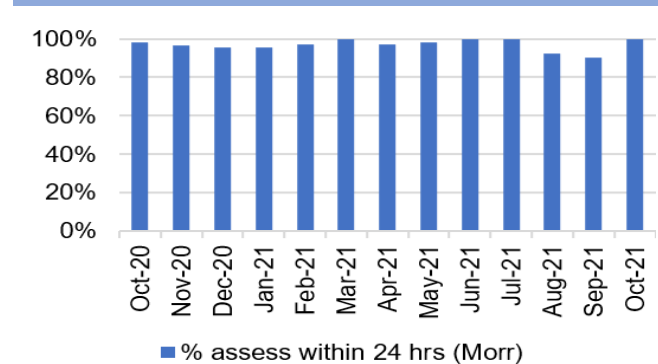


Chart 16: % stroke patients receiving consultant assessment within 24 hours

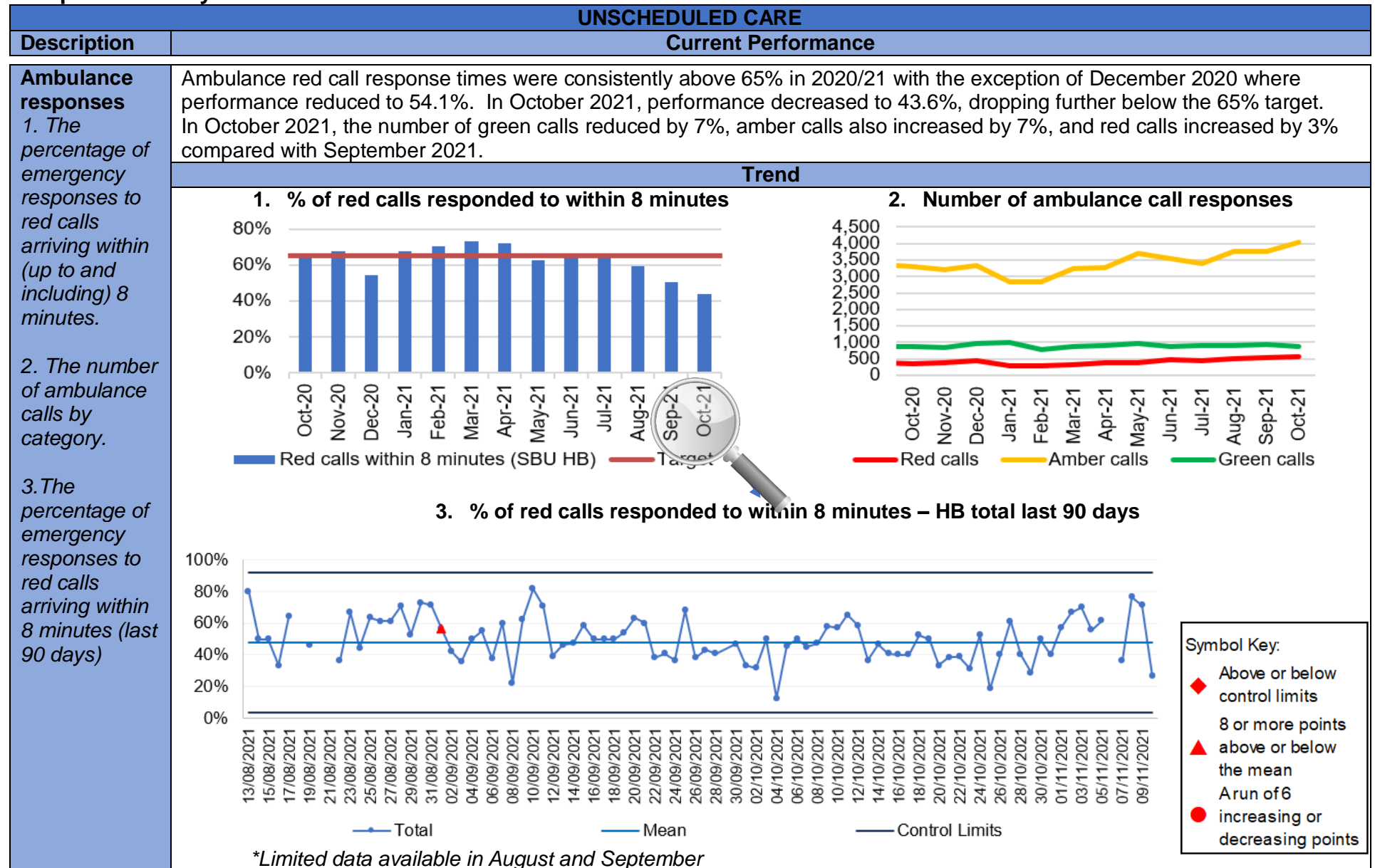


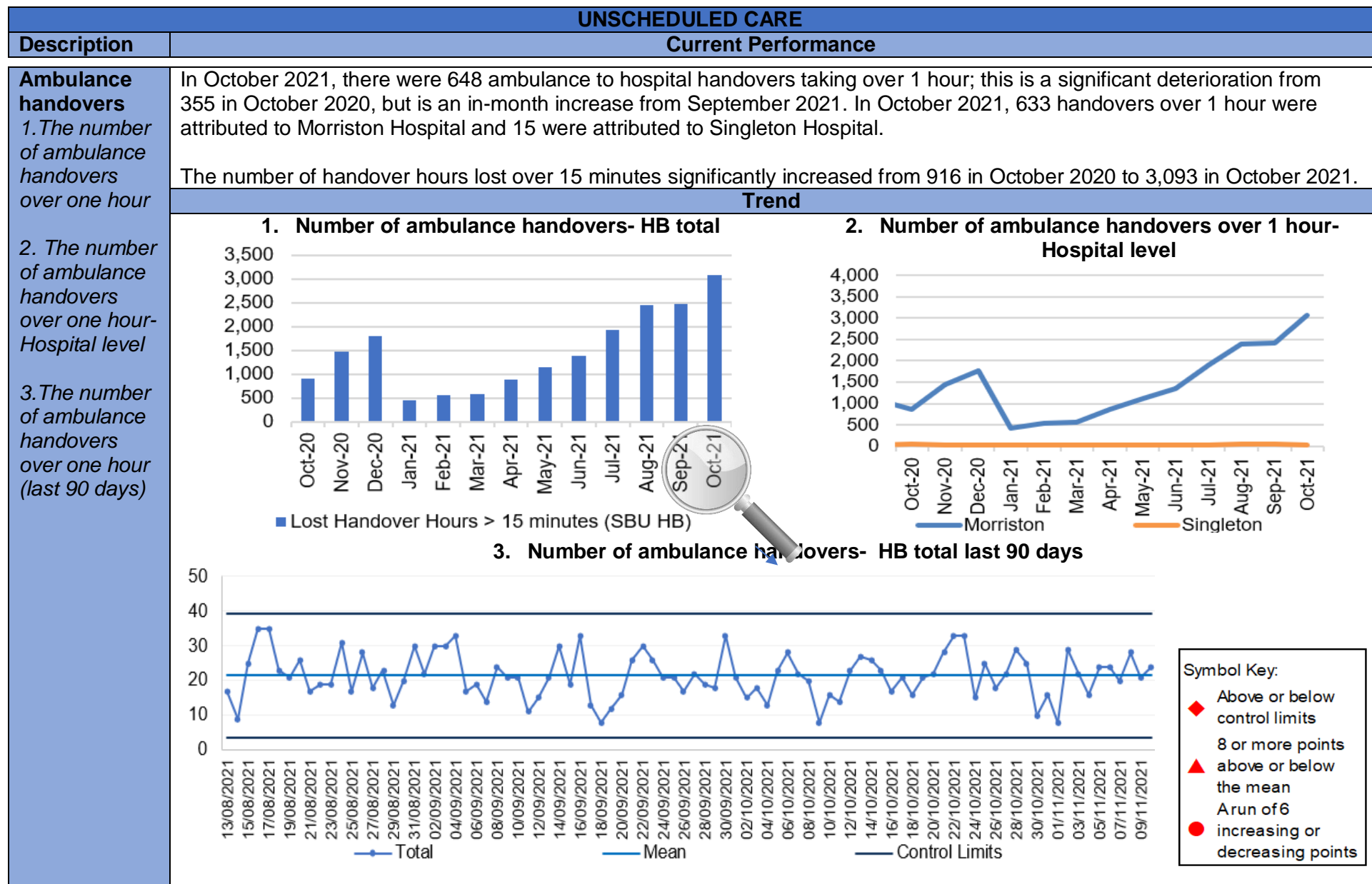
Unscheduled Care Overview (October 2021)

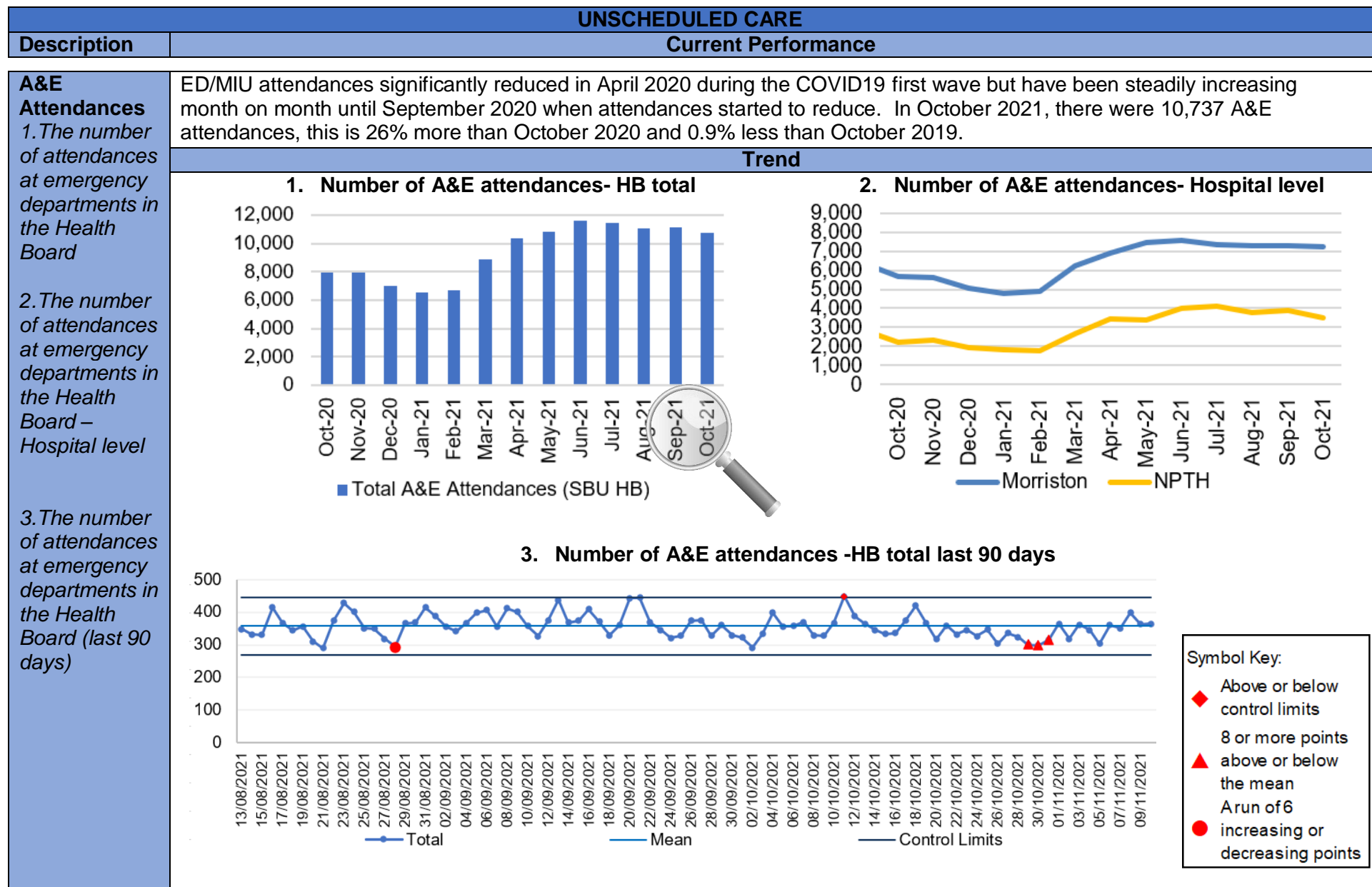
Primary Care Access		Ambulance	Emergency Department	
97% (→) GP practices open during daily core hours	88% (→) GP practices offering appointments between 5pm-6:30pm	43.6% (7%↓) Red calls responded to within 8 minutes	10,737 (4%↓) A&E attendances	71.96% (1.1%↓) Waits in A&E under 4 hours
93% (3%↓) % of 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>)	648 (1%↑) Ambulance handovers over 1 hour	1276 (2%↑) Waits in A&E over 12 hours	1,851 (2%↓) Patients admitted from A&E
		4,027 (7%↑) Amber calls		
		565 (3%↑) Red calls		
Emergency Activity		Patient Flow		
4,019 (↓) Emergency Inpatient Admissions	309 (-14%↓) (Jun-21) Emergency Theatre Cases	13 (19%↓) (Mar-20) Mental Health DTOCs * Data collection temporarily suspended	60 (13%↓) (Mar-20) Non-Mental Health DTOCs * Data collection temporarily suspended	
368 (15%↑) (Jun-21) Trauma theatre cases	54 (44%↑) Elective procedures cancelled due to no beds		238 (13%↓) Medically fit patients	

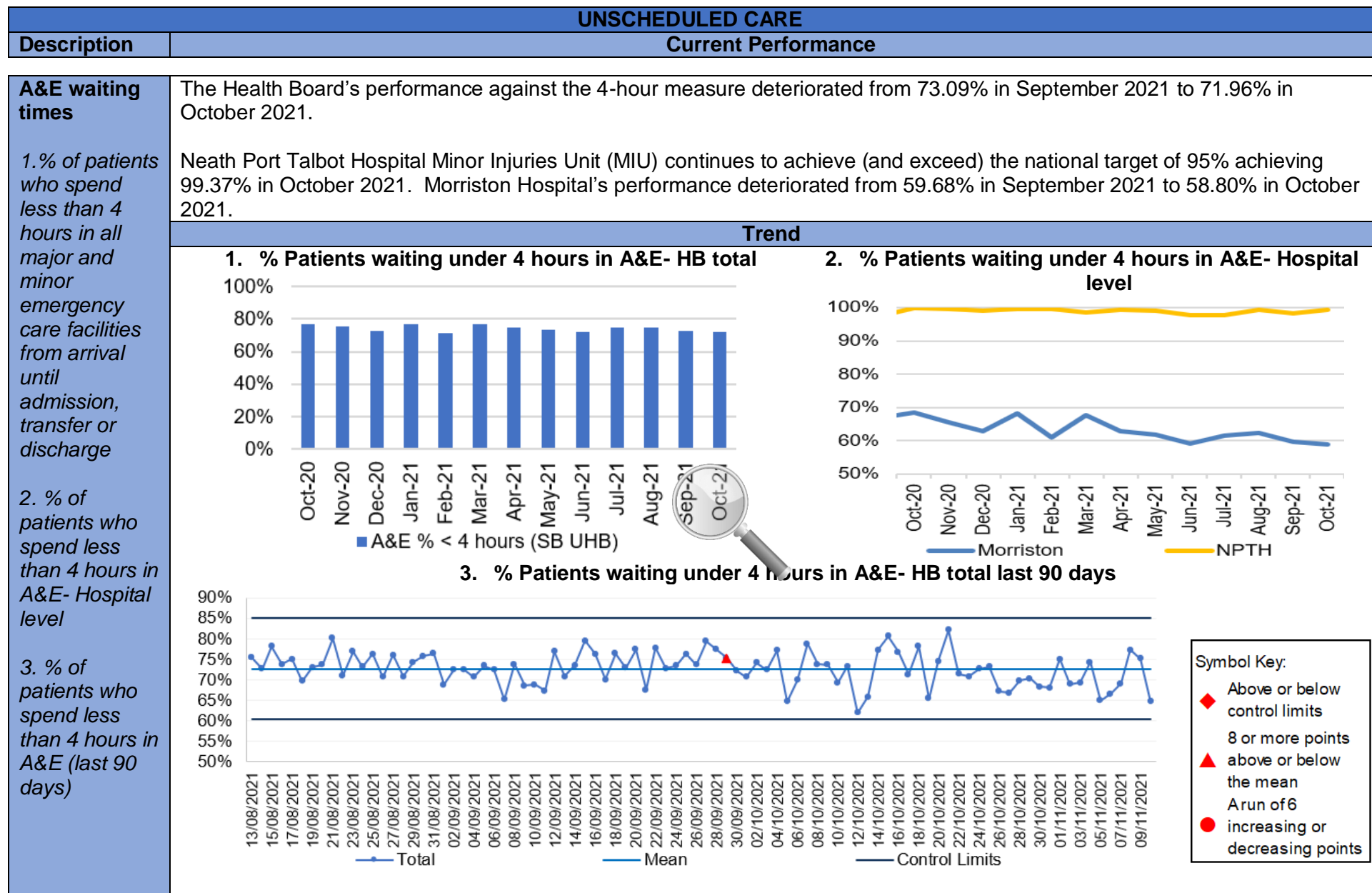
*RAG status and trend is based on in month-movement

