



Bwrdd Iechyd Prifysgol  
Bae Abertawe  
Swansea Bay University  
Health Board



<b>Meeting Date</b>	<b>26<sup>th</sup> October 2021</b>	<b>Agenda Item</b>	<b>2.1</b>
<b>Report Title</b>	<b>Integrated Performance Report</b>		
<b>Report Author</b>	Meghann Protheroe, Head of Performance		
<b>Report Sponsor</b>	Darren Griffiths, Director of Finance and Performance		
<b>Presented by</b>	Darren Griffiths, Director of Finance and Performance		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	The purpose of this report is to provide an update on the current performance of the Health Board at the end of the most recent reporting window (August 2021) in delivering key local performance measures as well as the national measures outlined in the NHS Wales Delivery Framework.		
<b>Key Issues</b>	<p>The Integrated Performance Report is a routine report that provides an overview of how the Health Board is performing against the National Delivery measures and key local quality and safety measures. The traditional format for the report includes identifying actions where performance is not compliant with national or local targets as well as highlighting both short term and long terms risks to delivery.</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. As a result, the 2020/21 Delivery Framework measures have been rolled over for 2021/22. During 2021-22, the Delivery Framework will be redeveloped to create a set of outcomes measures, reflecting the current work on the single integrated outcomes framework. The intention of the new 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 shared at the September 2021 Performance and Finance Committee and these now feature in this report. The performance against the trajectories is subject to test and challenge at weekly escalation meetings and routinely through Management Board.</p>		

**Key issues to highlight this month are as follows:**

**2021/22 Delivery Framework**

**COVID19-** The number of new cases of COVID19 has seen an increase in September 2021, with 12,839 new cases being reported in-month. The occupancy rate of confirmed COVID patients in general medical and critical care beds remains at a low rate, however figures are slowly increasing.

**Unscheduled Care-** Demand for emergency department care within Swansea Bay University (SBU) Health Board has steadily increased since January 2021. Attendances have been decreasing since July 2021, however in September 2021, there were 11,157 A&E attendances. The Health Board's performance against the 4-hour measure deteriorated from 75.04% in August 2021 to 73.09% in September 2021 and the number of patients waiting over 12 hours in A&E continues to increase.

**Planned Care-** September 2021 saw a slight in-month increase in the number of patients waiting over 26 weeks for a new outpatient appointment. In September 2021, there was 35,711 patients waiting over 36 weeks which is a 0.8% in-month decrease from August 2021. The waiting list for stage 1 patients continues to increase, and September 2021 saw an increase in the number of referrals received by secondary care. Therapy waiting times have increase in September 2021, however some therapy services have maintained a nil breach position (i.e. Occupational Therapy and Audiology).

**Cancer-** September 2021 (draft data) has seen a slight deterioration in performance against the Single Cancer Pathway measure of patients receiving definitive treatment within 62 days. The backlog of patients waiting over 63 days decreased in September 2021. September's figures are in the process of being validated at the time of writing this report.

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

**Child and Adolescent Mental Health Services (CAMHS)-** Access times for crisis performance has improved to 100% in August 2021 following several months of poor performance against the 100% target. Neurodevelopmental Disorders (NDD) access times within 26 weeks continues to be a challenge, with performance decreasing in August 27% in August 2021 against a target of 80%.

Specific Action Required	Information	Discussion	Assurance	Approval
	✓		✓	
<b>Recommendations</b>	<p>Members are asked to:</p> <ul style="list-style-type: none"> <li>• <b>NOTE</b> the Health Board performance against key measures and targets.</li> <li>• <b>NOTE</b> the actions being taken to improve performance: - <ul style="list-style-type: none"> <li>○ Allocation of £98k non recurrent funding to support additional capacity for outpatients in pressured tumour sites</li> <li>○ Business case for pancreatic cancer care developed for consideration within Health Board governance systems</li> <li>○ Agreement with Welsh Government of additional recovery monies, £1.056m and £0.682m for cellular pathology and laboratory medicine additional capacity</li> <li>○ Urgent work underway to reconfigure the front door of Morriston hospital to reduce admissions and provide swift emergency care for patients outside of the main Emergency Department</li> <li>○ Extending therapies and clinical services costs to be more consistent over 7 days of the week</li> <li>○ Hot clinic slots developed for patients who require care/assessment but can come back to a scheduled slot next day</li> <li>○ Development of virtual wards as part of integrated frailty system</li> <li>○ Both UEC and cancer performance remain under escalation as part of the Health Board's performance escalation framework.</li> </ul> </li> </ul>			

# INTEGRATED PERFORMANCE REPORT

## 1. INTRODUCTION

The purpose of this report is to provide an update on current performance of the Health Board at the end of the most recent reporting window in delivering key performance measures outlined in the 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.

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

**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: -
  - Allocation of £98k non recurrent funding to support additional capacity for outpatients in pressured tumour sites
  - Business case for pancreatic cancer care developed for consideration within Health Board governance systems
  - Agreement with Welsh Government of additional recovery monies, £1.056m and £0.682m for cellular pathology and laboratory medicine additional capacity
  - Urgent work underway to reconfigure the front door of Morriston hospital to reduce admissions and provide swift emergency care for patients outside of the main Emergency Department
  - Extending therapies and clinical services costs 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
  - Development of virtual wards as part of integrated frailty system
  - Both UEC and cancer performance remain under escalation as part of the Health Board's performance escalation framework

<b>Governance and Assurance</b>		
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	☒
	Co-Production and Health Literacy	☒
	Digitally Enabled Health and Wellbeing	☒
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	☒
	Partnerships for Care	☒
	Excellent Staff	☒
	Digitally Enabled Care	☒
	Outstanding Research, Innovation, Education and Learning	☒
<b>Health and Care Standards</b>		
(please choose)	Staying Healthy	☒
	Safe Care	☒
	Effective Care	☒
	Dignified Care	☒
	Timely Care	☒
	Individual Care	☒
	Staff and Resources	☒
<b>Quality, Safety and Patient Experience</b>		
<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>		
<b>Financial Implications</b>		
<p>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.</p>		
<b>Legal Implications (including equality and diversity assessment)</b>		
<p>A number of indicators monitor progress in relation to legislation, such as the Mental Health Measure.</p>		
<b>Staffing Implications</b>		
<p>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.</p>		

**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.

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



# Appendix 1- Integrated Performance Report October 2021



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# 1. OVERVIEW

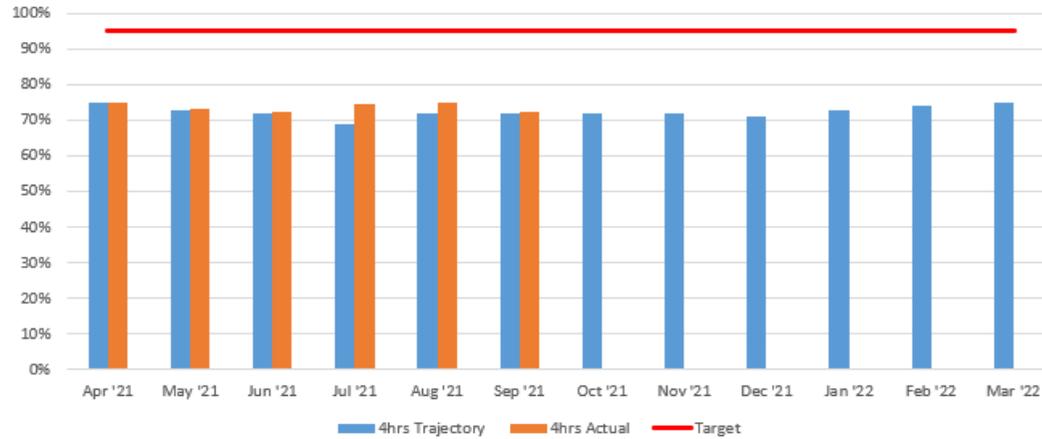
The following summarises the key successes, along with the priorities, risks and threats to achievement of the quality, access and workforce standards.

Successes	Concerns
<p><b>558,816</b> Total vaccinations undertaken (18.10.21)</p>	<p><b>0</b> Never Events reported</p>
<p><b>100%</b> MH&amp;LD patients waited less than 26 weeks for psychological therapy (performing above the nation 95% target)</p>	<p><b>↑</b> Significant increase in no. elective procedures cancelled due to lack of beds</p>
<p><b>↓</b> Reduction in number of Pressure ulcers reported</p>	<p><b>1014 (15%↑)</b> Waits in A&amp;E over 12 hours (July '21)</p>
<p><b>72% (3%↑)</b> Theatre utilisation rate</p>	<p><b>320 (72%↑)</b> Patients on Therapies W/L, waiting &gt; 14 weeks</p>
<p><b>663 (0.6%↓)</b> USC backlog over 63 days</p>	<p><b>277</b> Medically fit patients Highest figure reported in &gt; 2 years</p>
<p><b>↓</b> Reduction in number of admissions to ICU</p>	<p><b>1250 (18%↑)</b> Waits in A&amp;E over 12 hours</p>
<p><b>642 (12%↓)</b> Ambulance handovers over 1 hour</p>	<p><b>12,839 (↑)</b> Positive Covid cases in September 2021.</p>
	<p><b>↓</b> Reduction in % stroke patients assessed within 24 hours</p>
	<p><b>7% (↓)</b> NDD waiting list performance</p>

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

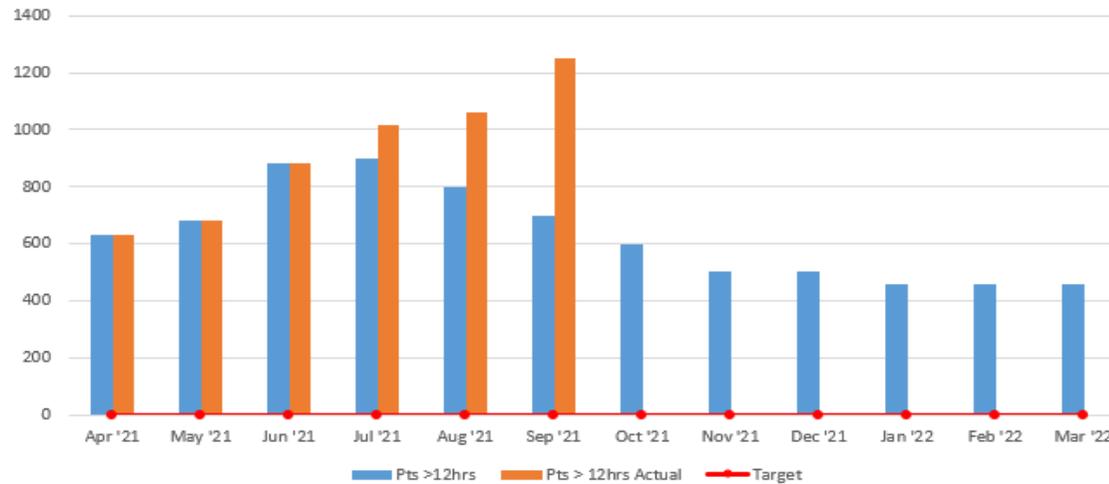
### 1. Submitted recover trajectory for A&E 4hr performance

SBUHB 4hr Performance 2021-22



### 2. Submitted recovery trajectory for A&E12-hour performance

Patients > 12 hours Performance 2021-22



1. As outlined, proposed recovery trajectories have been submitted for unscheduled care in line with the requirements of the health Board Performance escalation framework.

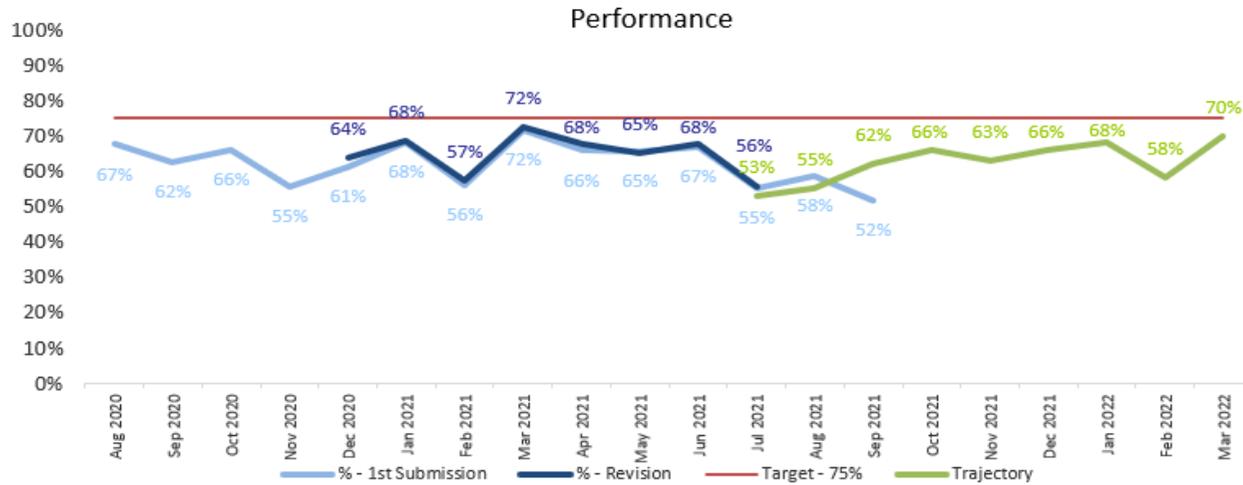
The current A&E four-hour performance for September 2021 is 72.2%, which is above the outlined trajectory.

2. The proposed 12-hour performance trajectory shows a consistent reduction in patients in the coming months, however 12-hour performance continues to decline.

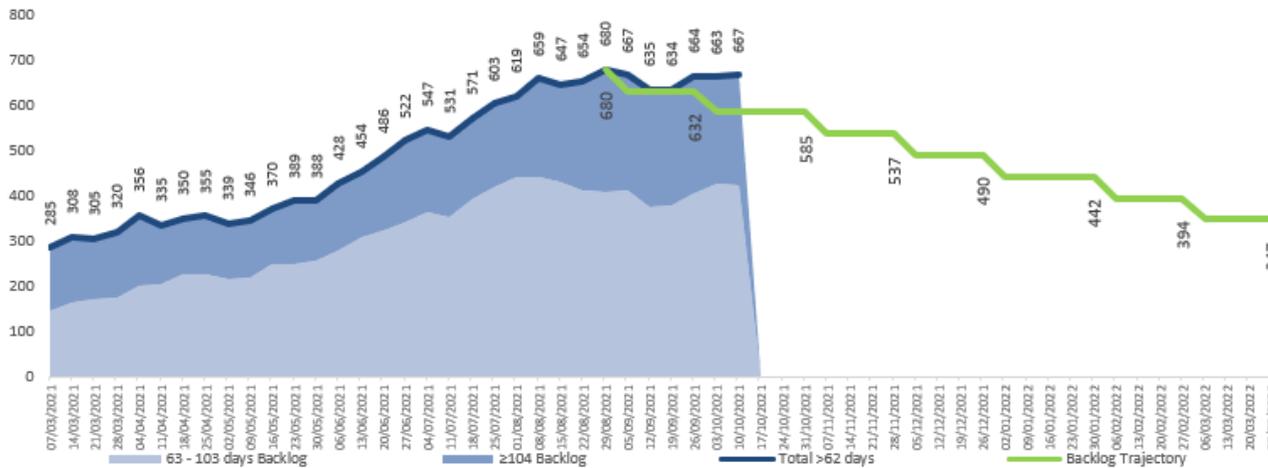
*A detailed recovery plan outlining key actions was shared in the September 2021 PFC agenda.*

## 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. The Cancer team has submitted the proposed recovery trajectory for the SCP performance. Graph 1 shows the planned profile to March 2022. A verbal update will be provided on the September performance as this continues to be clinically validated until the end of the following month.

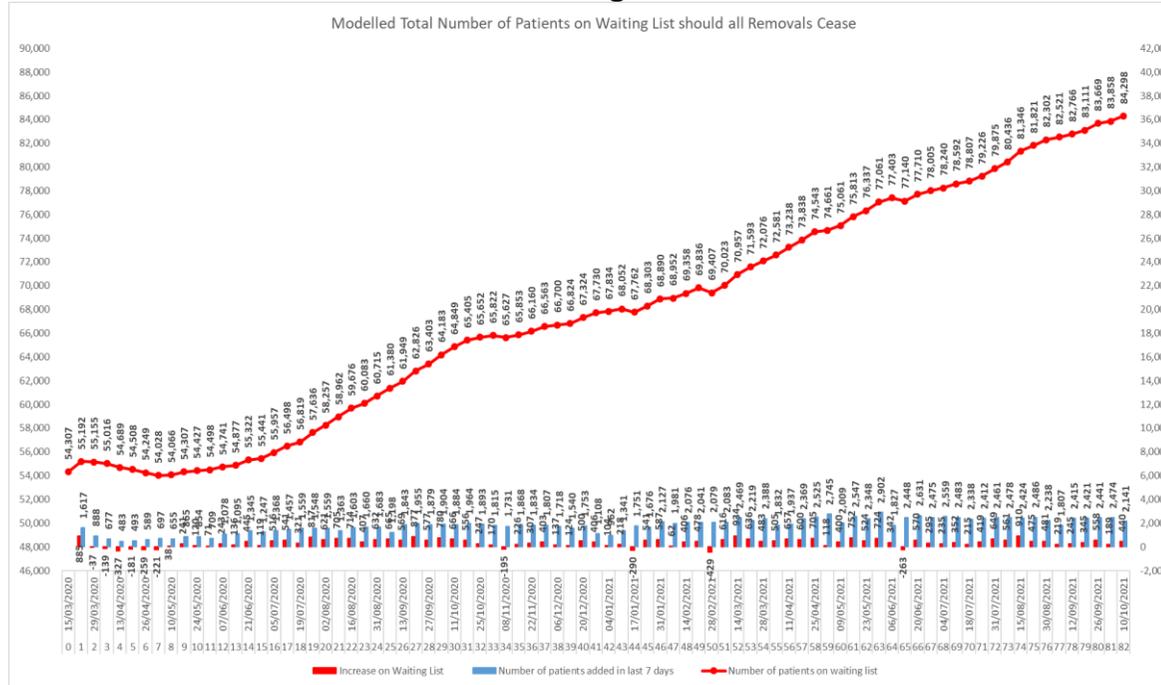
SCP performance in August 2021 reported above the proposed trajectories

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, detailed recovery plans are being explored to recover the position.

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

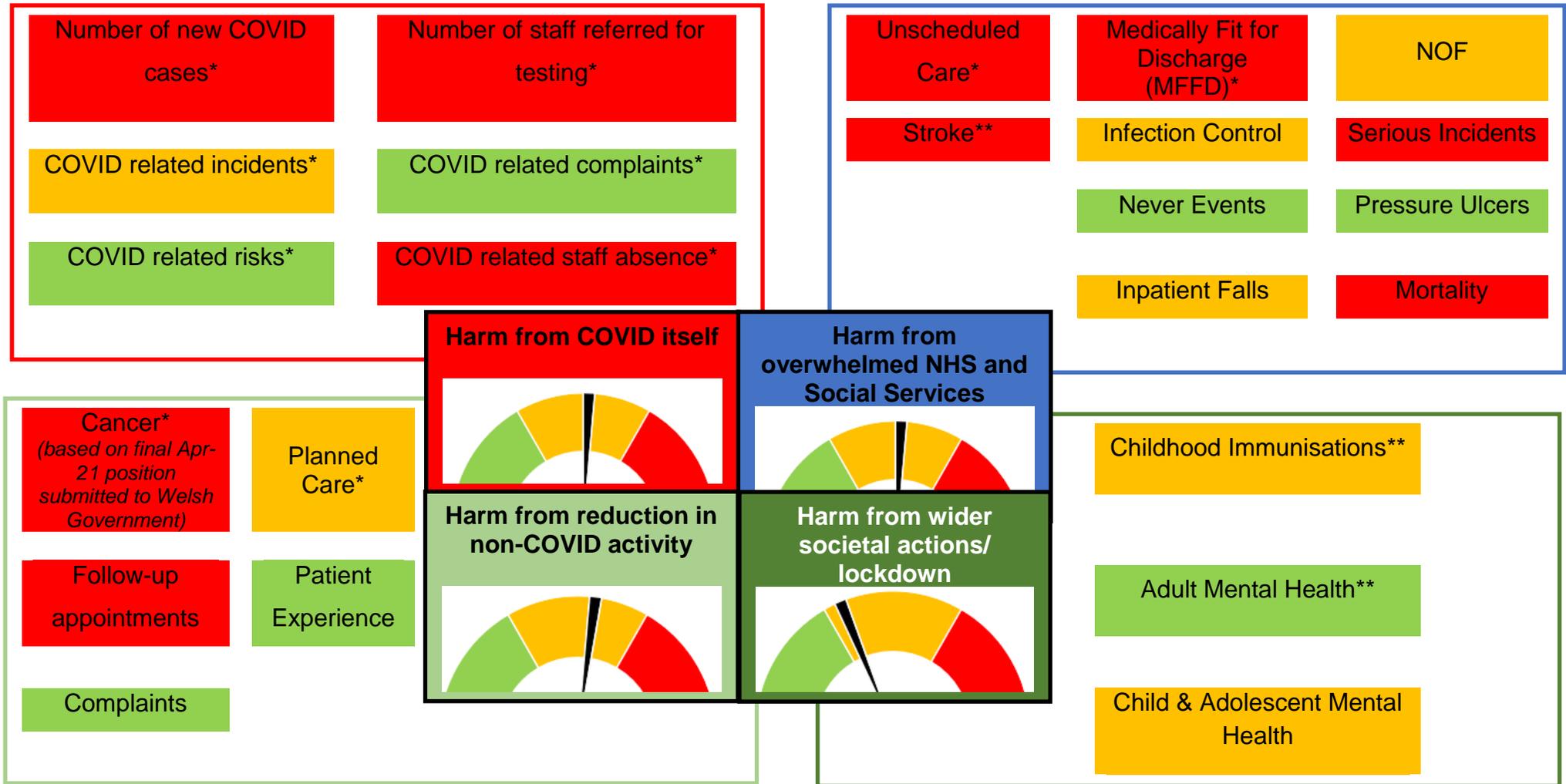
# HARM FROM REDUCTION IN NON-COVID ACTIVITY PLANNED CARE

## 1. Total waiting list movement



# 1. QUADRANTS OF HARM SUMMARY

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



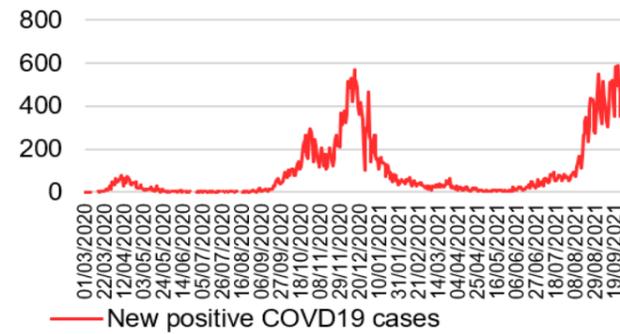
NB- RAG status is against national or local target

\*\* Data not available

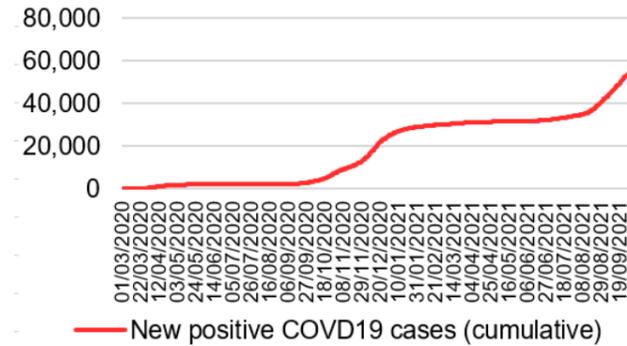
\*RAG status based on in-month movement in the absence of local profiles

### 3.1 HARM FROM COVID ITSELF

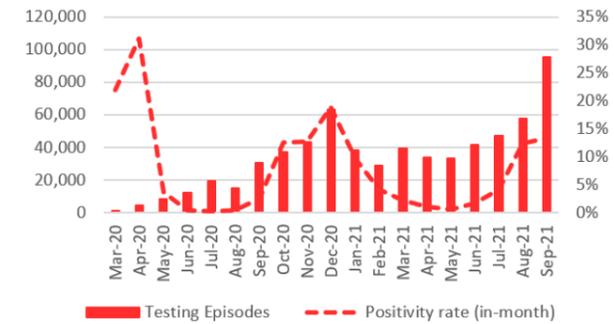
**Chart 1: Number of new COVID19 cases**



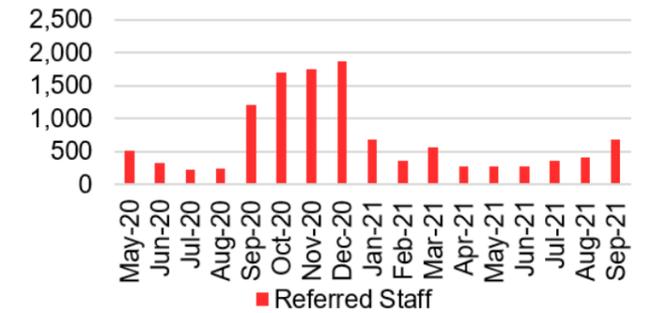
**Chart 2: Number of new COVID19 cases (cumulative)**