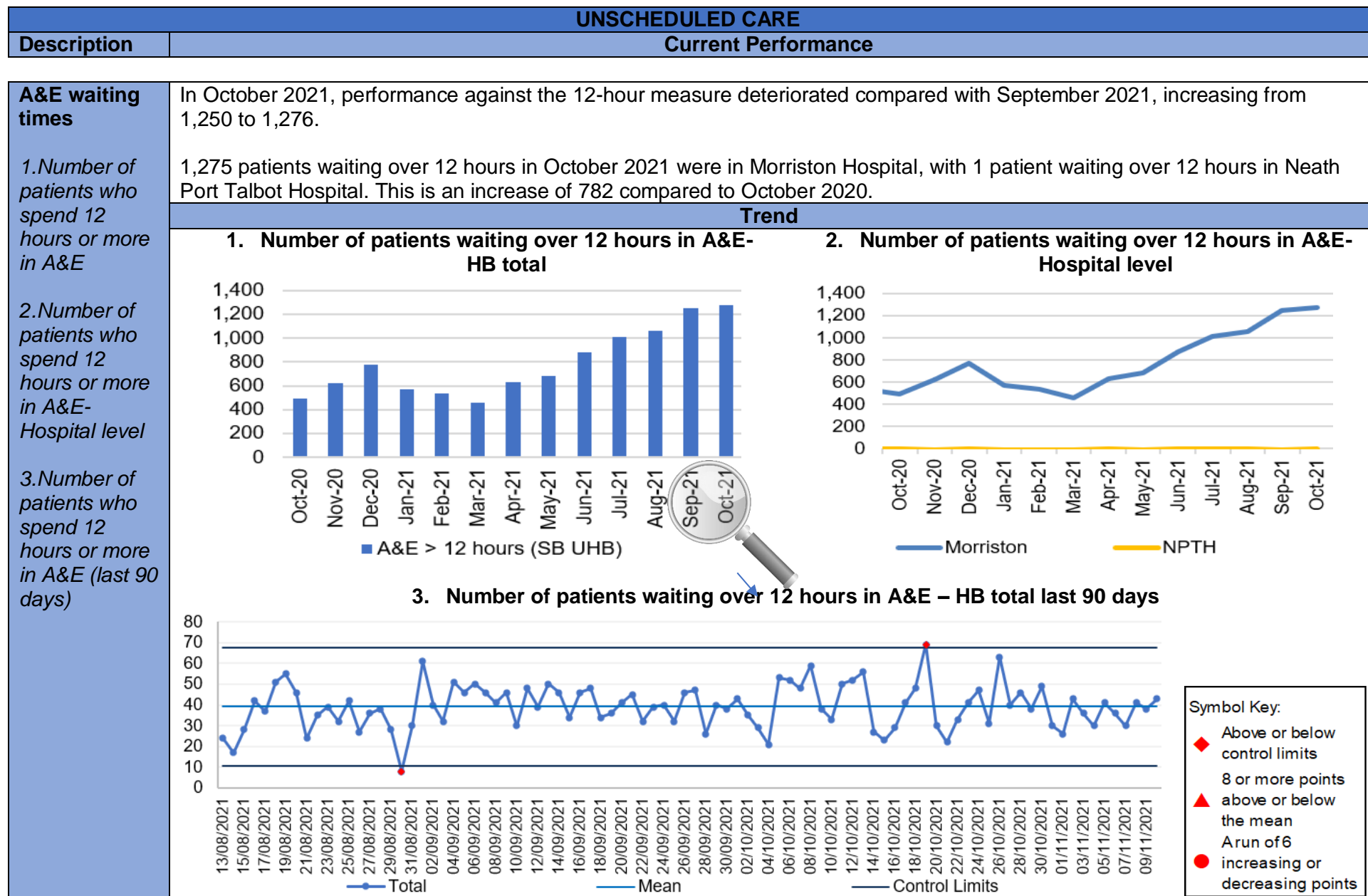
4.2 Updates on key measures

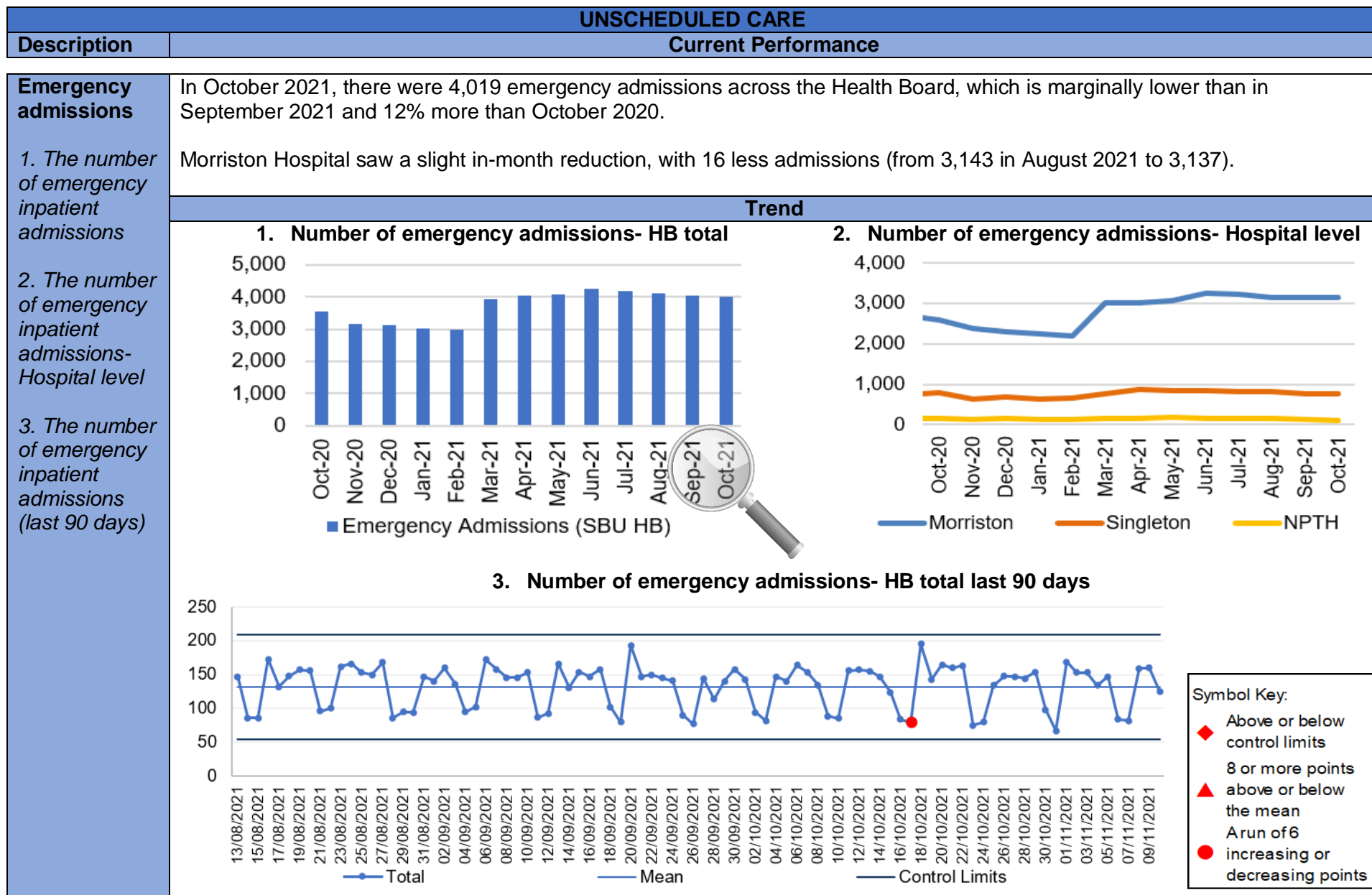


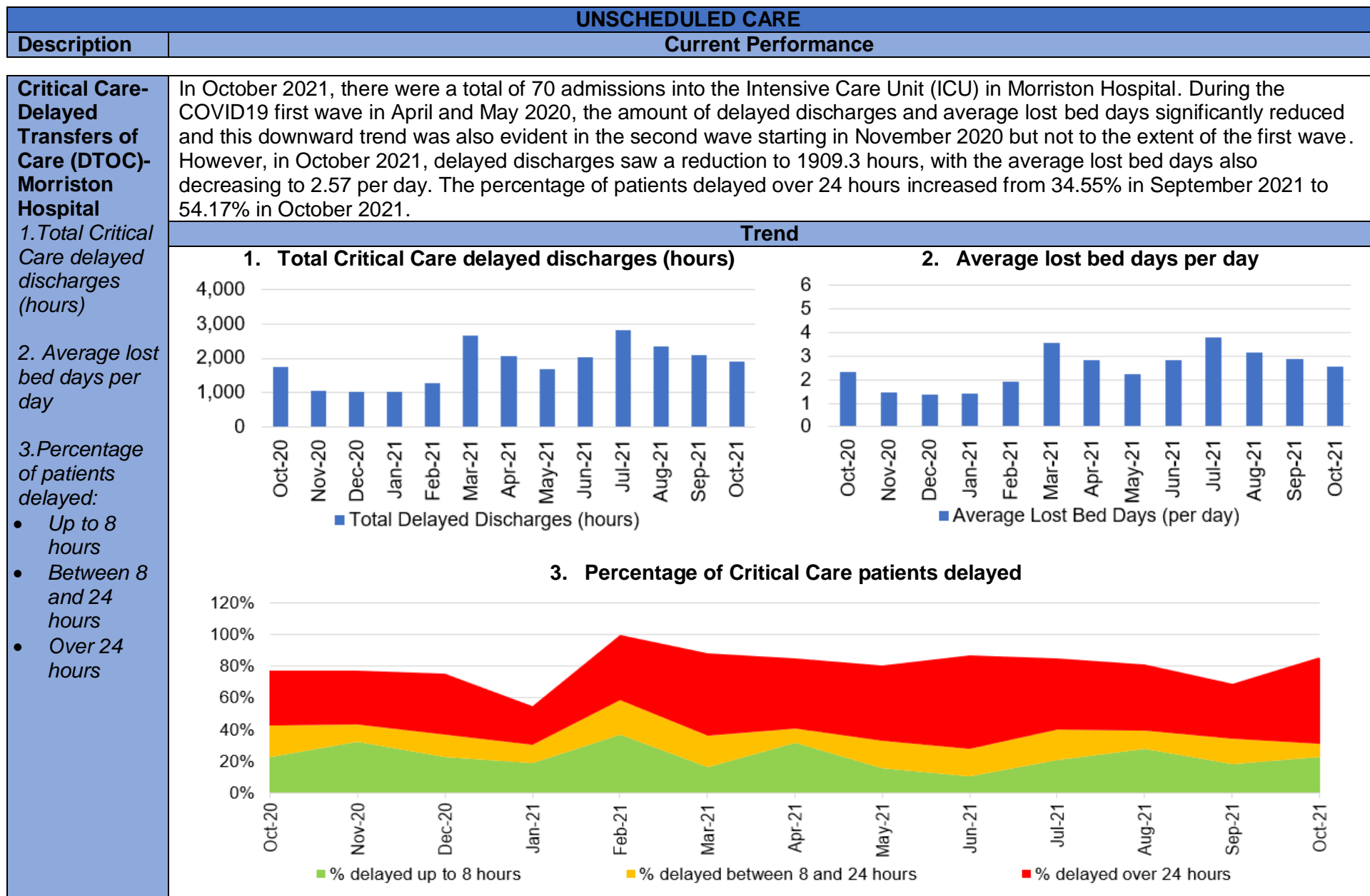




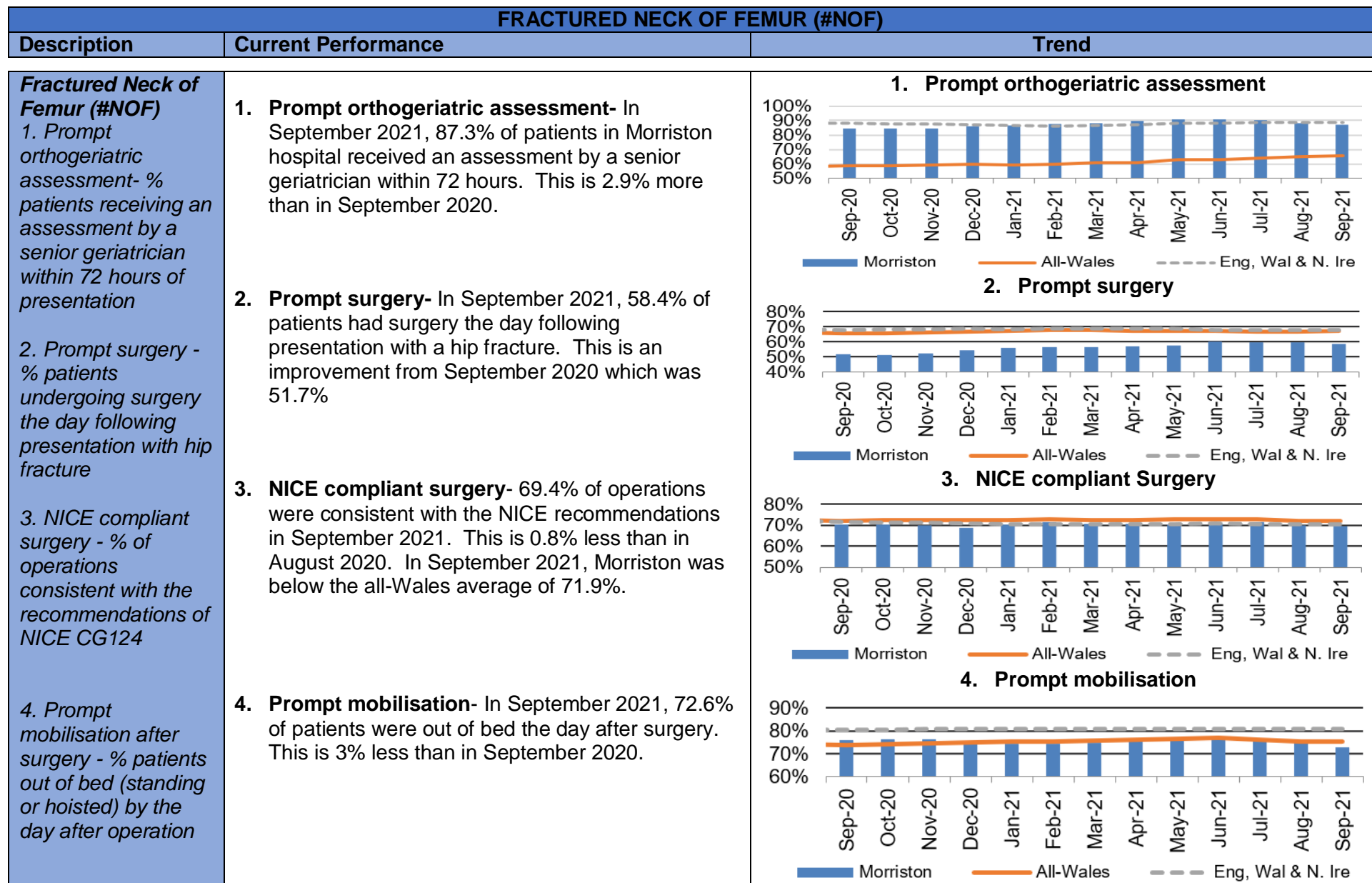




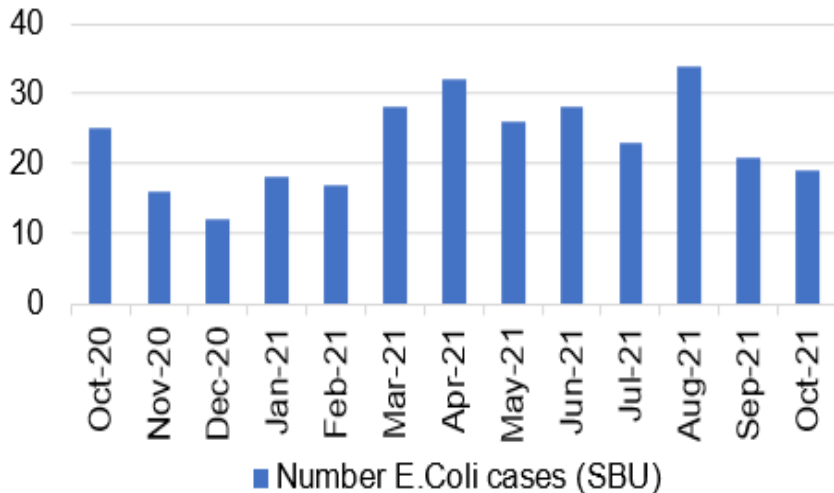
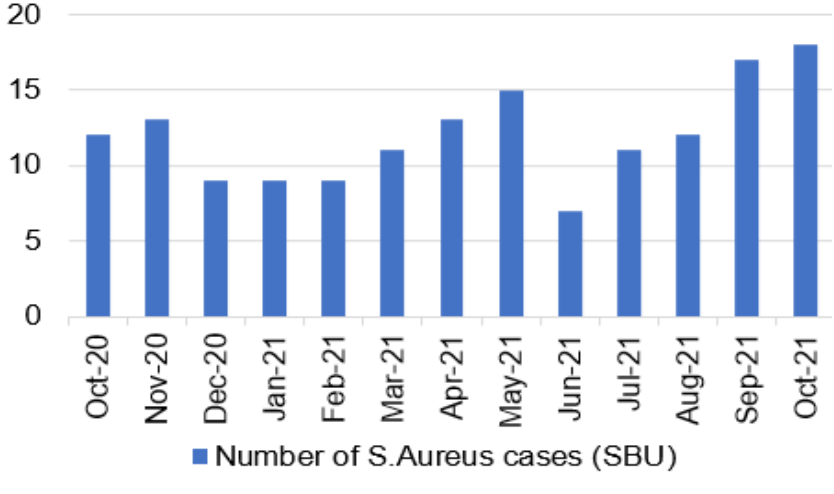


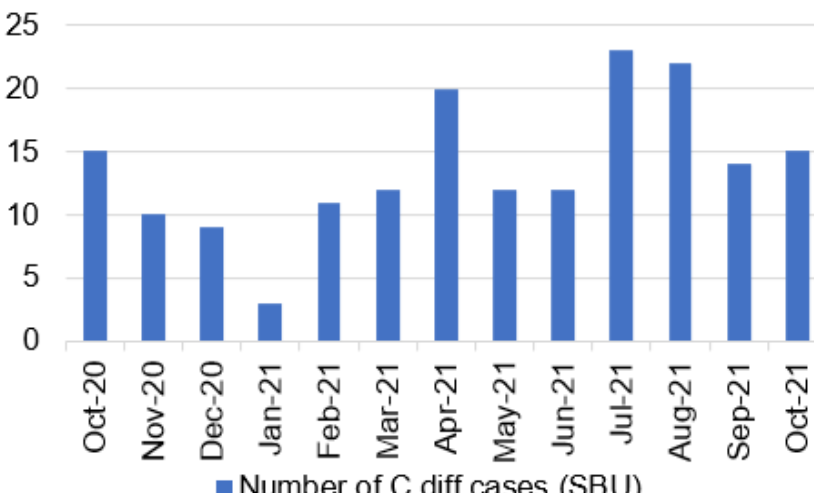
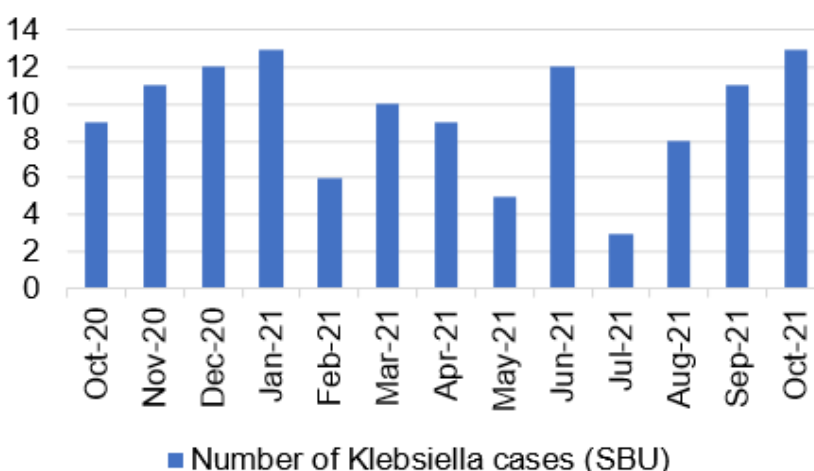


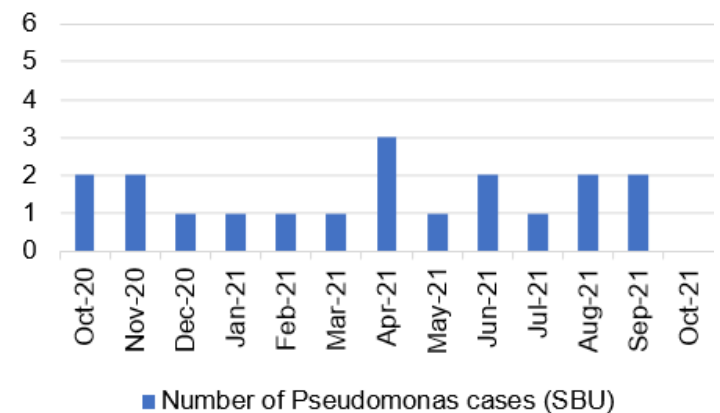
UNSCHEDULED CARE																																																																								
Description	Current Performance	Trend																																																																						
Clinically Optimised <i>The number of patients waiting at each site in the Health Board that are clinically optimised</i>	<p>In October 2021, there were on average 238 patients who were deemed clinically optimised but were still occupying a bed in one of the Health Board's Hospitals.</p> <p>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 has seen the first decrease in numbers, reducing from 272 in September 2021 to 238.</p> <p>In October 2021, Morriston Hospital had the largest proportion of clinically optimised patients with 90, followed by Neath Port Talbot Hospital with 81.</p>	<p>The number of clinically optimised patients by site</p> <table><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>NPTH</th><th>Gorseinon</th></tr></thead><tbody><tr><td>Oct-20</td><td>50</td><td>45</td><td>25</td><td>10</td></tr><tr><td>Nov-20</td><td>60</td><td>40</td><td>25</td><td>10</td></tr><tr><td>Dec-20</td><td>55</td><td>40</td><td>25</td><td>20</td></tr><tr><td>Jan-21</td><td>55</td><td>40</td><td>25</td><td>10</td></tr><tr><td>Feb-21</td><td>65</td><td>45</td><td>45</td><td>10</td></tr><tr><td>Mar-21</td><td>40</td><td>40</td><td>45</td><td>10</td></tr><tr><td>Apr-21</td><td>70</td><td>35</td><td>70</td><td>10</td></tr><tr><td>May-21</td><td>65</td><td>40</td><td>75</td><td>10</td></tr><tr><td>Jun-21</td><td>75</td><td>50</td><td>75</td><td>10</td></tr><tr><td>Jul-21</td><td>85</td><td>50</td><td>70</td><td>10</td></tr><tr><td>Aug-21</td><td>90</td><td>60</td><td>70</td><td>15</td></tr><tr><td>Sep-21</td><td>105</td><td>70</td><td>85</td><td>15</td></tr><tr><td>Oct-21</td><td>90</td><td>50</td><td>80</td><td>20</td></tr></tbody></table>	Month	Morriston	Singleton	NPTH	Gorseinon	Oct-20	50	45	25	10	Nov-20	60	40	25	10	Dec-20	55	40	25	20	Jan-21	55	40	25	10	Feb-21	65	45	45	10	Mar-21	40	40	45	10	Apr-21	70	35	70	10	May-21	65	40	75	10	Jun-21	75	50	75	10	Jul-21	85	50	70	10	Aug-21	90	60	70	15	Sep-21	105	70	85	15	Oct-21	90	50	80	20
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Elective procedures cancelled due to lack of beds <i>The number of elective procedure cancelled across the hospital where the main cancellation reasons was lack of beds</i>	<p>In October 2021, there were 54 elective procedures cancelled due to lack of beds on the day of surgery. This is 37 more cancellations than in October 2020 and 24 more than September 2021.</p> <p>51 of the cancelled procedures were attributed to Morriston Hospital, with 3 attributed to Neath Port Talbot Hospital.</p>	<p>Total number of elective procedures cancelled due to lack of beds</p> <table><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>NPTH</th></tr></thead><tbody><tr><td>Oct-20</td><td>15</td><td>2</td><td>1</td></tr><tr><td>Nov-20</td><td>12</td><td>2</td><td>1</td></tr><tr><td>Dec-20</td><td>2</td><td>2</td><td>1</td></tr><tr><td>Jan-21</td><td>2</td><td>2</td><td>1</td></tr><tr><td>Feb-21</td><td>8</td><td>2</td><td>1</td></tr><tr><td>Mar-21</td><td>10</td><td>2</td><td>1</td></tr><tr><td>Apr-21</td><td>5</td><td>2</td><td>1</td></tr><tr><td>May-21</td><td>6</td><td>2</td><td>1</td></tr><tr><td>Jun-21</td><td>7</td><td>2</td><td>1</td></tr><tr><td>Jul-21</td><td>18</td><td>2</td><td>1</td></tr><tr><td>Aug-21</td><td>12</td><td>2</td><td>1</td></tr><tr><td>Sep-21</td><td>25</td><td>2</td><td>1</td></tr><tr><td>Oct-21</td><td>54</td><td>3</td><td>1</td></tr></tbody></table>	Month	Morriston	Singleton	NPTH	Oct-20	15	2	1	Nov-20	12	2	1	Dec-20	2	2	1	Jan-21	2	2	1	Feb-21	8	2	1	Mar-21	10	2	1	Apr-21	5	2	1	May-21	6	2	1	Jun-21	7	2	1	Jul-21	18	2	1	Aug-21	12	2	1	Sep-21	25	2	1	Oct-21	54	3	1														
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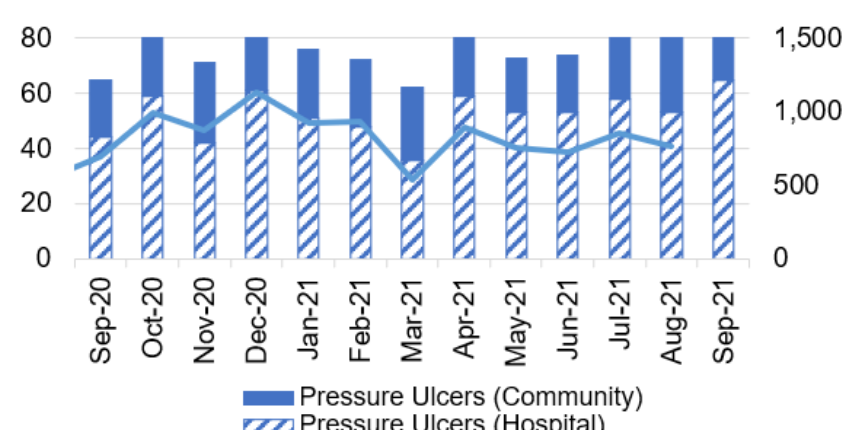


FRACTURED NECK OF FEMUR (#NOF)																																																										
Description	Current Performance	Trend																																																								
5. <i>Not delirious when tested- % patients (<4 on 4AT test) when tested in the week after operation</i>	5. Not delirious when tested- 76.1% of patients were not delirious in the week after their operation in September 2021. This is an improvement of 7.2% compared with September 2020.	<p>5. Not delirious when tested</p> <table><caption>5. Not delirious when tested (Estimated Data)</caption><thead><tr><th>Month</th><th>Morriston</th><th>All-Wales</th><th>Eng, Wal & N. Ire</th></tr></thead><tbody><tr><td>Sep-20</td><td>55%</td><td>55%</td><td>55%</td></tr><tr><td>Oct-20</td><td>58%</td><td>55%</td><td>55%</td></tr><tr><td>Nov-20</td><td>60%</td><td>55%</td><td>55%</td></tr><tr><td>Dec-20</td><td>62%</td><td>55%</td><td>55%</td></tr><tr><td>Jan-21</td><td>65%</td><td>55%</td><td>55%</td></tr><tr><td>Feb-21</td><td>68%</td><td>55%</td><td>55%</td></tr><tr><td>Mar-21</td><td>70%</td><td>55%</td><td>55%</td></tr><tr><td>Apr-21</td><td>72%</td><td>55%</td><td>55%</td></tr><tr><td>May-21</td><td>74%</td><td>55%</td><td>55%</td></tr><tr><td>Jun-21</td><td>75%</td><td>55%</td><td>55%</td></tr><tr><td>Jul-21</td><td>76%</td><td>55%</td><td>55%</td></tr><tr><td>Aug-21</td><td>76%</td><td>55%</td><td>55%</td></tr><tr><td>Sep-21</td><td>76.1%</td><td>55%</td><td>55%</td></tr></tbody></table>	Month	Morriston	All-Wales	Eng, Wal & N. Ire	Sep-20	55%	55%	55%	Oct-20	58%	55%	55%	Nov-20	60%	55%	55%	Dec-20	62%	55%	55%	Jan-21	65%	55%	55%	Feb-21	68%	55%	55%	Mar-21	70%	55%	55%	Apr-21	72%	55%	55%	May-21	74%	55%	55%	Jun-21	75%	55%	55%	Jul-21	76%	55%	55%	Aug-21	76%	55%	55%	Sep-21	76.1%	55%	55%
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Sep-21	76.1%	55%	55%																																																							
6. <i>Return to original residence- % patients discharged back to original residence, or in that residence at 120 day follow-up</i>	6. Return to original residence- 67.7% of patients in August 2021 were discharged back to their original residence. This is 10.3% less than in August 2020.	<p>6. Return to original residence</p> <table><caption>6. Return to original residence (Estimated Data)</caption><thead><tr><th>Month</th><th>Morriston</th><th>All-Wales</th><th>Eng, Wal & N. Ire</th></tr></thead><tbody><tr><td>Aug-20</td><td>75%</td><td>75%</td><td>75%</td></tr><tr><td>Sep-20</td><td>74%</td><td>75%</td><td>75%</td></tr><tr><td>Oct-20</td><td>73%</td><td>75%</td><td>75%</td></tr><tr><td>Nov-20</td><td>72%</td><td>75%</td><td>75%</td></tr><tr><td>Dec-20</td><td>71%</td><td>75%</td><td>75%</td></tr><tr><td>Jan-21</td><td>70%</td><td>75%</td><td>75%</td></tr><tr><td>Feb-21</td><td>69%</td><td>75%</td><td>75%</td></tr><tr><td>Mar-21</td><td>68%</td><td>75%</td><td>75%</td></tr><tr><td>Apr-21</td><td>67%</td><td>75%</td><td>75%</td></tr><tr><td>May-21</td><td>66%</td><td>75%</td><td>75%</td></tr><tr><td>Jun-21</td><td>65%</td><td>75%</td><td>75%</td></tr><tr><td>Jul-21</td><td>64%</td><td>75%</td><td>75%</td></tr><tr><td>Aug-21</td><td>67.7%</td><td>75%</td><td>75%</td></tr></tbody></table>	Month	Morriston	All-Wales	Eng, Wal & N. Ire	Aug-20	75%	75%	75%	Sep-20	74%	75%	75%	Oct-20	73%	75%	75%	Nov-20	72%	75%	75%	Dec-20	71%	75%	75%	Jan-21	70%	75%	75%	Feb-21	69%	75%	75%	Mar-21	68%	75%	75%	Apr-21	67%	75%	75%	May-21	66%	75%	75%	Jun-21	65%	75%	75%	Jul-21	64%	75%	75%	Aug-21	67.7%	75%	75%
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7. <i>30 day mortality rate</i>	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%. * Updated data is currently not available, but is being reviewed.	<p>7. 30 day mortality rate</p> <table><caption>7. 30 day mortality rate (Estimated Data)</caption><thead><tr><th>Month</th><th>Morriston</th><th>All-Wales</th><th>Eng, Wal & N. Ire</th></tr></thead><tbody><tr><td>Jan-20</td><td>8.0%</td><td>7.0%</td><td>7.0%</td></tr><tr><td>Feb-20</td><td>8.0%</td><td>7.0%</td><td>7.0%</td></tr><tr><td>Mar-20</td><td>8.0%</td><td>7.0%</td><td>7.0%</td></tr><tr><td>Apr-20</td><td>8.0%</td><td>7.0%</td><td>7.0%</td></tr><tr><td>May-20</td><td>8.0%</td><td>7.0%</td><td>7.0%</td></tr><tr><td>Jun-20</td><td>8.0%</td><td>7.0%</td><td>7.0%</td></tr><tr><td>Jul-20</td><td>8.0%</td><td>7.0%</td><td>7.0%</td></tr><tr><td>Aug-20</td><td>8.0%</td><td>7.0%</td><td>7.0%</td></tr><tr><td>Sep-20</td><td>8.0%</td><td>7.0%</td><td>7.0%</td></tr><tr><td>Oct-20</td><td>8.0%</td><td>7.0%</td><td>7.0%</td></tr><tr><td>Nov-20</td><td>8.0%</td><td>7.0%</td><td>7.0%</td></tr><tr><td>Dec-20</td><td>8.0%</td><td>7.0%</td><td>7.0%</td></tr><tr><td>Jan-21</td><td>7.5%</td><td>6.9%</td><td>7.6%</td></tr></tbody></table>	Month	Morriston	All-Wales	Eng, Wal & N. Ire	Jan-20	8.0%	7.0%	7.0%	Feb-20	8.0%	7.0%	7.0%	Mar-20	8.0%	7.0%	7.0%	Apr-20	8.0%	7.0%	7.0%	May-20	8.0%	7.0%	7.0%	Jun-20	8.0%	7.0%	7.0%	Jul-20	8.0%	7.0%	7.0%	Aug-20	8.0%	7.0%	7.0%	Sep-20	8.0%	7.0%	7.0%	Oct-20	8.0%	7.0%	7.0%	Nov-20	8.0%	7.0%	7.0%	Dec-20	8.0%	7.0%	7.0%	Jan-21	7.5%	6.9%	7.6%
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HEALTHCARE ACQUIRED INFECTIONS																														
Description	Current Performance	Trend																												
Healthcare Acquired Infections (HCAI) - E.coli bacteraemia- <i>Number of laboratory confirmed E.coli bacteraemia cases</i>	<ul style="list-style-type: none">19 cases of <i>E. coli</i> bacteraemia were identified in October 2021, of which 7 were hospital acquired and 12 were community acquired.Cumulative cases from September 2021 to October 2021 are 17.6% lower than the equivalent period in 2020/21. (148 in 2021/22 compared with 174 in 2020/21).	<p>Number of healthcare acquired E.coli bacteraemia cases</p>  <table><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>Oct-20</td><td>25</td></tr><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></tbody></table>	Month	Number of cases	Oct-20	25	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
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Healthcare Acquired Infections (HCAI)- S.aureus bacteraemia- <i>Number of laboratory confirmed S.aureus bacteraemias (MRSA & MSSA) cases</i>	<ul style="list-style-type: none">There were 18 cases of Staph. aureus bacteraemia in October 2021, of which 11 were hospital acquired and 7 were community acquired.Cumulative cases from September 2021 to October 2021 are 9% higher than the equivalent period in 2020/21 (66 in 2021/22 compared with 72 in 2020/21).	<p>Number of healthcare acquired S.aureus bacteraemia cases</p>  <table><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>Oct-20</td><td>12</td></tr><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></tbody></table>	Month	Number of cases	Oct-20	12	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
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HEALTHCARE ACQUIRED INFECTIONS																														
Description	Current Performance	Trend																												
Healthcare Acquired Infections (HCAI)- C.difficile- <i>Number of laboratory confirmed C.difficile cases</i>	<ul style="list-style-type: none">There were 15 <i>Clostridium difficile</i> toxin positive cases in October 2021, of which 10 were hospital acquired and 5 were community acquired.Cumulative cases from September 2021 to October 2021 are 18.1% more than the equivalent period of 2020/21 (83 in 2021/22 compared with 68 in 2020/21).	<p>Number of healthcare acquired C.difficile cases</p>  <table><caption>Number of healthcare acquired C.difficile cases (SBU)</caption><thead><tr><th>Month</th><th>Number of C.diff cases (SBU)</th></tr></thead><tbody><tr><td>Oct-20</td><td>15</td></tr><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></tbody></table>	Month	Number of C.diff cases (SBU)	Oct-20	15	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
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Jul-21	23																													
Aug-21	22																													
Sep-21	14																													
Oct-21	15																													
Healthcare Acquired Infections (HCAI)- Klebsiella sp- <i>Number of laboratory confirmed Klebsiella sp cases</i>	<ul style="list-style-type: none">There were 13 cases of Klebsiella sp in October 2021, of which 8 were hospital acquired and 5 were community acquired.Cumulative cases from September 2021 to October 2021 are 2% higher than the equivalent period in 2020/21 (51 in 2021/22 compared with 50 in 2020/21).	<p>Number of healthcare acquired Klebsiella cases</p>  <table><caption>Number of healthcare acquired Klebsiella cases (SBU)</caption><thead><tr><th>Month</th><th>Number of Klebsiella cases (SBU)</th></tr></thead><tbody><tr><td>Oct-20</td><td>9</td></tr><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></tbody></table>	Month	Number of Klebsiella cases (SBU)	Oct-20	9	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
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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 no cases of <i>P.Aeruginosa</i> bacteraemia reported in October 2021. Cumulative cases from September 2021 to October 2021 are 58% less than the equivalent period in 2020/21. 	Number of healthcare acquired Pseudomonas cases  <p>■ Number of Pseudomonas cases (SBU)</p>

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 September 2021 there were 104 cases of healthcare acquired pressure ulcers, 39 of which were community acquired and 65 were hospital acquired. There were 7 grade 3+ pressure ulcers in September 2021, of which 6 were community acquired and 1 was hospital acquired. The rate per 100,000 admissions decreased from 853 in July 2021 to 767 in August 2021. 	Total number of hospital and community acquired Pressure Ulcers (PU) and rate per 100,000 admissions  <p>■ Pressure Ulcers (Community) ■ Pressure Ulcers (Hospital)</p>

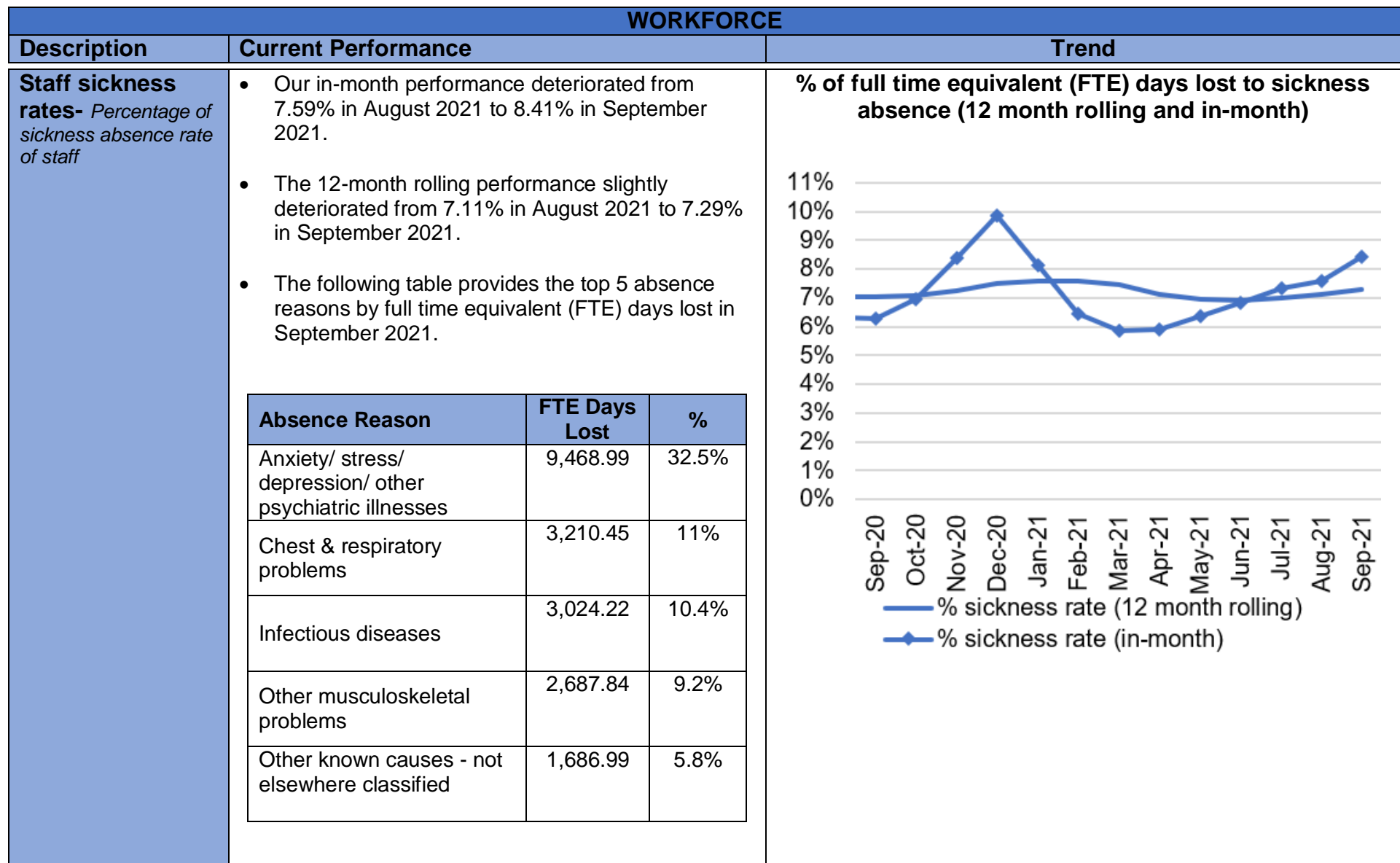
SERIOUS INCIDENTS		
Description	Current Performance	Trend
Serious Incidents- 1. <i>The number of serious incidents</i> 2. <i>The number of Never Events</i> 3. <i>Of the serious incidents due for assurance, the percentage which were assured within the agreed timescales</i>	1. The Health Board reported 3 Serious Incidents for the month of October 2021 to Welsh Government. The breakdown of incidents in October 2021 are set out below: - Neath port Talbot – 1 - Singleton - 2	1. and 2. Number of serious incidents and never events
	2. There were no new Never Event's reported in October 2021.	
	3. In October 2021, performance against the 80% target of submitting closure forms within 60 working days was 0%.	3. % of serious incidents closed within 60 days

* 0% compliance in June, July, October and November 2020 and January, March, April, May and June 2021

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 207 in September 2021. This is 5.8% less than September 2020 where 219 falls were recorded.	<p>Number of inpatient Falls</p> <table><thead><tr><th>Month</th><th>Falls</th></tr></thead><tbody><tr><td>Sep-20</td><td>219</td></tr><tr><td>Oct-20</td><td>190</td></tr><tr><td>Nov-20</td><td>245</td></tr><tr><td>Dec-20</td><td>245</td></tr><tr><td>Jan-21</td><td>205</td></tr><tr><td>Feb-21</td><td>180</td></tr><tr><td>Mar-21</td><td>175</td></tr><tr><td>Apr-21</td><td>180</td></tr><tr><td>May-21</td><td>230</td></tr><tr><td>Jun-21</td><td>175</td></tr><tr><td>Jul-21</td><td>195</td></tr><tr><td>Aug-21</td><td>200</td></tr><tr><td>Sep-21</td><td>207</td></tr></tbody></table> <p>■ Inpatient falls</p>	Month	Falls	Sep-20	219	Oct-20	190	Nov-20	245	Dec-20	245	Jan-21	205	Feb-21	180	Mar-21	175	Apr-21	180	May-21	230	Jun-21	175	Jul-21	195	Aug-21	200	Sep-21	207
Month	Falls																													
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Dec-20	245																													
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Jun-21	175																													
Jul-21	195																													
Aug-21	200																													
Sep-21	207																													

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 October 2021, the percentage of completed discharge summaries was 61%.</p> <p>In October 2021, compliance ranged from 56% in Singleton Hospital to 67% in Mental Health & Learning Disabilities.</p>	<p>% discharge summaries approved and sent</p> <table><thead><tr><th>Month</th><th>Percentage</th></tr></thead><tbody><tr><td>Oct-20</td><td>67%</td></tr><tr><td>Nov-20</td><td>65%</td></tr><tr><td>Dec-20</td><td>58%</td></tr><tr><td>Jan-21</td><td>66%</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>66%</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>61%</td></tr></tbody></table> <p>■ % of completed discharge summaries</p>	Month	Percentage	Oct-20	67%	Nov-20	65%	Dec-20	58%	Jan-21	66%	Feb-21	62%	Mar-21	63%	Apr-21	62%	May-21	66%	Jun-21	68%	Jul-21	61%	Aug-21	61%	Sep-21	67%	Oct-21	61%
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Sep-21	67%																													
Oct-21	61%																													

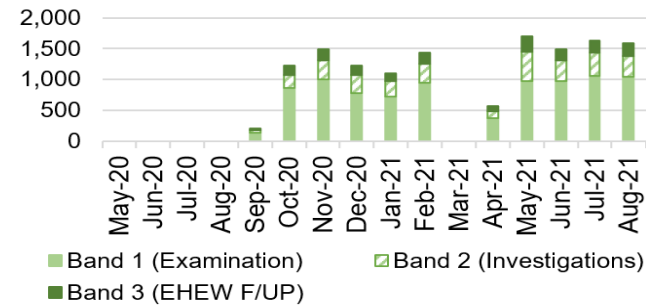
CRUDE MORTALITY																																																																								
Description	Current Performance	Trend																																																																						
Crude Mortality Rate	September 2021 reports the crude mortality rate for the Health Board at 1.03% compared with 1.02% in August 2021.	Crude hospital mortality rate by Hospital (74 years of age or less) <table><caption>Crude hospital mortality rate by Hospital (74 years of age or less)</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>Sep-20</td><td>1.5%</td><td>0.4%</td><td>0.2%</td><td>0.9%</td></tr><tr><td>Oct-20</td><td>1.6%</td><td>0.4%</td><td>0.2%</td><td>1.0%</td></tr><tr><td>Nov-20</td><td>1.7%</td><td>0.5%</td><td>0.2%</td><td>1.1%</td></tr><tr><td>Dec-20</td><td>1.8%</td><td>0.5%</td><td>0.2%</td><td>1.2%</td></tr><tr><td>Jan-21</td><td>1.9%</td><td>0.6%</td><td>0.3%</td><td>1.2%</td></tr><tr><td>Feb-21</td><td>2.0%</td><td>0.6%</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>0.1%</td><td>1.0%</td></tr></tbody></table>	Month	Morriston Hospital	Singleton Hospital	NPT Hospital	HB Total	Sep-20	1.5%	0.4%	0.2%	0.9%	Oct-20	1.6%	0.4%	0.2%	1.0%	Nov-20	1.7%	0.5%	0.2%	1.1%	Dec-20	1.8%	0.5%	0.2%	1.2%	Jan-21	1.9%	0.6%	0.3%	1.2%	Feb-21	2.0%	0.6%	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%	0.1%	1.0%
	Month		Morriston Hospital	Singleton Hospital	NPT Hospital	HB Total																																																																		
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	A breakdown by Hospital for September 2021: <ul style="list-style-type: none">• Morriston – 1.72%• Singleton – 0.53%• NPT – 0.11%																																																																							



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

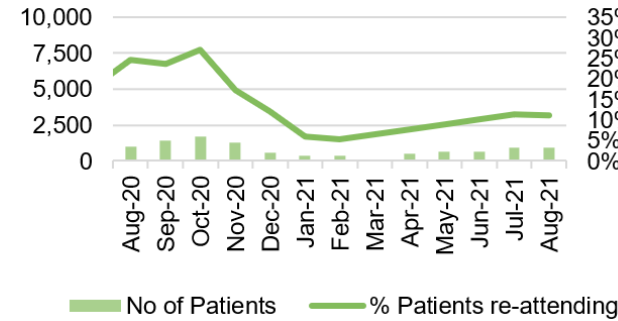


Chart 9: District Nursing- Number of patients on caseload

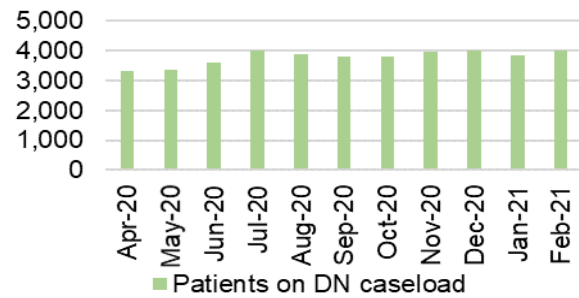


Chart 13: % of patients with a RTT (referral to stage 1) of 26 weeks or less for Restorative Dentistry

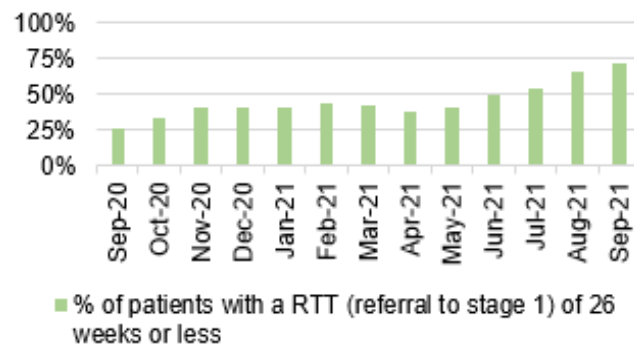


Chart 2: Common Ailment Scheme - Number of consultations provided

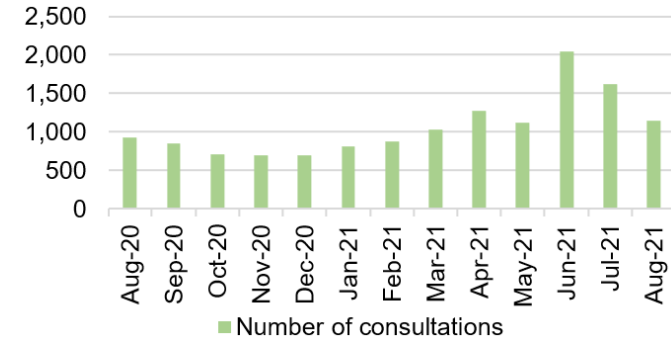


Chart 6: Pregnancy Advisory Service- Referral to appointment within 5 days and treatment within 10 days

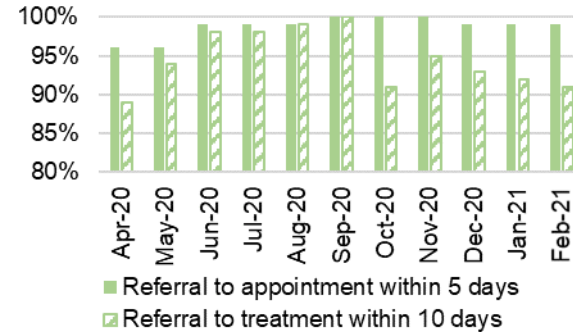


Chart 10: District Nursing- Total number of contacts

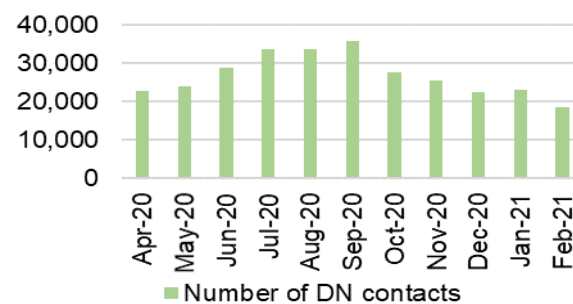
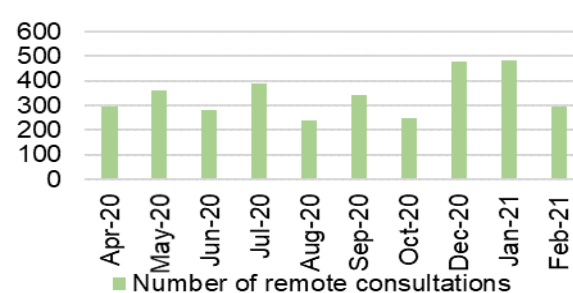


Chart 14: Audiology- Number of remote consultations



Nov-20 data not available

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

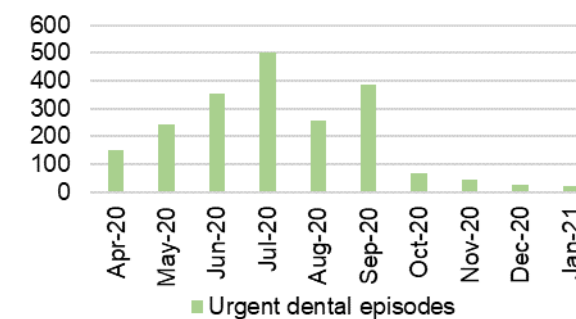


Chart 7: Sexual health services- Attendances at sexual health ambulance

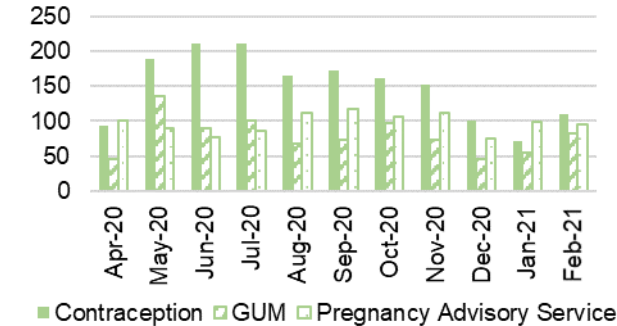


Chart 11: Community wound clinic- Number of attendances and number of home visits