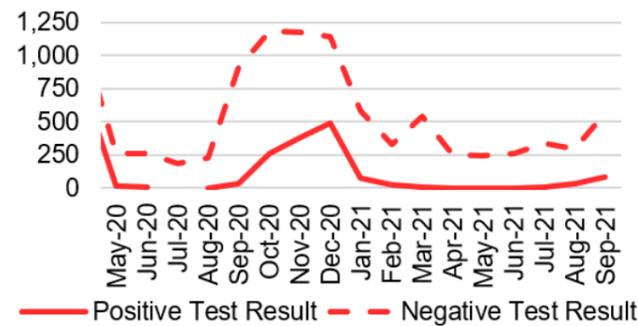
**Chart 3: Number of COVID19 tests completed and positivity rate**



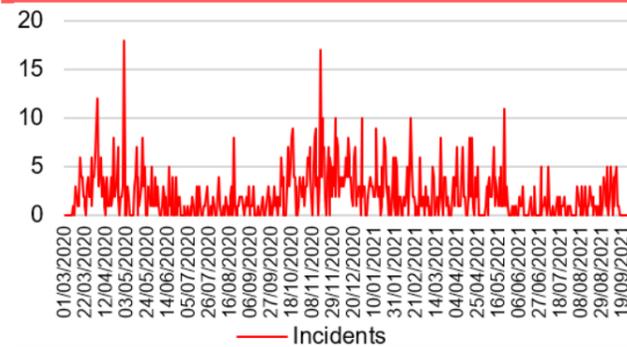
**Chart 4: Number of staff referred for Antigen testing**



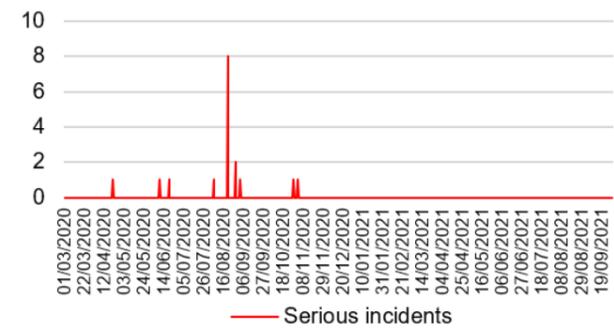
**Chart 5: Outcome of staff COVID19/ antigen tests**



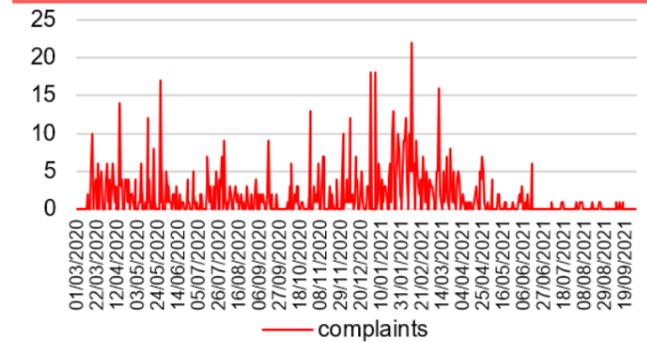
**Chart 6: Number of COVID19 related incidents**



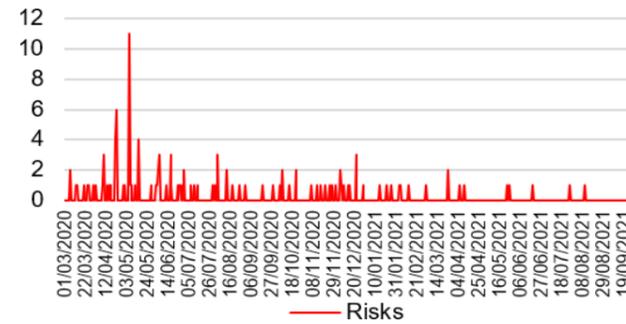
**Chart 7: Number of COVID19 related serious incidents**



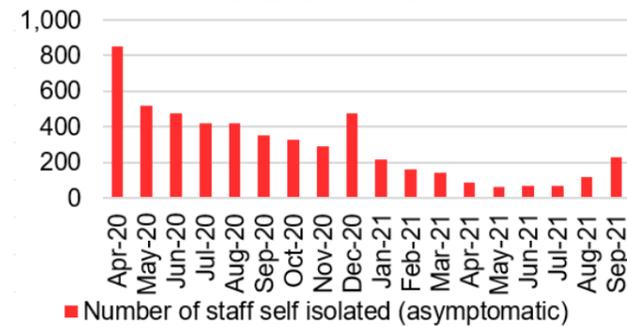
**Chart 8: Number of COVID19 related complaints**



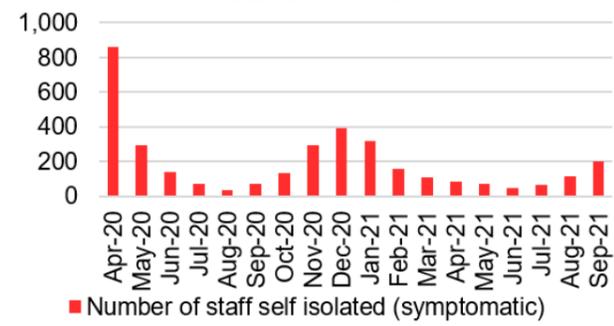
**Chart 9: Number of COVID19 related risks**



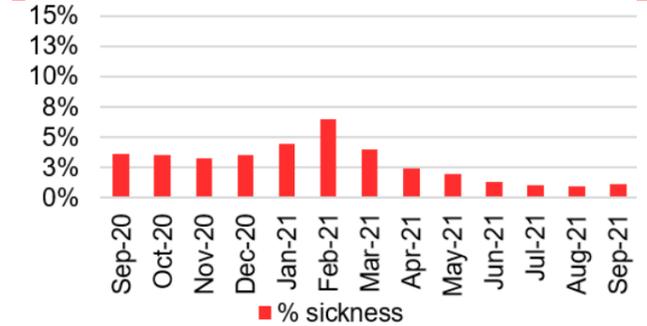
**Chart 10: Number of staff self-isolating (asymptomatic)**



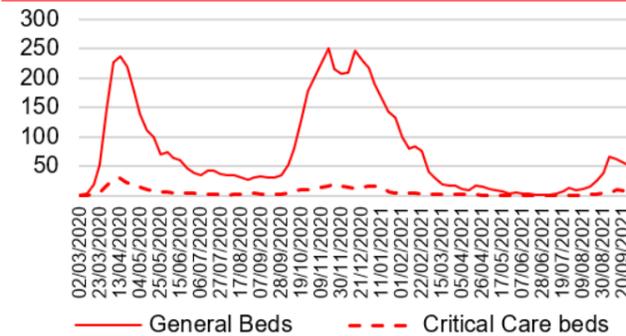
**Chart 11: Number of staff self isolating (symptomatic)**



**Chart 12: % staff sickness**



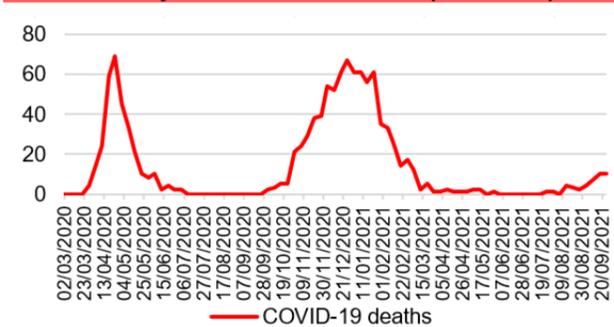
**Chart 13: Bed Occupancy for suspected and confirmed COVID19 cases**



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



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



**Chart 16: Number of mortuary spaces**



### 3.1 Updates on key measures

COVID TESTING																																																																																																						
Description	Current Performance	Trend																																																																																																				
<p>1. Number of new COVID19 cases in Swansea Bay population area</p>	<p><b>1. Number of new COVID cases</b>                      In September 2021, there were an additional 12,839 positive cases recorded bringing the cumulative total to 54,189 in Swansea Bay since March 2020.</p>	<p><b>1. Number of new COVID19 cases for Swansea Bay population</b></p> <table border="1"> <caption>1. Number of new COVID19 cases for Swansea Bay population</caption> <thead> <tr> <th>Month</th> <th>New positive COVID19 cases</th> </tr> </thead> <tbody> <tr><td>Mar-20</td><td>0</td></tr> <tr><td>Apr-20</td><td>1,000</td></tr> <tr><td>May-20</td><td>0</td></tr> <tr><td>Jun-20</td><td>0</td></tr> <tr><td>Jul-20</td><td>0</td></tr> <tr><td>Aug-20</td><td>0</td></tr> <tr><td>Sep-20</td><td>500</td></tr> <tr><td>Oct-20</td><td>4,500</td></tr> <tr><td>Nov-20</td><td>5,500</td></tr> <tr><td>Dec-20</td><td>12,000</td></tr> <tr><td>Jan-21</td><td>3,500</td></tr> <tr><td>Feb-21</td><td>1,000</td></tr> <tr><td>Mar-21</td><td>500</td></tr> <tr><td>Apr-21</td><td>0</td></tr> <tr><td>May-21</td><td>0</td></tr> <tr><td>Jun-21</td><td>500</td></tr> <tr><td>Jul-21</td><td>2,000</td></tr> <tr><td>Aug-21</td><td>7,000</td></tr> <tr><td>Sep-21</td><td>12,839</td></tr> </tbody> </table>	Month	New positive COVID19 cases	Mar-20	0	Apr-20	1,000	May-20	0	Jun-20	0	Jul-20	0	Aug-20	0	Sep-20	500	Oct-20	4,500	Nov-20	5,500	Dec-20	12,000	Jan-21	3,500	Feb-21	1,000	Mar-21	500	Apr-21	0	May-21	0	Jun-21	500	Jul-21	2,000	Aug-21	7,000	Sep-21	12,839																																																												
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<p>2. Number of staff referred for Antigen testing</p>	<p><b>3. Staff referred for Antigen testing</b>                      The cumulative number of staff referred for COVID testing between March 2020 and August 2021 is 13,951 of which 16% have been positive (Cumulative total).</p>	<p><b>2. Outcome of staff referred for Antigen testing</b></p> <table border="1"> <caption>2. Outcome of staff referred for Antigen testing</caption> <thead> <tr> <th>Month</th> <th>Positive</th> <th>Negative</th> <th>In Progress</th> <th>Unknown/blank</th> </tr> </thead> <tbody> <tr><td>Mar-20</td><td>200</td><td>100</td><td>0</td><td>0</td></tr> <tr><td>Apr-20</td><td>1,800</td><td>100</td><td>0</td><td>0</td></tr> <tr><td>May-20</td><td>300</td><td>100</td><td>0</td><td>0</td></tr> <tr><td>Jun-20</td><td>200</td><td>100</td><td>0</td><td>0</td></tr> <tr><td>Jul-20</td><td>100</td><td>100</td><td>0</td><td>0</td></tr> <tr><td>Aug-20</td><td>100</td><td>100</td><td>0</td><td>0</td></tr> <tr><td>Sep-20</td><td>100</td><td>100</td><td>0</td><td>0</td></tr> <tr><td>Oct-20</td><td>1,500</td><td>100</td><td>0</td><td>0</td></tr> <tr><td>Nov-20</td><td>1,500</td><td>100</td><td>0</td><td>0</td></tr> <tr><td>Dec-20</td><td>1,800</td><td>100</td><td>0</td><td>0</td></tr> <tr><td>Jan-21</td><td>500</td><td>100</td><td>0</td><td>0</td></tr> <tr><td>Feb-21</td><td>300</td><td>100</td><td>0</td><td>0</td></tr> <tr><td>Mar-21</td><td>500</td><td>100</td><td>0</td><td>0</td></tr> <tr><td>Apr-21</td><td>200</td><td>100</td><td>0</td><td>0</td></tr> <tr><td>May-21</td><td>200</td><td>100</td><td>0</td><td>0</td></tr> <tr><td>Jun-21</td><td>200</td><td>100</td><td>0</td><td>0</td></tr> <tr><td>Jul-21</td><td>200</td><td>100</td><td>0</td><td>0</td></tr> <tr><td>Aug-21</td><td>200</td><td>100</td><td>0</td><td>0</td></tr> <tr><td>Sep-21</td><td>500</td><td>100</td><td>0</td><td>0</td></tr> </tbody> </table>	Month	Positive	Negative	In Progress	Unknown/blank	Mar-20	200	100	0	0	Apr-20	1,800	100	0	0	May-20	300	100	0	0	Jun-20	200	100	0	0	Jul-20	100	100	0	0	Aug-20	100	100	0	0	Sep-20	100	100	0	0	Oct-20	1,500	100	0	0	Nov-20	1,500	100	0	0	Dec-20	1,800	100	0	0	Jan-21	500	100	0	0	Feb-21	300	100	0	0	Mar-21	500	100	0	0	Apr-21	200	100	0	0	May-21	200	100	0	0	Jun-21	200	100	0	0	Jul-21	200	100	0	0	Aug-21	200	100	0	0	Sep-21	500	100	0	0
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Description	Current Performance	Trend
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**Staff absence due to COVID19**

1. Number of staff self-isolating (asymptomatic)

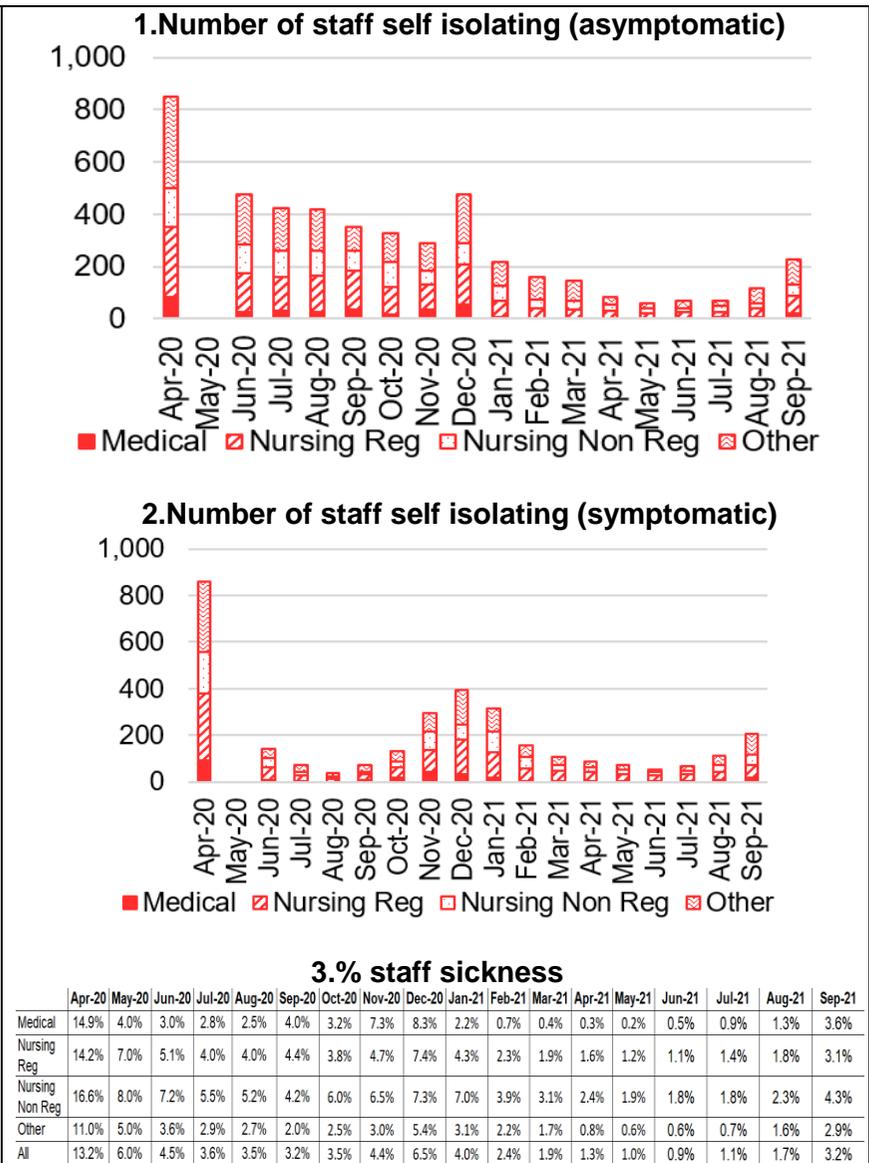
2. Number of staff self-isolating (symptomatic)

3. % staff sickness

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 August and September 2021, the number of staff self-isolating (asymptomatic) slightly increased from 115 to 227 and the number of staff self-isolating (symptomatic) increased from 114 to 204. In September 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.

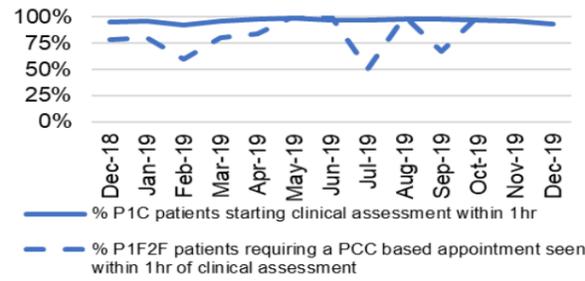
**3. % Staff sickness**  
 The percentage of staff sickness absence due to COVID19 has slightly increased from 1.7% in August 2021 to 3.2% in September 2021.



# HARM FROM OVERWHELMED NHS AND SOCIAL CARE SYSTEM

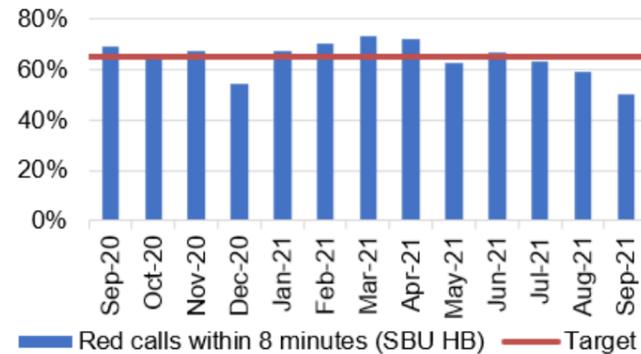
## 4.1 Unscheduled Care- Overview

**Chart 1: GP Out of Hours/ 111**

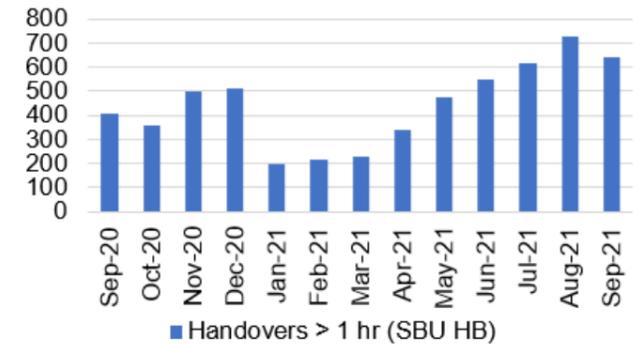


Service continues to experience issues with data reporting. It is anticipated that up to date accurate data will be available shortly.

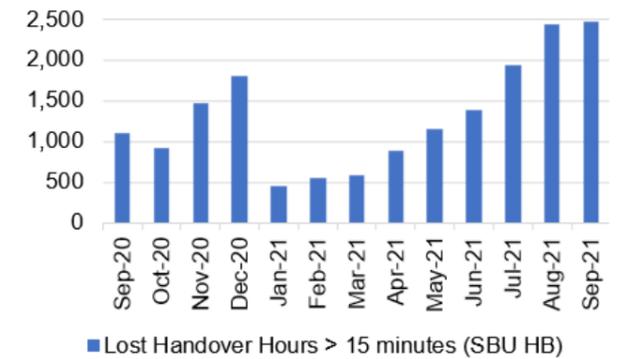
**Chart 2: % red calls responded to within 8 minutes**



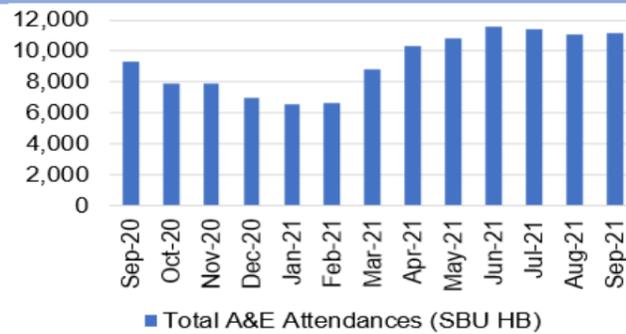
**Chart 3: Number of ambulance handovers over 1 hour**



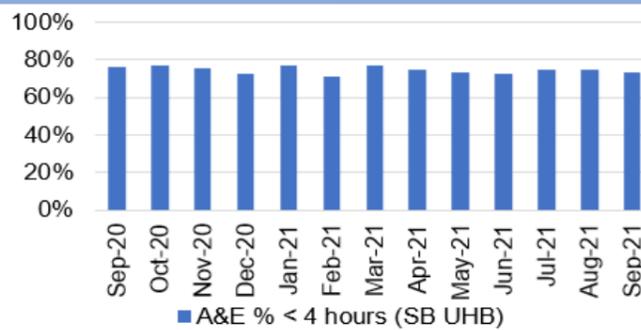
**Chart 4: Lost hours- notification to ambulance handover over 15 minutes**



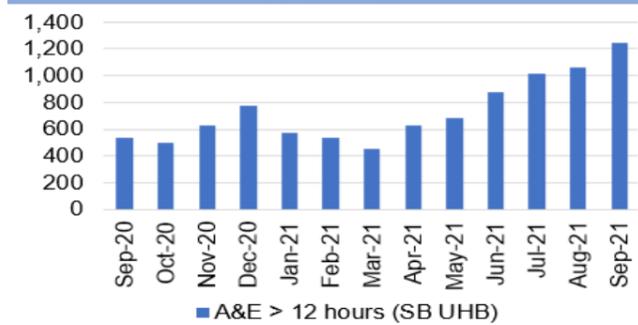
**Chart 5: A&E Attendances**



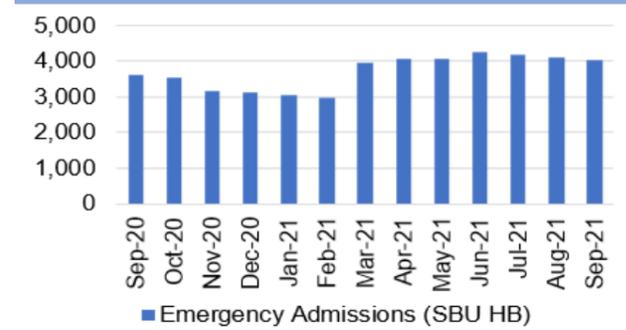
**Chart 6: % patients who spend less than 4 hours in A&E**



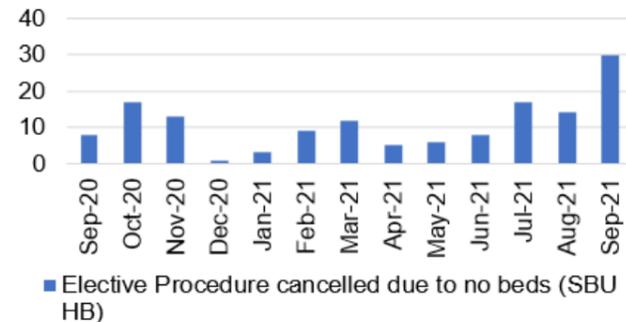
**Chart 7: Number of patients waiting over 12 hours in A&E**



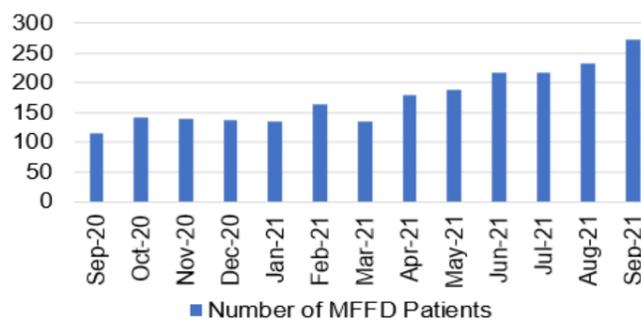
**Chart 8: Number of emergency admissions**



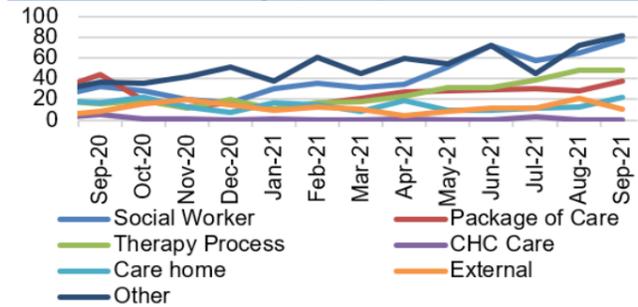
**Chart 9: Elective procedures cancelled due to lack of beds**



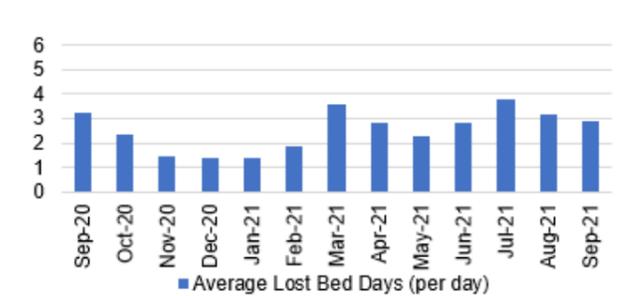
**Chart 10: Number of Medically Fit For Discharge (MFFD) patients**