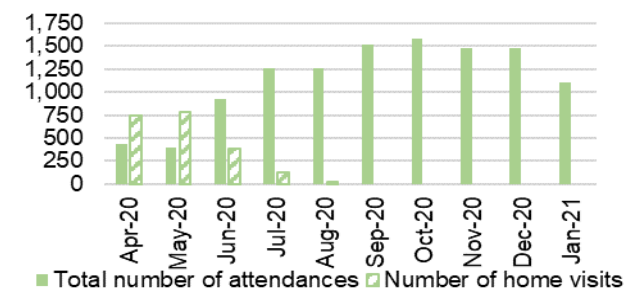


Chart 15: Audiology- Total number of patients waiting > 14 weeks

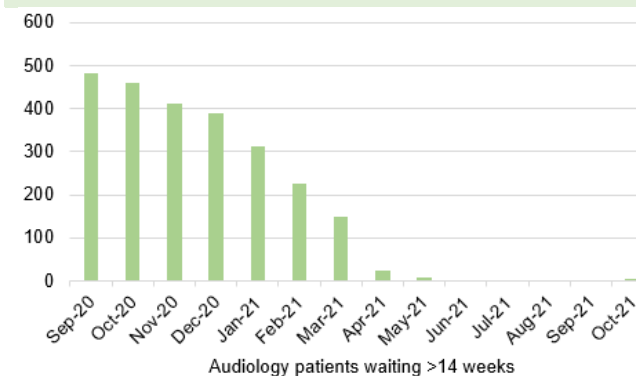


Chart 4: General Dental Practice activity- Total number of telephone calls received

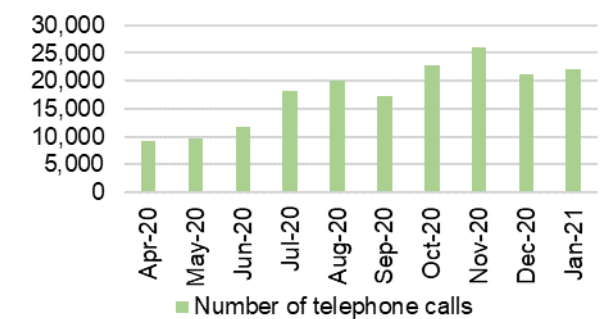


Chart 8: Sexual health services- Patient outcomes

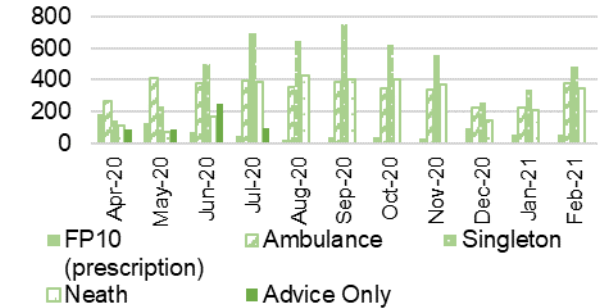


Chart 12: Community wound clinic- Number of assessments by location

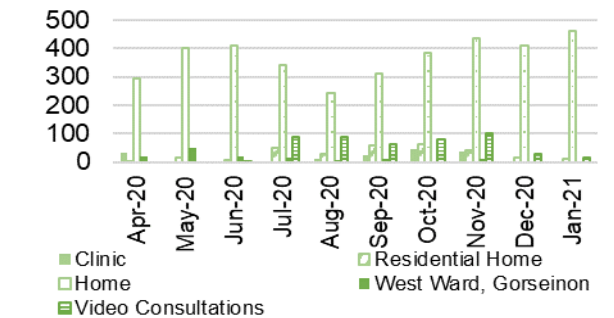
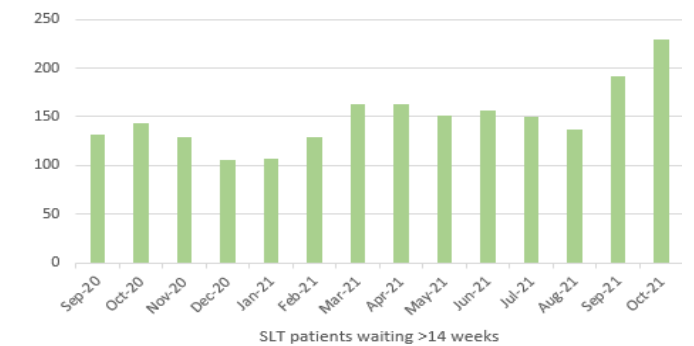


Chart 16: Speech & Language Therapy- Number of patients waiting > 14 weeks



Harm from reduction in non-Covid activity

5.2 Planned Care Overview

Chart 1: Number of GP Referrals into secondary care

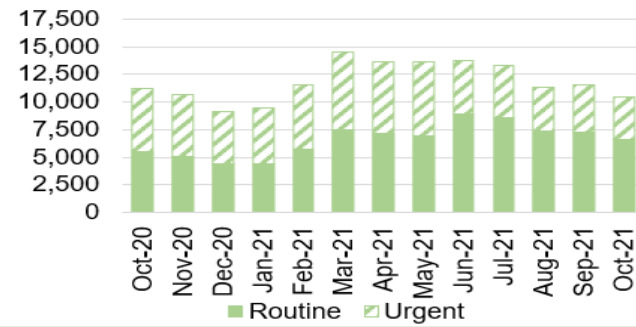


Chart 2: Number of patients waiting over 26 weeks for an outpatient appointment

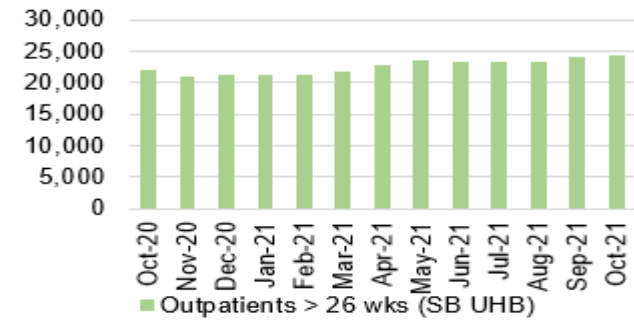


Chart 3: Number of patients waiting over 36 weeks for treatment

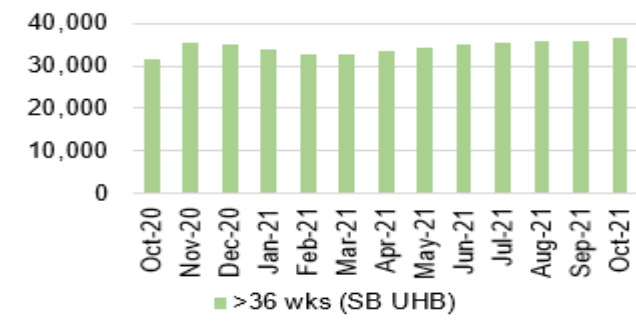


Chart 4: % patients waiting less than 26 weeks from referral to treatment

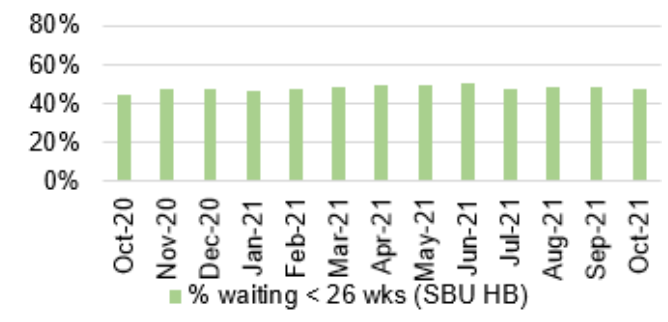


Chart 5: Number of patients waiting for reportable diagnostics over 8 weeks

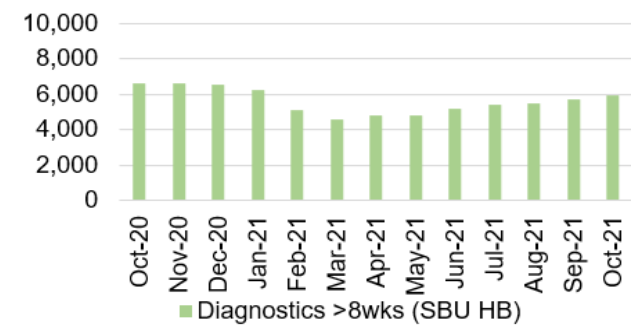


Chart 6: Number of patients waiting for reportable Cardiac diagnostics over 8 weeks

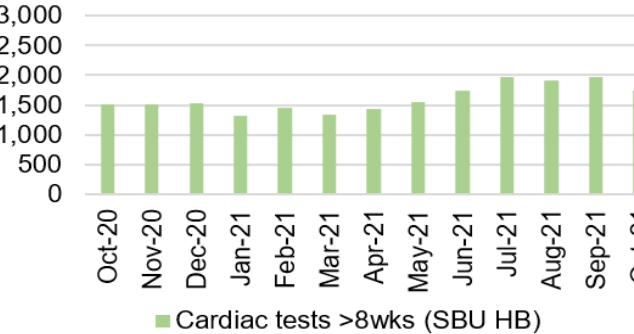


Chart 7: Number of patients waiting more than 14 weeks for Therapies

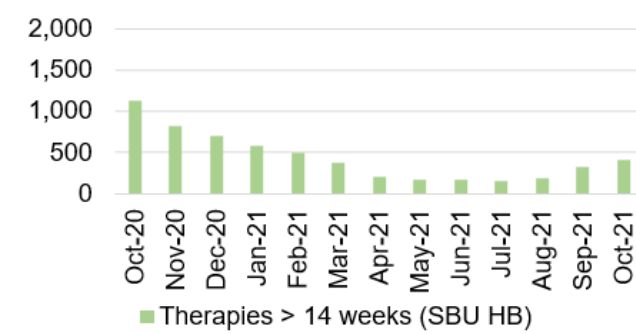


Chart 8: Cancer referrals

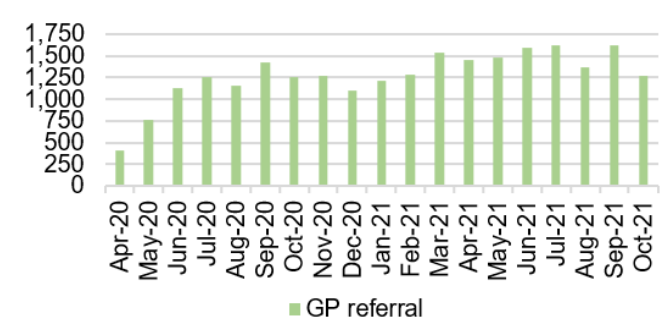


Chart 9: Single Cancer Pathway- % of patients starting definitive treatment within 62 days from point of suspicion

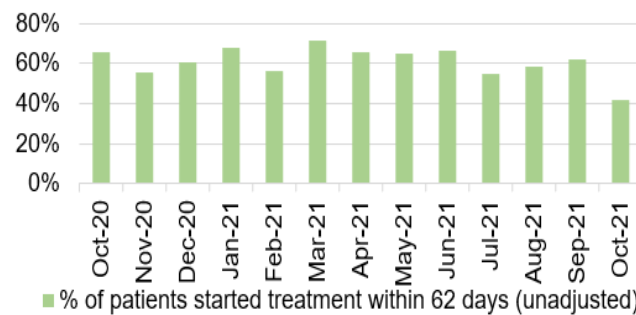


Chart 10: Number of new cancer patients starting definitive treatment

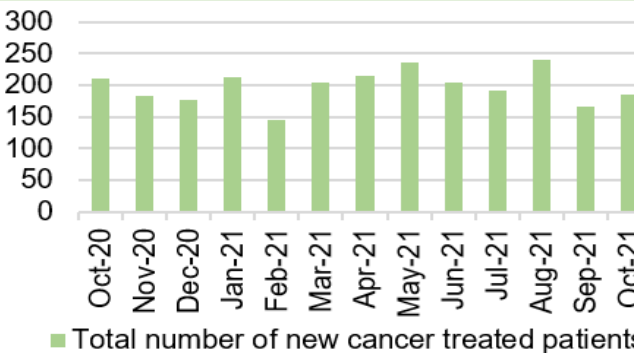


Chart 11: Single Cancer Pathway backlog- patients waiting over 63 days

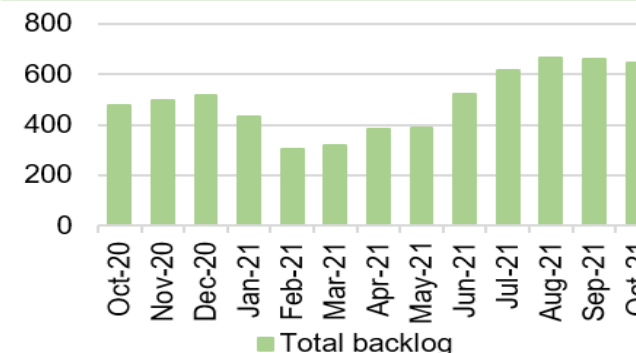


Chart 12: Number of patients waiting for an outpatient follow-up who are delayed past their target date

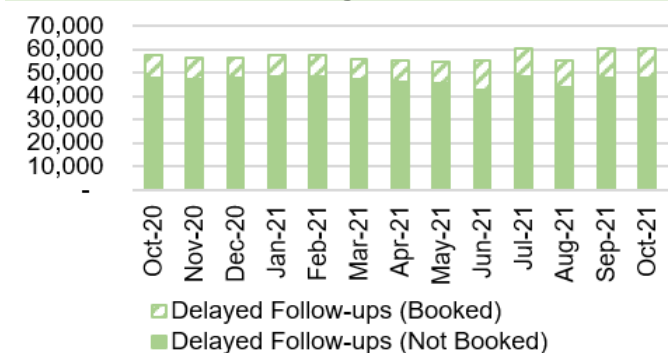


Chart 13: Number of patients without a documented clinical review date

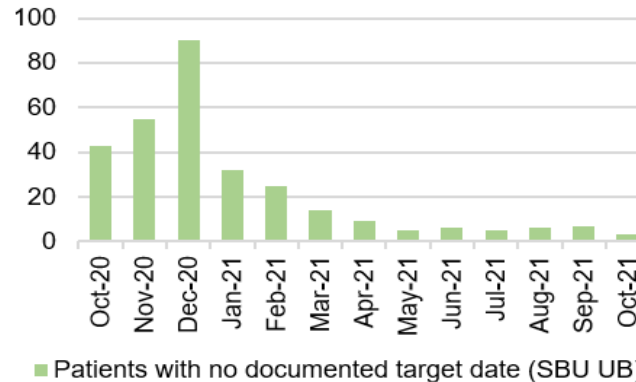


Chart 14: Ophthalmology patients without an allocated health risk factor

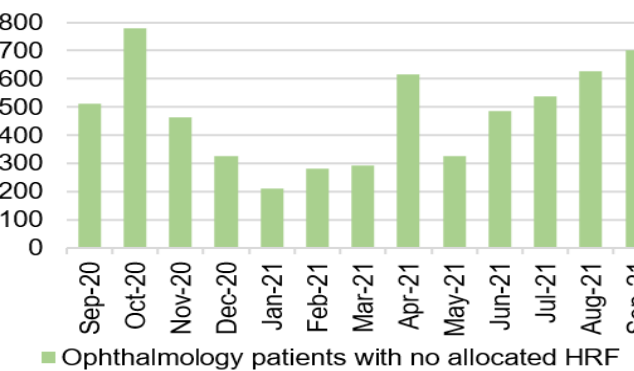


Chart 15: Total number of patients on the follow-up waiting list

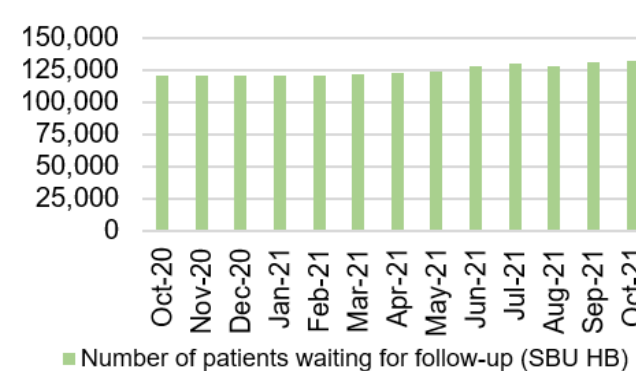
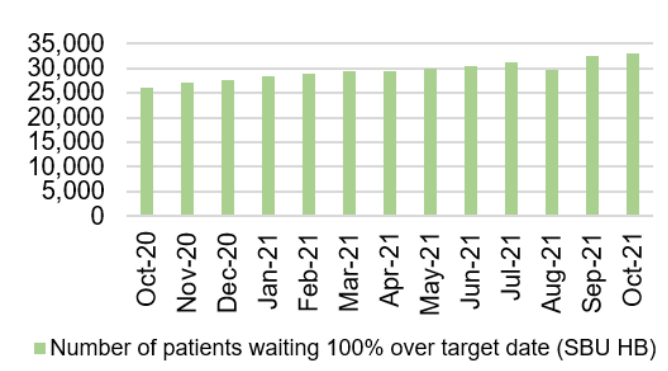


Chart 16: Number of patients delayed by over 100%



Planned Care- Overview (October 2021)

Demand		Waiting Times	
10,488 (9%↓) Total GP referrals	24,483 (2%↑) Patients waiting over 26 weeks for a new outpatient appointment	36,420 (2%↑) Patients waiting over 36 weeks for treatment	27,495 (3%↑) Patients waiting over 52 weeks for treatment
6,589 (10%↓) Routine GP referrals	47.4% (0.7%↓) Patients waiting under 26 weeks from referral to treatment	5,939 (4%↑) Patients waiting over 8 weeks for all reportable diagnostics	1,744 (11.3%↓) Patients waiting over 8 weeks for Cardiac diagnostics only
3,899 (8%↓) Urgent GP referrals	414 (29%↑) Patients waiting over 14 weeks for reportable therapies	131,554 (0.45%↑) Patients waiting for a follow-up outpatient appointment	33,121 (1.7%↑) Patients waiting for a follow-up outpatients appointment who are delayed over 100%
Cancer		Theatre Efficiencies	
1,655 (%12↓) Number of USC referrals received	646 (2.6%↓) USC backlog over 63 days	66% (6%↓) Theatre utilisation rate	50% (4%↑) % of theatres sessions finishing early
50% (12.2%↓) <i>draft Oct '21</i> Patients starting first definitive cancer treatment within 62 days		46% (4%↑) % of theatres sessions starting late	42% (1%↓) Operations cancelled on the day

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

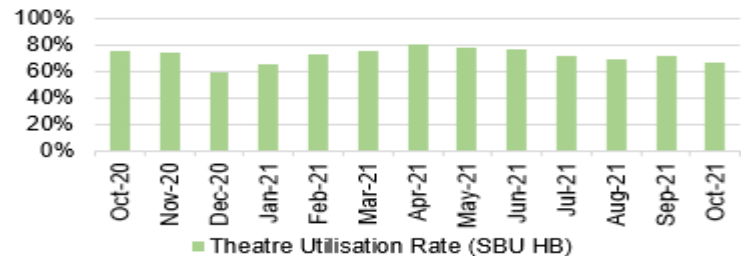
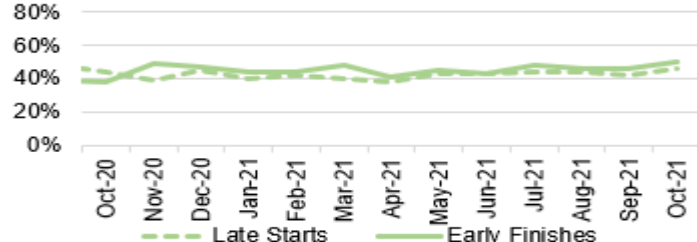
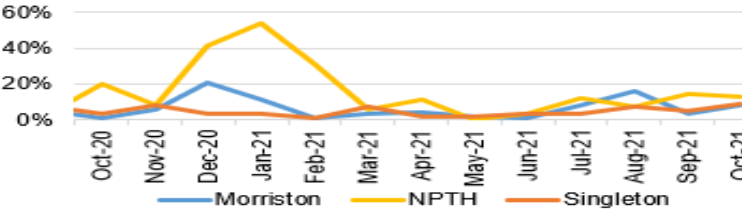
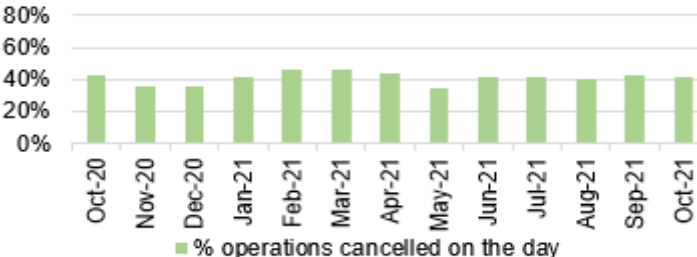
5.3 Updates on key measures

PLANNED CARE	
Description	Current Performance
Referrals and shape of the waiting list 1. GP Referrals <i>The number of Stage 1 additions per week</i> 2. Stage 1 additions <i>The number of new patients that have been added to the outpatient waiting list</i> 3. Size of the waiting list <i>Total number of patients on the waiting list by stage as at December 2019</i> 4. Size of the waiting list <i>Total number of patients on the waiting list by stage as at October 2021</i>	<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. October 2021 has seen a decrease 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 8,200 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> <p>Trend</p> <div> <div> 1. Number of GP referrals received by SBU Health Board </div> <div> 2. Number of stage 1 additions per week </div> <div> 3. Total size of the waiting list and movement (December 2019) </div> <div> 4. Total size of the waiting list and movement </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	<p>The number of patients waiting over 26 weeks for a first outpatient appointment is still a challenge. October 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 23,997 in September 2021 to 24,483 in October 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 and is now remaining steady.</p>
	Trend
	<div> <div> 1. Number of stage 1 over 26 weeks- HB total <p>■ Outpatients > 26 wks (SB UHB)</p> </div> <div> 2. Number of stage 1 over 26 weeks- Hospital level <p>— Morriston — Singleton — PCT — NPTH</p> </div> <div> 3. Patients waiting over 26 weeks for an outpatient appointment by specialty as at September 2021 </div> <div> 4. Outpatient activity undertaken <p>— New outpatient attendances - - - Follow-up attendances</p> </div> </div>
<p>**Please note – reporting measures changed from June 2021 – Using power BI platform</p>	