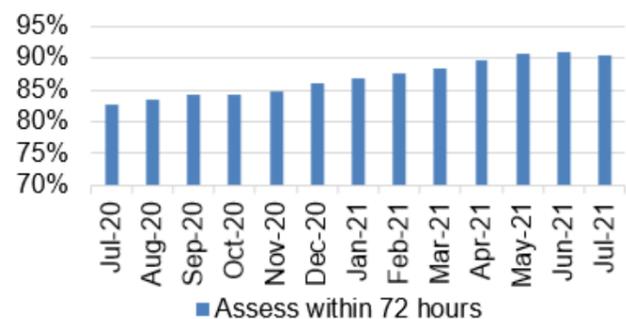
**Chart 11: Delay reason for Medically Fit For Discharge (MFFD) patients**



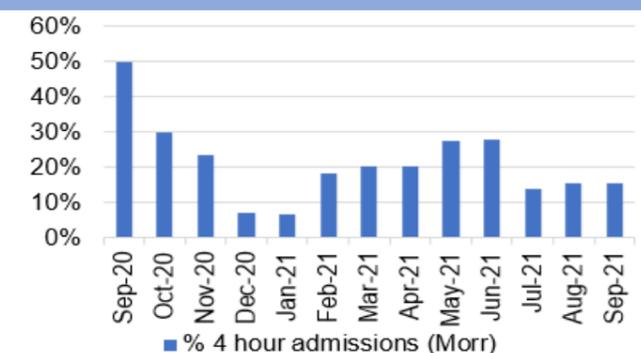
**Chart 12: Average lost bed days (per day)**



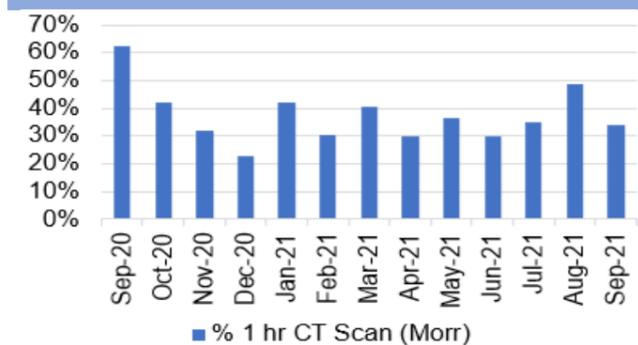
**Chart 12: % of patients (> 60 years) who presented with a hip fracture that received an orthogeriatrician assessment within 72 hours**



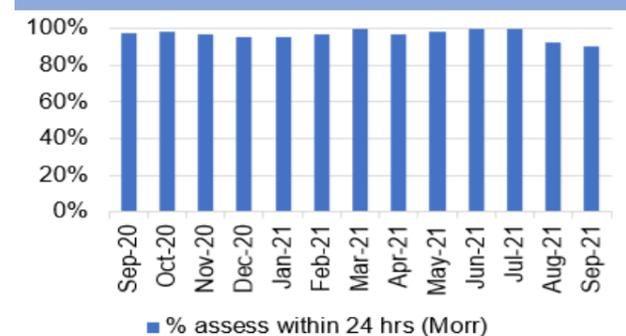
**Chart 13: Direct admission to Acute Stroke Unit within 4 hours**



**Chart 14: % of stroke patients receiving CT scan with 1 hour**



**Chart 15: % stroke patients receiving consultant assessment within 24 hours**



## Unscheduled Care Overview (September 2021)

Primary Care Access		Ambulance	Emergency Department	
<b>97% (→)</b> GP practices open during daily core hours	<b>88% (→)</b> GP practices offering appointments between 5pm-6:30pm	<b>50.4% (9%↓)</b> Red calls responded to with 8 minutes	<b>11,157 (1%↑)</b> A&E attendances	<b>73.09% (2%↓)</b> Waits in A&E under 4 hours
<b>93% (3%↓)</b> % of Out of Hours (OoH)/111 patients prioritised as P1CH that started their definitive clinical assessment within 1 hour of their initial call being answered ( <i>July-19</i> )	<b>100% (33%↑)</b> % of Out of Hours (OOH)/111 patients prioritised as P1F2F requiring a Primary Care Centre (PCC) based appointment seen within 1 hour following completion of their definitive clinical assessment ( <i>Oct-19</i> )	<b>642 (12%↓)</b> Ambulance handovers over 1 hour	<b>1250 (18%↑)</b> Waits in A&E over 12 hours	<b>1,893 (1%↓)</b> Patients admitted from A&E
		<b>3,772 (→)</b> Amber calls		
		<b>546 (11%↑)</b> Red calls		
Emergency Activity		Patient Flow		
<b>4,025 (2%↓)</b> Emergency Inpatient Admissions	<b>309 (-14%↓)</b> ( <i>Jun-21</i> ) Emergency Theatre Cases	<b>13 (19%↓)</b> ( <i>Mar-20</i> ) Mental Health DTOCs * Data collection temporarily suspended	<b>60 (13%↓)</b> ( <i>Mar-20</i> ) Non-Mental Health DTOCs * Data collection temporarily suspended	
<b>368 (15%↑)</b> ( <i>Jun-21</i> ) Trauma theatre cases	<b>14 (18%↓)</b> Elective procedures cancelled due to no beds		<b>277 (17%↑)</b> Medically fit patients	

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

## 4.2 Updates on key measures

UNSCHEDULED CARE																																																																																																			
Description	Current Performance																																																																																																		
<p><b>Ambulance responses</b></p> <p>1. The percentage of emergency responses to red calls arriving within (up to and including) 8 minutes.</p> <p>2. The number of ambulance calls by category.</p> <p>3. The percentage of emergency responses to red calls arriving within 8 minutes (last 90 days)</p>	<p>Ambulance red call response times were consistently above 65% in 2020/21 with the exception of December 2020 where performance reduced to 54.1%. In September 2021, performance decreased to 50.4%, dropping further below the 65% target. In September 2021, the number of green calls increased by 2%, amber calls remained the same and red calls increased by 11% compared with August 2021.</p>																																																																																																		
	<p style="text-align: center;"><b>Trend</b></p> <div style="display: flex; justify-content: space-around;"> <div style="width: 45%;"> <p><b>1. % of red calls responded to within 8 minutes</b></p> <table border="1"> <caption>1. % of red calls responded to within 8 minutes</caption> <thead> <tr> <th>Month</th> <th>% of red calls responded to within 8 minutes (SBU HB)</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>Sep-20</td><td>68%</td><td>65%</td></tr> <tr><td>Oct-20</td><td>65%</td><td>65%</td></tr> <tr><td>Nov-20</td><td>65%</td><td>65%</td></tr> <tr><td>Dec-20</td><td>54.1%</td><td>65%</td></tr> <tr><td>Jan-21</td><td>65%</td><td>65%</td></tr> <tr><td>Feb-21</td><td>68%</td><td>65%</td></tr> <tr><td>Mar-21</td><td>70%</td><td>65%</td></tr> <tr><td>Apr-21</td><td>68%</td><td>65%</td></tr> <tr><td>May-21</td><td>65%</td><td>65%</td></tr> <tr><td>Jun-21</td><td>65%</td><td>65%</td></tr> <tr><td>Jul-21</td><td>65%</td><td>65%</td></tr> <tr><td>Aug-21</td><td>60%</td><td>65%</td></tr> <tr><td>Sep-21</td><td>50.4%</td><td>65%</td></tr> </tbody> </table> </div> <div style="width: 45%;"> <p><b>2. Number of ambulance call responses</b></p> <table border="1"> <caption>2. Number of ambulance call responses</caption> <thead> <tr> <th>Month</th> <th>Red calls</th> <th>Amber calls</th> <th>Green calls</th> </tr> </thead> <tbody> <tr><td>Sep-20</td><td>400</td><td>3200</td><td>900</td></tr> <tr><td>Oct-20</td><td>350</td><td>3100</td><td>900</td></tr> <tr><td>Nov-20</td><td>400</td><td>3200</td><td>950</td></tr> <tr><td>Dec-20</td><td>350</td><td>3000</td><td>950</td></tr> <tr><td>Jan-21</td><td>300</td><td>3000</td><td>900</td></tr> <tr><td>Feb-21</td><td>350</td><td>3200</td><td>900</td></tr> <tr><td>Mar-21</td><td>400</td><td>3300</td><td>950</td></tr> <tr><td>Apr-21</td><td>400</td><td>3400</td><td>950</td></tr> <tr><td>May-21</td><td>450</td><td>3500</td><td>950</td></tr> <tr><td>Jun-21</td><td>450</td><td>3400</td><td>900</td></tr> <tr><td>Jul-21</td><td>450</td><td>3400</td><td>900</td></tr> <tr><td>Aug-21</td><td>500</td><td>3500</td><td>950</td></tr> <tr><td>Sep-21</td><td>550</td><td>3500</td><td>950</td></tr> </tbody> </table> </div> </div> <p style="text-align: center;"><b>3. % of red calls responded to within 8 minutes – HB total last 90 days</b></p> <p style="text-align: center;">*Limited data available in August and September</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p><b>Symbol Key:</b></p> <ul style="list-style-type: none"> <li>◆ Above or below control limits</li> <li>8 or more points</li> <li>▲ above or below the mean</li> <li>A run of 6</li> <li>● increasing or decreasing points</li> </ul> </div>	Month	% of red calls responded to within 8 minutes (SBU HB)	Target	Sep-20	68%	65%	Oct-20	65%	65%	Nov-20	65%	65%	Dec-20	54.1%	65%	Jan-21	65%	65%	Feb-21	68%	65%	Mar-21	70%	65%	Apr-21	68%	65%	May-21	65%	65%	Jun-21	65%	65%	Jul-21	65%	65%	Aug-21	60%	65%	Sep-21	50.4%	65%	Month	Red calls	Amber calls	Green calls	Sep-20	400	3200	900	Oct-20	350	3100	900	Nov-20	400	3200	950	Dec-20	350	3000	950	Jan-21	300	3000	900	Feb-21	350	3200	900	Mar-21	400	3300	950	Apr-21	400	3400	950	May-21	450	3500	950	Jun-21	450	3400	900	Jul-21	450	3400	900	Aug-21	500	3500	950	Sep-21	550	3500	950
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**UNSCHEDULED CARE**

**Description**

**Current Performance**

**Ambulance handovers**

1. The number of ambulance handovers over one hour

In September 2021, there were 642 ambulance to hospital handovers taking over 1 hour; this is a significant deterioration from 410 in September 2020, but is an in-month decrease of 84 from August 2021. In September 2021, 622 handovers over 1 hour were attributed to Morriston Hospital and 20 were attributed to Singleton Hospital.

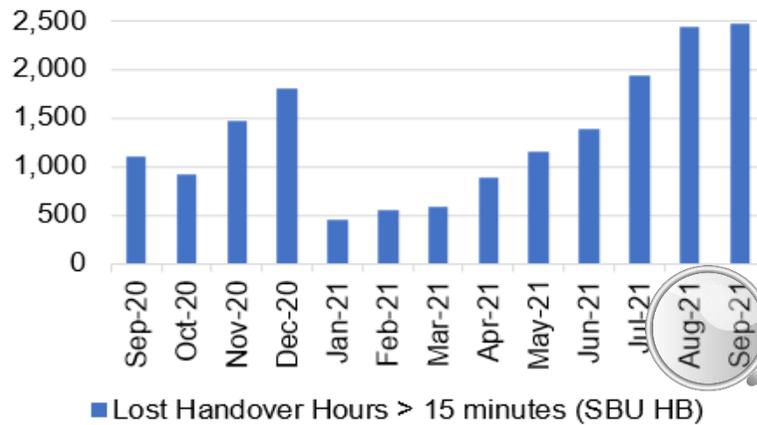
The number of handover hours lost over 15 minutes significantly increased from 1,100 in September 2020 to 2,467 in September 2021.

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

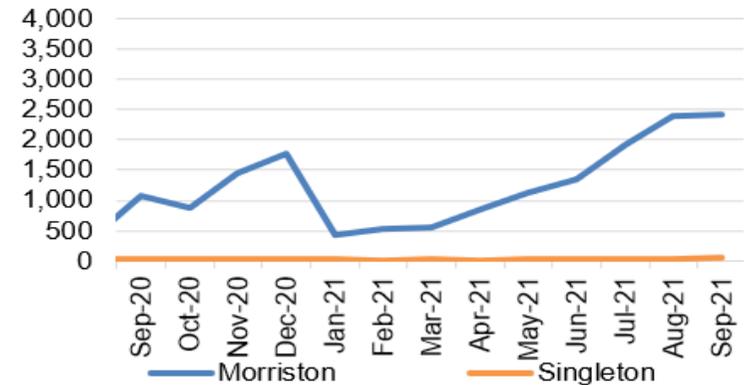
3. The number of ambulance handovers over one hour (last 90 days)

**Trend**

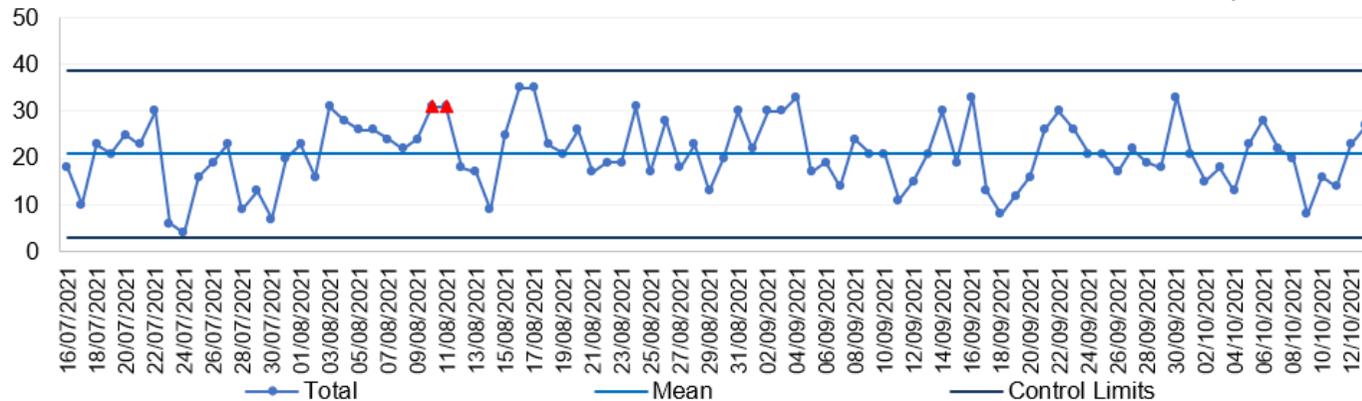
**1. Number of ambulance handovers- HB total**



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



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



**Symbol Key:**

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

## UNSCHEDULED CARE

### Description

### Current Performance

#### A&E Attendances

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

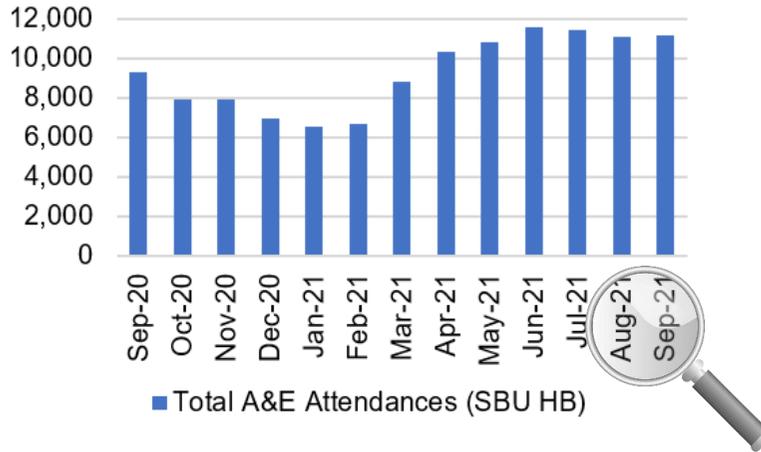
2. The number of attendances at emergency departments in the Health Board – Hospital level

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

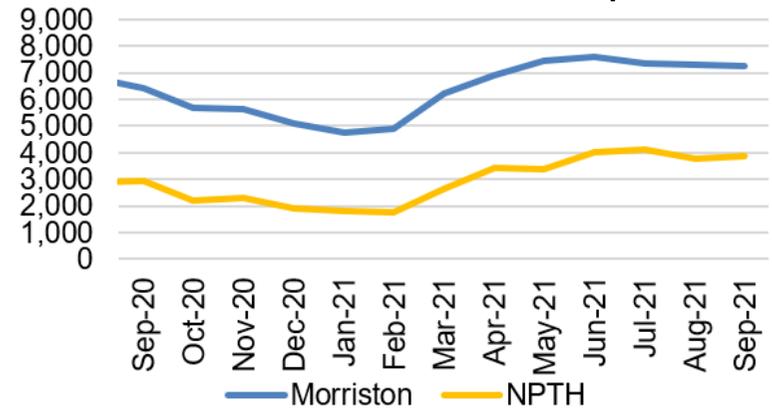
ED/MIU attendances significantly reduced in April 2020 during the COVID19 first wave but have been steadily increasing month on month until September 2020 when attendances started to reduce. Attendances have been decreasing since July 2021, however in September 2021, there were 11,157 A&E attendances. This is 53% more than April 2020 and 2% more than September 2019.

#### Trend

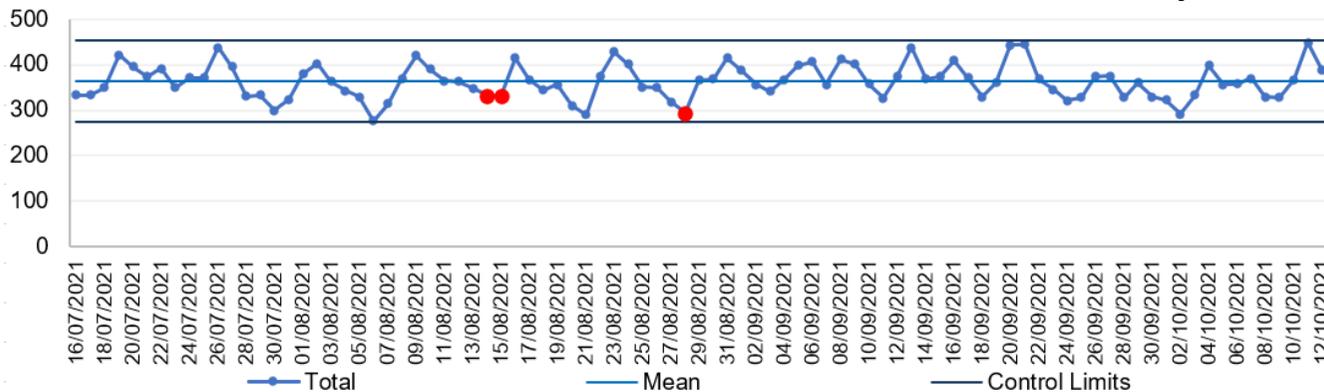
1. Number of A&E attendances- HB total



2. Number of A&E attendances- Hospital level



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



Symbol Key:

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

## UNSCHEDULED CARE

### Description

### Current Performance

#### A&E waiting times

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

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

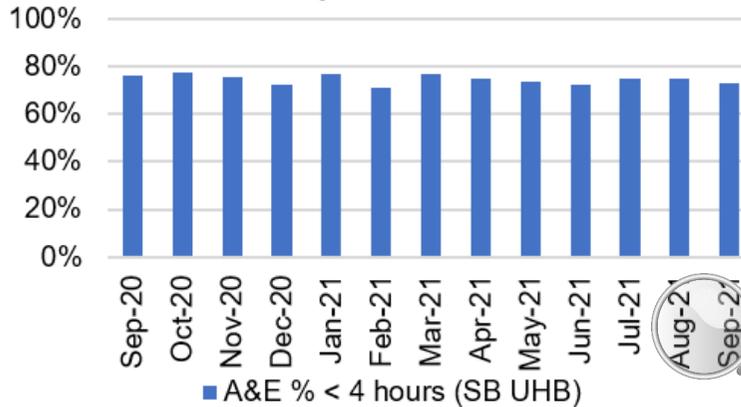
3. % of patients who spend less than 4 hours in A&E (last 90 days)

The Health Board's performance against the 4-hour measure deteriorated from 75.04% in August 2021 to 73.09% in September 2021.

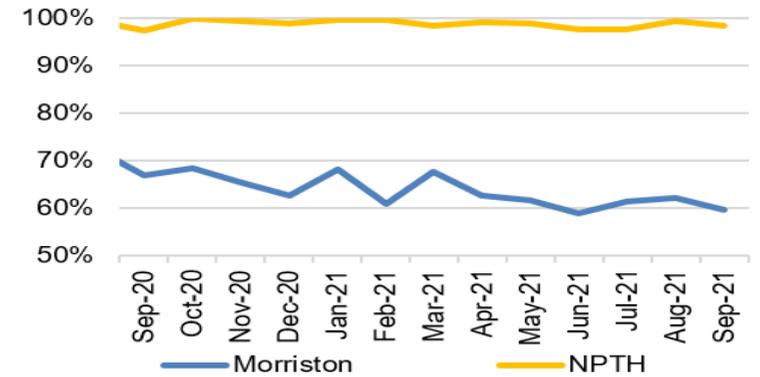
Neath Port Talbot Hospital Minor Injuries Unit (MIU) continues to achieve (and exceed) the national target of 95% achieving 98.33% in September 2021. Morriston Hospital's performance deteriorated from 62.32% in August 2021 to 59.68% in September 2021.

#### Trend

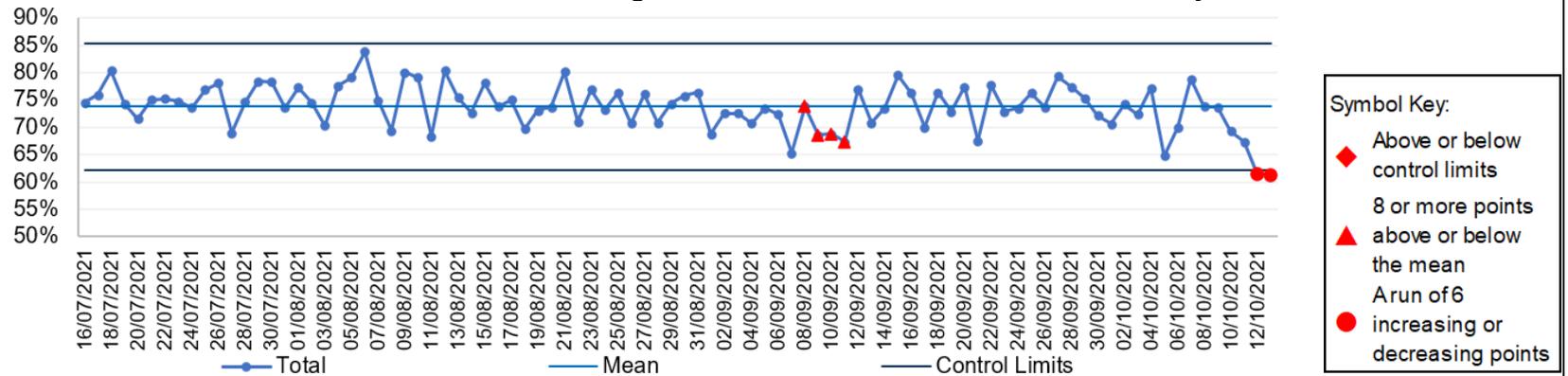
**1. % Patients waiting under 4 hours in A&E- HB total**



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



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



## UNSCHEDULED CARE

### Description

### Current Performance

#### A&E waiting times

In September 2021, performance against the 12-hour measure deteriorated compared with August 2021, increasing from 1060 to 1,250.

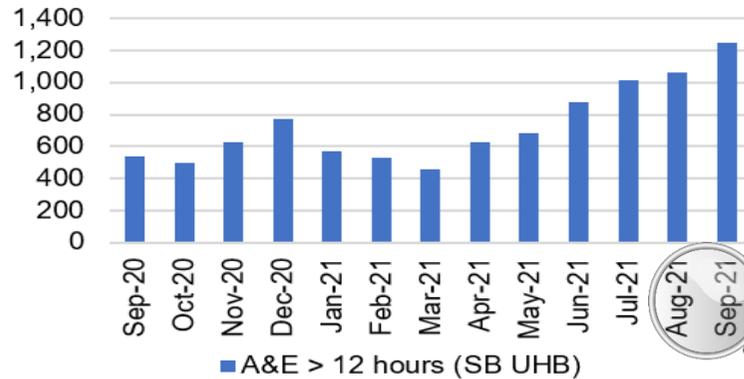
1. Number of patients who spend 12 hours or more in A&E

All patients waiting over 12 hours in September 2021 were in Morriston Hospital. This is an increase of 713 compared to September 2020.

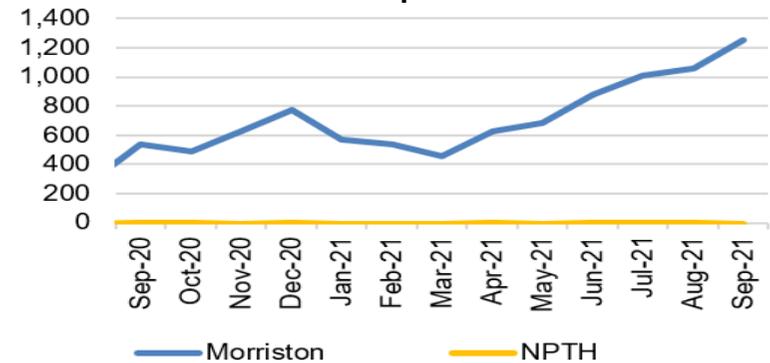
2. Number of patients who spend 12 hours or more in A&E - Hospital level

#### Trend

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

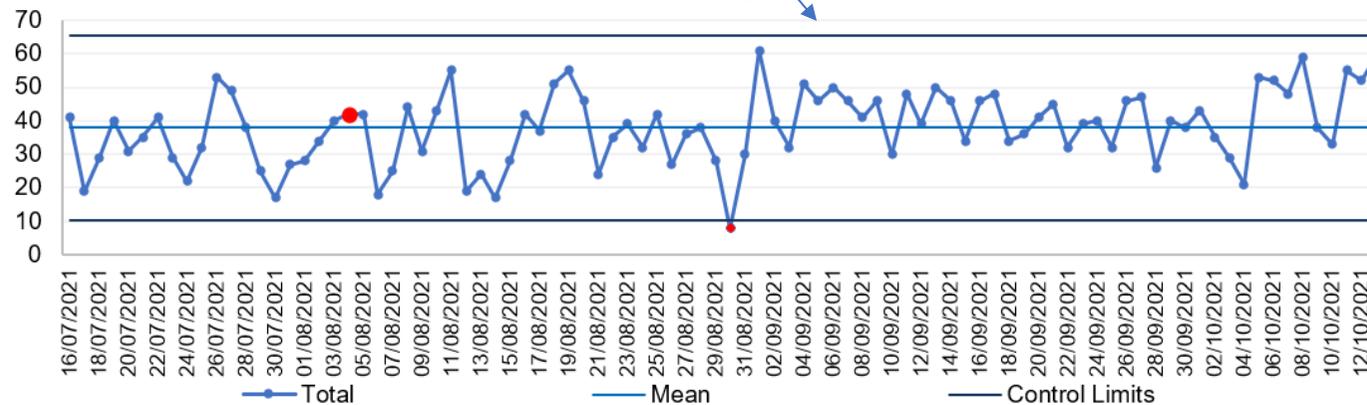


**2. Number of patients waiting over 12 hours in A&E - Hospital level**



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

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



**Symbol Key:**

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

## UNSCHEDULED CARE

### Current Performance

#### Emergency admissions

In September 2021, there were 4,025 emergency admissions across the Health Board, which is 2% lower than in August 2021 and 10.4% more than September 2020.

1. The number of emergency inpatient admissions

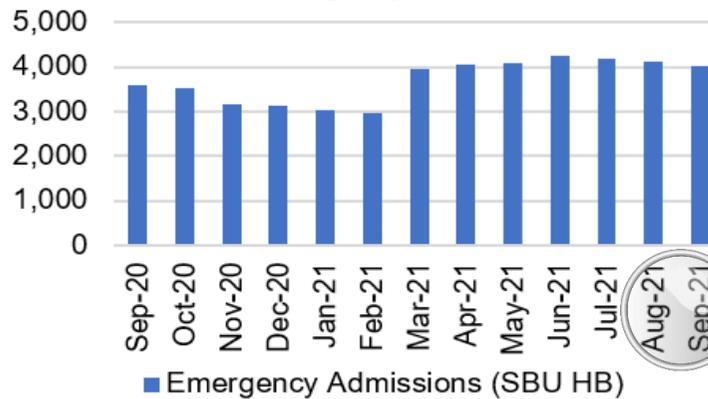
Morryston Hospital saw a slight in-month reduction, with 12 less admissions (from 3,155 in August 2021 to 3,143).

2. The number of emergency inpatient admissions- Hospital level

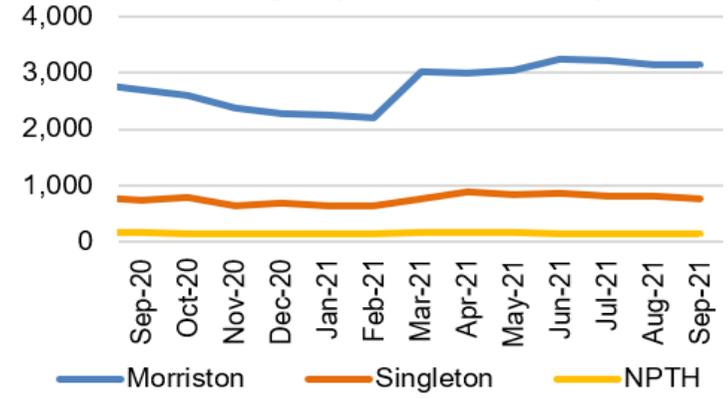
3. The number of emergency inpatient admissions (last 90 days)

#### Trend

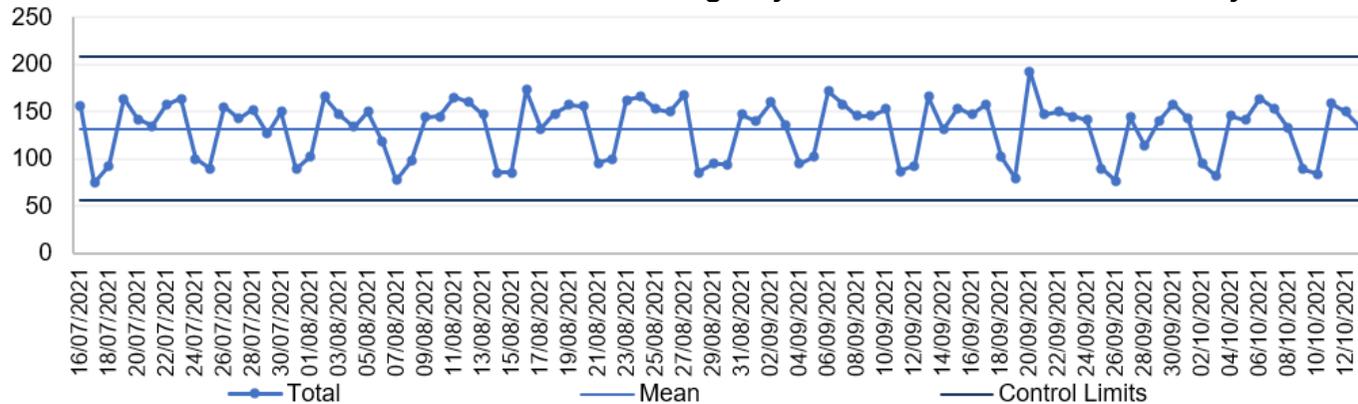
**1. Number of emergency admissions- HB total**



**2. Number of emergency admissions- Hospital level**



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



**Symbol Key:**

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

**UNSCHEDULED CARE**

**Description Current Performance**

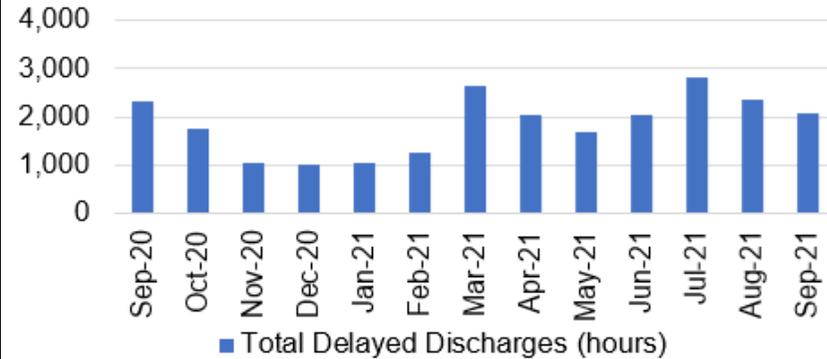
**Critical Care-Delayed Transfers of Care (DTC)-Morrison Hospital**

In September 2021, there were a total of 82 admissions into the Intensive Care Unit (ICU) in Morrison Hospital. During the COVID19 first wave in April and May 2020, the amount of delayed discharges and average lost bed days significantly reduced and this downward trend was also evident in the second wave starting in November 2020 but not to the extent of the first wave. However, in September 2021, delayed discharges saw a reduction to 2,082.4 hours, with the average lost bed days also decreasing to 2.89 per day. The percentage of patients delayed over 24 hours decreased from 42.03% in August 2021 to 34.55% in September 2021.

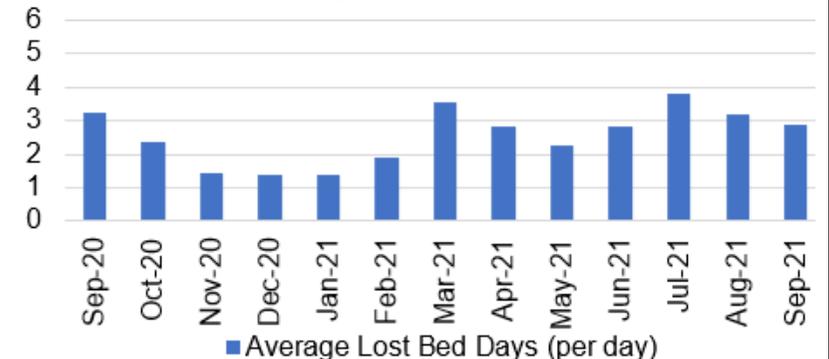
1. Total Critical Care delayed discharges (hours)
2. Average lost bed days per day
3. Percentage of patients delayed:
- Up to 8 hours
  - Between 8 and 24 hours
  - Over 24 hours

**Trend**

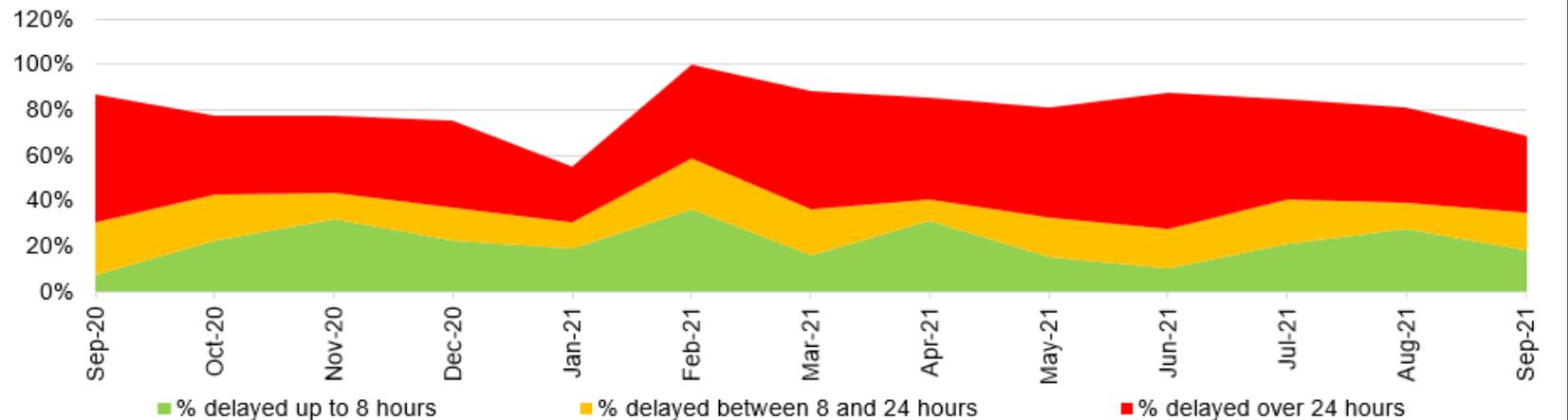
**1. Total Critical Care delayed discharges (hours)**



**2. Average lost bed days per day**



**3. Percentage of Critical Care patients delayed**



**UNSCHEDULED CARE**

Description	Current Performance	Trend																																																																						
<p><b>Medically Fit</b>  <i>The number of patients waiting at each site in the Health Board that are deemed discharge/medically fit</i></p>	<p>In September 2021, there were on average 272 patients who were deemed medically/discharge fit, 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. It began increasing again in May 2021, with September 2021 (272) now seeing the highest number of medically/ discharge fit patients in over two years.</p> <p>In September 2021, Morriston Hospital had the largest proportion of medically/ discharge fit patients with 105, followed by Neath Port Talbot Hospital with 84.</p>	<p><b>The number of discharge/ medically fit patients by site</b></p> <table border="1"> <caption>Estimated data for 'The number of discharge/ medically fit patients by site'</caption> <thead> <tr> <th>Month</th> <th>Morriston</th> <th>Singleton</th> <th>NPTH</th> <th>Gorseinon</th> </tr> </thead> <tbody> <tr><td>Sep-20</td><td>40</td><td>40</td><td>25</td><td>10</td></tr> <tr><td>Oct-20</td><td>60</td><td>50</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>40</td><td>10</td></tr> <tr><td>Apr-21</td><td>65</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>80</td><td>50</td><td>75</td><td>10</td></tr> <tr><td>Jul-21</td><td>90</td><td>50</td><td>70</td><td>10</td></tr> <tr><td>Aug-21</td><td>95</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> </tbody> </table>	Month	Morriston	Singleton	NPTH	Gorseinon	Sep-20	40	40	25	10	Oct-20	60	50	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	40	10	Apr-21	65	35	70	10	May-21	65	40	75	10	Jun-21	80	50	75	10	Jul-21	90	50	70	10	Aug-21	95	60	70	15	Sep-21	105	70	85	15
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<p><b>Elective procedures cancelled due to lack of beds</b>  <i>The number of elective procedure cancelled across the hospital where the main cancellation reasons was lack of beds</i></p>	<p>In September 2021, there were 30 elective procedures cancelled due to lack of beds on the day of surgery. This is 22 more cancellations than in September 2020 and 16 more than August 2021.</p> <p>All of the cancelled procedures were attributed to Morriston Hospital.</p>	<p><b>Total number of elective procedures cancelled due to lack of beds</b></p> <table border="1"> <caption>Estimated data for 'Total number of elective procedures cancelled due to lack of beds'</caption> <thead> <tr> <th>Month</th> <th>Morriston</th> <th>Singleton</th> <th>NPTH</th> </tr> </thead> <tbody> <tr><td>Sep-20</td><td>6</td><td>1</td><td>1</td></tr> <tr><td>Oct-20</td><td>16</td><td>1</td><td>1</td></tr> <tr><td>Nov-20</td><td>13</td><td>1</td><td>1</td></tr> <tr><td>Dec-20</td><td>1</td><td>1</td><td>1</td></tr> <tr><td>Jan-21</td><td>2</td><td>1</td><td>1</td></tr> <tr><td>Feb-21</td><td>9</td><td>1</td><td>1</td></tr> <tr><td>Mar-21</td><td>11</td><td>1</td><td>1</td></tr> <tr><td>Apr-21</td><td>5</td><td>1</td><td>1</td></tr> <tr><td>May-21</td><td>6</td><td>1</td><td>1</td></tr> <tr><td>Jun-21</td><td>7</td><td>1</td><td>1</td></tr> <tr><td>Jul-21</td><td>17</td><td>1</td><td>1</td></tr> <tr><td>Aug-21</td><td>12</td><td>1</td><td>1</td></tr> <tr><td>Sep-21</td><td>30</td><td>1</td><td>1</td></tr> </tbody> </table>	Month	Morriston	Singleton	NPTH	Sep-20	6	1	1	Oct-20	16	1	1	Nov-20	13	1	1	Dec-20	1	1	1	Jan-21	2	1	1	Feb-21	9	1	1	Mar-21	11	1	1	Apr-21	5	1	1	May-21	6	1	1	Jun-21	7	1	1	Jul-21	17	1	1	Aug-21	12	1	1	Sep-21	30	1	1														
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NICE compliant surgery-</b> 69.8% of operations were consistent with the NICE recommendations in August 2021. This is 0.5% less than in August 2020. In August 2021, Morriston was below the all-Wales average of 71.9%.</p> <p><b>4. Prompt mobilisation-</b> In August 2021, 74.4% of patients were out of bed the day after surgery. This is 1.2% less than in August 2020.</p>	<p><b>1. Prompt orthogeriatric assessment</b></p> <table border="1"> <thead> <tr> <th>Month</th> <th>Morriston (%)</th> <th>All-Wales (%)</th> <th>Eng, Wal &amp; N. 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Aug-20	53.3	65.0	65.0																																																																																																																																																																																																																															
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Jun-21	53.3	65.0	65.0																																																																																																																																																																																																																															
Jul-21	53.3	65.0	65.0																																																																																																																																																																																																																															
Aug-21	59.4	65.0	65.0																																																																																																																																																																																																																															
Month	Morriston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)																																																																																																																																																																																																																															
Aug-20	69.3	71.9	71.9																																																																																																																																																																																																																															
Sep-20	69.3	71.9	71.9																																																																																																																																																																																																																															
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**FRACTURED NECK OF FEMUR (#NOF)**

Description	Current Performance	Trend																																																								
<p>5. <i>Not delirious when tested- % patients (&lt;4 on 4AT test) when tested in the week after operation</i></p> <p>6. <i>Return to original residence- % patients discharged back to original residence, or in that residence at 120 day follow-up</i></p> <p>7. <i>30 day mortality rate</i></p>	<p><b>5. Not delirious when tested-</b> 77.7% of patients were not delirious in the week after their operation in August 2021. This is an improvement of 11% compared with August 2020.</p>	<p align="center"><b>5. Not delirious when tested</b></p> <table border="1"> <caption>5. Not delirious when tested</caption> <thead> <tr><th>Month</th><th>Morryston (%)</th><th>All-Wales (%)</th><th>Eng, Wal &amp; N. Ire (%)</th></tr> </thead> <tbody> <tr><td>Aug-20</td><td>65</td><td>60</td><td>60</td></tr> <tr><td>Sep-20</td><td>68</td><td>60</td><td>60</td></tr> <tr><td>Oct-20</td><td>70</td><td>60</td><td>60</td></tr> <tr><td>Nov-20</td><td>70</td><td>60</td><td>60</td></tr> <tr><td>Dec-20</td><td>72</td><td>60</td><td>60</td></tr> <tr><td>Jan-21</td><td>72</td><td>60</td><td>60</td></tr> <tr><td>Feb-21</td><td>72</td><td>60</td><td>60</td></tr> <tr><td>Mar-21</td><td>72</td><td>60</td><td>60</td></tr> <tr><td>Apr-21</td><td>72</td><td>60</td><td>60</td></tr> <tr><td>May-21</td><td>72</td><td>60</td><td>60</td></tr> <tr><td>Jun-21</td><td>72</td><td>60</td><td>60</td></tr> <tr><td>Jul-21</td><td>72</td><td>60</td><td>60</td></tr> <tr><td>Aug-21</td><td>78</td><td>60</td><td>60</td></tr> </tbody> </table>	Month	Morryston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)	Aug-20	65	60	60	Sep-20	68	60	60	Oct-20	70	60	60	Nov-20	70	60	60	Dec-20	72	60	60	Jan-21	72	60	60	Feb-21	72	60	60	Mar-21	72	60	60	Apr-21	72	60	60	May-21	72	60	60	Jun-21	72	60	60	Jul-21	72	60	60	Aug-21	78	60	60
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Aug-21	78	60	60																																																							
<p><b>6. Return to original residence-</b> 68.4% of patients in July 2021 were discharged back to their original residence. This is 8.8% less than in July 2020.</p>	<p align="center"><b>6. Return to original residence</b></p> <table border="1"> <caption>6. Return to original residence</caption> <thead> <tr><th>Month</th><th>Morryston (%)</th><th>All-Wales (%)</th><th>Eng, Wal &amp; N. Ire (%)</th></tr> </thead> <tbody> <tr><td>Jul-20</td><td>75</td><td>75</td><td>70</td></tr> <tr><td>Aug-20</td><td>75</td><td>75</td><td>70</td></tr> <tr><td>Sep-20</td><td>75</td><td>75</td><td>70</td></tr> <tr><td>Oct-20</td><td>75</td><td>75</td><td>70</td></tr> <tr><td>Nov-20</td><td>75</td><td>75</td><td>70</td></tr> <tr><td>Dec-20</td><td>75</td><td>75</td><td>70</td></tr> <tr><td>Jan-21</td><td>72</td><td>75</td><td>70</td></tr> <tr><td>Feb-21</td><td>72</td><td>75</td><td>70</td></tr> <tr><td>Mar-21</td><td>70</td><td>75</td><td>70</td></tr> <tr><td>Apr-21</td><td>70</td><td>75</td><td>70</td></tr> <tr><td>May-21</td><td>70</td><td>75</td><td>70</td></tr> <tr><td>Jun-21</td><td>72</td><td>75</td><td>70</td></tr> <tr><td>Jul-21</td><td>68</td><td>75</td><td>70</td></tr> </tbody> </table>	Month	Morryston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)	Jul-20	75	75	70	Aug-20	75	75	70	Sep-20	75	75	70	Oct-20	75	75	70	Nov-20	75	75	70	Dec-20	75	75	70	Jan-21	72	75	70	Feb-21	72	75	70	Mar-21	70	75	70	Apr-21	70	75	70	May-21	70	75	70	Jun-21	72	75	70	Jul-21	68	75	70	
Month	Morryston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)																																																							
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May-21	70	75	70																																																							
Jun-21	72	75	70																																																							
Jul-21	68	75	70																																																							
<p><b>7. 30 day mortality rate-</b> In January 2021 the mortality rate for Morryston Hospital was 7.5% which is 0.5% less than January 2020. The mortality rate in Morryston Hospital in January 2021 is higher than the all-Wales average of 6.9% but lower than the national average of 7.6%.</p> <p>* Updated data is currently not available, but is being reviewed.</p>	<p align="center"><b>7. 30 day mortality rate</b></p> <table border="1"> <caption>7. 30 day mortality rate</caption> <thead> <tr><th>Month</th><th>Morryston (%)</th><th>All-Wales (%)</th><th>Eng, Wal &amp; 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>7.5</td><td>7.0</td><td>7.0</td></tr> <tr><td>Sep-20</td><td>7.5</td><td>7.0</td><td>7.0</td></tr> <tr><td>Oct-20</td><td>7.5</td><td>7.0</td><td>7.0</td></tr> <tr><td>Nov-20</td><td>7.5</td><td>7.0</td><td>7.0</td></tr> <tr><td>Dec-20</td><td>7.5</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	Morryston (%)	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	7.5	7.0	7.0	Sep-20	7.5	7.0	7.0	Oct-20	7.5	7.0	7.0	Nov-20	7.5	7.0	7.0	Dec-20	7.5	7.0	7.0	Jan-21	7.5	6.9	7.6	
Month	Morryston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)																																																							
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## HEALTHCARE ACQUIRED INFECTIONS

Description	Current Performance	Trend																												
<b>Healthcare Acquired Infections (HCAI) - E.coli bacteraemia-</b> <i>Number of laboratory confirmed E.coli bacteraemia cases</i>	<ul style="list-style-type: none"> <li>• 21 cases of <i>E. coli</i> bacteraemia were identified in September 2021, of which 9 were hospital acquired and 25 were community acquired.</li> <li>• Cumulative cases from August 2021 to September 2021 are 16% lower than the equivalent period in 2020/21. (129 in 2021/22 compared with 150 in 2020/21).</li> </ul>	<p style="text-align: center;"><b>Number of healthcare acquired E.coli bacteraemia cases</b></p> <table border="1"> <caption>Number of healthcare acquired E.coli bacteraemia cases (SBU)</caption> <thead> <tr> <th>Month</th> <th>Number of Cases</th> </tr> </thead> <tbody> <tr><td>Sep-20</td><td>23</td></tr> <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> </tbody> </table> <p style="text-align: center;">■ Number E.Coli cases (SBU)</p>	Month	Number of Cases	Sep-20	23	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
Month	Number of Cases																													
Sep-20	23																													
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May-21	26																													
Jun-21	28																													
Jul-21	23																													
Aug-21	34																													
Sep-21	21																													
<b>Healthcare Acquired Infections (HCAI)- S.aureus bacteraemia-</b> <i>Number of laboratory confirmed S.aureus bacteraemias (MRSA &amp; MSSA) cases</i>	<ul style="list-style-type: none"> <li>• There were 17 cases of Staph. aureus bacteraemia in September 2021, of which 13 were hospital acquired and 3 were community acquired.</li> <li>• Cumulative cases from August 2021 to September 2021 are 8.9% lower than the equivalent period in 2020/21 (56 in 2021/22 compared with 61 in 2020/21).</li> </ul>	<p style="text-align: center;"><b>Number of healthcare acquired S.aureus bacteraemia cases</b></p> <table border="1"> <caption>Number of healthcare acquired S.aureus bacteraemia cases (SBU)</caption> <thead> <tr> <th>Month</th> <th>Number of Cases</th> </tr> </thead> <tbody> <tr><td>Sep-20</td><td>14</td></tr> <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> </tbody> </table> <p style="text-align: center;">■ Number of S.Aureus cases (SBU)</p>	Month	Number of Cases	Sep-20	14	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
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## HEALTHCARE ACQUIRED INFECTIONS