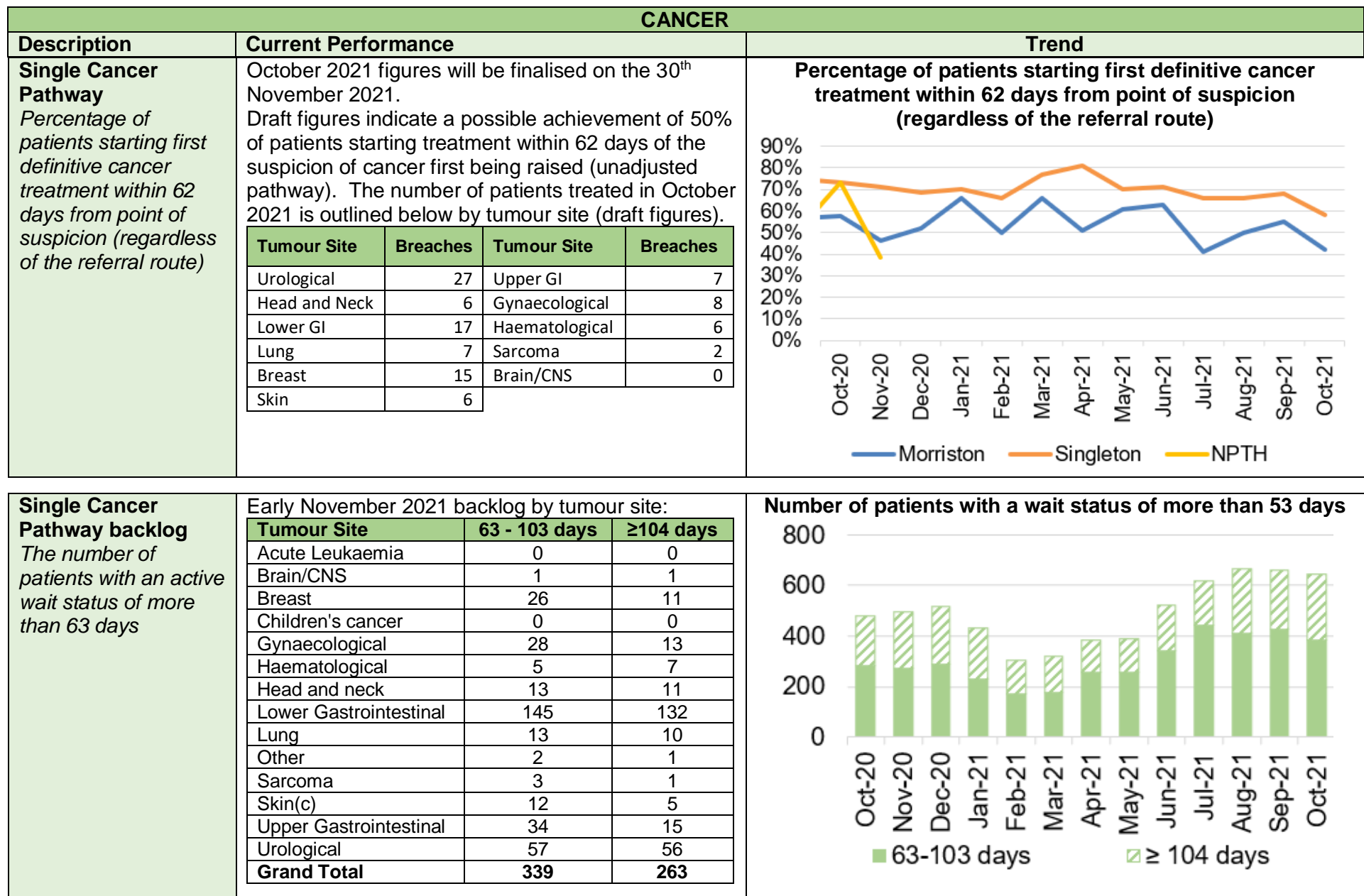
PLANNED CARE																																																																																																																														
Description	Current Performance																																																																																																																													
Patients waiting over 36 weeks for treatment <i>1. Number of patients waiting more than 36 weeks for treatment and the number of elective patients admitted for treatment- Health Board Total</i> <i>2. Number of patients waiting more than 36 weeks for treatment and the number of elective patients admitted for treatment- Hospital level</i> <i>3. Number of elective admissions</i>	<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 October 2021, there was 36,420 patients waiting over 36 weeks which is a 2% in-month increase from September 2021. 27,495 of the 36,420 were waiting over 52 weeks in October 2021.</p>																																																																																																																													
	Trend																																																																																																																													
	<div><div>1. Number of patients waiting over 36 weeks- HB total <table><caption>1. Number of patients waiting over 36 weeks- HB total</caption><thead><tr><th>Month</th><th>Patients</th></tr></thead><tbody><tr><td>Oct-20</td><td>31,000</td></tr><tr><td>Nov-20</td><td>34,000</td></tr><tr><td>Dec-20</td><td>34,000</td></tr><tr><td>Jan-21</td><td>33,000</td></tr><tr><td>Feb-21</td><td>32,000</td></tr><tr><td>Mar-21</td><td>32,000</td></tr><tr><td>Apr-21</td><td>33,000</td></tr><tr><td>May-21</td><td>33,000</td></tr><tr><td>Jun-21</td><td>34,000</td></tr><tr><td>Jul-21</td><td>34,000</td></tr><tr><td>Aug-21</td><td>34,000</td></tr><tr><td>Sep-21</td><td>34,000</td></tr><tr><td>Oct-21</td><td>36,420</td></tr></tbody></table><p>■ > 36 wks (SB UHB)</p></div><div>2. Number of patients waiting over 36 weeks- Hospital level <table><caption>2. Number of patients waiting over 36 weeks- Hospital level</caption><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>PCT</th><th>NPTH</th></tr></thead><tbody><tr><td>Oct-20</td><td>18,000</td><td>10,000</td><td>0</td><td>0</td></tr><tr><td>Nov-20</td><td>22,000</td><td>12,000</td><td>0</td><td>0</td></tr><tr><td>Dec-20</td><td>22,000</td><td>12,000</td><td>0</td><td>0</td></tr><tr><td>Jan-21</td><td>21,000</td><td>11,000</td><td>0</td><td>0</td></tr><tr><td>Feb-21</td><td>21,000</td><td>11,000</td><td>0</td><td>0</td></tr><tr><td>Mar-21</td><td>21,000</td><td>11,000</td><td>0</td><td>0</td></tr><tr><td>Apr-21</td><td>22,000</td><td>12,000</td><td>0</td><td>0</td></tr><tr><td>May-21</td><td>22,000</td><td>12,000</td><td>0</td><td>0</td></tr><tr><td>Jun-21</td><td>23,000</td><td>12,000</td><td>0</td><td>0</td></tr><tr><td>Jul-21</td><td>23,000</td><td>12,000</td><td>0</td><td>0</td></tr><tr><td>Aug-21</td><td>24,000</td><td>12,000</td><td>0</td><td>0</td></tr><tr><td>Sep-21</td><td>23,000</td><td>12,000</td><td>0</td><td>0</td></tr><tr><td>Oct-21</td><td>24,000</td><td>12,000</td><td>0</td><td>0</td></tr></tbody></table><p>— Morriston — Singleton — PCT — NPTH</p></div><div>3. Number of elective admissions <table><caption>3. Number of elective admissions</caption><thead><tr><th>Month</th><th>Admitted elective patients</th></tr></thead><tbody><tr><td>Oct-20</td><td>3,500</td></tr><tr><td>Nov-20</td><td>3,200</td></tr><tr><td>Dec-20</td><td>3,100</td></tr><tr><td>Jan-21</td><td>3,500</td></tr><tr><td>Feb-21</td><td>3,500</td></tr><tr><td>Mar-21</td><td>4,200</td></tr><tr><td>Apr-21</td><td>3,800</td></tr><tr><td>May-21</td><td>4,200</td></tr><tr><td>Jun-21</td><td>5,500</td></tr><tr><td>Jul-21</td><td>5,300</td></tr><tr><td>Aug-21</td><td>4,200</td></tr><tr><td>Sep-21</td><td>4,000</td></tr><tr><td>Oct-21</td><td>3,800</td></tr></tbody></table><p>— Admitted elective patients</p></div></div>	Month	Patients	Oct-20	31,000	Nov-20	34,000	Dec-20	34,000	Jan-21	33,000	Feb-21	32,000	Mar-21	32,000	Apr-21	33,000	May-21	33,000	Jun-21	34,000	Jul-21	34,000	Aug-21	34,000	Sep-21	34,000	Oct-21	36,420	Month	Morriston	Singleton	PCT	NPTH	Oct-20	18,000	10,000	0	0	Nov-20	22,000	12,000	0	0	Dec-20	22,000	12,000	0	0	Jan-21	21,000	11,000	0	0	Feb-21	21,000	11,000	0	0	Mar-21	21,000	11,000	0	0	Apr-21	22,000	12,000	0	0	May-21	22,000	12,000	0	0	Jun-21	23,000	12,000	0	0	Jul-21	23,000	12,000	0	0	Aug-21	24,000	12,000	0	0	Sep-21	23,000	12,000	0	0	Oct-21	24,000	12,000	0	0	Month	Admitted elective patients	Oct-20	3,500	Nov-20	3,200	Dec-20	3,100	Jan-21	3,500	Feb-21	3,500	Mar-21	4,200	Apr-21	3,800	May-21	4,200	Jun-21	5,500	Jul-21	5,300	Aug-21	4,200	Sep-21	4,000	Oct-21
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Total waiting times <i>Percentage of patients waiting less than 26 weeks from referral to treatment</i>	<p>Throughout 2019/20 the overall percentage of patients waiting less than 26 weeks from referral to treatment ranged between 80% and 88%. Whereas, throughout the Covid19 pandemic in 2020/21 the percentage ranged between 41% and 72%.</p> <p>In October 2021, 47.4% of patients were waiting under 26 weeks from referral to treatment, which is a reduction from September 2021.</p>	<p>Percentage of patient waiting less than 26 weeks</p> <table><caption>Estimated data for 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>Oct-20</td><td>35%</td><td>45%</td><td>30%</td><td>80%</td></tr><tr><td>Nov-20</td><td>40%</td><td>48%</td><td>40%</td><td>85%</td></tr><tr><td>Dec-20</td><td>40%</td><td>48%</td><td>40%</td><td>85%</td></tr><tr><td>Jan-21</td><td>40%</td><td>48%</td><td>40%</td><td>85%</td></tr><tr><td>Feb-21</td><td>40%</td><td>48%</td><td>40%</td><td>85%</td></tr><tr><td>Mar-21</td><td>40%</td><td>48%</td><td>40%</td><td>85%</td></tr><tr><td>Apr-21</td><td>40%</td><td>48%</td><td>40%</td><td>85%</td></tr><tr><td>May-21</td><td>40%</td><td>48%</td><td>40%</td><td>85%</td></tr><tr><td>Jun-21</td><td>40%</td><td>48%</td><td>40%</td><td>85%</td></tr><tr><td>Jul-21</td><td>40%</td><td>48%</td><td>40%</td><td>85%</td></tr><tr><td>Aug-21</td><td>40%</td><td>48%</td><td>40%</td><td>85%</td></tr><tr><td>Sep-21</td><td>40%</td><td>48%</td><td>40%</td><td>85%</td></tr><tr><td>Oct-21</td><td>45%</td><td>48%</td><td>40%</td><td>75%</td></tr></tbody></table>	Month	Morriston	Singleton	PCT	NPTH	Oct-20	35%	45%	30%	80%	Nov-20	40%	48%	40%	85%	Dec-20	40%	48%	40%	85%	Jan-21	40%	48%	40%	85%	Feb-21	40%	48%	40%	85%	Mar-21	40%	48%	40%	85%	Apr-21	40%	48%	40%	85%	May-21	40%	48%	40%	85%	Jun-21	40%	48%	40%	85%	Jul-21	40%	48%	40%	85%	Aug-21	40%	48%	40%	85%	Sep-21	40%	48%	40%	85%	Oct-21	45%	48%	40%	75%
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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>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><caption>Estimated data for 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>48%</td><td>100%</td></tr><tr><td>Jan-21</td><td>48%</td><td>100%</td></tr><tr><td>Feb-21</td><td>48%</td><td>100%</td></tr><tr><td>Mar-21</td><td>48%</td><td>100%</td></tr><tr><td>Apr-21</td><td>48%</td><td>100%</td></tr><tr><td>May-21</td><td>48%</td><td>100%</td></tr><tr><td>Jun-21</td><td>48%</td><td>100%</td></tr><tr><td>Jul-21</td><td>48%</td><td>100%</td></tr><tr><td>Aug-21</td><td>48%</td><td>100%</td></tr><tr><td>Sep-21</td><td>48%</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	48%	100%	Jan-21	48%	100%	Feb-21	48%	100%	Mar-21	48%	100%	Apr-21	48%	100%	May-21	48%	100%	Jun-21	48%	100%	Jul-21	48%	100%	Aug-21	48%	100%	Sep-21	48%	100%	Oct-21	48.6%	100%																												
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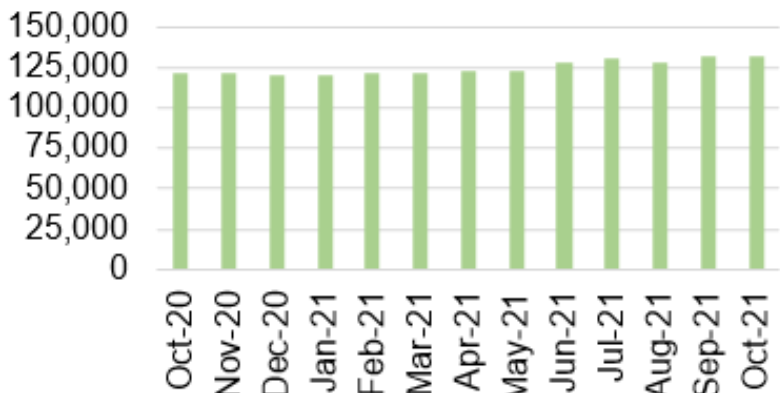
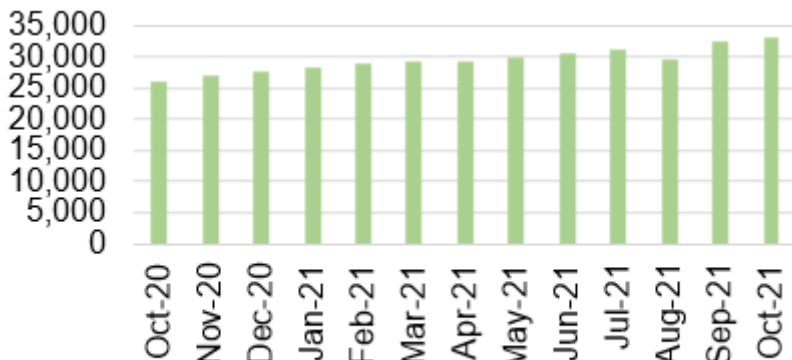
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Description	Current Performance	Trend																																																							
Theatre Efficiency <i>1. Theatre Utilisation Rates</i> <i>2. % of theatre sessions starting late</i> <i>3. % of theatre sessions finishing early</i> <i>4. % of theatre sessions cancelled at short notice (<28 days)</i> <i>5. % of operations cancelled on the day</i>	<p>In October 2021 the Theatre Utilisation rate was 66%. This is an in-month reduction of 6% and a 9% decrease compared to October 2020.</p>	<p>1. Theatre Utilisation Rates</p>  <table><caption>Theatre Utilisation Rate (SBU HB)</caption><thead><tr><th>Month</th><th>Rate (%)</th></tr></thead><tbody><tr><td>Oct-20</td><td>75</td></tr><tr><td>Nov-20</td><td>75</td></tr><tr><td>Dec-20</td><td>60</td></tr><tr><td>Jan-21</td><td>65</td></tr><tr><td>Feb-21</td><td>75</td></tr><tr><td>Mar-21</td><td>75</td></tr><tr><td>Apr-21</td><td>80</td></tr><tr><td>May-21</td><td>78</td></tr><tr><td>Jun-21</td><td>75</td></tr><tr><td>Jul-21</td><td>70</td></tr><tr><td>Aug-21</td><td>70</td></tr><tr><td>Sep-21</td><td>72</td></tr><tr><td>Oct-21</td><td>66</td></tr></tbody></table>	Month	Rate (%)	Oct-20	75	Nov-20	75	Dec-20	60	Jan-21	65	Feb-21	75	Mar-21	75	Apr-21	80	May-21	78	Jun-21	75	Jul-21	70	Aug-21	70	Sep-21	72	Oct-21	66																											
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<p>In October 2021, 50% of theatre sessions finished early. This is 4% higher than figures seen in September 2021 but is 12% more than in October 2020.</p>	<p>4.% theatre sessions cancelled at short notice (<28 days)</p>  <table><caption>% 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>Oct-20</td><td>10</td><td>10</td><td>10</td></tr><tr><td>Nov-20</td><td>10</td><td>10</td><td>10</td></tr><tr><td>Dec-20</td><td>10</td><td>40</td><td>10</td></tr><tr><td>Jan-21</td><td>10</td><td>50</td><td>10</td></tr><tr><td>Feb-21</td><td>10</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>10</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>10</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></tbody></table>	Month	Morriston (%)	NPTH (%)	Singleton (%)	Oct-20	10	10	10	Nov-20	10	10	10	Dec-20	10	40	10	Jan-21	10	50	10	Feb-21	10	10	10	Mar-21	10	10	10	Apr-21	10	10	10	May-21	10	10	10	Jun-21	10	10	10	Jul-21	10	10	10	Aug-21	10	10	10	Sep-21	10	10	10	Oct-21	10	10	10
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<p>9% of theatre sessions were cancelled at short notice in October 2021. This is an increase of 3% from September 2021 and is 5% more than in September 2020.</p>	<p>5. % of operations cancelled on the day</p>  <table><caption>% of operations cancelled on the day</caption><thead><tr><th>Month</th><th>Rate (%)</th></tr></thead><tbody><tr><td>Oct-20</td><td>40</td></tr><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>40</td></tr><tr><td>Mar-21</td><td>40</td></tr><tr><td>Apr-21</td><td>40</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>40</td></tr><tr><td>Oct-21</td><td>40</td></tr></tbody></table>	Month	Rate (%)	Oct-20	40	Nov-20	35	Dec-20	35	Jan-21	40	Feb-21	40	Mar-21	40	Apr-21	40	May-21	35	Jun-21	40	Jul-21	40	Aug-21	40	Sep-21	40	Oct-21	40																												
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<p>Of the operations cancelled in October 2021, 42% of them were cancelled on the day. This is a reduction from 43% in September 2021 and a 1% reduction from October 2020.</p>																																																									

PLANNED CARE																																																																																																																		
Description	Current Performance	Trend																																																																																																																
Diagnostics waiting times <i>The number of patients waiting more than 8 weeks for specified diagnostics</i>	<p>In October 2021, there was an increase in the number of patients waiting over 8 weeks for specified diagnostics. It increased from 5,732 in September 2021 to 5,939 in October 2021.</p> <p>The following is a breakdown for the 8-week breaches by diagnostic test for October 2021:</p> <ul style="list-style-type: none">• Endoscopy= 2,635• Cardiac tests= 1,744• Cystoscopy= 16	<p>Number of patients waiting longer than 8 weeks for diagnostics</p> <table><caption>Approximate data for Diagnostics Waiting Times (Oct-20 to Oct-21)</caption><thead><tr><th>Month</th><th>Cardiac tests</th><th>Endoscopy</th><th>Other diagnostics (inc. radiology)</th></tr></thead><tbody><tr><td>Oct-20</td><td>1,500</td><td>2,000</td><td>3,000</td></tr><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>2,800</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>1,400</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>2,100</td><td>1,100</td></tr><tr><td>Jun-21</td><td>1,800</td><td>2,000</td><td>1,400</td></tr><tr><td>Jul-21</td><td>1,900</td><td>2,000</td><td>1,400</td></tr><tr><td>Aug-21</td><td>1,800</td><td>1,900</td><td>1,700</td></tr><tr><td>Sep-21</td><td>1,900</td><td>2,100</td><td>1,600</td></tr><tr><td>Oct-21</td><td>1,700</td><td>2,600</td><td>1,600</td></tr></tbody></table>	Month	Cardiac tests	Endoscopy	Other diagnostics (inc. radiology)	Oct-20	1,500	2,000	3,000	Nov-20	1,500	2,000	3,000	Dec-20	1,500	2,200	2,800	Jan-21	1,300	2,200	2,500	Feb-21	1,400	2,000	1,500	Mar-21	1,300	2,000	1,200	Apr-21	1,400	2,000	1,200	May-21	1,500	2,100	1,100	Jun-21	1,800	2,000	1,400	Jul-21	1,900	2,000	1,400	Aug-21	1,800	1,900	1,700	Sep-21	1,900	2,100	1,600	Oct-21	1,700	2,600	1,600																																																								
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Therapy waiting times <i>The number of patients waiting more than 14 weeks for specified therapies</i>	<p>In October 2021 there were 414 patients waiting over 14 weeks for specified Therapies.</p> <p>The breakdown for the breaches in October 2021 are:</p> <ul style="list-style-type: none">• Speech & Language Therapy= 229• Podiatry = 156• Dietetics = 25	<p>Number of patients waiting longer than 14 weeks for therapies</p> <table><caption>Approximate data for Therapy Waiting Times (Oct-20 to Oct-21)</caption><thead><tr><th>Month</th><th>Occ Therapy/ LD (MH)</th><th>Occ Therapy (exc. MH)</th><th>Audiology</th><th>Speech & Language</th><th>Dietetics</th><th>Phsyio</th><th>Podiatry</th></tr></thead><tbody><tr><td>Oct-20</td><td>1,000</td><td>500</td><td>100</td><td>100</td><td>50</td><td>50</td><td>50</td></tr><tr><td>Nov-20</td><td>700</td><td>300</td><td>100</td><td>100</td><td>50</td><td>50</td><td>50</td></tr><tr><td>Dec-20</td><td>600</td><td>200</td><td>100</td><td>100</td><td>50</td><td>50</td><td>50</td></tr><tr><td>Jan-21</td><td>500</td><td>100</td><td>100</td><td>100</td><td>50</td><td>50</td><td>50</td></tr><tr><td>Feb-21</td><td>400</td><td>100</td><td>100</td><td>100</td><td>50</td><td>50</td><td>50</td></tr><tr><td>Mar-21</td><td>300</td><td>100</td><td>100</td><td>100</td><td>50</td><td>50</td><td>50</td></tr><tr><td>Apr-21</td><td>200</td><td>100</td><td>100</td><td>100</td><td>50</td><td>50</td><td>50</td></tr><tr><td>May-21</td><td>150</td><td>100</td><td>100</td><td>100</td><td>50</td><td>50</td><td>50</td></tr><tr><td>Jun-21</td><td>150</td><td>100</td><td>100</td><td>100</td><td>50</td><td>50</td><td>50</td></tr><tr><td>Jul-21</td><td>150</td><td>100</td><td>100</td><td>100</td><td>50</td><td>50</td><td>50</td></tr><tr><td>Aug-21</td><td>150</td><td>100</td><td>100</td><td>100</td><td>50</td><td>50</td><td>50</td></tr><tr><td>Sep-21</td><td>150</td><td>100</td><td>100</td><td>100</td><td>50</td><td>50</td><td>50</td></tr><tr><td>Oct-21</td><td>150</td><td>100</td><td>100</td><td>100</td><td>50</td><td>50</td><td>50</td></tr></tbody></table>	Month	Occ Therapy/ LD (MH)	Occ Therapy (exc. MH)	Audiology	Speech & Language	Dietetics	Phsyio	Podiatry	Oct-20	1,000	500	100	100	50	50	50	Nov-20	700	300	100	100	50	50	50	Dec-20	600	200	100	100	50	50	50	Jan-21	500	100	100	100	50	50	50	Feb-21	400	100	100	100	50	50	50	Mar-21	300	100	100	100	50	50	50	Apr-21	200	100	100	100	50	50	50	May-21	150	100	100	100	50	50	50	Jun-21	150	100	100	100	50	50	50	Jul-21	150	100	100	100	50	50	50	Aug-21	150	100	100	100	50	50	50	Sep-21	150	100	100	100	50	50	50	Oct-21	150	100	100	100	50	50	50
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CANCER		
Description	Current Performance	Trend
Cancer demand and shape of the waiting list	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.	<div>1. Number of USC referrals</div>
	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.	
1. Number of Urgent Suspected Cancer (USC) referrals received		
2. Source of suspicion for patients on Single Cancer Pathway (SCP)	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.	<div>2. Source of suspicion for patients starting cancer treatment</div>