Description	Current Performance	Trend																												
<b>Healthcare Acquired Infections (HCAI)- C.difficile-</b> Number of laboratory confirmed C.difficile cases	<ul style="list-style-type: none"> <li>There were 14 <i>Clostridium difficile</i> toxin positive cases in September 2021, of which 9 were hospital acquired and 5 were community acquired.</li> <li>Cumulative cases from August 2021 to September 2021 are 28.4% more than the equivalent period of 2020/21 (74 in 2021/22 compared with 53 in 2020/21).</li> </ul>	<p style="text-align: center;"><b>Number of healthcare acquired C.difficile cases</b></p> <table border="1"> <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>Sep-20</td><td>18</td></tr> <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> </tbody> </table> <p style="text-align: center;">■ Number of C.diff cases (SBU)</p>	Month	Number of C.diff cases (SBU)	Sep-20	18	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
Month	Number of C.diff cases (SBU)																													
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<b>Healthcare Acquired Infections (HCAI)- Klebsiella sp-</b> Number of laboratory confirmed Klebsiella sp cases	<ul style="list-style-type: none"> <li>There were 11 cases of Klebsiella sp in September 2021, of which 8 were hospital acquired and 3 were community acquired.</li> <li>Cumulative cases from August 2021 to September 2021 are 4.7% lower than the equivalent period in 2020/21 (43 in 2021/22 compared with 45 in 2020/21).</li> </ul>	<p style="text-align: center;"><b>Number of healthcare acquired Klebsiella cases</b></p> <table border="1"> <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>Sep-20</td><td>5</td></tr> <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> </tbody> </table> <p style="text-align: center;">■ Number of Klebsiella cases (SBU)</p>	Month	Number of Klebsiella cases (SBU)	Sep-20	5	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
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## HEALTHCARE ACQUIRED INFECTIONS

Description	Current Performance	Trend
<b>Healthcare Acquired Infections (HCAI)- Aeruginosa-</b> Number of laboratory confirmed Aeruginosa cases	<ul style="list-style-type: none"> <li>There were 2 cases of <i>P.Aeruginosa</i> bacteraemia reported in September 2021.</li> <li>Cumulative cases from August 2021 to September 2021 are 80% more than the equivalent period in 2020/21.</li> </ul>	<p style="text-align: center;"><b>Number of healthcare acquired Pseudomonas cases</b></p> <p style="text-align: center;">■ Number of Pseudomonas cases (SBU)</p>

## PRESSURE ULCERS

Description	Current Performance	Trend
<b>Number of pressure ulcers</b> 1. Total number of pressure ulcers developed in hospital and in the community  2. Rate of pressure ulcers per 100,000 admissions	<p>1. In August 2021 there were 87 cases of healthcare acquired pressure ulcers, 34 of which were community acquired and 53 were hospital acquired.</p> <p>There were 10 grade 3+ pressure ulcers in August 2021, of which 8 were community acquired and 2 were hospital acquired.</p> <p>2. The rate per 100,000 admissions decreased from 853 in August 2021 to 767 in September 2021.</p>	<p style="text-align: center;"><b>Total number of hospital and community acquired Pressure Ulcers (PU) and rate per 100,000 admissions</b></p> <p style="text-align: center;">■ Pressure Ulcers (Community) ▨ Pressure Ulcers (Hospital)</p>

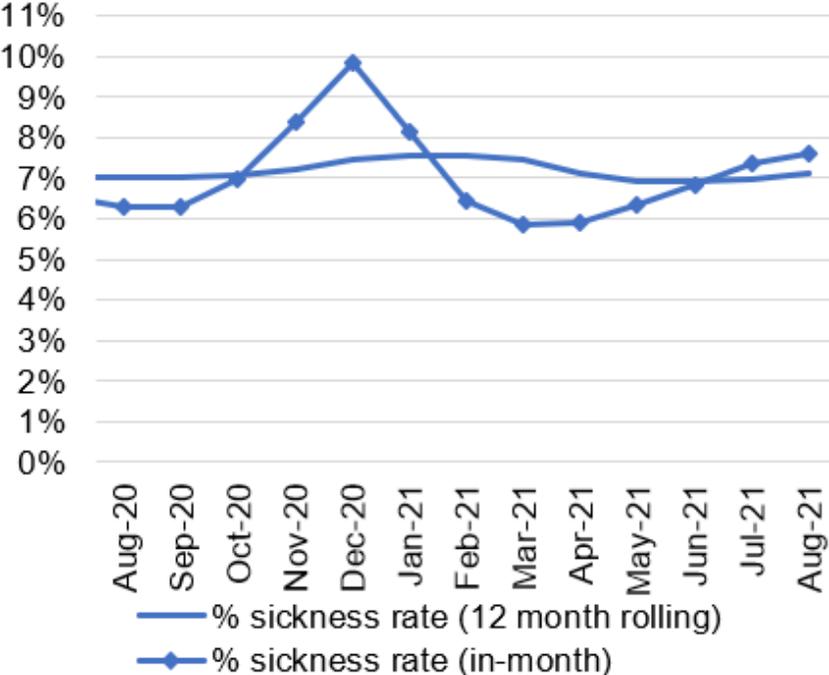
SERIOUS INCIDENTS																																																																																						
Description	Current Performance	Trend																																																																																				
<b>Serious Incidents-</b> 1. <i>The number of serious incidents</i>  2. <i>The number of Never Events</i>  3. <i>Of the serious incidents due for assurance, the percentage which were assured within the agreed timescales</i>	<p>1. The Health Board reported 5 Serious Incidents for the month of September 2021 to Welsh Government. The breakdown of incidents in September 2021 are set out below:</p> <ul style="list-style-type: none"> <li>- Morrision – 2</li> <li>- Neath port Talbot – 1</li> <li>- Singleton - 2</li> </ul> <p>2. There were no new Never Event's reported in September 2021.</p> <p>3. In September 2021, performance against the 80% target of submitting closure forms within 60 working days cannot be reported as there were no of the closure forms due to be submitted to Welsh Government.</p>	<p><b>1. and 2. Number of serious incidents and never events</b></p> <table border="1"> <caption>1. and 2. Number of serious incidents and never events</caption> <thead> <tr> <th>Month</th> <th>Number of Serious Incidents</th> <th>Number of never events</th> </tr> </thead> <tbody> <tr><td>Sep-20</td><td>21</td><td>0</td></tr> <tr><td>Oct-20</td><td>14</td><td>0</td></tr> <tr><td>Nov-20</td><td>17</td><td>1</td></tr> <tr><td>Dec-20</td><td>12</td><td>0</td></tr> <tr><td>Jan-21</td><td>4</td><td>0</td></tr> <tr><td>Feb-21</td><td>5</td><td>0</td></tr> <tr><td>Mar-21</td><td>4</td><td>0</td></tr> <tr><td>Apr-21</td><td>4</td><td>0</td></tr> <tr><td>May-21</td><td>6</td><td>0</td></tr> <tr><td>Jun-21</td><td>6</td><td>1</td></tr> <tr><td>Jul-21</td><td>1</td><td>0</td></tr> <tr><td>Aug-21</td><td>5</td><td>0</td></tr> <tr><td>Sep-21</td><td>5</td><td>0</td></tr> </tbody> </table> <p><b>3. % of serious incidents closed within 60 days</b></p> <table border="1"> <caption>3. % of serious incidents closed within 60 days</caption> <thead> <tr> <th>Month</th> <th>% SI's assured</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>Sep-20</td><td>20%</td><td>80%</td></tr> <tr><td>Oct-20</td><td>0%</td><td>80%</td></tr> <tr><td>Nov-20</td><td>0%</td><td>80%</td></tr> <tr><td>Dec-20</td><td>5%</td><td>80%</td></tr> <tr><td>Jan-21</td><td>0%</td><td>80%</td></tr> <tr><td>Feb-21</td><td>10%</td><td>80%</td></tr> <tr><td>Mar-21</td><td>0%</td><td>80%</td></tr> <tr><td>Apr-21</td><td>0%</td><td>80%</td></tr> <tr><td>May-21</td><td>0%</td><td>80%</td></tr> <tr><td>Jun-21</td><td>0%</td><td>80%</td></tr> <tr><td>Jul-21</td><td>35%</td><td>80%</td></tr> <tr><td>Aug-21</td><td>0%</td><td>80%</td></tr> <tr><td>Sep-21</td><td>0%</td><td>80%</td></tr> </tbody> </table> <p><i>* 0% compliance in June, July, October and November 2020 and January, March, April, May and June 2021</i></p>	Month	Number of Serious Incidents	Number of never events	Sep-20	21	0	Oct-20	14	0	Nov-20	17	1	Dec-20	12	0	Jan-21	4	0	Feb-21	5	0	Mar-21	4	0	Apr-21	4	0	May-21	6	0	Jun-21	6	1	Jul-21	1	0	Aug-21	5	0	Sep-21	5	0	Month	% SI's assured	Target	Sep-20	20%	80%	Oct-20	0%	80%	Nov-20	0%	80%	Dec-20	5%	80%	Jan-21	0%	80%	Feb-21	10%	80%	Mar-21	0%	80%	Apr-21	0%	80%	May-21	0%	80%	Jun-21	0%	80%	Jul-21	35%	80%	Aug-21	0%	80%	Sep-21	0%	80%
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INPATIENT FALLS																														
Description	Current Performance	Trend																												
<p><b>Inpatient Falls</b> <i>The total number of inpatient falls</i></p>	<ul style="list-style-type: none"> <li>The number of Falls reported via Datix web for Swansea Bay UHB was 207 in September 2021. This is 5.8% less than September 2020 where 219 falls were recorded.</li> </ul>	<p><b>Number of inpatient Falls</b></p> <table border="1"> <caption>Number of inpatient Falls (Estimated)</caption> <thead> <tr> <th>Month</th> <th>Inpatient 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>	Month	Inpatient 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
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DISCHARGE SUMMARIES																														
Description	Current Performance	Trend																												
<p><b>Discharge Summaries</b> <i>Percentage of discharge summaries approved and sent to patients' doctor following discharge</i></p>	<p>The latest data shows that in September 2021, the percentage of completed discharge summaries was 68%.</p> <p>In September 2021, compliance ranged from 61% in Singleton Hospital to 86% in Mental Health &amp; Learning Disabilities.</p>	<p><b>% discharge summaries approved and sent</b></p> <table border="1"> <caption>% discharge summaries approved and sent (Estimated)</caption> <thead> <tr> <th>Month</th> <th>% of completed discharge summaries</th> </tr> </thead> <tbody> <tr><td>Sep-20</td><td>70%</td></tr> <tr><td>Oct-20</td><td>68%</td></tr> <tr><td>Nov-20</td><td>65%</td></tr> <tr><td>Dec-20</td><td>60%</td></tr> <tr><td>Jan-21</td><td>68%</td></tr> <tr><td>Feb-21</td><td>63%</td></tr> <tr><td>Mar-21</td><td>64%</td></tr> <tr><td>Apr-21</td><td>63%</td></tr> <tr><td>May-21</td><td>67%</td></tr> <tr><td>Jun-21</td><td>69%</td></tr> <tr><td>Jul-21</td><td>63%</td></tr> <tr><td>Aug-21</td><td>63%</td></tr> <tr><td>Sep-21</td><td>68%</td></tr> </tbody> </table>	Month	% of completed discharge summaries	Sep-20	70%	Oct-20	68%	Nov-20	65%	Dec-20	60%	Jan-21	68%	Feb-21	63%	Mar-21	64%	Apr-21	63%	May-21	67%	Jun-21	69%	Jul-21	63%	Aug-21	63%	Sep-21	68%
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Description	Current Performance	Trend																																																																						
<b>Crude Mortality Rate</b>	<p>August 2021 reports the crude mortality rate for the Health Board at 1.02% compared with 1.03% in July 2021.</p> <p>A breakdown by Hospital for August 2021:</p> <ul style="list-style-type: none"> <li>• Morriston – 1.7%</li> <li>• Singleton – 0.53%</li> <li>• NPT – 0.23%</li> </ul>	<p><b>Crude hospital mortality rate by Hospital (74 years of age or less)</b></p> <table border="1"> <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>Aug-20</td><td>1.5%</td><td>0.4%</td><td>0.2%</td><td>0.8%</td></tr> <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>0.9%</td></tr> <tr><td>Nov-20</td><td>1.7%</td><td>0.4%</td><td>0.2%</td><td>1.0%</td></tr> <tr><td>Dec-20</td><td>1.8%</td><td>0.4%</td><td>0.2%</td><td>1.1%</td></tr> <tr><td>Jan-21</td><td>1.9%</td><td>0.4%</td><td>0.2%</td><td>1.1%</td></tr> <tr><td>Feb-21</td><td>2.0%</td><td>0.4%</td><td>0.2%</td><td>1.1%</td></tr> <tr><td>Mar-21</td><td>1.8%</td><td>0.4%</td><td>0.2%</td><td>1.0%</td></tr> <tr><td>Apr-21</td><td>1.7%</td><td>0.4%</td><td>0.2%</td><td>1.0%</td></tr> <tr><td>May-21</td><td>1.7%</td><td>0.4%</td><td>0.2%</td><td>1.0%</td></tr> <tr><td>Jun-21</td><td>1.6%</td><td>0.4%</td><td>0.2%</td><td>1.0%</td></tr> <tr><td>Jul-21</td><td>1.6%</td><td>0.4%</td><td>0.2%</td><td>1.0%</td></tr> <tr><td>Aug-21</td><td>1.6%</td><td>0.53%</td><td>0.23%</td><td>1.02%</td></tr> </tbody> </table>	Month	Morriston Hospital	Singleton Hospital	NPT Hospital	HB Total	Aug-20	1.5%	0.4%	0.2%	0.8%	Sep-20	1.5%	0.4%	0.2%	0.9%	Oct-20	1.6%	0.4%	0.2%	0.9%	Nov-20	1.7%	0.4%	0.2%	1.0%	Dec-20	1.8%	0.4%	0.2%	1.1%	Jan-21	1.9%	0.4%	0.2%	1.1%	Feb-21	2.0%	0.4%	0.2%	1.1%	Mar-21	1.8%	0.4%	0.2%	1.0%	Apr-21	1.7%	0.4%	0.2%	1.0%	May-21	1.7%	0.4%	0.2%	1.0%	Jun-21	1.6%	0.4%	0.2%	1.0%	Jul-21	1.6%	0.4%	0.2%	1.0%	Aug-21	1.6%	0.53%	0.23%	1.02%
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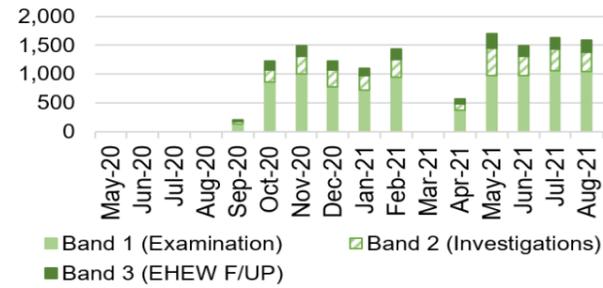
**WORKFORCE**

Description	Current Performance	Trend																																																												
<p><b>Staff sickness rates-</b> <i>Percentage of sickness absence rate of staff</i></p>	<ul style="list-style-type: none"> <li>Our in-month performance deteriorated from 7.34% in July 2021 to 7.59% in August 2021.</li> <li>The 12-month rolling performance slightly deteriorated from 6.99% in July 2021 to 7.11% in August 2021.</li> <li>The following table provides the top 5 absence reasons by full time equivalent (FTE) days lost in July 2021.</li> </ul> <p><i>*August 2021 data not available at the time of publishing*</i></p> <table border="1" data-bbox="517 703 1200 1294"> <thead> <tr> <th>Absence Reason</th> <th>FTE Days Lost</th> <th>%</th> </tr> </thead> <tbody> <tr> <td>Anxiety/ stress/ depression/ other psychiatric illnesses</td> <td>8,861.76</td> <td>37.1%</td> </tr> <tr> <td>Other musculoskeletal problems</td> <td>2,658.4</td> <td>11.1%</td> </tr> <tr> <td>Other known causes - not elsewhere classified</td> <td>1,930.22</td> <td>8.1%</td> </tr> <tr> <td>Chest &amp; respiratory problems</td> <td>1,803.94</td> <td>7.6%</td> </tr> <tr> <td>Gastrointestinal problems</td> <td>1,341.68</td> <td>5.6%</td> </tr> </tbody> </table>	Absence Reason	FTE Days Lost	%	Anxiety/ stress/ depression/ other psychiatric illnesses	8,861.76	37.1%	Other musculoskeletal problems	2,658.4	11.1%	Other known causes - not elsewhere classified	1,930.22	8.1%	Chest & respiratory problems	1,803.94	7.6%	Gastrointestinal problems	1,341.68	5.6%	<p><b>% of full time equivalent (FTE) days lost to sickness absence (12 month rolling and in-month)</b></p>  <table border="1" data-bbox="1249 395 2078 1070"> <caption>Approximate data from the trend chart</caption> <thead> <tr> <th>Month</th> <th>% sickness rate (12 month rolling)</th> <th>% sickness rate (in-month)</th> </tr> </thead> <tbody> <tr><td>Aug-20</td><td>7.0%</td><td>6.3%</td></tr> <tr><td>Sep-20</td><td>7.0%</td><td>6.2%</td></tr> <tr><td>Oct-20</td><td>7.0%</td><td>6.8%</td></tr> <tr><td>Nov-20</td><td>7.2%</td><td>8.3%</td></tr> <tr><td>Dec-20</td><td>7.5%</td><td>10.0%</td></tr> <tr><td>Jan-21</td><td>7.5%</td><td>8.1%</td></tr> <tr><td>Feb-21</td><td>7.5%</td><td>6.4%</td></tr> <tr><td>Mar-21</td><td>7.3%</td><td>5.8%</td></tr> <tr><td>Apr-21</td><td>7.1%</td><td>5.8%</td></tr> <tr><td>May-21</td><td>7.0%</td><td>6.3%</td></tr> <tr><td>Jun-21</td><td>7.0%</td><td>6.8%</td></tr> <tr><td>Jul-21</td><td>7.0%</td><td>7.4%</td></tr> <tr><td>Aug-21</td><td>7.1%</td><td>7.6%</td></tr> </tbody> </table>	Month	% sickness rate (12 month rolling)	% sickness rate (in-month)	Aug-20	7.0%	6.3%	Sep-20	7.0%	6.2%	Oct-20	7.0%	6.8%	Nov-20	7.2%	8.3%	Dec-20	7.5%	10.0%	Jan-21	7.5%	8.1%	Feb-21	7.5%	6.4%	Mar-21	7.3%	5.8%	Apr-21	7.1%	5.8%	May-21	7.0%	6.3%	Jun-21	7.0%	6.8%	Jul-21	7.0%	7.4%	Aug-21	7.1%	7.6%
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Aug-21	7.1%	7.6%																																																												

# HARM FROM REDUCTION IN NON-COVID ACTIVITY

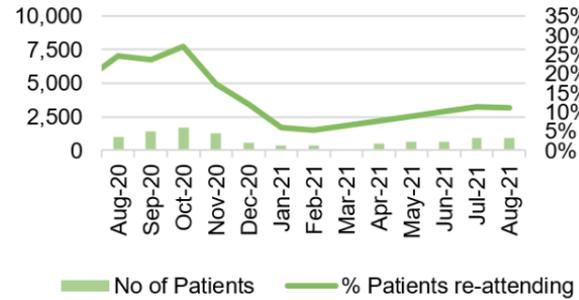
## 5.1 Primary and Community Care Overview

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

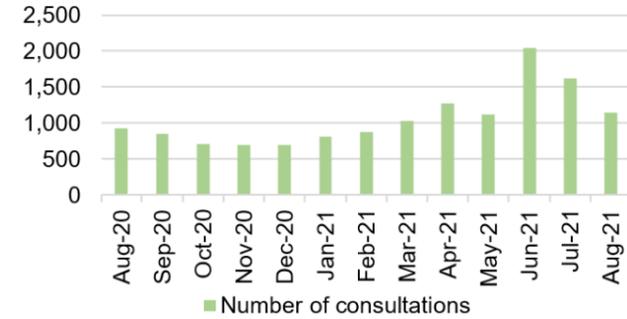


No claims submitted between April and August 2020

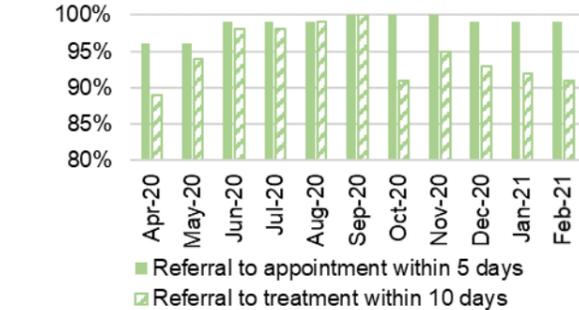
**Chart 5: Number and percentage of adult dental patients re-attending NHS Primary Dental Care between 6-9 months**



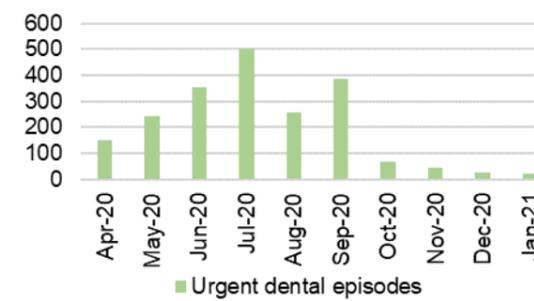
**Chart 2: Common Ailment Scheme - Number of consultations provided**



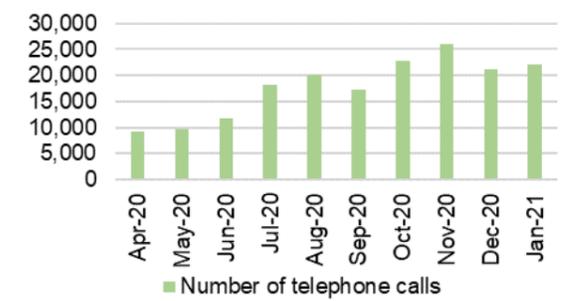
**Chart 6: Pregnancy Advisory Service- Referral to appointment within 5 days and treatment within 10 days**



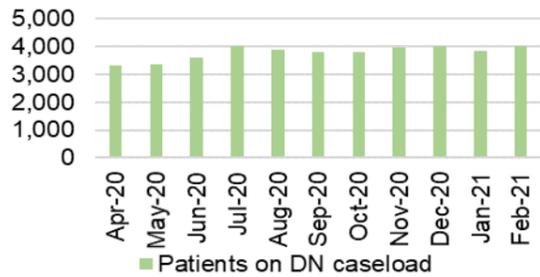
**Chart 3: Urgent Dental Centre- Total episodes of patient care**



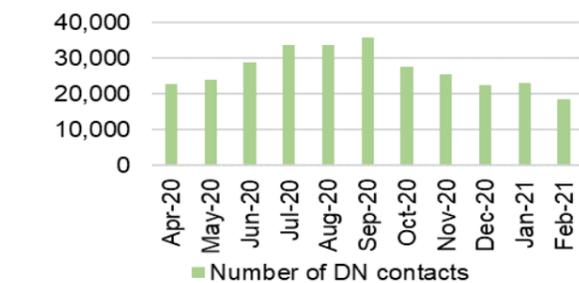
**Chart 4: General Dental Practice activity- Total number of telephone calls received**



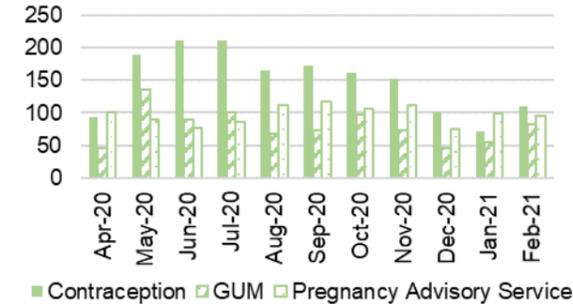
**Chart 9: District Nursing- Number of patients on caseload**



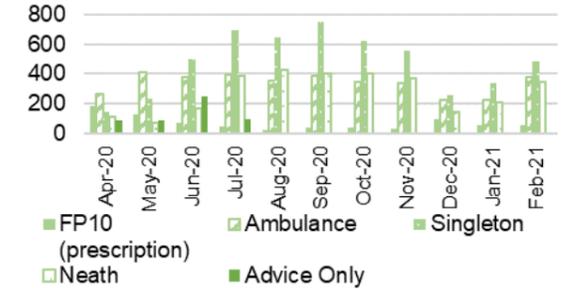
**Chart 10: District Nursing- Total number of contacts**



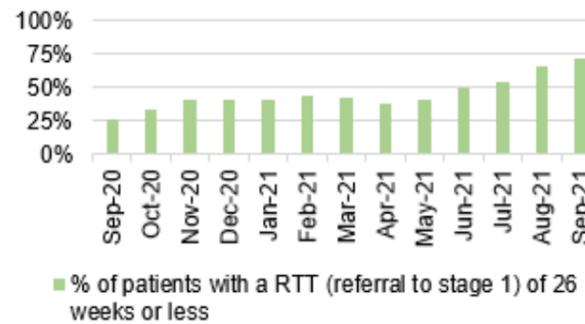
**Chart 7: Sexual health services- Attendances at sexual health ambulance**



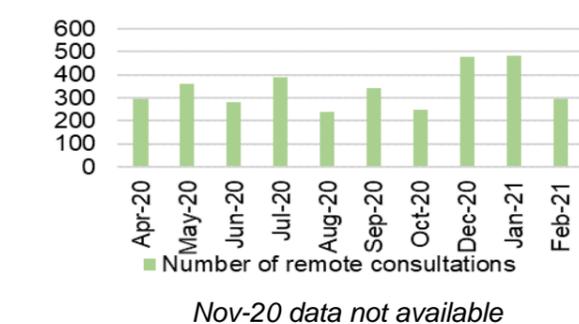
**Chart 8: Sexual health services- Patient outcomes**



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

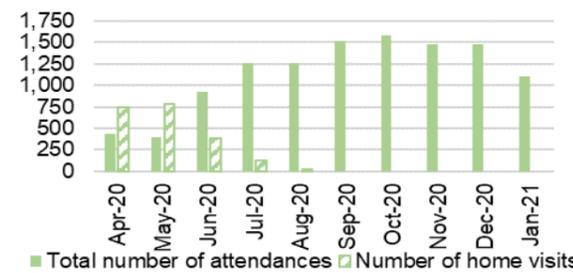


**Chart 14: Audiology- Number of remote consultations**

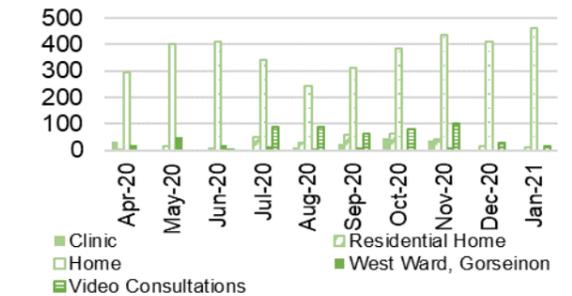


Nov-20 data not available

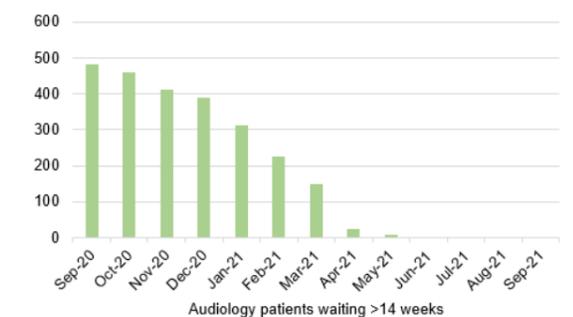
**Chart 11: Community wound clinic- Number of attendances and number of home visits**



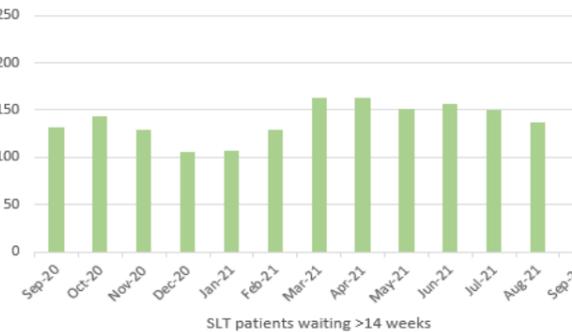
**Chart 12: Community wound clinic- Number of assessments by location**



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



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



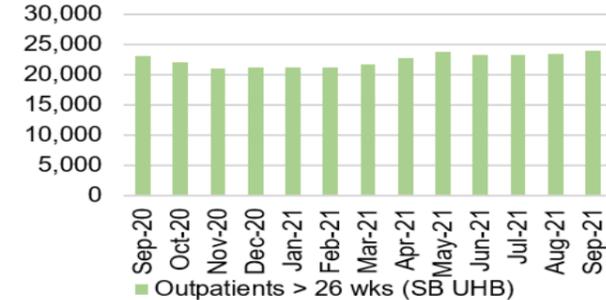
## Harm from reduction in non-Covid activity

### 5.2 Planned Care Overview

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



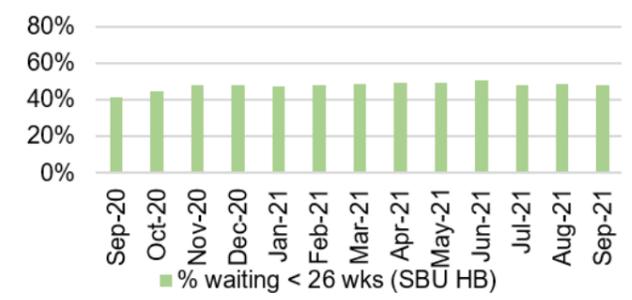
**Chart 2: Number of patients waiting over 26 weeks for an outpatient appointment**



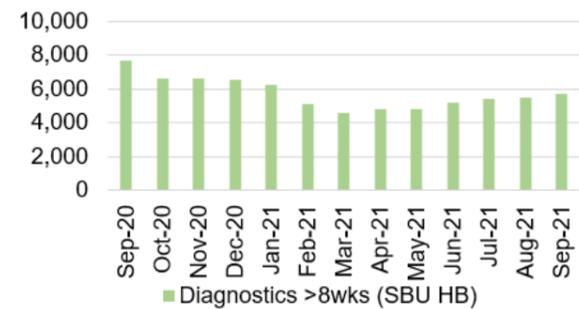
**Chart 3: Number of patients waiting over 36 weeks for treatment**



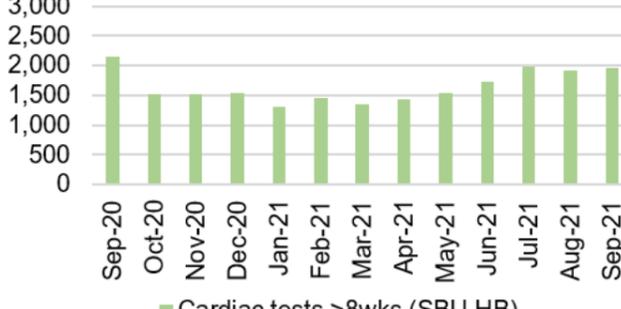
**Chart 4: % patients waiting less than 26 weeks from referral to treatment**



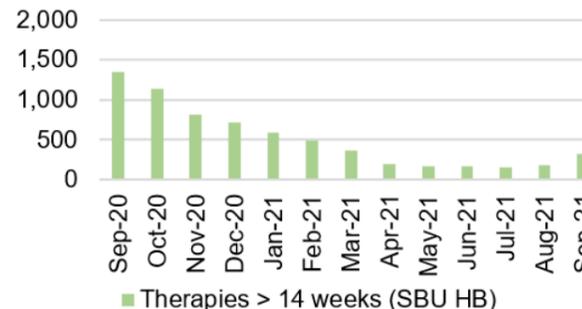
**Chart 5: Number of patients waiting for reportable diagnostics over 8 weeks**



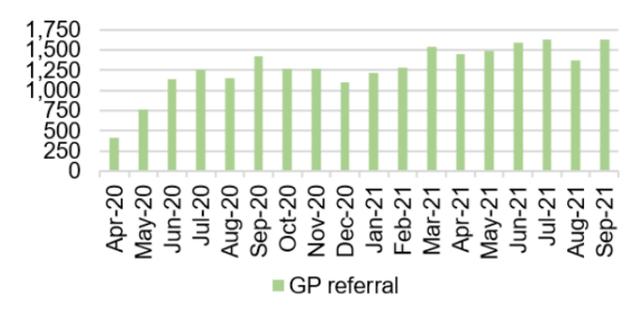
**Chart 6: Number of patients waiting for reportable Cardiac diagnostics over 8 weeks**



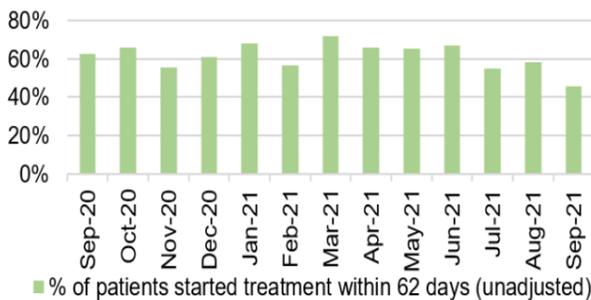
**Chart 7: Number of patients waiting more than 14 weeks for Therapies**



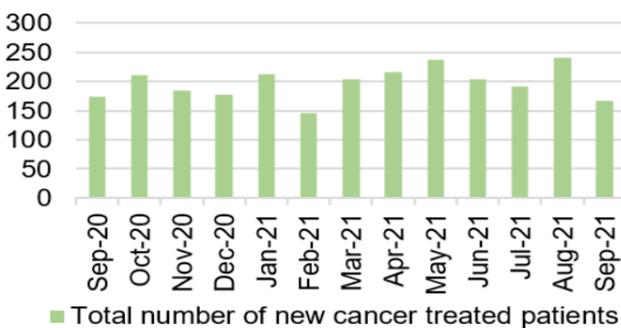
**Chart 8: Cancer referrals**



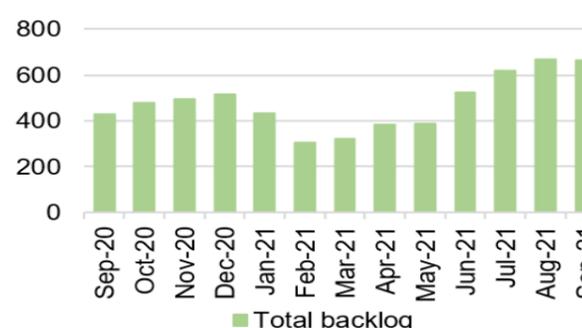
**Chart 9: Single Cancer Pathway- % of patients starting definitive treatment within 62 days from point of suspicion**



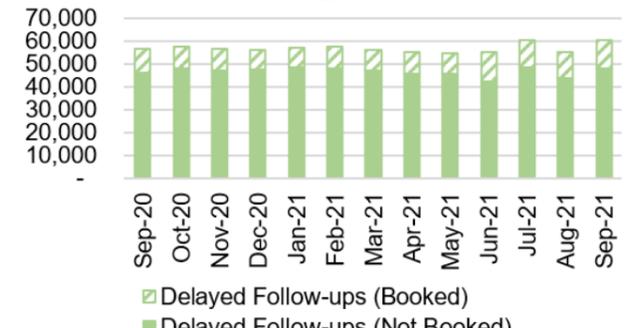
**Chart 10: Number of new cancer patients starting definitive treatment**



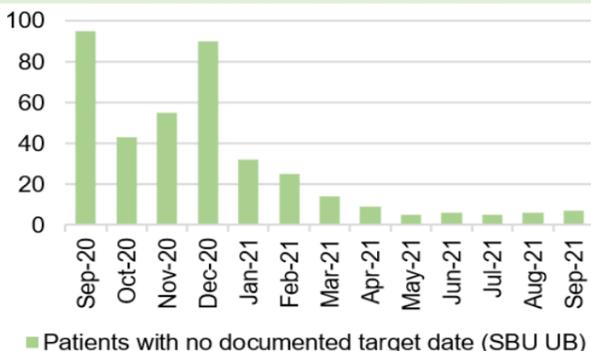
**Chart 11: Single Cancer Pathway backlog- patients waiting over 63 days**



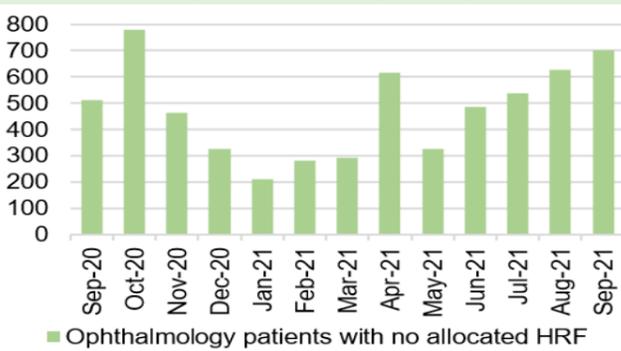
**Chart 12: Number of patients waiting for an outpatient follow-up who are delayed past their target date**



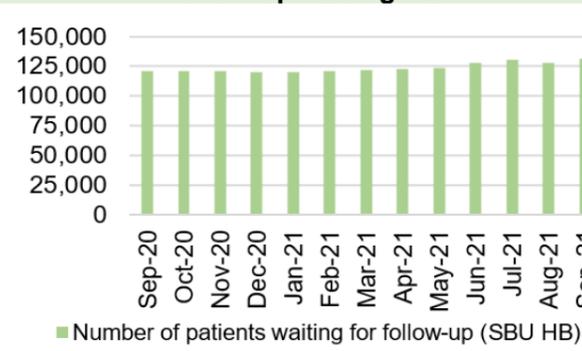
**Chart 13: Number of patients without a documented clinical review date**



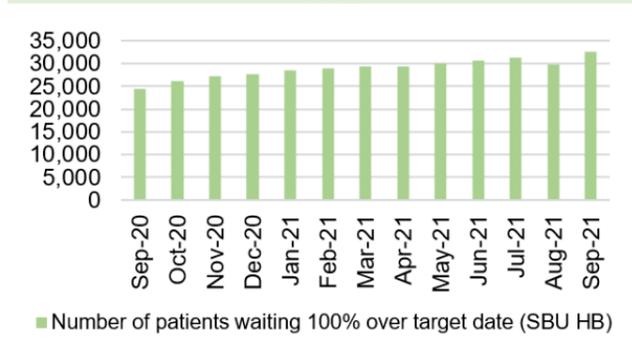
**Chart 14: Ophthalmology patients without an allocated health risk factor**



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



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



## Planned Care- Overview (September 2021)

Demand	Waiting Times		
<b>11,516 (2%↑)</b> Total GP referrals	<b>23,997 (2%↑)</b> Patients waiting over 26 weeks for a new outpatient appointment	<b>35,999 (0.8%↓)</b> Patients waiting over 36 weeks for treatment	<b>26,659 (3%↑)</b> Patients waiting over 52 weeks for treatment
<b>7,292 (1%↓)</b> Routine GP referrals	<b>48.1% (0.5%↓)</b> Patients waiting under 26 weeks from referral to treatment	<b>5,732 (4%↑)</b> Patients waiting over 8 weeks for all reportable diagnostics	<b>1,967 (2.5%↑)</b> Patients waiting over 8 weeks for Cardiac diagnostics only
<b>3,963 (7%↑)</b> Urgent GP referrals	<b>320 (72%↑)</b> Patients waiting over 14 weeks for reportable therapies	<b>130,963 (2.8%↑)</b> Patients waiting for a follow-up outpatient appointment	<b>32,574 (9.4%↑)</b> Patients waiting for a follow-up outpatients appointment who are delayed over 100%

### Cancer

<b>1,885 (13.3%↑)</b> Number of USC referrals received	<b>663 (0.6%↓)</b> USC backlog over 63 days
<b>52% (10.4%↓) draft Sept '21</b> Patients starting first definitive cancer treatment within 62 days	

### Theatre Efficiencies

<b>72% (3%↑)</b> Theatre utilisation rate	<b>46% (→)</b> % of theatres sessions finishing early
<b>42% (2%↓)</b> % of theatres sessions starting late	<b>29 (4%↑)</b> Operations cancelled on the day

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

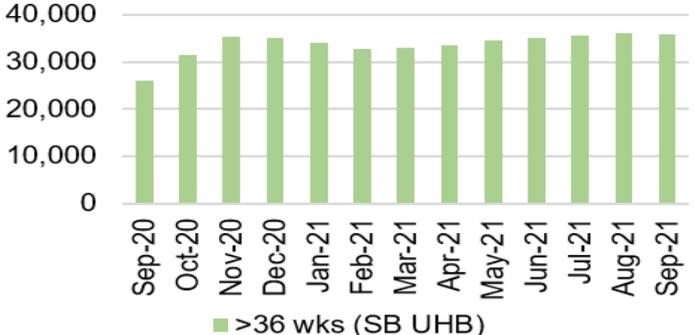
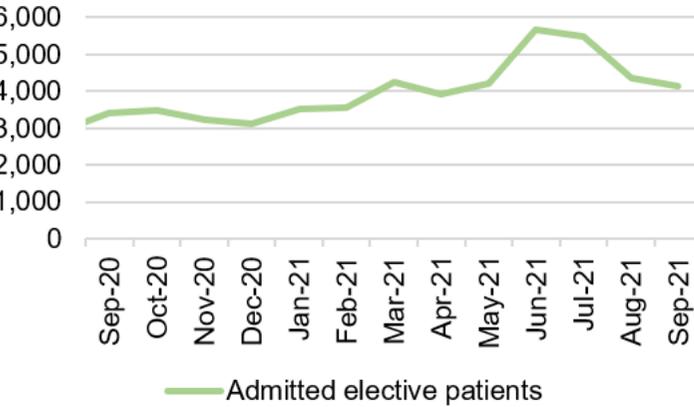
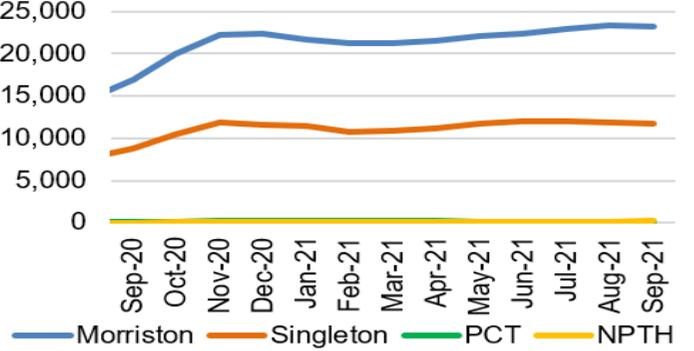
### 5.3 Updates on key measures

PLANNED CARE	
Description	Current Performance
<p><b>Referrals and shape of the waiting list</b></p> <p><b>1. GP Referrals</b> <i>The number of Stage 1 additions per week</i></p> <p><b>2. Stage 1 additions</b> <i>The number of new patients that have been added to the outpatient waiting list</i></p> <p><b>3. Size of the waiting list</b> <i>Total number of patients on the waiting list by stage as at December 2019</i></p> <p><b>4. Size of the waiting list</b> <i>Total number of patients on the waiting list by stage as at June 2021</i></p>	<p>The number of GP referrals and additions to the outpatient waiting list has increased each month since May 2020, this is reflected in the reduction in the size of the waiting list in April 2020 and subsequent increase every month since May 2020. September 2021 has seen a further 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 and 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>
	<b>Trend</b>
	<div style="display: flex; justify-content: space-around;"> <div style="width: 45%;"> <p style="text-align: center;"><b>1. Number of GP referrals received by SBU Health Board</b></p> </div> <div style="width: 45%;"> <p style="text-align: center;"><b>2. Number of stage 1 additions per week</b></p> </div> </div>
	<div style="display: flex; justify-content: space-around;"> <div style="width: 45%;"> <p style="text-align: center;"><b>3. Total size of the waiting list and movement (December 2019)</b></p> </div> <div style="width: 45%;"> <p style="text-align: center;"><b>4. Total size of the waiting list and movement (August 2021)</b></p> </div> </div>

**PLANNED CARE**

Description	Current Performance																																																																																																																																																																										
<p><b>Outpatient waiting times</b></p> <p>1. Number of patients waiting more than 26 weeks for an outpatient appointment (stage 1)- Health Board Total</p> <p>2. Number of patients waiting more than 26 weeks for an outpatient appointment (stage 1)- Hospital Level</p> <p>3. Patients waiting over 26 weeks for an outpatient appointment by specialty</p> <p>4. Outpatient activity undertaken</p>	<p>The number of patients waiting over 26 weeks for a first outpatient appointment is still a challenge. September 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 23,444 in August 2021 to 23,997 in September 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> <p><b>Trend</b></p> <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <p><b>1. Number of stage 1 over 26 weeks- HB total</b></p> <table border="1"> <caption>1. Number of stage 1 over 26 weeks- HB total</caption> <thead> <tr> <th>Month</th> <th>Outpatients &gt; 26 wks (SB UHB)</th> </tr> </thead> <tbody> <tr><td>Sep-20</td><td>23,444</td></tr> <tr><td>Oct-20</td><td>22,000</td></tr> <tr><td>Nov-20</td><td>21,000</td></tr> <tr><td>Dec-20</td><td>21,000</td></tr> <tr><td>Jan-21</td><td>21,000</td></tr> <tr><td>Feb-21</td><td>21,000</td></tr> <tr><td>Mar-21</td><td>21,500</td></tr> <tr><td>Apr-21</td><td>22,500</td></tr> <tr><td>May-21</td><td>23,500</td></tr> <tr><td>Jun-21</td><td>23,000</td></tr> <tr><td>Jul-21</td><td>23,000</td></tr> <tr><td>Aug-21</td><td>23,444</td></tr> <tr><td>Sep-21</td><td>23,997</td></tr> </tbody> </table> </div> <div style="width: 48%;"> <p><b>2. Number of stage 1 over 26 weeks- Hospital level</b></p> <table border="1"> <caption>2. Number of stage 1 over 26 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>Sep-20</td><td>12,500</td><td>10,000</td><td>500</td><td>500</td></tr> <tr><td>Oct-20</td><td>12,500</td><td>8,500</td><td>500</td><td>500</td></tr> <tr><td>Nov-20</td><td>12,500</td><td>8,500</td><td>500</td><td>500</td></tr> <tr><td>Dec-20</td><td>12,500</td><td>8,500</td><td>500</td><td>500</td></tr> <tr><td>Jan-21</td><td>12,500</td><td>8,500</td><td>500</td><td>500</td></tr> <tr><td>Feb-21</td><td>12,500</td><td>8,500</td><td>500</td><td>500</td></tr> <tr><td>Mar-21</td><td>12,500</td><td>8,500</td><td>500</td><td>500</td></tr> <tr><td>Apr-21</td><td>13,500</td><td>9,000</td><td>500</td><td>500</td></tr> <tr><td>May-21</td><td>14,000</td><td>9,000</td><td>500</td><td>500</td></tr> <tr><td>Jun-21</td><td>14,000</td><td>8,500</td><td>500</td><td>500</td></tr> <tr><td>Jul-21</td><td>14,500</td><td>8,500</td><td>500</td><td>500</td></tr> <tr><td>Aug-21</td><td>15,000</td><td>8,500</td><td>500</td><td>500</td></tr> <tr><td>Sep-21</td><td>15,500</td><td>8,500</td><td>500</td><td>500</td></tr> </tbody> </table> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 48%;"> <p><b>3. Patients waiting over 26 weeks for an outpatient appointment by specialty as at September 2021</b></p> <table border="1"> <caption>3. Patients waiting over 26 weeks for an outpatient appointment by specialty as at September 2021</caption> <thead> <tr> <th>Specialty</th> <th>Number of Patients</th> </tr> </thead> <tbody> <tr><td>Ophthalmology</td><td>3,800</td></tr> <tr><td>ENT</td><td>3,500</td></tr> <tr><td>General Surgery</td><td>3,000</td></tr> <tr><td>Urology</td><td>2,500</td></tr> <tr><td>Dermatology</td><td>2,200</td></tr> <tr><td>Vascular</td><td>1,800</td></tr> <tr><td>Thoracic Medicine</td><td>1,500</td></tr> <tr><td>Neurology</td><td>1,200</td></tr> <tr><td>Spinal Surgery</td><td>1,000</td></tr> <tr><td>Restorative Dentistry</td><td>800</td></tr> <tr><td>Cardiac Surgery</td><td>700</td></tr> <tr><td>Medicine for the Elderly</td><td>600</td></tr> <tr><td>Endocrinology</td><td>500</td></tr> <tr><td>Nephrology</td><td>400</td></tr> </tbody> </table> </div> <div style="width: 48%;"> <p><b>4. Outpatient activity undertaken</b></p> <table border="1"> <caption>4. Outpatient activity undertaken</caption> <thead> <tr> <th>Month</th> <th>New outpatient attendances</th> <th>Follow-up attendances</th> </tr> </thead> <tbody> <tr><td>Sep-20</td><td>8,000</td><td>20,000</td></tr> <tr><td>Oct-20</td><td>8,000</td><td>20,000</td></tr> <tr><td>Nov-20</td><td>8,000</td><td>20,000</td></tr> <tr><td>Dec-20</td><td>7,000</td><td>18,000</td></tr> <tr><td>Jan-21</td><td>6,000</td><td>15,000</td></tr> <tr><td>Feb-21</td><td>6,000</td><td>13,000</td></tr> <tr><td>Mar-21</td><td>7,000</td><td>15,000</td></tr> <tr><td>Apr-21</td><td>7,000</td><td>14,000</td></tr> <tr><td>May-21</td><td>10,000</td><td>20,000</td></tr> <tr><td>Jun-21</td><td>13,000</td><td>25,000</td></tr> <tr><td>Jul-21</td><td>13,000</td><td>23,000</td></tr> <tr><td>Aug-21</td><td>15,000</td><td>25,000</td></tr> <tr><td>Sep-21</td><td>13,000</td><td>25,000</td></tr> </tbody> </table> </div> </div> <p><b>**Please note – reporting measures changed from June 2021 – Using power BI platform</b></p>	Month	Outpatients > 26 wks (SB UHB)	Sep-20	23,444	Oct-20	22,000	Nov-20	21,000	Dec-20	21,000	Jan-21	21,000	Feb-21	21,000	Mar-21	21,500	Apr-21	22,500	May-21	23,500	Jun-21	23,000	Jul-21	23,000	Aug-21	23,444	Sep-21	23,997	Month	Morriston	Singleton	PCT	NPTH	Sep-20	12,500	10,000	500	500	Oct-20	12,500	8,500	500	500	Nov-20	12,500	8,500	500	500	Dec-20	12,500	8,500	500	500	Jan-21	12,500	8,500	500	500	Feb-21	12,500	8,500	500	500	Mar-21	12,500	8,500	500	500	Apr-21	13,500	9,000	500	500	May-21	14,000	9,000	500	500	Jun-21	14,000	8,500	500	500	Jul-21	14,500	8,500	500	500	Aug-21	15,000	8,500	500	500	Sep-21	15,500	8,500	500	500	Specialty	Number of Patients	Ophthalmology	3,800	ENT	3,500	General Surgery	3,000	Urology	2,500	Dermatology	2,200	Vascular	1,800	Thoracic Medicine	1,500	Neurology	1,200	Spinal Surgery	1,000	Restorative Dentistry	800	Cardiac Surgery	700	Medicine for the Elderly	600	Endocrinology	500	Nephrology	400	Month	New outpatient attendances	Follow-up attendances	Sep-20	8,000	20,000	Oct-20	8,000	20,000	Nov-20	8,000	20,000	Dec-20	7,000	18,000	Jan-21	6,000	15,000	Feb-21	6,000	13,000	Mar-21	7,000	15,000	Apr-21	7,000	14,000	May-21	10,000	20,000	Jun-21	13,000	25,000	Jul-21	13,000	23,000	Aug-21	15,000	25,000	Sep-21	13,000	25,000
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Ophthalmology	3,800																																																																																																																																																																										
ENT	3,500																																																																																																																																																																										
General Surgery	3,000																																																																																																																																																																										
Urology	2,500																																																																																																																																																																										
Dermatology	2,200																																																																																																																																																																										
Vascular	1,800																																																																																																																																																																										
Thoracic Medicine	1,500																																																																																																																																																																										
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Spinal Surgery	1,000																																																																																																																																																																										
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Cardiac Surgery	700																																																																																																																																																																										
Medicine for the Elderly	600																																																																																																																																																																										
Endocrinology	500																																																																																																																																																																										
Nephrology	400																																																																																																																																																																										
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Sep-21	13,000	25,000																																																																																																																																																																									