CANCER																																																																		
Description	Current Performance	Trend																																																																
USC First Outpatient Appointments <i>The number of patients at first outpatient appointment stage by days waiting</i>	To date, early November 2021 figures show total wait volumes have decreased by 16%, 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 November 2021 <table><tr><th>FIRST OPA</th><th>31-Oct</th><th>07-Nov</th><th>% change</th></tr><tr><td>Acute Leukaemia</td><td>0</td><td>0</td><td>0%</td></tr><tr><td>Brain/CNS</td><td>0</td><td>1</td><td>0%</td></tr><tr><td>Breast</td><td>5</td><td>1</td><td>-80%</td></tr><tr><td>Children’s Cancer</td><td>1</td><td>2</td><td>100%</td></tr><tr><td>Gynaecological</td><td>49</td><td>56</td><td>14%</td></tr><tr><td>Haematological</td><td>1</td><td>4</td><td>300%</td></tr><tr><td>Head and Neck</td><td>58</td><td>41</td><td>-29%</td></tr><tr><td>Lower GI</td><td>185</td><td>154</td><td>-17%</td></tr><tr><td>Lung</td><td>12</td><td>12</td><td>0%</td></tr><tr><td>Other</td><td>61</td><td>32</td><td>-48%</td></tr><tr><td>Sarcoma</td><td>13</td><td>16</td><td>23%</td></tr><tr><td>Skin</td><td>150</td><td>117</td><td>-22%</td></tr><tr><td>Upper GI</td><td>75</td><td>67</td><td>-11%</td></tr><tr><td>Urological</td><td>31</td><td>35</td><td>13%</td></tr><tr><td></td><td>641</td><td>538</td><td>-16%</td></tr></table>	FIRST OPA	31-Oct	07-Nov	% change	Acute Leukaemia	0	0	0%	Brain/CNS	0	1	0%	Breast	5	1	-80%	Children’s Cancer	1	2	100%	Gynaecological	49	56	14%	Haematological	1	4	300%	Head and Neck	58	41	-29%	Lower GI	185	154	-17%	Lung	12	12	0%	Other	61	32	-48%	Sarcoma	13	16	23%	Skin	150	117	-22%	Upper GI	75	67	-11%	Urological	31	35	13%		641	538	-16%
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Radiotherapy waiting times <i>The percentage of patients receiving radiotherapy treatment</i>	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. <table><tr><th>Measure</th><th>Target</th><th>Oct-21</th></tr><tr><td>Scheduled (21 Day Target)</td><td>80%</td><td>37%</td></tr><tr><td>Scheduled (28 Day Target)</td><td>100%</td><td>84%</td></tr><tr><td>Urgent SC (7 Day Target)</td><td>80%</td><td>30%</td></tr><tr><td>Urgent SC (14 Day Target)</td><td>100%</td><td>90%</td></tr><tr><td>Emergency (within 1 day)</td><td>80%</td><td>100%</td></tr><tr><td>Emergency (within 2 days)</td><td>100%</td><td>100%</td></tr><tr><td>Elective Delay (21 Day Target)</td><td>80%</td><td>89%</td></tr><tr><td>Elective Delay (28 Day Target)</td><td>100%</td><td>94%</td></tr></table>	Measure	Target	Oct-21	Scheduled (21 Day Target)	80%	37%	Scheduled (28 Day Target)	100%	84%	Urgent SC (7 Day Target)	80%	30%	Urgent SC (14 Day Target)	100%	90%	Emergency (within 1 day)	80%	100%	Emergency (within 2 days)	100%	100%	Elective Delay (21 Day Target)	80%	89%	Elective Delay (28 Day Target)	100%	94%	Radiotherapy waiting times 																																					
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FOLLOW-UP APPOINTMENTS																																																										
Description	Current Performance	Trend																																																								
Follow-up appointments <i>1. The total number of patients on the follow-up waiting list</i> <i>2. The number of patients waiting 100% over target for a follow-up appointment</i>	<p>In October 2021, the overall size of the follow-up waiting list increased by 591 patients compared with September 2021 (from 130,963 to 131,554).</p> <p>In October 2021, there was a total of 60,447 patients waiting for a follow-up past their target date. This is an in-month increase of 0.2% (from 60,340 in September 2021 to 60,447).</p> <p>Of the 60,447 delayed follow-ups in October 2021, 12,538 had appointment dates and 47,909 were still waiting for an appointment.</p> <p>In addition, 33,121 patients were waiting 100%+ over target date in October 2021. This is a 1.7% increase when compared with September 2021.</p>	<div><p>1. Total number of patients waiting for a follow-up</p><table><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>Oct-20</td><td>120,000</td></tr><tr><td>Nov-20</td><td>120,000</td></tr><tr><td>Dec-20</td><td>120,000</td></tr><tr><td>Jan-21</td><td>120,000</td></tr><tr><td>Feb-21</td><td>120,000</td></tr><tr><td>Mar-21</td><td>120,000</td></tr><tr><td>Apr-21</td><td>120,000</td></tr><tr><td>May-21</td><td>120,000</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>125,000</td></tr></tbody></table><p>■ Number of patients waiting for follow-up (SBU HB)</p></div> <div><p>2. Delayed follow-ups: Number of patients waiting 100% over target</p><table><caption>2. Delayed follow-ups: Number of patients waiting 100% over target date (SBU HB)</caption><thead><tr><th>Month</th><th>Number of patients</th></tr></thead><tbody><tr><td>Oct-20</td><td>25,000</td></tr><tr><td>Nov-20</td><td>26,000</td></tr><tr><td>Dec-20</td><td>27,000</td></tr><tr><td>Jan-21</td><td>28,000</td></tr><tr><td>Feb-21</td><td>29,000</td></tr><tr><td>Mar-21</td><td>29,000</td></tr><tr><td>Apr-21</td><td>29,000</td></tr><tr><td>May-21</td><td>30,000</td></tr><tr><td>Jun-21</td><td>30,000</td></tr><tr><td>Jul-21</td><td>31,000</td></tr><tr><td>Aug-21</td><td>30,000</td></tr><tr><td>Sep-21</td><td>32,000</td></tr><tr><td>Oct-21</td><td>33,000</td></tr></tbody></table><p>■ Number of patients waiting 100% over target date (SBU HB)</p></div>	Month	Number of patients	Oct-20	120,000	Nov-20	120,000	Dec-20	120,000	Jan-21	120,000	Feb-21	120,000	Mar-21	120,000	Apr-21	120,000	May-21	120,000	Jun-21	125,000	Jul-21	125,000	Aug-21	125,000	Sep-21	125,000	Oct-21	125,000	Month	Number of patients	Oct-20	25,000	Nov-20	26,000	Dec-20	27,000	Jan-21	28,000	Feb-21	29,000	Mar-21	29,000	Apr-21	29,000	May-21	30,000	Jun-21	30,000	Jul-21	31,000	Aug-21	30,000	Sep-21	32,000	Oct-21	33,000
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PATIENT EXPERIENCE		
Description	Current Performance	Trend
Patient experience 1. Number of friends and family surveys completed 2. Percentage of patients/ service users who would recommend and highly recommend	<ul style="list-style-type: none"> Health Board Friends & Family patient satisfaction level in October 2021 was 92% and 2,733 surveys were completed. <ul style="list-style-type: none"> Singleton/ Neath Port Talbot Hospitals Service Group completed 1,118 surveys in October 2021, with a recommended score of 92%. Morrison Hospital completed 941 surveys in October 2021, with a recommended score of 92%. Primary & Community Care completed 89 surveys for October 2021, with a recommended score of 90%. The Mental Health Service Group completed 10 surveys for October 2021, with a recommended score of 90%. 	<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																																																						
Patient concerns <i>1. Number of formal complaints received</i> <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>1. In August 2021, the Health Board received 115 formal complaints; this is lower than the number seen in July 2021 (139).</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>1. Number of formal complaints received</p> <table border="1"><caption>Number of formal complaints received (Estimated Data)</caption><thead><tr><th>Month</th><th>MH & LD</th><th>Morriston Hospital</th><th>NPT Hospital</th><th>PCCS</th><th>Singleton Hospital</th></tr></thead><tbody><tr><td>Jan-21</td><td>10</td><td>32</td><td>5</td><td>8</td><td>12</td></tr><tr><td>Feb-21</td><td>12</td><td>40</td><td>5</td><td>8</td><td>18</td></tr><tr><td>Mar-21</td><td>10</td><td>50</td><td>5</td><td>20</td><td>22</td></tr><tr><td>Apr-21</td><td>25</td><td>22</td><td>5</td><td>8</td><td>22</td></tr><tr><td>May-21</td><td>12</td><td>52</td><td>5</td><td>15</td><td>22</td></tr><tr><td>Jun-21</td><td>18</td><td>68</td><td>10</td><td>15</td><td>30</td></tr><tr><td>Jul-21</td><td>22</td><td>50</td><td>5</td><td>18</td><td>28</td></tr><tr><td>Aug-21</td><td>12</td><td>50</td><td>5</td><td>8</td><td>32</td></tr></tbody></table> <p>MH & LD Morriston Hospital NPT Hospital PCCS Singleton Hospital</p>	Month	MH & LD	Morriston Hospital	NPT Hospital	PCCS	Singleton Hospital	Jan-21	10	32	5	8	12	Feb-21	12	40	5	8	18	Mar-21	10	50	5	20	22	Apr-21	25	22	5	8	22	May-21	12	52	5	15	22	Jun-21	18	68	10	15	30	Jul-21	22	50	5	18	28	Aug-21	12	50	5	8	32
	Month	MH & LD	Morriston Hospital	NPT Hospital	PCCS	Singleton Hospital																																																		
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Jun-21	18	68	10	15	30																																																			
Jul-21	22	50	5	18	28																																																			
Aug-21	12	50	5	8	32																																																			
	<p>2. The overall Health Board rate for responding to concerns within 30 working days was 83% in August 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><tr><th></th><th>30 day response rate</th></tr><tr><td>Neath Port Talbot Hospital</td><td>67%</td></tr><tr><td>Morriston Hospital</td><td>94%</td></tr><tr><td>Mental Health & Learning Disabilities</td><td>62%</td></tr><tr><td>Primary, Community and Therapies</td><td>75%</td></tr><tr><td>Singleton Hospital</td><td>81%</td></tr></table>		30 day response rate	Neath Port Talbot Hospital	67%	Morriston Hospital	94%	Mental Health & Learning Disabilities	62%	Primary, Community and Therapies	75%	Singleton Hospital	81%	<p>2. Response rate for concerns within 30 days</p> <table border="1"><caption>Response rate for concerns within 30 days (Estimated Data)</caption><thead><tr><th>Month</th><th>Health Board Total</th></tr></thead><tbody><tr><td>Aug-20</td><td>72%</td></tr><tr><td>Sep-20</td><td>82%</td></tr><tr><td>Oct-20</td><td>75%</td></tr><tr><td>Nov-20</td><td>82%</td></tr><tr><td>Dec-20</td><td>80%</td></tr><tr><td>Jan-21</td><td>70%</td></tr><tr><td>Feb-21</td><td>80%</td></tr><tr><td>Mar-21</td><td>80%</td></tr><tr><td>Apr-21</td><td>78%</td></tr><tr><td>May-21</td><td>78%</td></tr><tr><td>Jun-21</td><td>68%</td></tr><tr><td>Jul-21</td><td>68%</td></tr><tr><td>Aug-21</td><td>83%</td></tr></tbody></table> <p>Health Board Total HB Profile</p>	Month	Health Board Total	Aug-20	72%	Sep-20	82%	Oct-20	75%	Nov-20	82%	Dec-20	80%	Jan-21	70%	Feb-21	80%	Mar-21	80%	Apr-21	78%	May-21	78%	Jun-21	68%	Jul-21	68%	Aug-21	83%														
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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

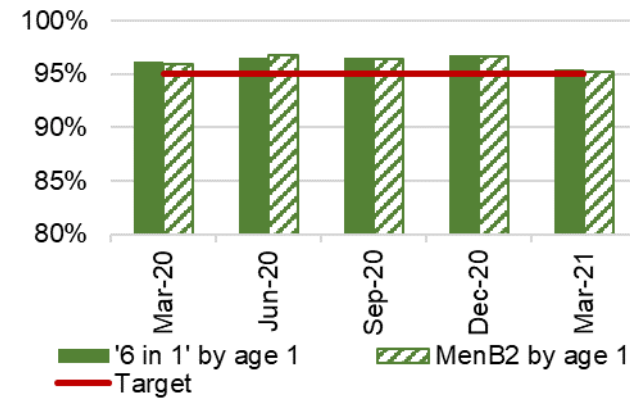


Chart 2: % children who received PCV2 vaccine and Rotavirus vaccine by age 1

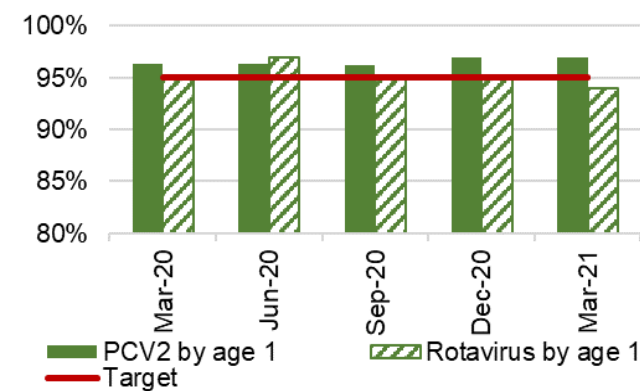


Chart 3: % children who received MMR1 vaccine and PCVf3 vaccine by age 2

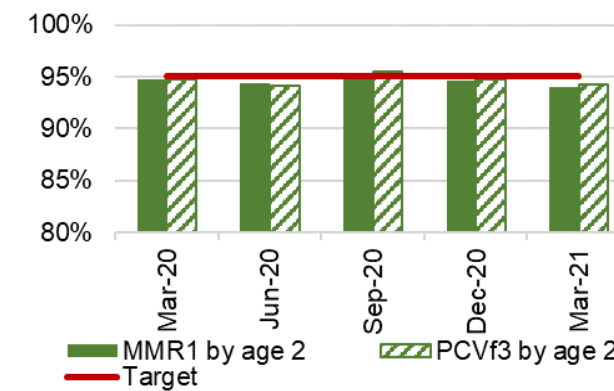


Chart 4: % children who received MenB4 vaccine and Hib/MenC vaccine by age 2



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

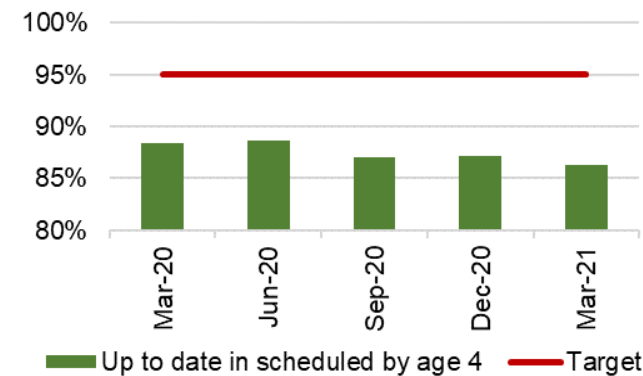


Chart 6: % children who received 2 doses of the MMR vaccine and 4 in 1 vaccine by age 5

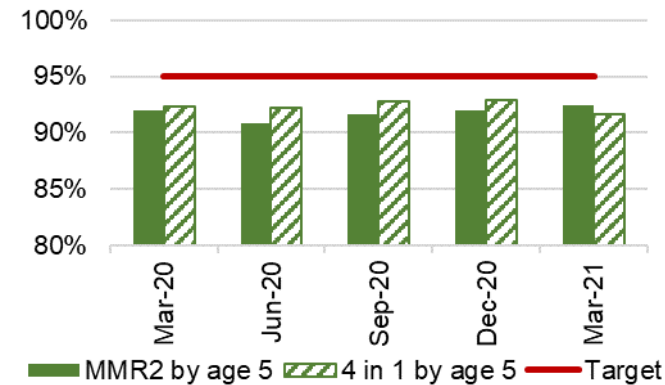


Chart 7: % children who received MMR vaccine and teenage booster by age 16

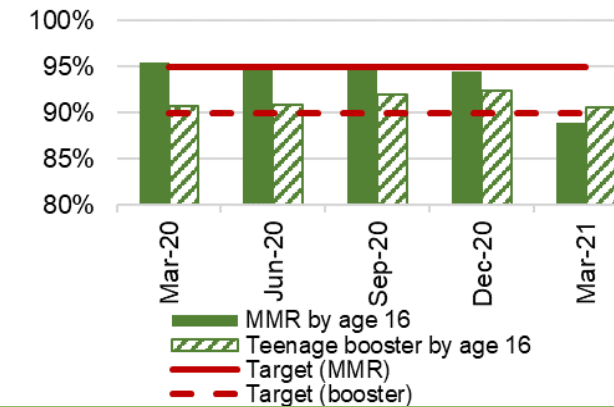
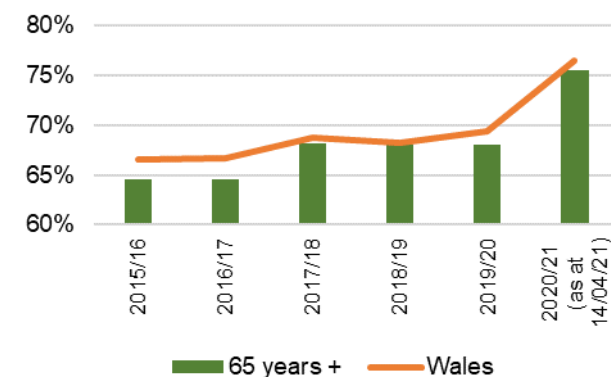


Chart 8: % children who received MenACWY vaccine by age 16

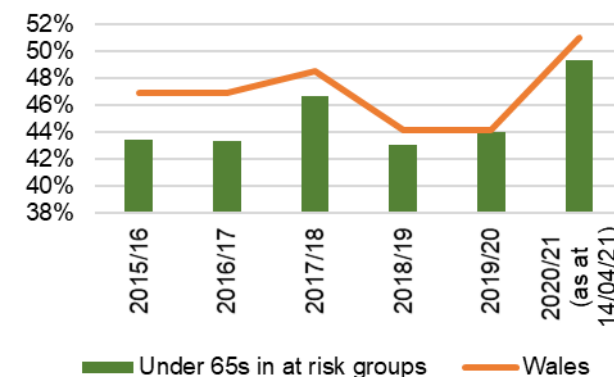


Chart 9: Influenza uptake for amongst 65 year olds and over



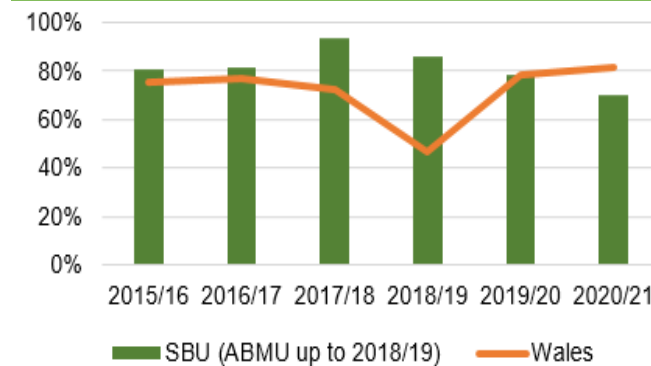
Data prior to April 2019 relates to Abertawe Bro Morgannwg University Health Board

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



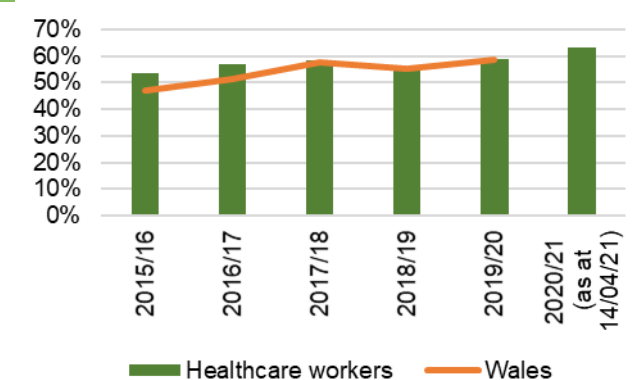
Data prior to April 2019 relates to Abertawe Bro Morgannwg University Health Board

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

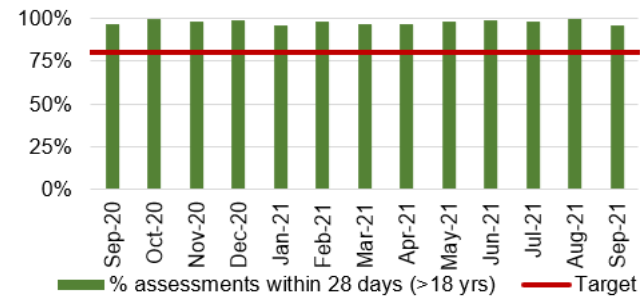


Chart 2: % of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS

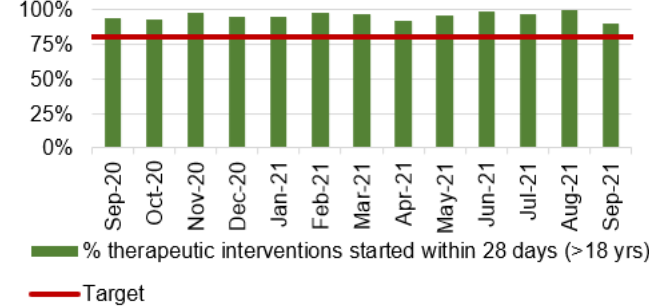


Chart 3: % of health board residents in receipt of secondary mental health services (all ages) who have a valid care and treatment plan

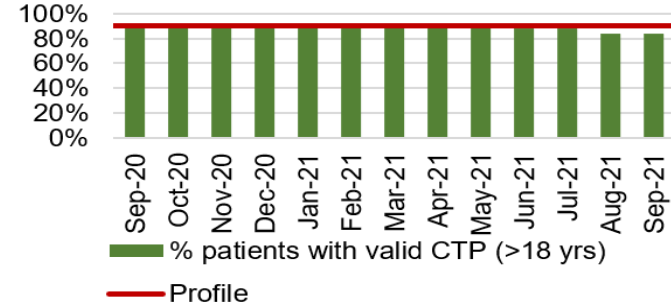


Chart 4: % of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health



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

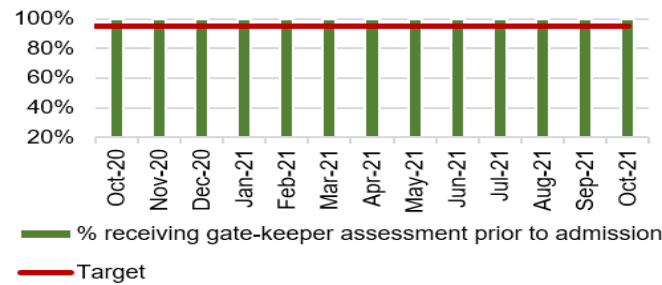


Chart 6: 100% of those admitted without a gate keeping assessment will receive a follow up assessment by CRHTS within 24hrs of admission

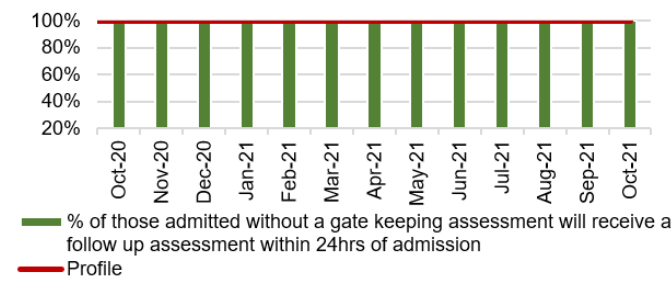


Chart 7: % of patients waiting under 14 weeks for Therapies

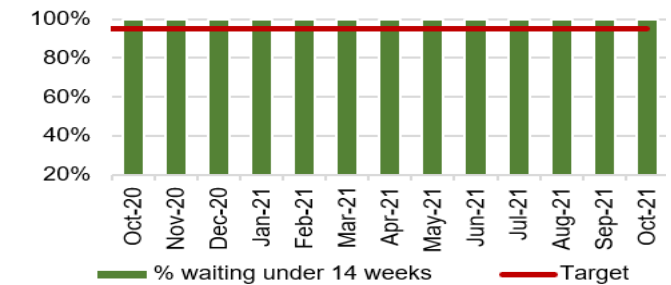


Chart 8: Number of Mental Health Delayed Transfers of Care (DTOCs)

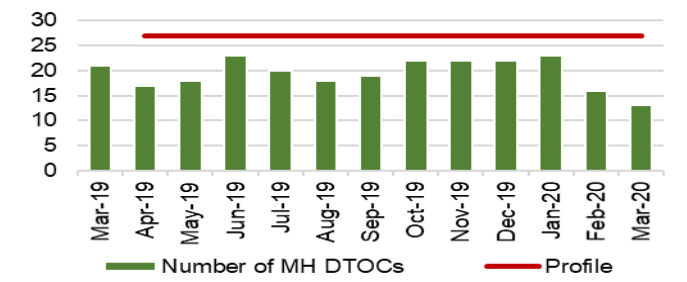


Chart 9: Number of patients detained under the Mental Health Act as a percentage of all admissions

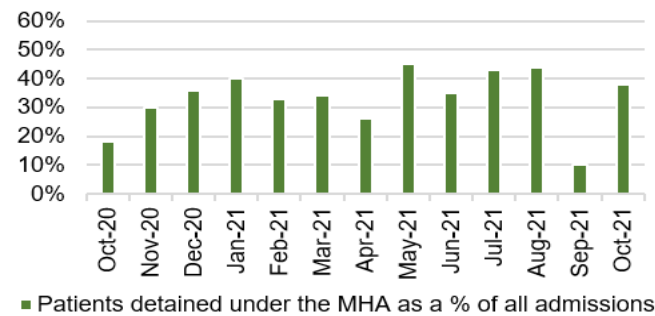


Chart 10: Number of patients subject to Deprivation of Liberty Safeguards (DOLS)

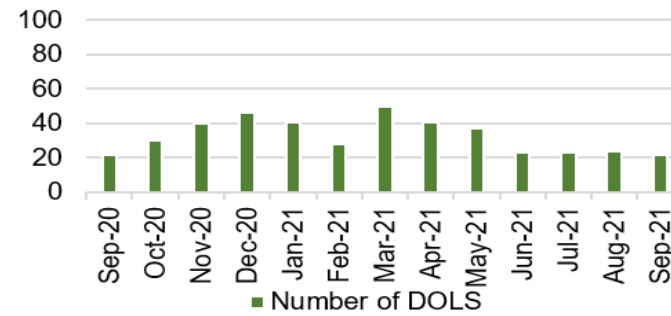


Chart 11: Number of Serious Incidents

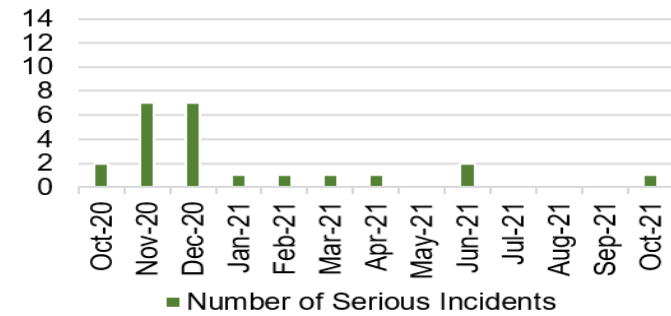
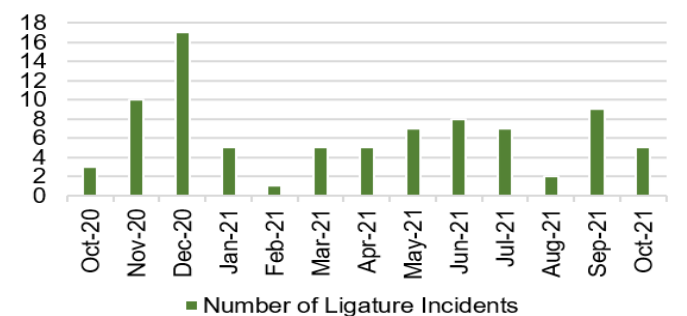


Chart 12: Number of ligature incidents



Child & Adolescent Mental Health Services (CAMHS)

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

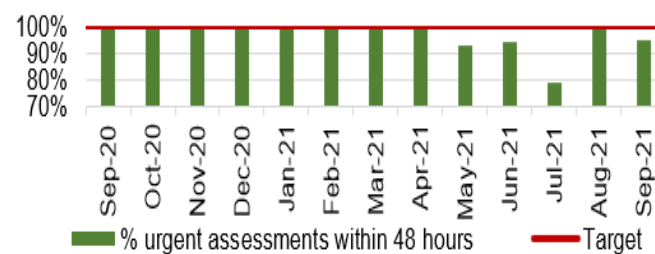


Chart 14: Neuro-developmental disorder assessment and intervention received within 26 weeks

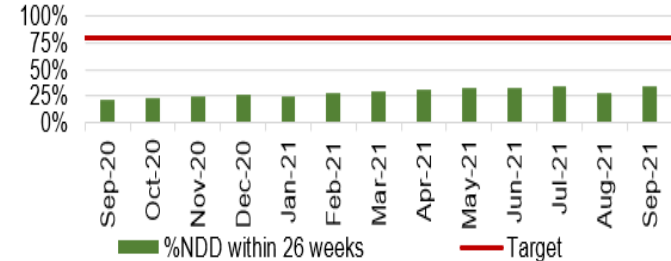


Chart 15: Assessment and intervention within 28 days

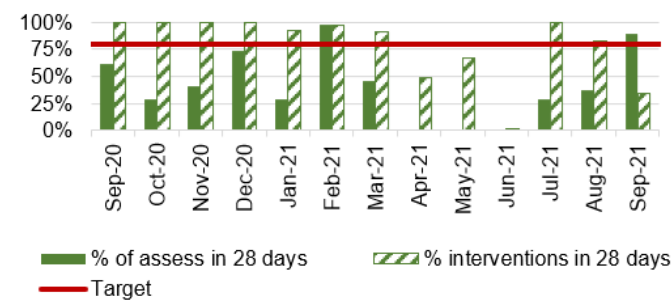
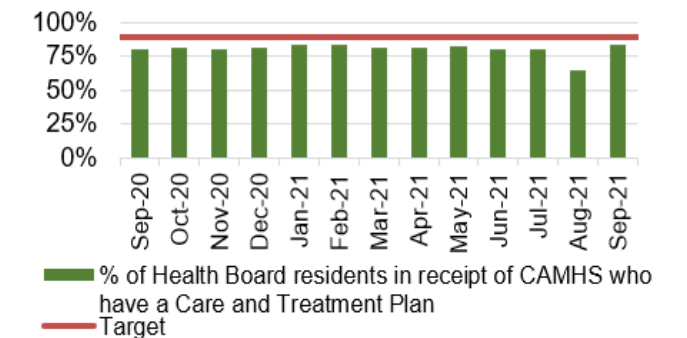


Chart 16: % of residents with a Care and Treatment Plan



6.3 Updates on key measures

ADULT MENTAL HEALTH																														
Description	Current Performance	Trend																												
Adult Mental Health Measures: 1. % of MH assessments undertaken within 28 days from the date of receipt of referral (18 years and over)	1. In September 2021, 96% of assessments were undertaken within 28 days of referral for patients 18 years and over.	1. % Mental Health assessments undertaken within 28 days from receipt of referral <table><caption>1. % Mental Health assessments undertaken within 28 days from receipt of referral</caption><thead><tr><th>Month</th><th>% assessments within 28 days (>18 yrs)</th></tr></thead><tbody><tr><td>Sep-20</td><td>95%</td></tr><tr><td>Oct-20</td><td>95%</td></tr><tr><td>Nov-20</td><td>95%</td></tr><tr><td>Dec-20</td><td>95%</td></tr><tr><td>Jan-21</td><td>95%</td></tr><tr><td>Feb-21</td><td>95%</td></tr><tr><td>Mar-21</td><td>95%</td></tr><tr><td>Apr-21</td><td>95%</td></tr><tr><td>May-21</td><td>95%</td></tr><tr><td>Jun-21</td><td>95%</td></tr><tr><td>Jul-21</td><td>95%</td></tr><tr><td>Aug-21</td><td>95%</td></tr><tr><td>Sep-21</td><td>96%</td></tr></tbody></table>	Month	% assessments within 28 days (>18 yrs)	Sep-20	95%	Oct-20	95%	Nov-20	95%	Dec-20	95%	Jan-21	95%	Feb-21	95%	Mar-21	95%	Apr-21	95%	May-21	95%	Jun-21	95%	Jul-21	95%	Aug-21	95%	Sep-21	96%
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Aug-21	95%																													
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2. % of therapeutic interventions started within 28 days following an assessment by LPMHSS (18 years and over)	2. In September 2021, the percentage of therapeutic interventions started within 28 days following an assessment by the Local Primary Mental Health Support Service (LPMHSS) was 90%.	2. % Mental Health therapeutic interventions started within 28 days following LPMHSS assessment <table><caption>2. % Mental Health therapeutic interventions started within 28 days following LPMHSS assessment</caption><thead><tr><th>Month</th><th>% therapeutic interventions started within 28 days (>18 yrs)</th></tr></thead><tbody><tr><td>Sep-20</td><td>90%</td></tr><tr><td>Oct-20</td><td>90%</td></tr><tr><td>Nov-20</td><td>90%</td></tr><tr><td>Dec-20</td><td>90%</td></tr><tr><td>Jan-21</td><td>90%</td></tr><tr><td>Feb-21</td><td>90%</td></tr><tr><td>Mar-21</td><td>90%</td></tr><tr><td>Apr-21</td><td>90%</td></tr><tr><td>May-21</td><td>90%</td></tr><tr><td>Jun-21</td><td>90%</td></tr><tr><td>Jul-21</td><td>90%</td></tr><tr><td>Aug-21</td><td>90%</td></tr><tr><td>Sep-21</td><td>90%</td></tr></tbody></table>	Month	% therapeutic interventions started within 28 days (>18 yrs)	Sep-20	90%	Oct-20	90%	Nov-20	90%	Dec-20	90%	Jan-21	90%	Feb-21	90%	Mar-21	90%	Apr-21	90%	May-21	90%	Jun-21	90%	Jul-21	90%	Aug-21	90%	Sep-21	90%
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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)	3. 84% of residents in receipt of secondary care mental health services had a valid Care and Treatment Plan in September 2021.	3. % residents with a valid Care and Treatment Plan (CTP) <table><caption>3. % residents with a valid Care and Treatment Plan (CTP)</caption><thead><tr><th>Month</th><th>% patients with valid CTP (>18 yrs)</th></tr></thead><tbody><tr><td>Sep-20</td><td>95%</td></tr><tr><td>Oct-20</td><td>95%</td></tr><tr><td>Nov-20</td><td>95%</td></tr><tr><td>Dec-20</td><td>95%</td></tr><tr><td>Jan-21</td><td>95%</td></tr><tr><td>Feb-21</td><td>95%</td></tr><tr><td>Mar-21</td><td>95%</td></tr><tr><td>Apr-21</td><td>95%</td></tr><tr><td>May-21</td><td>95%</td></tr><tr><td>Jun-21</td><td>90%</td></tr><tr><td>Jul-21</td><td>90%</td></tr><tr><td>Aug-21</td><td>85%</td></tr><tr><td>Sep-21</td><td>84%</td></tr></tbody></table>	Month	% patients with valid CTP (>18 yrs)	Sep-20	95%	Oct-20	95%	Nov-20	95%	Dec-20	95%	Jan-21	95%	Feb-21	95%	Mar-21	95%	Apr-21	95%	May-21	95%	Jun-21	90%	Jul-21	90%	Aug-21	85%	Sep-21	84%
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4. % of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health	4. In September 2021, 100% of patients waited less than 26 weeks for psychological therapy. This was above the national target of 95%.	4. % waiting less than 26 weeks for Psychology Therapy <table><caption>4. % waiting less than 26 weeks for Psychology Therapy</caption><thead><tr><th>Month</th><th>% waiting less than 26 wks for psychological therapy</th></tr></thead><tbody><tr><td>Sep-20</td><td>100%</td></tr><tr><td>Oct-20</td><td>100%</td></tr><tr><td>Nov-20</td><td>100%</td></tr><tr><td>Dec-20</td><td>100%</td></tr><tr><td>Jan-21</td><td>100%</td></tr><tr><td>Feb-21</td><td>100%</td></tr><tr><td>Mar-21</td><td>100%</td></tr><tr><td>Apr-21</td><td>100%</td></tr><tr><td>May-21</td><td>100%</td></tr><tr><td>Jun-21</td><td>100%</td></tr><tr><td>Jul-21</td><td>100%</td></tr><tr><td>Aug-21</td><td>100%</td></tr><tr><td>Sep-21</td><td>100%</td></tr></tbody></table>	Month	% waiting less than 26 wks for psychological therapy	Sep-20	100%	Oct-20	100%	Nov-20	100%	Dec-20	100%	Jan-21	100%	Feb-21	100%	Mar-21	100%	Apr-21	100%	May-21	100%	Jun-21	100%	Jul-21	100%	Aug-21	100%	Sep-21	100%
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CHILD & ADOLESCENT MENTAL HEALTH (CAMHS)		
Description	Current Performance	Trend
<p>1. Crisis - % Urgent Assessment by CAMHS undertaken within 48 Hours from receipt of referral</p> <p>2. Primary CAMHS (P-CAMHS) - % Routine Assessment by CAMHS undertaken within 28 days from receipt of referral</p> <p>3. Primary CAMHS (P-CAMHS) - % Therapeutic interventions started within 28 days following assessment by LPMHSS</p> <p>4. NDD - % Neurodevelopmental Disorder patients receiving a Diagnostic Assessment within 26 weeks</p> <p>5. Specialist CAMHS (S-CAMHS) - % Routine Assessment by SCAMHS undertaken within 28 days from receipt of referral</p>	<p>1. In September 2021, 95% of CAMHS patients received an assessment within 48 hours.</p> <p>2. 89% of routine assessments were undertaken within 28 days from referral in September 2021 against a target of 80%.</p> <p>3. 35% of therapeutic interventions were started within 28 days following assessment by LPMHSS in September 2021.</p> <p>4. 34% of NDD patients received a diagnostic assessment within 26 weeks in September 2021 against a target of 80%.</p> <p>5. 41% of routine assessments by SCAMHS were undertaken within 28 days in September 2021.</p>	<p>1. Crisis- assessment within 48 hours</p> <p>2. and 3. P-CAMHS % assessments and therapeutic interventions within 28 days</p> <p>4. NDD- assessment within 26 weeks</p> <p>5. S-CAMHS % assessments within 28 days</p>

8. FINANCE UPDATES

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

Description	Current Performance	Trend																																																				
Revenue Financial Position – expenditure incurred against revenue resource limit	<ul style="list-style-type: none">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 £13.880m against a forecast position of £14.236m.	<div><p>HEALTH BOARD FINANCIAL PERFORMANCE 2021/22</p><table><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>3,541</td></tr><tr><td>M2</td><td>564</td><td></td><td>564</td></tr><tr><td>M3</td><td>1,976</td><td></td><td>1,976</td></tr><tr><td>M4</td><td>1,973</td><td></td><td>1,973</td></tr><tr><td>M5</td><td>2,131</td><td></td><td>2,131</td></tr><tr><td>M6</td><td>1,821</td><td></td><td>1,821</td></tr><tr><td>M7</td><td>1,875</td><td></td><td>1,875</td></tr><tr><td>M8</td><td>1,874</td><td></td><td>1,874</td></tr><tr><td>M9</td><td>1,829</td><td>2,284</td><td>1,829</td></tr><tr><td>M10</td><td></td><td>2,247</td><td>2,034</td></tr><tr><td>M11</td><td></td><td>2,290</td><td>2,034</td></tr><tr><td>M12</td><td></td><td>2,290</td><td>2,034</td></tr></tbody></table></div>	Month	Operational Position (£'000)	Forecast Position (£'000)	Target Overspend (£'000)	M1	3,541		3,541	M2	564		564	M3	1,976		1,976	M4	1,973		1,973	M5	2,131		2,131	M6	1,821		1,821	M7	1,875		1,875	M8	1,874		1,874	M9	1,829	2,284	1,829	M10		2,247	2,034	M11		2,290	2,034	M12		2,290	2,034
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Description	Current Performance	Trend
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 £0.488m. Allocations are anticipated from WG which will balance this position. The reported forecast outturn position assumes that £0.552m of disposal income will be received. 	<p>Capital - Cumulative Performance to Plan</p> <p>£'000</p> <p>Forecast Actual/Revised Forecast</p>
Workforce Spend – workforce expenditure profile	<ul style="list-style-type: none"> The pay budgets are underspent by £5.4m after 7 months. This is after funding has been allocated to support additional costs associated with COVID, funding of the overtime holiday pay arrears which were paid in August and 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, however it should be noted that medical and dental agency spend reduced in October. 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. 	<p>Variable Pay Expenditure</p> <p>Bank Overtime Agency - Non Medical Agency - Medical WLI Irregular Sessions Current Year Budget Last Year Expenditure</p>

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 has seen a significant reduction in compliance with the target. 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. Whilst performance is positive for non-NHS invoices, the NHS position is less favourable. A workplan to improve the NHS position is being developed as part of the All Wales Accounts Payable group. 	<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>96.5</td></tr> <tr><td>M3</td><td>95.0</td><td>96.0</td></tr> <tr><td>M4</td><td>96.0</td><td>96.0</td></tr> <tr><td>M5</td><td>97.0</td><td>96.5</td></tr> <tr><td>M6</td><td>96.0</td><td>96.0</td></tr> <tr><td>M7</td><td>91.5</td><td>95.5</td></tr> <tr><td>M8</td><td></td><td></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	96.5	M3	95.0	96.0	M4	96.0	96.0	M5	97.0	96.5	M6	96.0	96.0	M7	91.5	95.5	M8			M9			M10			M11			M12		
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APPENDIX 2: INTEGRATED PERFORMANCE DASHBOARD

		Harm quadrant- Harm from Covid itself															
Measure	Locality	National/ Local Target	Internal profile	Trend	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
Number of new COVID19 cases*	HB Total				4,664	5,525	11,976	3,759	1,208	907	406	189	708	1,946	7,177	12,839	10,918
Number of staff referred for Antigen Testing	HB Total				1,695	1,741	1,864	684	366	568	274	267	281	367	406	673	524
Number of staff awaiting results of COVID19 test*	HB Total				21 (as at 06/11/20)	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
Number of COVID19 related incidents*	HB Total				87	141	127	84	63	53	74	67	23	24	36	36	73
Number of COVID19 related serious incidents*	HB Total				1	1	0	0	0	0	0	0	0	0	0	0	0
Number of COVID19 related complaints*	HB Total				37	50	83	106	131	98	38	13	16	4	6	3	4
Number of COVID19 related risks*	HB Total				6	7	10	3	3	3	2	2	1	1	1	0	0
Number of staff self isolated (asymptomatic)*	Medical				17	36	55	7	2	3	2	1	3	7	5	20	13
	Nursing Registered				106	93	152	61	40	32	28	18	21	19	35	67	38
	Nursing Non Registered				95	56	81	57	33	35	25	20	18	24	21	43	28
	Other				111	106	187	93	85	75	29	22	28	21	54	97	41
Number of staff self isolated (symptomatic)*	Medical				17	41	34	16	5	1	1	1	2	3	7	15	10
	Nursing Registered				44	97	145	112	52	44	39	33	23	28	36	57	51
	Nursing Non Registered				25	77	68	88	49	29	24	20	18	18	27	44	34
	Other				46	79	147	100	50	34	23	17	7	18	44	88	85
% sickness*	Medical				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%
	Nursing Registered				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%
	Nursing Non Registered				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%
	Other				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%
	All				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%
Measure	Locality	National/ Local Target	Internal profile	Trend	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
Unscheduled Care																	
Number of ambulance handovers over one hour*	Morrison	0			340	484	499	187	215	225	332	462	528	607	711	622	633
	Singleton				15	16	11	8	4	6	5	15	19	9	15	20	15
	Total				355	500	510	195	219	231	337	477	547	616	726	642	648
% 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*	Morrison	95%			68.4%	65.4%	62.7%	68.2%	61.0%	67.7%	62.8%	61.7%	59.0%	61.5%	62.3%	59.7%	58.8%
	NPTH				99.8%	99.5%	99.0%	99.6%	99.7%	98.5%	99.2%	99.0%	97.7%	97.8%	99.4%	98.3%	99.4%
	Total				77.2%	75.4%	72.6%	76.8%	71.3%	76.9%	74.9%	73.4%	72.4%	74.7%	75.0%	73.1%	72.0%
Number of patients who spend 12 hours or more in all hospital major and minor care facilities from arrival until	Morrison	0			493	626	775	570	534	457	630	684	879	1,013	1,059	1,250	1,275
	NPTH				1	0	1	0	0	0	1	0	1	1	1	0	1
	Total				494	626	776	570	534	457	631	684	880	1,014	1,060	1,250	1,276
% of patients who have a direct admission to an acute stroke unit within 4 hours*	Morrison	59.8%			29.8%	23.7%	7.1%	6.8%	18.2%	20.4%	20.3%	27.5%	28.3%	13.5%	15.4%	15.4%	0.0%
	Total	(UK SNAP average)			29.8%	23.7%	7.1%	6.8%	18.2%	20.4%	20.3%	27.5%	28.3%	13.5%	15.4%	15.4%	0.0%
					29.8%	23.7%	7.1%	6.8%	18.2%	20.4%	20.3%	27.5%	28.3%	13.5%	15.4%	15.4%	0.0%
% of patients who receive a CT scan within 1 hour*	Morrison	54.5%			42.1%	31.7%	22.7%	42.2%	30.6%	40.8%	29.7%	36.5%	29.6%	34.6%	48.7%	34.1%	16.7%
	Total	(UK SNAP average)			42.1%	31.7%	22.7%	42.2%	30.6%	40.8%	29.7%	36.5%	29.6%	34.6%	48.7%	34.1%	16.7%
					42.1%	31.7%	22.7%	42.2%	30.6%	40.8%	29.7%	36.5%	29.6%	34.6%	48.7%	34.1%	16.7%
% of patients who are assessed by a stroke specialist consultant physician within 24 hours*	Morrison	84.2%			98.2%	96.7%	95.5%	95.6%	97.2%	100.0%	96.9%	98.1%	100.0%	100.0%	92.3%	90.2%	100.0%
	Total	(UK SNAP average)			98.2%	96.7%	95.5%	95.6%	97.2%	100.0%	96.9%	98.1%	100.0%	100.0%	92.3%	90.2%	100.0%
					98.2%	96.7%	95.5%	95.6%	97.2%	100.0%	96.9%	98.1%	100.0%	100.0%	92.3%	90.2%	100.0%
% of thrombolysed stroke patients with a door to door needle time of less than or equal to 45 *minutes	Morrison	12 month			11.1%	28.6%	0.0%	12.5%	0.0%	55.6%	25.0%	0.0%	33.3%	28.6%	20.0%	0.0%	0.0%
	Total	improvement trend			11.1%	28.6%	0.0%	12.5%	0.0%	55.6%	25.0%	0.0%	33.3%	28.6%	20.0%	0.0%	0.0%
					11.1%	28.6%	0.0%	12.5%	0.0%	55.6%	25.0%	0.0%	33.3%	28.6%	20.0%	0.0%	0.0%
% of patients receiving the required minutes for speech and language therapy	Morrison	12 month			86.5%	65.1%	63.4%	65.7%	61.2%	55.9%	47.1%	39.7%	41.9%	45.4%	58.9%	58.6%	64.6%