**PLANNED CARE**

Description	Current Performance	
<p><b>Patients waiting over 36 weeks for treatment</b></p> <p>1. Number of patients waiting more than 36 weeks for treatment and the number of elective patients admitted for treatment- Health Board Total</p> <p>2. Number of patients waiting more than 36 weeks for treatment and the number of elective patients admitted for treatment- Hospital level</p> <p>3. Number of elective admissions</p>	<p>The number of patients waiting longer than 36 weeks from referral to treatment has increased every month since the first wave of COVID19 in March 2020. December 2020 was the first month in 2020 that saw an in-month reduction and this trend continued into January and February 2021 however, the number of breaches increased again from March 2021. In September 2021, there was 35,711 patients waiting over 36 weeks which is a 0.8% in-month decrease from August 2021. 26,659 of the 35,711 were waiting over 52 weeks in September 2021.</p>	
	<p align="center"><b>Trend</b></p>	
	<p><b>1. Number of patients waiting over 36 weeks- HB total</b></p>  <p><b>3. Number of elective admissions</b></p> 	<p><b>2. Number of patients waiting over 36 weeks- Hospital level</b></p> 

PLANNED CARE																																																																								
Description	Current Performance																																																																							
<p><b>Total waiting times</b> <i>Percentage of patients waiting less than 26 weeks from referral to treatment</i></p>	<p>Throughout 2019/20 the overall percentage of patients waiting less than 26 weeks from referral to treatment ranged between 80% and 88%. Whereas, throughout the Covid19 pandemic in 2020/21 the percentage ranged between 41% and 72%.</p> <p>In September 2021, 48.1% of patients were waiting under 26 weeks from referral to treatment, which is an decrease from August 2021.</p>	<p><b>Percentage of patient waiting less than 26 weeks</b></p> <table border="1"> <caption>Percentage of patient waiting less than 26 weeks</caption> <thead> <tr> <th>Month</th> <th>Morriston</th> <th>Singleton</th> <th>PCT</th> <th>NPTH</th> </tr> </thead> <tbody> <tr><td>Sep-20</td><td>35%</td><td>42%</td><td>35%</td><td>75%</td></tr> <tr><td>Oct-20</td><td>38%</td><td>45%</td><td>32%</td><td>85%</td></tr> <tr><td>Nov-20</td><td>40%</td><td>48%</td><td>40%</td><td>90%</td></tr> <tr><td>Dec-20</td><td>40%</td><td>48%</td><td>40%</td><td>95%</td></tr> <tr><td>Jan-21</td><td>40%</td><td>48%</td><td>40%</td><td>90%</td></tr> <tr><td>Feb-21</td><td>42%</td><td>48%</td><td>42%</td><td>85%</td></tr> <tr><td>Mar-21</td><td>42%</td><td>48%</td><td>40%</td><td>90%</td></tr> <tr><td>Apr-21</td><td>42%</td><td>48%</td><td>38%</td><td>88%</td></tr> <tr><td>May-21</td><td>42%</td><td>48%</td><td>42%</td><td>85%</td></tr> <tr><td>Jun-21</td><td>45%</td><td>48%</td><td>50%</td><td>82%</td></tr> <tr><td>Jul-21</td><td>45%</td><td>48%</td><td>58%</td><td>80%</td></tr> <tr><td>Aug-21</td><td>45%</td><td>48%</td><td>70%</td><td>78%</td></tr> <tr><td>Sep-21</td><td>45%</td><td>48%</td><td>75%</td><td>75%</td></tr> </tbody> </table>	Month	Morriston	Singleton	PCT	NPTH	Sep-20	35%	42%	35%	75%	Oct-20	38%	45%	32%	85%	Nov-20	40%	48%	40%	90%	Dec-20	40%	48%	40%	95%	Jan-21	40%	48%	40%	90%	Feb-21	42%	48%	42%	85%	Mar-21	42%	48%	40%	90%	Apr-21	42%	48%	38%	88%	May-21	42%	48%	42%	85%	Jun-21	45%	48%	50%	82%	Jul-21	45%	48%	58%	80%	Aug-21	45%	48%	70%	78%	Sep-21	45%	48%	75%	75%
Month	Morriston	Singleton	PCT	NPTH																																																																				
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Aug-21	45%	48%	70%	78%																																																																				
Sep-21	45%	48%	75%	75%																																																																				
<p><b>Ophthalmology waiting times</b> <i>Percentage of ophthalmology R1 patients who are waiting within their clinical target date or within 25% in excess of their clinical target date for their care or treatments</i></p>	<p>In September 2021, 47.9% of Ophthalmology R1 patients were waiting within their clinical target date or within 25% of the target date.</p> <p>There was an upward trend in performance in 2019/20 however, there was a continuous downward trend in performance in 2020/21 and this appears to be continuing into 2021/22.</p>	<p><b>Percentage of ophthalmology R1 patients who are waiting within their clinical target date or within 25% in excess of their clinical target date for their care or treatments</b></p> <table border="1"> <caption>Percentage of ophthalmology R1 patients who are waiting within their clinical target date or within 25% in excess of their clinical target date for their care or treatments</caption> <thead> <tr> <th>Month</th> <th>% of R1 ophthalmology patient pathways waiting within target date or within 25% beyond target date for an outpatient appointment</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>Sep-20</td><td>48%</td><td>100%</td></tr> <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>45%</td><td>100%</td></tr> <tr><td>Aug-21</td><td>45%</td><td>100%</td></tr> <tr><td>Sep-21</td><td>47.9%</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	Sep-20	48%	100%	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	45%	100%	Aug-21	45%	100%	Sep-21	47.9%	100%																												
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## THEATRE EFFICIENCY

Description	Current Performance	Trend																																																																																																																																																										
<b>Theatre Efficiency</b> 1. <i>Theatre Utilisation Rates</i>  2. <i>% of theatre sessions starting late</i>  3. <i>% of theatre sessions finishing early</i>  4. <i>% of theatre sessions cancelled at short notice (&lt;28 days)</i>  5. <i>% of operations cancelled on the day</i>	<p>In September 2021 the Theatre Utilisation rate was 72%. This is an in-month increase of 3% and a 3% decrease compared to September 2020.</p> <p>42% of theatre sessions started late in September 2021. This is an improvement from 49% in September 2020.</p> <p>In September 2021, 46% of theatre sessions finished early. These are the same figures which were seen in August 2021 but is 7% more than in September 2020.</p> <p>6% of theatre sessions were cancelled at short notice in September 2021 (61 sessions). This is a decrease of 6% from August 2021 and is 1% more than in August 2021.</p> <p>Of the operations cancelled in September 2021, 43% of them were cancelled on the day. This is an increase from 40% in August 2021 and an increase of 7% from September 2020.</p>	<div style="text-align: center;"> <b>1. Theatre Utilisation Rates</b> </div> <table border="1"> <caption>1. Theatre Utilisation Rates (SBU HB)</caption> <thead> <tr> <th>Month</th> <th>Utilisation Rate (%)</th> </tr> </thead> <tbody> <tr><td>Sep-20</td><td>72</td></tr> <tr><td>Oct-20</td><td>75</td></tr> <tr><td>Nov-20</td><td>70</td></tr> <tr><td>Dec-20</td><td>65</td></tr> <tr><td>Jan-21</td><td>68</td></tr> <tr><td>Feb-21</td><td>72</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>68</td></tr> <tr><td>Sep-21</td><td>72</td></tr> </tbody> </table> <div style="text-align: center;"> <b>2. and 3. % theatre sessions starting late/finishing early</b> </div> <table border="1"> <caption>2. and 3. % theatre sessions starting late/finishing early</caption> <thead> <tr> <th>Month</th> <th>Late Starts (%)</th> <th>Early Finishes (%)</th> </tr> </thead> <tbody> <tr><td>Sep-20</td><td>49</td><td>35</td></tr> <tr><td>Oct-20</td><td>45</td><td>38</td></tr> <tr><td>Nov-20</td><td>48</td><td>42</td></tr> <tr><td>Dec-20</td><td>45</td><td>40</td></tr> <tr><td>Jan-21</td><td>42</td><td>42</td></tr> <tr><td>Feb-21</td><td>40</td><td>45</td></tr> <tr><td>Mar-21</td><td>38</td><td>48</td></tr> <tr><td>Apr-21</td><td>40</td><td>42</td></tr> <tr><td>May-21</td><td>42</td><td>45</td></tr> <tr><td>Jun-21</td><td>45</td><td>48</td></tr> <tr><td>Jul-21</td><td>45</td><td>45</td></tr> <tr><td>Aug-21</td><td>45</td><td>45</td></tr> <tr><td>Sep-21</td><td>42</td><td>46</td></tr> </tbody> </table> <div style="text-align: center;"> <b>4. % theatre sessions cancelled at short notice (&lt;28 days)</b> </div> <table border="1"> <caption>4. % theatre sessions cancelled at short notice (&lt;28 days)</caption> <thead> <tr> <th>Month</th> <th>Morriston (%)</th> <th>NPTH (%)</th> <th>Singleton (%)</th> </tr> </thead> <tbody> <tr><td>Sep-20</td><td>5</td><td>5</td><td>5</td></tr> <tr><td>Oct-20</td><td>5</td><td>20</td><td>5</td></tr> <tr><td>Nov-20</td><td>5</td><td>10</td><td>5</td></tr> <tr><td>Dec-20</td><td>20</td><td>40</td><td>5</td></tr> <tr><td>Jan-21</td><td>15</td><td>55</td><td>5</td></tr> <tr><td>Feb-21</td><td>5</td><td>10</td><td>5</td></tr> <tr><td>Mar-21</td><td>5</td><td>10</td><td>5</td></tr> <tr><td>Apr-21</td><td>5</td><td>10</td><td>5</td></tr> <tr><td>May-21</td><td>5</td><td>5</td><td>5</td></tr> <tr><td>Jun-21</td><td>5</td><td>10</td><td>5</td></tr> <tr><td>Jul-21</td><td>15</td><td>10</td><td>5</td></tr> <tr><td>Aug-21</td><td>15</td><td>10</td><td>5</td></tr> <tr><td>Sep-21</td><td>10</td><td>10</td><td>5</td></tr> </tbody> </table> <div style="text-align: center;"> <b>5. % of operations cancelled on the day</b> </div> <table border="1"> <caption>5. % of operations cancelled on the day</caption> <thead> <tr> <th>Month</th> <th>% operations cancelled on the day</th> </tr> </thead> <tbody> <tr><td>Sep-20</td><td>45</td></tr> <tr><td>Oct-20</td><td>42</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>45</td></tr> <tr><td>Mar-21</td><td>45</td></tr> <tr><td>Apr-21</td><td>42</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>43</td></tr> </tbody> </table>	Month	Utilisation Rate (%)	Sep-20	72	Oct-20	75	Nov-20	70	Dec-20	65	Jan-21	68	Feb-21	72	Mar-21	75	Apr-21	80	May-21	78	Jun-21	75	Jul-21	70	Aug-21	68	Sep-21	72	Month	Late Starts (%)	Early Finishes (%)	Sep-20	49	35	Oct-20	45	38	Nov-20	48	42	Dec-20	45	40	Jan-21	42	42	Feb-21	40	45	Mar-21	38	48	Apr-21	40	42	May-21	42	45	Jun-21	45	48	Jul-21	45	45	Aug-21	45	45	Sep-21	42	46	Month	Morriston (%)	NPTH (%)	Singleton (%)	Sep-20	5	5	5	Oct-20	5	20	5	Nov-20	5	10	5	Dec-20	20	40	5	Jan-21	15	55	5	Feb-21	5	10	5	Mar-21	5	10	5	Apr-21	5	10	5	May-21	5	5	5	Jun-21	5	10	5	Jul-21	15	10	5	Aug-21	15	10	5	Sep-21	10	10	5	Month	% operations cancelled on the day	Sep-20	45	Oct-20	42	Nov-20	35	Dec-20	35	Jan-21	40	Feb-21	45	Mar-21	45	Apr-21	42	May-21	35	Jun-21	40	Jul-21	40	Aug-21	40	Sep-21	43
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<p><b>Diagnostics waiting times</b>  <i>The number of patients waiting more than 8 weeks for specified diagnostics</i></p>	<p>In September 2021, there was an increase in the number of patients waiting over 8 weeks for specified diagnostics. It increased from 5,523 in August 2021 to 5,732 in September 2021.</p> <p>The following is a breakdown for the 8-week breaches by diagnostic test for September 2021:</p> <ul style="list-style-type: none"> <li>• Endoscopy= 2,204</li> <li>• Cardiac tests= 1,967</li> <li>• Cystoscopy= 17</li> </ul>	<p><b>Number of patients waiting longer than 8 weeks for diagnostics</b></p> <table border="1"> <caption>Estimated data for Number of patients waiting longer than 8 weeks for diagnostics</caption> <thead> <tr> <th>Month</th> <th>Cardiac tests</th> <th>Endoscopy</th> <th>Other diagnostics (inc. radiology)</th> </tr> </thead> <tbody> <tr><td>Sep-20</td><td>2,100</td><td>1,800</td><td>3,800</td></tr> <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>2,000</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>2,100</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>2,100</td><td>1,300</td></tr> <tr><td>May-21</td><td>1,500</td><td>2,100</td><td>1,200</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>2,000</td><td>1,700</td></tr> <tr><td>Sep-21</td><td>1,967</td><td>2,204</td><td>17</td></tr> </tbody> </table>	Month	Cardiac tests	Endoscopy	Other diagnostics (inc. radiology)	Sep-20	2,100	1,800	3,800	Oct-20	1,500	2,000	3,000	Nov-20	1,500	2,000	3,000	Dec-20	1,500	2,000	2,800	Jan-21	1,300	2,200	2,500	Feb-21	1,400	2,100	1,500	Mar-21	1,300	2,000	1,200	Apr-21	1,400	2,100	1,300	May-21	1,500	2,100	1,200	Jun-21	1,800	2,000	1,400	Jul-21	1,900	2,000	1,400	Aug-21	1,800	2,000	1,700	Sep-21	1,967	2,204	17
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<p><b>Therapy waiting times</b>  <i>The number of patients waiting more than 14 weeks for specified therapies</i></p>	<p>In September 2021 there were 320 patients waiting over 14 weeks for specified Therapies.</p> <p>The breakdown for the breaches in September 2021 are:</p> <ul style="list-style-type: none"> <li>• Speech &amp; Language Therapy= 191</li> <li>• Podiatry = 111</li> <li>• Dietetics = 18</li> </ul>	<p><b>Number of patients waiting longer than 14 weeks for therapies</b></p> <table border="1"> <caption>Estimated data for Number of patients waiting longer than 14 weeks for therapies</caption> <thead> <tr> <th>Month</th> <th>Occ Therapy/ LD (MH)</th> <th>Occ Therapy (exc. MH)</th> <th>Audiology</th> <th>Speech &amp; Language</th> <th>Dietetics</th> <th>Phsyio</th> </tr> </thead> <tbody> <tr><td>Sep-20</td><td>100</td><td>100</td><td>100</td><td>100</td><td>100</td><td>100</td></tr> <tr><td>Oct-20</td><td>100</td><td>100</td><td>100</td><td>100</td><td>100</td><td>100</td></tr> <tr><td>Nov-20</td><td>100</td><td>100</td><td>100</td><td>100</td><td>100</td><td>100</td></tr> <tr><td>Dec-20</td><td>100</td><td>100</td><td>100</td><td>100</td><td>100</td><td>100</td></tr> <tr><td>Jan-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>100</td><td>100</td></tr> <tr><td>Feb-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>100</td><td>100</td></tr> <tr><td>Mar-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>100</td><td>100</td></tr> <tr><td>Apr-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>100</td><td>100</td></tr> <tr><td>May-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>100</td><td>100</td></tr> <tr><td>Jun-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>100</td><td>100</td></tr> <tr><td>Jul-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>100</td><td>100</td></tr> <tr><td>Aug-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>100</td><td>100</td></tr> <tr><td>Sep-21</td><td>191</td><td>111</td><td>18</td><td>191</td><td>18</td><td>18</td></tr> </tbody> </table>	Month	Occ Therapy/ LD (MH)	Occ Therapy (exc. MH)	Audiology	Speech & Language	Dietetics	Phsyio	Sep-20	100	100	100	100	100	100	Oct-20	100	100	100	100	100	100	Nov-20	100	100	100	100	100	100	Dec-20	100	100	100	100	100	100	Jan-21	100	100	100	100	100	100	Feb-21	100	100	100	100	100	100	Mar-21	100	100	100	100	100	100	Apr-21	100	100	100	100	100	100	May-21	100	100	100	100	100	100	Jun-21	100	100	100	100	100	100	Jul-21	100	100	100	100	100	100	Aug-21	100	100	100	100	100	100	Sep-21	191	111	18	191	18	18
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## CANCER

### Description

#### Cancer demand and shape of the waiting list

1. Number of Urgent Suspected Cancer (USC) referrals received

2. Source of suspicion for patients on Single Cancer Pathway (SCP)

3. Volume of patients by stage and adjusted wait-SCP (May 2020)

4. Volume of patients by stage and adjusted wait-SCP (May 2021)

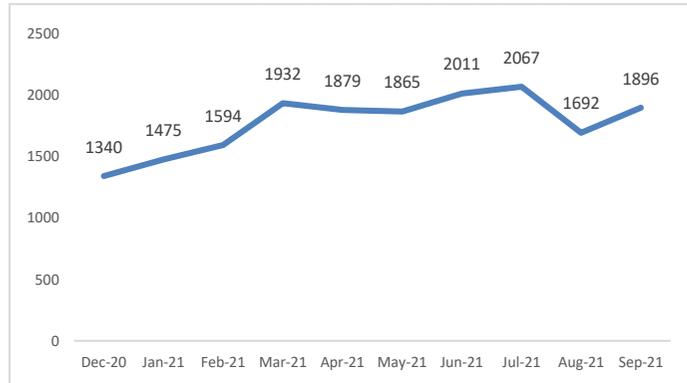
\*Current dashboard not producing updated data\*

### Current Performance

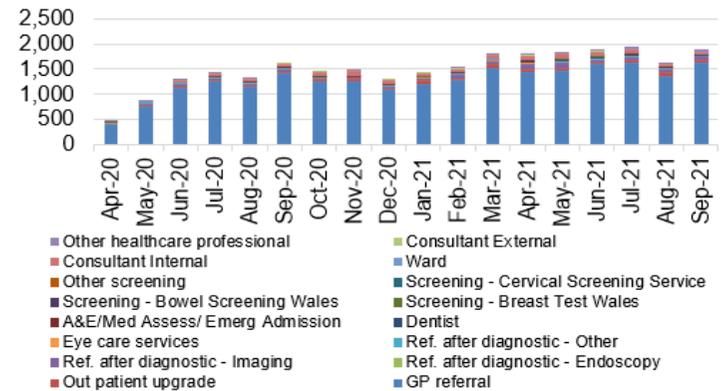
The number of Urgent Suspected Cancer (USC) referrals significantly reduced between March and April 2020, however there has been an upward trend since May 2020. The shape of the waiting list shows that there is a significant “wave” of patients that are likely to breach in the near future, there is also an increased number of referrals being received in comparison with previous years.

### Trend

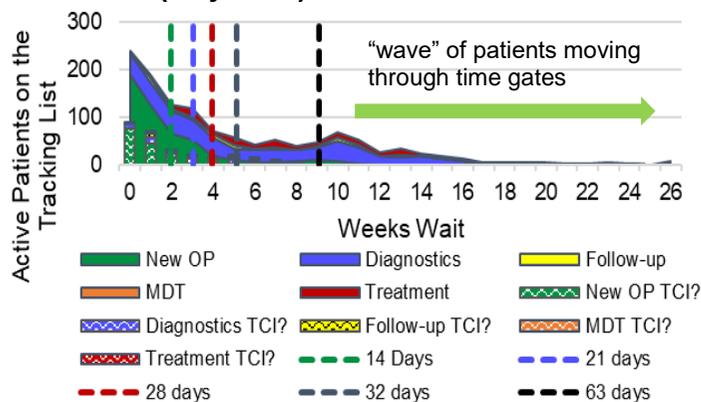
**1. Number of USC referrals**



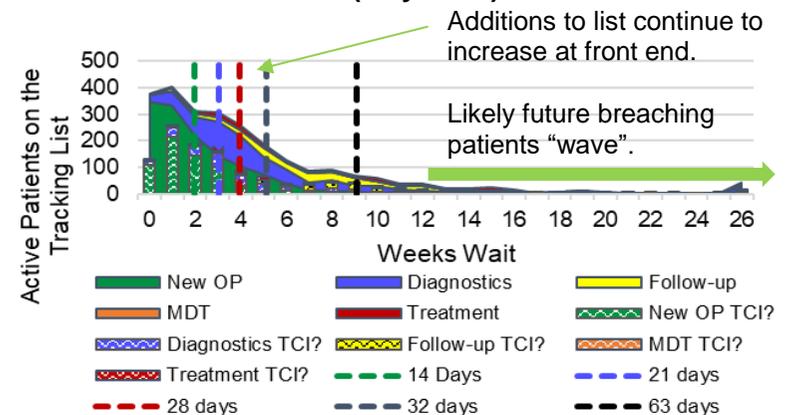
**2. Source of suspicion for patients starting cancer treatment**



**3. Volume of patients by stage and adjusted wait (May 2020)-SCP**



**4. Volume of patients by stage and adjusted wait (May 2021)- SCP**



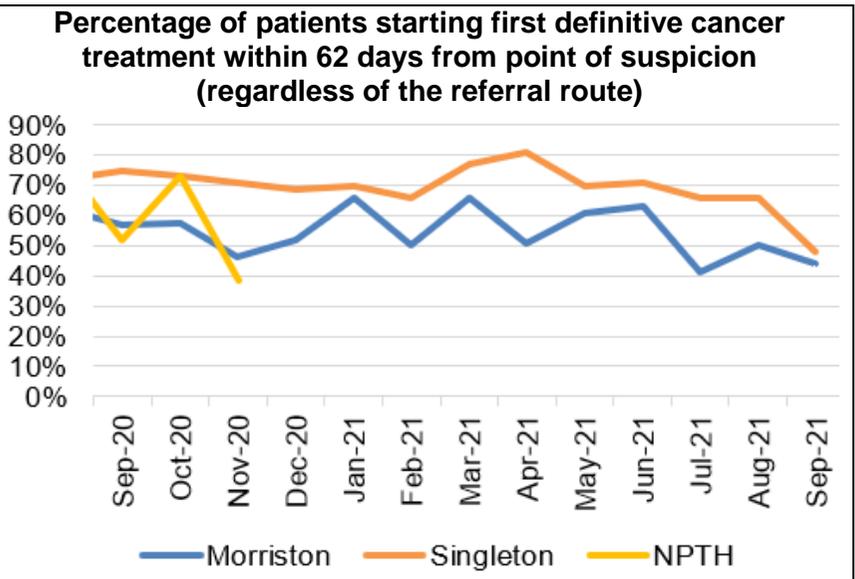
**CANCER**

Description	Current Performance	Trend
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**Single Cancer Pathway**  
*Percentage of patients starting first definitive cancer treatment within 62 days from point of suspicion (regardless of the referral route)*

September 2021 figures will be finalised on the 31<sup>st</sup> October 2021.  
 Draft figures indicate a possible achievement of 52% of patients starting treatment within 62 days of the suspicion of cancer first being raised (unadjusted pathway). The number of patients treated in September 2021 is outlined below by tumour site (draft figures).