Measure	Locality	National/ Local Target	Internal profile	Trend														
					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	
		Fractured Neck of Femur (NOF)																
Prompt orthogeriatric assessment- % patients receiving an assessment by a senior geriatrician within 72 hours of presentation	Morriston	75%			84.4%	84.7%	86.0%	86.8%	87.6%	88.3%	89.7%	90.7%	91.0%	90.5%	88.2%	87.3%		
Prompt surgery - % patients undergoing surgery by the day following presentation with hip	Morriston	75%			51.0%	51.8%	54.1%	55.5%	56.3%	56.2%	56.6%	57.2%	60.0%	59.5%	59.4%	58.4%		
NICE compliant surgery - % of operations consistent with the recommendations of NICE CG124	Morriston	75%			70.1%	69.6%	68.5%	70.3%	71.2%	70.5%	70.4%	70.1%	71.0%	71.2%	69.8%	69.4%		
Prompt mobilisation after surgery - % of patients out of bed (standing or hoisted) by the day after operation	Morriston	75%			76.3%	76.0%	74.3%	74.1%	74.1%	74.6%	75.4%	75.9%	76.0%	75.7%	74.4%	72.6%		
Not delirious when tested- % patients (<4 on 4AT test) when tested in the week after operation	Morriston	75%			70.5%	71.1%	73.5%	74.4%	75.2%	75.3%	75.4%	75.9%	76.0%	76.8%	77.7%	76.1%		
Return to original residence - % patients discharged back to original residence, or in that residence at 120 day follow-up	Morriston	75%			76.2%	75.9%	75.6%	73.7%	74.3%	70.7%	70.2%							
30 day mortality - crude and adjusted figures, noting ONS data only correct after around 6	Morriston	12 month improvement trend			7.7%	7.6%	8.4%	7.5%										
% of survival within 30 days of emergency admission for a hip fracture	HB Total	12 month improvement trend			90.0%	67.9%	68.0%	65.3%	70.7%									
Measure	Locality	National/ Local Target	Internal profile	Trend	SBU													
					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	
		Healthcare Acquired Infections																
Number of E.Coli bacteraemia cases	PCCS Community	12 month reduction trend	12		11	11	7	12	11	19	20	15	23	15	25	12	12	
	PCCS Hospital		0		0	0	0	0	0	0	0	1	0	0	0	1	0	
	MH&LD		0		0	0	0	0	0	0	0	0	0	0	0	0	0	
	Morriston		3		9	2	2	3	3	5	5	8	2	3	4	5	5	
	NPTH		2		2	1	0	1	0	1	2	2	1	3	2	2	1	
	Singleton		2		3	2	3	2	3	3	5	0	2	2	3	1	1	
	Total		19		25	16	12	18	17	28	32	26	28	23	34	21	19	
Number of S.aureus bacteraemia cases	PCCS Community	12 month reduction trend	5		6	6	3	4	2	7	9	10	2	4	4	4	7	
	PCCS Hospital		0		0	0	0	0	0	0	0	0	0	0	0	0	0	
	MH&LD		0		0	0	0	0	0	0	0	0	0	0	0	0	0	
	Morriston		2		4	3	1	5	4	2	2	1	3	3	4	8	9	
	NPTH		0		0	1	1	0	0	0	0	0	0	0	0	1	0	
	Singleton		1		2	3	4	0	3	2	2	4	2	4	4	4	2	
	Total		8		12	13	9	9	9	11	13	15	7	11	12	17	18	
Number of C.difficile cases	PCCS Community	12 month reduction trend	4		3	2	3	0	2	5	5	5	6	7	2	5	5	
	PCCS Hospital		0		0	0	0	0	0	0	0	0	0	0	0	0	0	
	MH&LD		0		1	0	0	0	0	0	0	0	0	0	0	0	0	
	Morriston		6		6	5	5	0	5	3	10	5	3	7	10	6	7	
	NPTH		1		2	1	0	1	2	1	1	1	0	1	0	0	0	
	Singleton		2		3	2	1	2	2	3	4	1	2	8	9	3	3	
	Total		13		15	10	9	3	11	12	20	12	12	23	22	14	15	
Number of Klebsiella cases	PCCS Community	12 month reduction trend	3		2	4	4	5	2	9	5	2	7	1	4	3	5	
	PCCS Hospital		0		0	0	0	0	0	0	0	0	0	0	0	0	0	
	MH&LD		0		0	0	0	0	0	0	0	0	0	0	0	0	0	
	Morriston		2		5	6	4	7	2	0	3	2	1	2	4	6	6	
	NPTH		0		1	0	2	0	1	0	1	0	0	0	0	0	0	
	Singleton		1		1	1	2	1	1	1	0	1	4	0	0	2	2	
	Total		6		9	11	12	13	6	10	9	5	12	3	8	11	13	
Number of Aeruginosa cases	PCCS Community	12 month reduction trend	2		1	1	0	1	1	1	1	1	1	1	1	0	0	
	PCCS Hospital		0		0	0	0	0	0	0	0	0	0	0	0	0	0	
	MH&LD		0		0	0	0	0	0	0	0	0	0	0	0	0	0	
	Morriston		1		1	1	1	0	0	0	2	0	1	0	0	2	0	
	NPTH		0		0	0	0	0	0	0	0	0	0	0	0	0	0	
	Singleton		1		0	0	0	0	0	0	0	0	0	0	1	0	0	
	Total		4		2	2	1	1	1	1	3	1	2	1	2	2	0	
Compliance with hand hygiene audits	PCCS	95%			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	96.3%	98.3%	96.0%	94.9%	94.9%	96.0%	97.1%	
	MH&LD				98.1%	96.1%	96.8%	98.7%	97.4%	96.7%	98.1%	99.6%	98.3%	95.9%	99.4%	98.3%	96.0%	
	Morriston				99.3%	98.7%	96.8%	95.0%	92.8%	96.3%	95.8%	99.2%	94.5%	93.8%	93.5%	99.0%	97.9%	
	NPTH				100.0%	100.0%	95.7%	100.0%	100.0%	100.0%	100.0%	100.0%	90.0%	95.0%	93.3%	89.7%	100.0%	100.0%
	Singleton				94.2%	98.7%	96.0%	90.0%	88.5%	95.5%	100.0%	-	100.0%	100.0%	100.0%	100.0%	100.0%	-
	Total				97.2%	97.3%	96.2%	95.1%	92.8%	97.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%

Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					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
Serious Incidents & Risks																	
Number of Serious Incidents	PCCS	12 month reduction trend			2	1	0	0	2	1	2	3	1	0	1	0	0
	MH&LD				2	7	7	1	1	1	1	0	2	0	0	0	1
	Morrison				3	5	1	2	1	2	0	2	1	1	0	2	0
	NPTH				1	1	0	0	0	0	0	0	0	0	0	1	1
	Singleton				6	3	4	1	1	0	1	1	2	1	4	2	2
	Total				14	17	12	4	5	4	4	6	6	1	5	5	4
Of the serious incidents due for assurance, the % which were assured within the agreed timescales	Total	90%			0%	0%	4%	0%	10%	0%	0%	0%	0%	0%	0%	0%	0%
Number of Never Events	PCCS	0			0	0	0	0	0	0	0	0	0	0	0	0	0
	MH&LD				0	0	0	0	0	0	0	0	0	0	0	0	0
	Morrison				0	1	0	0	0	0	0	0	1	0	0	0	0
	NPTH				0	0	0	0	0	0	0	0	0	0	0	0	0
	Singleton				1	0	0	0	0	0	0	0	0	0	0	0	0
	Total				1	1	0	0	0	0	0	0	1	0	0	0	0
Pressure Ulcers																	
Total number of Pressure Ulcers	PCCS Community	12 month reduction trend			34	29	26	25	24	26	31	20	21	33	34	39	0
	PCCS Hospital				0	0	0	0	0	0	0	0	0	1	0	0	
	MH&LD				3	0	0	0	1	0	0	2	0	3	1	1	0
	Morrison				27	27	41	31	26	24	25	30	25	37	32	47	0
	NPTH				4	0	0	1	4	3	3	2	3	2	5	0	0
	Singleton		25	15	20	19	17	9	31	19	25	16	14	17	0		
	Total				93	71	87	76	72	62	90	73	74	91	87	104	0
Total number of Grade 3+ Pressure Ulcers	PCCS Community	12 month reduction trend			11	5	7	5	4	2	10	2	4	2	8	6	0
	PCCS Hospital				0	0	0	0	0	0	0	0	0	0	0	0	0
	MH&LD				0	0	0	0	0	0	0	0	0	0	1	0	
	Morrison				1	1	2	2	2	1	1	0	0	3	1	0	0
	NPTH				0	0	0	0	0	0	1	0	0	0	1	0	0
	Singleton		3	3	1	0	1	0	2	1	2	0	0	0	0		
	Total				15	9	10	7	7	3	14	3	6	5	10	7	0
Pressure Ulcer (Hosp) patients per 100,000 admissions	Total	12 month reduction trend			990	877	1,128	928	951	533	896	756	723	853	767	955	0
Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					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
Inpatient Falls																	
Total number of Inpatient Falls	PCCS	12 month reduction trend			8	9	8	9	10	4	12	5	8	6	6	8	4
	MH&LD				44	31	29	27	27	22	18	42	24	32	40	25	28
	Morrison				77	120	129	92	67	84	81	105	69	66	73	96	114
	NPTH				29	32	30	33	30	28	31	34	32	41	31	25	35
	Singleton				28	47	48	38	42	33	34	42	41	48	48	53	58
	Total				187	247	247	203	177	171	176	228	174	193	198	207	240
Inpatient Falls per 1,000 beddays	HB Total	Between 3.0 & 5.0			5.23	7.26	6.91	5.56	5.40	4.62	4.85	5.94	4.50				
Mortality																	
Universal Mortality reviews undertaken within 28 days (Stage 1 reviews)	Morrison	95%			100%	98%	99%	100%	100%	98%	99%	98%	98%	97%	90%	97%	96%
	Singleton				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
	NPTH				100%	92%	100%	100%	100%	86%	100%	88%	100%	100%	100%	100%	80%
Stage 2 mortality reviews completed within 60 days	Morrison	95%			100%	98%	99%	100%	100%	98%	99%	98%	99%	98%	93%	98%	97%
	Singleton				38%	25%	80%	43%									
	NPTH				-	-	50%	50%									
	Total				0%	100%	-	0%									
Crude hospital mortality rate by Delivery Unit (74 years of age or less)	Morrison	12 month reduction trend			33%	36%	75%	37%									
	Singleton				1.66%	1.75%	1.86%	1.97%	2.05%	2.04%	1.80%	1.76%	1.71%	1.73%	1.70%	1.72%	0.00%
	NPTH				0.48%	0.50%	0.54%	0.56%	0.57%	0.56%	0.50%	0.52%	0.00%	0.00%	0.00%	0.00%	0.00%
	Total (SBU)				0.22%	0.21%	0.20%	0.24%	0.18%	0.17%	0.15%	0.15%	0.52%	0.52%	0.53%	0.53%	0.00%
					0.97%	1.01%	1.08%	1.14%	1.17%	1.17%	1.04%	1.04%	0.13%	0.12%	0.23%	0.11%	0.00%

		Harm from reduction in non-Covid activity																
Measure	Locality	National/ Local Target	Internal profile	Trend	SBU													
					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	
Cancer																		
Single Cancer Pathway- % of patients started treatment within 62 days (without suspensions)	Total	12 month improvement trend			65.9%	55.4%	61.0%	67.9%	56.4%	71.6%	65.7%	60.0%	66.8%	55.0%	58.4%	62.2%	50.0%	
Planned Care																		
Number of patients waiting > 26 weeks for outpatient appointment*	Morrison	0			12,617	12,306	12,543	12,487	12,479	12,870	13,398	14,047	13,867	14,080	14,661	15,092	15,906	
	NPTH				129	75	49	61	111	73	92	157	228	271	335	407	378	
	Singleton				9,073	8,394	8,336	8,427	8,414	8,575	9,027	9,327	9,053	8,769	8,383	8,447	8,162	
	PC&CS				231	230	251	233	221	232	235	169	131	105	65	51	37	
	Total				22,050	21,005	21,179	21,208	21,225	21,750	22,752	23,700	23,279	23,225	23,444	23,997	24,483	
Number of patients waiting > 36 weeks for treatment*	Morrison	0			20,035	22,298	22,391	21,695	21,199	21,228	21,579	22,095	22,414	22,968	23,364	23,214	23,874	
	NPTH				33	48	42	41	43	45	46	45	57	98	167	189	191	
	Singleton				10,514	11,865	11,629	11,385	10,788	10,942	11,134	11,727	12,022	11,980	11,920	11,764	11,841	
	PC&CS				153	220	247	219	204	196	181	115	119	82	53	43	35	
	Total (inc. diagnostics > 36 wks)				31,508	35,387	35,126	33,991	32,719	32,874	33,395	34,447	35,040	35,583	35,999	35,711	36,420	
Number of patients waiting > 8 weeks for a specified diagnostics*	Morrison	0			4,564	4,559	4,361	3,938	2,978	2,517	2,757	2,739	3,162	3,390	3,573	3,528	3,320	
	Singleton				2,081	2,051	2,218	2,301	2,109	2,037	2,047	2,103	2,068	2,035	1,950	2,204	2,619	
	Total				6,645	6,610	6,579	6,239	5,087	4,554	4,804	4,842	5,230	5,425	5,523	5,732	5,939	
Number of patients waiting > 14 weeks for a specified therapy*	MH&LD	0			0	0	0	0	0	0	0	1	0	0	0	0	0	
	NPTH				110	99	93	127	129	60	18	8	15	0	0	0	0	
	PC&CS				1,025	718	615	457	362	309	183	157	156	0	0	0	0	
	Total				1,135	817	708	584	491	369	201	166	171	0	0	0	0	
Measure	Locality	National/ Local Target	Internal profile	Trend	SBU													
					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	
Planned Care																		
Total number of patients waiting for a follow-up outpatient appointment*	Total	HB Target TBC			120,968	120,874	119,963	119,999	120,882	121,403	122,303	123,088	127,444	130,208	127,391	130,963	131,554	
Number of patients delayed by over 100% past their target date*	Total				26,217	27,156	27,641	28,419	28,862	29,316	29,334	30,062	30,550	31,316	29,770	32,574	33,121	
Number of patients delayed past their agreed target date (booked and not booked)*	Total				57,380	56,647	56,210	57,297	57,458	55,944	55,086	54,664	55,254	60,618	54,993	60,340	60,447	
Number of Ophthalmology patients without an allocated health risk factor	Total	0			780	464	326	212	281	294	614	326	486	539	628	702	413	
Number of patients without a documented clinical review date	Total	0			43	55	90	32	25	14	9	5	6	5	6	7	3	
Patient Experience/ Feedback																		
Number of friends and family surveys completed	PCCS	12 month improvement trend			208	231	84	144	97	255		159	532	79	245	213	89	
	MH&LD				48	82	56	22	8	11		3	0	0	59	18	10	
	Morrison				269	155	152	168	211	326		1,330	934	699	642	995	941	
	NPTH				40	24	18	43	31	16			0	0	0	0	0	
	Singleton				530	377	330	323	459	453		3,098	1,808	1,029	1,106	1,452	1,118	
	Total				1,047	787	584	678	798	1,050		4,590	3,297	1,912	2,075	2,025	2,733	
% of patients who would recommend and highly recommend	PCCS	90%	80%		65%	80%	62%	76%	77%	90%		100%	100%	89%	94%	90%	90%	
	MH&LD				19%	41%	21%	36%	88%	73%		100%	0%	0%	93%	94%	90%	
	Morrison				82%	86%	70%	76%	82%	86%		96%	97%	93%	92%	93%	92%	
	NPTH				90%	75%	67%	58%	32%	75%			0%	0%	0%	0%	0%	
	Singleton				88%	87%	85%	85%	92%	87%		97%	97%	91%	92%	90%	92%	
	Total				82%	84%	77%	79%	85%	87%		96%	97%	92%	92%	92%	92%	
% of all-Wales surveys scoring 9 or 10 on overall satisfaction	PCCS	90%	80%		100%	80%	67%	90%	100%	100%		100%	-		95%	92%	94%	
	MH&LD				100%	-	-	-	-	50%		0%	0%		0%	0%	0%	
	Morrison				58%	100%	33%	80%	71%	90%		93%	97%		96%	96%	94%	
	NPTH				100%	-	67%	67%	100%	100%			0%		0%	0%	0%	
	Singleton				90%	86%	80%	77%	95%	92%		93%	97%		95%	96%	95%	
	Total				79%	85%	65%	81%	94%	93%		92%	96%		92%	96%	93%	
Number of new complaints received	PCCS	12 month reduction trend			22	24	24	9	10	22	8	16	16	18	8	0	0	
	MH&LD				20	13	6	11	15	10	26	15	19	24	13	0	0	
	Morrison				44	40	38	33	40	50	23	53	69	51	50	0	0	
	NPTH				6	7	1	7	6	7	4	3	10	6	6	0	0	
	Singleton				25	20	20	15	20	24	24	23	31	28	32	0	0	
	Total				121	103	83	78	94	117	100	115	159	139	115	0	0	
% of complaints that have received a final reply (under Regulation 24) or an interim reply (under Regulation 26) up to and including 30 working days from the date the complaint was first received by the organisation	PCCS	75%	80%		67%	76%	77%	63%	67%	67%								
	MH&LD				70%	92%	75%	73%	64%	67%								
	Morrison				86%	89%	91%	81%	95%	92%								
	NPTH				67%	86%	0%	57%	67%	100%								
	Singleton				64%	70%	70%	57%	68%	67%								
	Total				75%	82%	80%	71%	80%	81%								

		Harm from wider societal actions/lockdown															
Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					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
		Childhood immunisations															
% children who received 3 doses of the hexavalent '6 in 1' vaccine by age 1	NPT	95%	90%	* .	97.2%		94.1%										
	Swansea			* .	96.4%		96.3%										
	HB Total			* .	96.7%		95.4%										
% children who received MenB2 vaccine by age 1	NPT	95%	90%	* .	97.8%		93.8%										
	Swansea			* .	95.8%		96.1%										
	HB Total			* .	96.6%		95.2%										
% children who received PCV2 vaccine by age 1	NPT	95%	90%	* .	98.1%		96.6%										
	Swansea			* .	96.2%		97.2%										
	HB Total			* .	96.9%		96.9%										
% children who received Rotavirus vaccine by age 1	NPT	95%	90%	* .	95.0%		93.8%										
	Swansea			* .	95.1%		94.1%										
	HB Total			* .	95.1%		94.0%										
% children who received MMR1 vaccine by age 2	NPT	95%	90%	* .	93.6%		95.5%										
	Swansea			* .	95.2%		93.1%										
	HB Total			* .	94.6%		94.0%										
% children who received PCV3 vaccine by age 2	NPT	95%	90%	* .	93.9%		96.1%										
	Swansea			* .	95.2%		93.3%										
	HB Total			* .	94.7%		94.3%										
% children who received MenB4 vaccine by age 2	NPT	95%	90%	* .	93.9%		95.5%										
	Swansea			* .	95.2%		93.3%										
	HB Total			* .	94.7%		94.1%										
% children who received Hib/MenC vaccine by age 2	NPT	95%	90%	* .	93.6%		95.2%										
	Swansea			* .	94.8%		92.7%										
	HB Total			* .	94.4%		96.3%										
Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					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
% children who are up to date in schedule by age 4	NPT	95%	90%	* .	86.4%		86.6%										
	Swansea			* .	87.8%		86.2%										
	HB Total			* .	87.2%		86.3%										
% of children who received 2 doses of the MMR vaccine by age 5	NPT	95%	90%	* .	92.0%		93.9%										
	Swansea			* .	92.0%		91.4%										
	HB Total			* .	92.0%		92.4%										
% children who received 4 in 1 vaccine by age 5	NPT	95%	90%	* .	92.5%		93.7%										
	Swansea			* .	93.1%		90.5%										
	HB Total			* .	92.9%		91.7%										
% children who received MMR vaccination by age 16	NPT	95%	90%	* .	96.0%		90.5%										
	Swansea			* .	93.6%		87.8%										
	HB Total			* .	94.5%		88.9%										
% children who received teenage booster by age 16	NPT	90%	85%	* .	92.7%		91.3%										
	Swansea			* .	92.2%		90.0%										
	HB Total			* .	92.4%		90.5%										
% children who received MenACWY vaccine by age 16	NPT	Improve		* .	92.9%		92.1%										
	Swansea			* .	92.3%		90.8%										
	HB Total			* .	92.5%		91.3%										

Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					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
		Mental Health Services															
% of urgent assessments undertaken within 48 hours from receipt of referral (Crisis) (< 18 yrs)	< 18 years old (CAMHS)	100%			100%	100%	100%	100%	100%	100%	100%	93%	94%	79%	100%	95%	
% of patients waiting less than 28 days for 1st outpatient appointment (< 18 yrs)	< 18 years old (CAMHS)	80%			90%	88%	61%	53%	66%	63%	60%	61%	58%	41%	48%	40%	
% of routine assessments undertaken within 28 days from receipt of referral (PCAMHS) (< 18 yrs)	< 18 years old (CAMHS)	80%			29%	41%	73%	29%	97%	46%	0%	0%	0%	29%	37%	89%	
% of routine assessments undertaken within 28 days from receipt of referral (SCAMHS) (< 18 yrs)	< 18 years old (CAMHS)	80%			79%	62%	58%	60%	56%	53%	48%	53%	44%	29%	32%	41%	
% of mental health assessments undertaken within (up to and including) 28 days from the date of receipt of referral (> 18 yrs)	> 18 years old	80%			99.5%	98%	99%	96%	98%	97%	97%	98%	99%	98%	100%	96%	
% of therapeutic interventions started within 28 days following assessment by LPMHSS (< 18 yrs)	< 18 years old (CAMHS)	80%			100%	100%	100%	93%	97%	91%	49%	67%	1%	100%	82%	35%	
% of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS (> 18 yrs)	> 18 years old	80%			93%	98%	95%	95%	98%	97%	92%	96%	99%	97%	100%	90%	
% of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health (> 18 yrs)	> 18 years old	95%			99.7%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	
% of patients with NDD receiving diagnostic assessment and intervention within 26 weeks (< 18 yrs)	< 18 years old (CAMHS)	80%			22%	24%	26%	24%	28%	30%	30%	33%	32%	34%	27%	34%	
% residents in receipt of secondary mental health services (all ages) who have a valid care and treatment plan (CTP) (< 18 yrs)	< 18 years old (CAMHS)	90%			82%	81%	82%	83%	84%	82%	82%	83%	81%	81%	65%	84%	
% residents in receipt of secondary mental health services (all ages) who have a valid care and treatment plan (CTP) (> 18 yrs)	> 18 years old	90%			91%	91%	89%	91%	91%	91%	91%	92%	88%	88%	84%	84%	