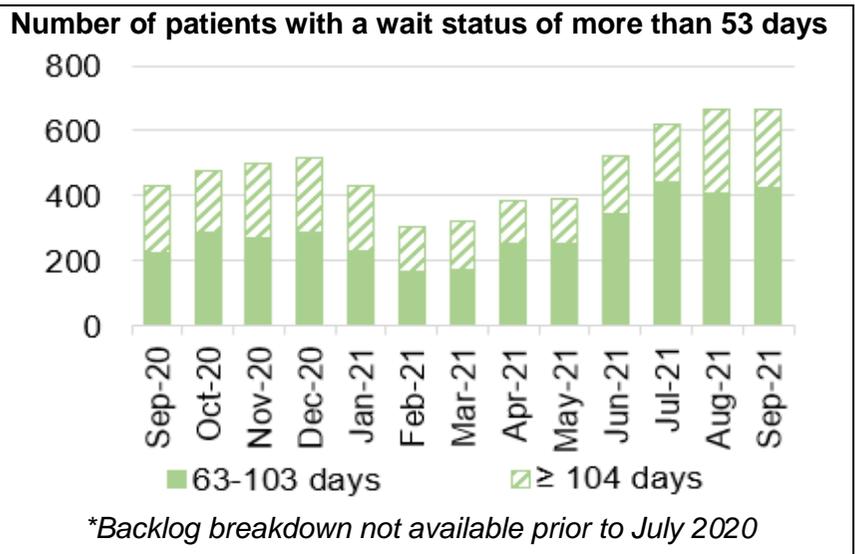
Tumour Site	Breaches	Tumour Site	Breaches
Urological	19	Upper GI	9
Head and Neck	7	Gynaecological	7
Lower GI	14	Haematological	5
Lung	12	Sarcoma	1
Breast	10	Brain/CNS	0
Skin	6		



**Single Cancer Pathway backlog**  
*The number of patients with an active wait status of more than 63 days*

Beginning of October 2021 backlog by tumour site:

Tumour Site	63 - 103 days	≥104 days
Acute Leukaemia	0	0
Brain/CNS	0	0
Breast	28	13
Children's cancer	0	0
Gynaecological	38	13
Haematological	7	5
Head and neck	26	6
Lower Gastrointestinal	196	128
Lung	6	8
Other	3	0
Sarcoma	2	4
Skin(c)	11	4
Upper Gastrointestinal	39	17
Urological	66	40
<b>Grand Total</b>	<b>422</b>	<b>245</b>



**CANCER**

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

To date, early October 2021 figures show total wait volumes have decreased by 27%, 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.

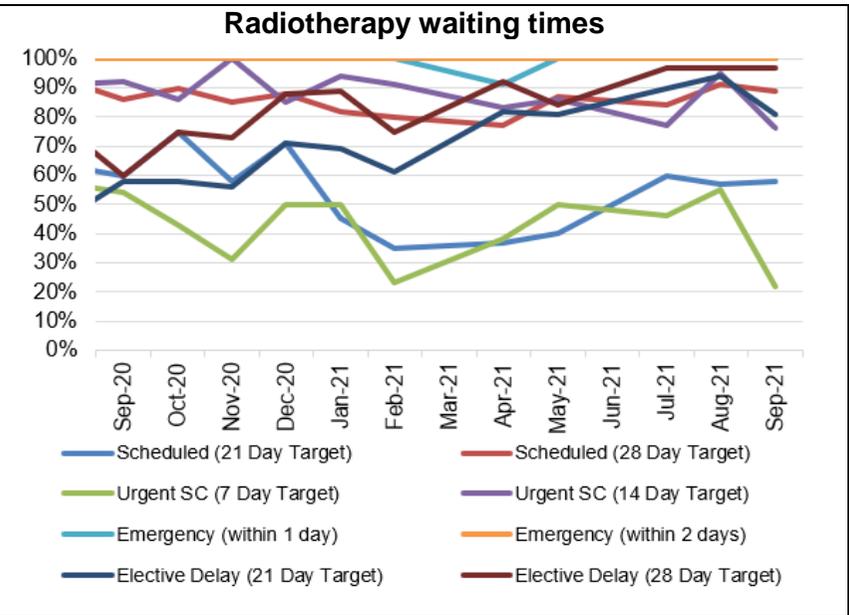
**The number of patients waiting for a first outpatient appointment (by total days waiting) – Start of October 2021**

FIRST OPA	03-Oct	10-Oct	% change
Acute Leukaemia	0	0	0%
Brain/CNS	1	0	-100%
Breast	76	11	-86%
Children's Cancer	0	0	0%
Gynaecological	71	54	-24%
Haematological	5	5	0%
Head and Neck	79	74	-6%
Lower GI	362	290	-20%
Lung	14	12	-14%
Other	35	37	6%
Sarcoma	6	8	33%
Skin	155	114	-26%
Upper GI	85	72	-15%
Urological	84	38	-55%
<b>Total</b>	<b>973</b>	<b>715</b>	<b>-27%</b>

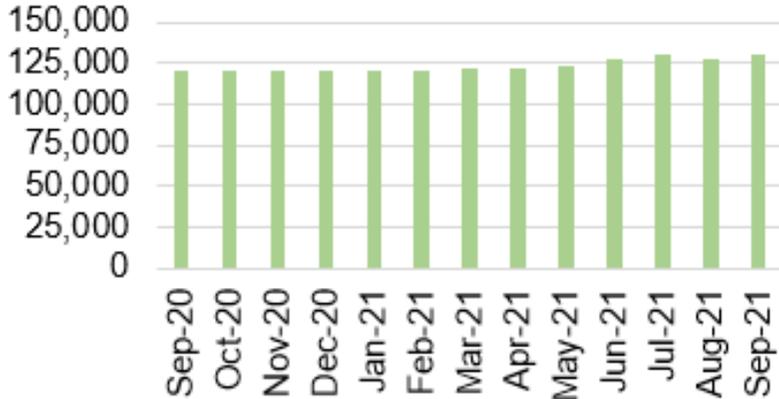
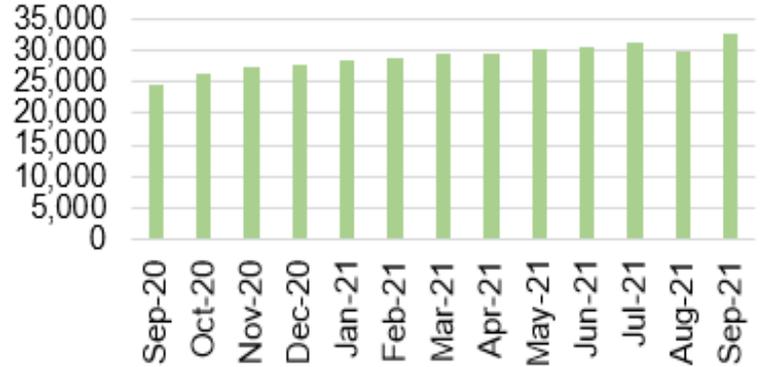
**Radiotherapy waiting times**  
*The percentage of patients receiving radiotherapy treatment*

Radiotherapy waiting times are challenging however the provision of emergency radiotherapy within 1 and 2 days has been maintained at 100% throughout the COVID19 outbreak.

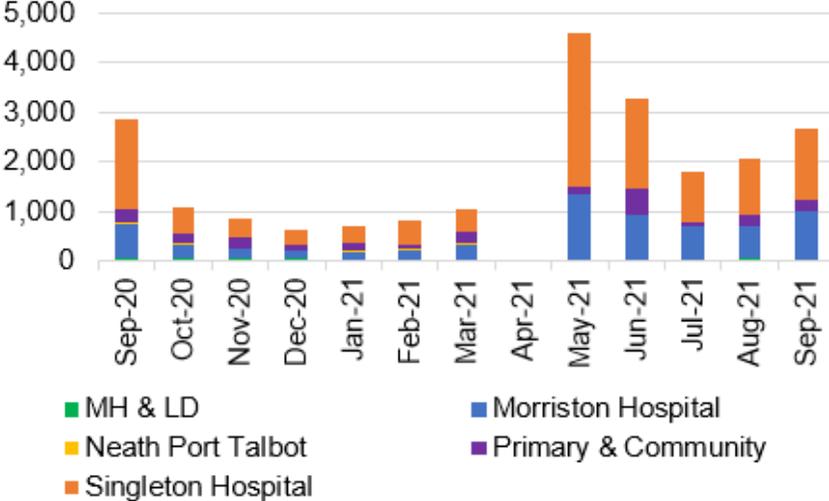
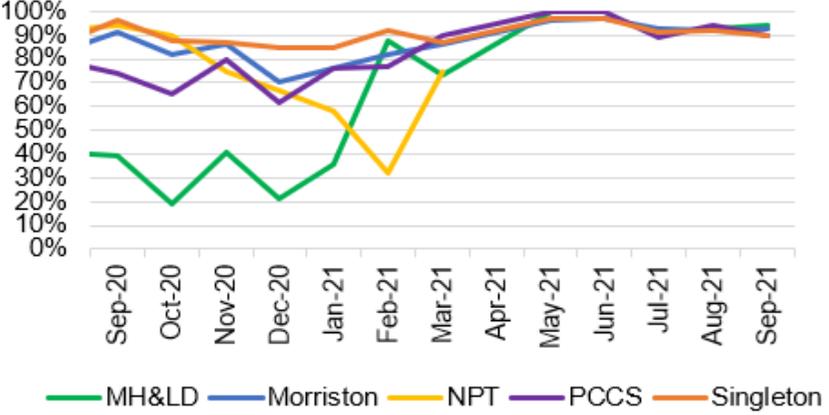
Measure	Target	August-21
Scheduled (21 Day Target)	80%	58%
Scheduled (28 Day Target)	100%	89%
Urgent SC (7 Day Target)	80%	22%
Urgent SC (14 Day Target)	100%	76%
Emergency (within 1 day)	80%	100%
Emergency (within 2 days)	100%	100%
Elective Delay (21 Day Target)	80%	81%
Elective Delay (28 Day Target)	100%	97%



**FOLLOW-UP APPOINTMENTS**

Description	Current Performance	Trend																																																								
<p><b>Follow-up appointments</b></p> <p><i>1. The total number of patients on the follow-up waiting list</i></p> <p><i>2. The number of patients waiting 100% over target for a follow-up appointment</i></p>	<p>In September 2021, the overall size of the follow-up waiting list increased by 3,572 patients compared with July 2021 (from 127,391 to 130,963).</p> <p>In September 2021, there was a total of 60,340 patients waiting for a follow-up past their target date. This is an in-month increase of 9.7% (from 54,993 in August 2021 to 60,340 in September 2021).</p> <p>Of the 60,340 delayed follow-ups in September 2021, 12,364 had appointment dates and 47,976 were still waiting for an appointment.</p> <p>In addition, 32,574 patients were waiting 100%+ over target date in September 2021. This is a 9.4% increase when compared with August 2021.</p>	<p><b>1. Total number of patients waiting for a follow-up</b></p>  <table border="1"> <caption>1. Total number of patients waiting for a follow-up (SBU HB)</caption> <thead> <tr> <th>Month</th> <th>Number of patients</th> </tr> </thead> <tbody> <tr><td>Sep-20</td><td>125,000</td></tr> <tr><td>Oct-20</td><td>125,000</td></tr> <tr><td>Nov-20</td><td>125,000</td></tr> <tr><td>Dec-20</td><td>125,000</td></tr> <tr><td>Jan-21</td><td>125,000</td></tr> <tr><td>Feb-21</td><td>125,000</td></tr> <tr><td>Mar-21</td><td>125,000</td></tr> <tr><td>Apr-21</td><td>125,000</td></tr> <tr><td>May-21</td><td>125,000</td></tr> <tr><td>Jun-21</td><td>125,000</td></tr> <tr><td>Jul-21</td><td>127,391</td></tr> <tr><td>Aug-21</td><td>127,391</td></tr> <tr><td>Sep-21</td><td>130,963</td></tr> </tbody> </table> <p><b>2. Delayed follow-ups: Number of patients waiting 100% over target</b></p>  <table border="1"> <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>Sep-20</td><td>24,000</td></tr> <tr><td>Oct-20</td><td>26,000</td></tr> <tr><td>Nov-20</td><td>27,000</td></tr> <tr><td>Dec-20</td><td>27,000</td></tr> <tr><td>Jan-21</td><td>28,000</td></tr> <tr><td>Feb-21</td><td>28,000</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>32,574</td></tr> </tbody> </table>	Month	Number of patients	Sep-20	125,000	Oct-20	125,000	Nov-20	125,000	Dec-20	125,000	Jan-21	125,000	Feb-21	125,000	Mar-21	125,000	Apr-21	125,000	May-21	125,000	Jun-21	125,000	Jul-21	127,391	Aug-21	127,391	Sep-21	130,963	Month	Number of patients	Sep-20	24,000	Oct-20	26,000	Nov-20	27,000	Dec-20	27,000	Jan-21	28,000	Feb-21	28,000	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	32,574
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**PATIENT EXPERIENCE**

Description	Current Performance	Trend
<p><b>Patient experience</b></p> <p>1. Number of friends and family surveys completed</p> <p>2. Percentage of patients/ service users who would recommend and highly recommend</p>	<ul style="list-style-type: none"> <li>Health Board Friends &amp; Family patient satisfaction level in September 2021 was 92% and 2,025 surveys were completed.                             <ul style="list-style-type: none"> <li>Singleton/ Neath Port Talbot Hospitals Service Group completed 1,452 surveys in September 2021, with a recommended score of 90%.</li> <li>Morrison Hospital completed 995 surveys in September 2021, with a recommended score of 93%.</li> <li>Primary &amp; Community Care completed 213 surveys for September 2021, with a recommended score of 90%.</li> <li>The Mental Health Service Group completed 18 surveys for September 2021, with a recommended score of 94%.</li> </ul> </li> </ul>	<p><b>1. Number of friends and family surveys completed</b></p>  <p><b>2. % of patients/ service users who would recommend and highly recommend</b></p>  <p>* Data not available for April 2021. Neath Port Talbot included in Singleton's figures from May 2021</p>

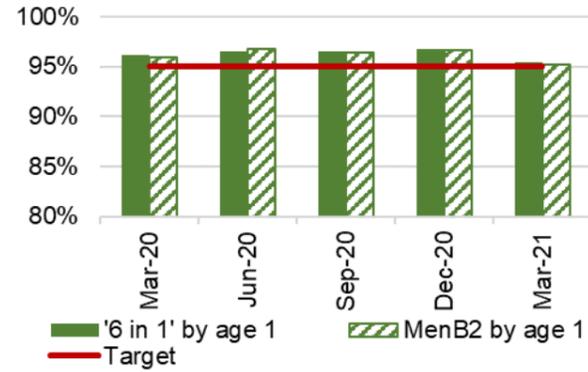
## COMPLAINTS

Description	Current Performance	Trend												
<p><b>Patient concerns</b></p> <p><i>1. Number of formal complaints received</i></p> <p><i>2. Percentage of concerns that have received a final reply or an interim reply up to and including 30 working days from the date the concern was first received by the organisation</i></p>	<p>1. In July 2021, the Health Board received 139 formal complaints; this is lower than the number seen in June 2021 (159).</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 July 2021 was higher than the pre-COVID levels.</p> <p><i>*Updated August 2021 figures were not available when publishing this report*</i></p> <p>2. The overall Health Board rate for responding to concerns within 30 working days was 69% in July 2021, against the Welsh Government target of 75% and Health Board target of 80%.</p> <p>Below is a breakdown of performance against the 30-day response target:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 70%;"></th> <th style="width: 30%;">30 day response rate</th> </tr> </thead> <tbody> <tr> <td>Neath Port Talbot Hospital</td> <td style="text-align: center;">100%</td> </tr> <tr> <td>Morrison Hospital</td> <td style="text-align: center;">76%</td> </tr> <tr> <td>Mental Health &amp; Learning Disabilities</td> <td style="text-align: center;">58%</td> </tr> <tr> <td>Primary, Community and Therapies</td> <td style="text-align: center;">54%</td> </tr> <tr> <td>Singleton Hospital</td> <td style="text-align: center;">54%</td> </tr> </tbody> </table>		30 day response rate	Neath Port Talbot Hospital	100%	Morrison Hospital	76%	Mental Health & Learning Disabilities	58%	Primary, Community and Therapies	54%	Singleton Hospital	54%	<div style="text-align: center;"> <p><b>1. Number of formal complaints received</b></p> <p style="font-size: small;">■ MH &amp; LD ■ Morrison Hospital ■ NPT Hospital ■ PCCS ■ Singleton Hospital</p> </div> <div style="text-align: center;"> <p><b>2. Response rate for concerns within 30 days</b></p> <p style="font-size: small;">■ Health Board Total — HB Profile</p> </div>
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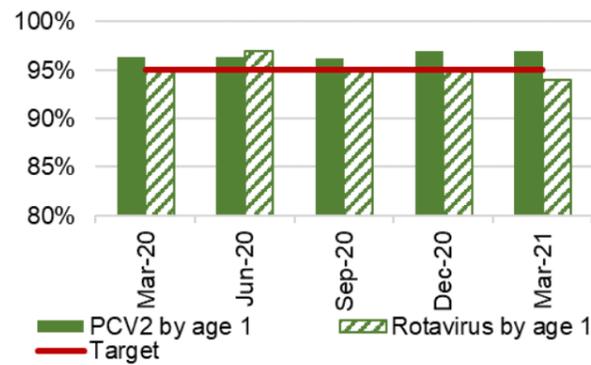
# HARM FROM WIDER SOCIETAL ACTIONS/LOCKDOWN

## 6.1 Vaccinations and Immunisations

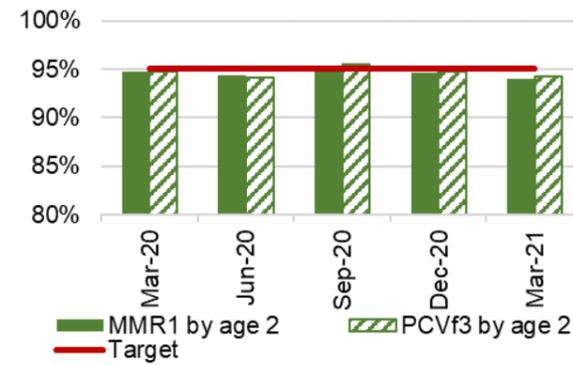
**Chart 1: % children who received 3 doses of the hexavalent '6 in 1' vaccine and MenB2 vaccine by age 1**



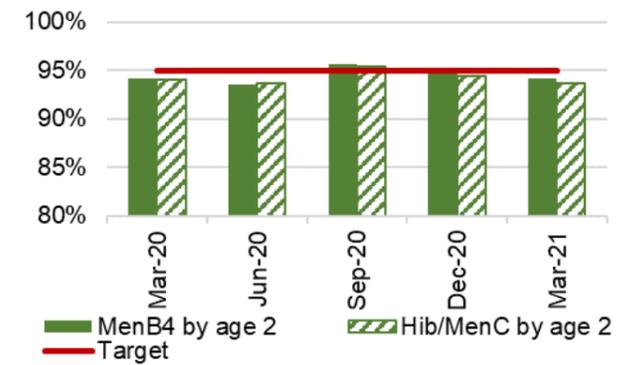
**Chart 2: % children who received PCV2 vaccine and Rotavirus vaccine by age 1**



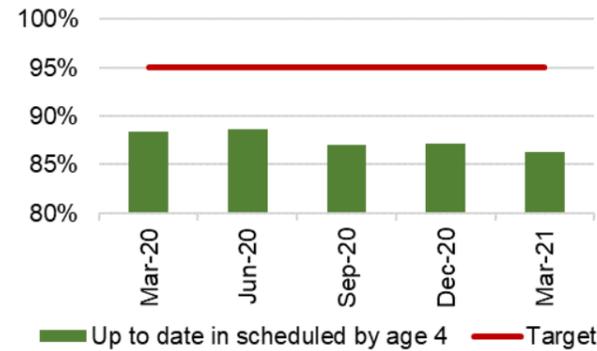
**Chart 3: % children who received MMR1 vaccine and PCVf3 vaccine by age 2**



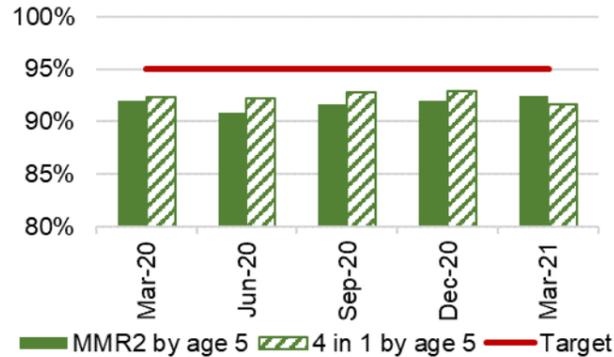
**Chart 4: % children who received MenB4 vaccine and Hib/MenC vaccine by age 2**



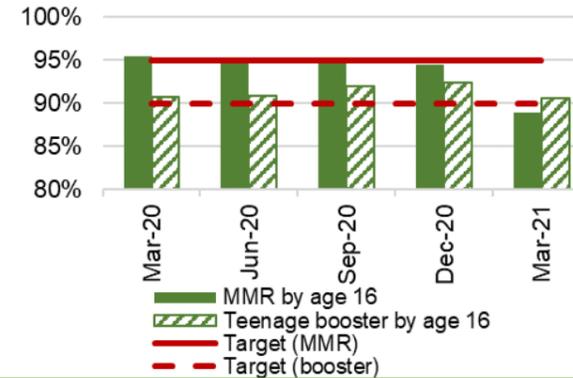
**Chart 5: % children who are up to date in schedule by age 4**



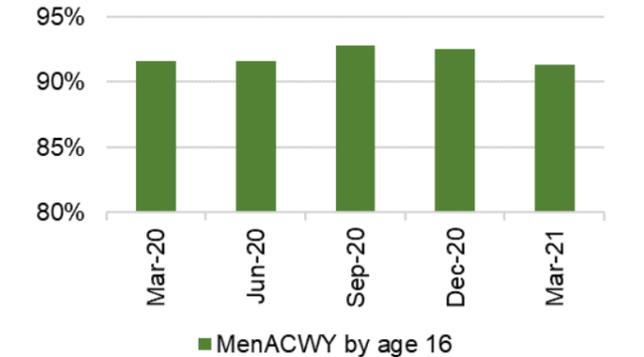
**Chart 6: % children who received 2 doses of the MMR vaccine and 4 in 1 vaccine by age 5**



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



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



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



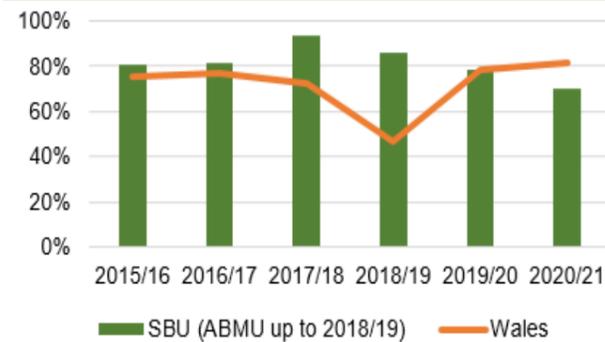
Data prior to April 2019 relates to Abertawe Bro Morgannwg University Health Board

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



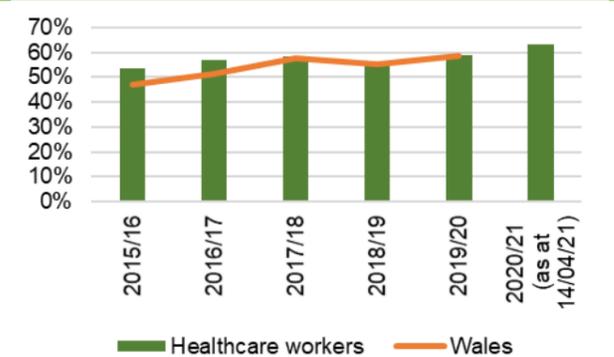
Data prior to April 2019 relates to Abertawe Bro Morgannwg University Health Board

**Chart 11: Influenza uptake for amongst pregnant women**



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

**Chart 12: Influenza uptake for amongst healthcare workers**

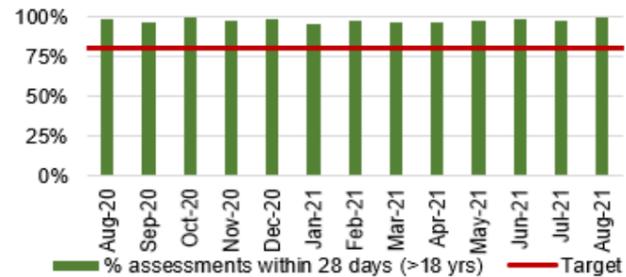


Data prior to April 2019 relates to Abertawe Bro Morgannwg University Health Board. 2020/21 all-Wales data not yet available

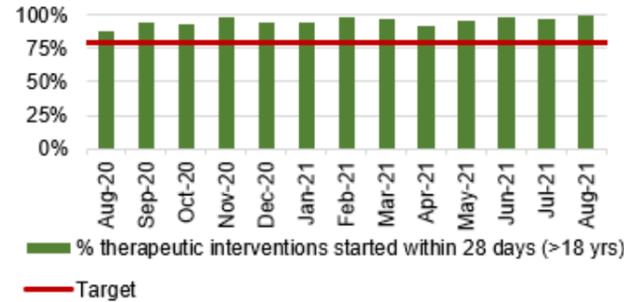
# HARM FROM WIDER SOCIETAL ACTIONS/LOCKDOWN

## 6.2 Mental Health Overview

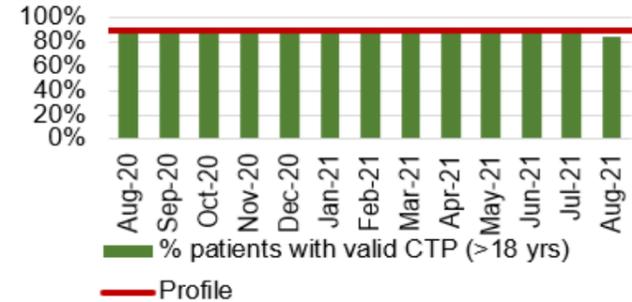
**Chart 1: % of mental health assessments undertaken within (up to and including) 28 days from the date of receipt of referral**



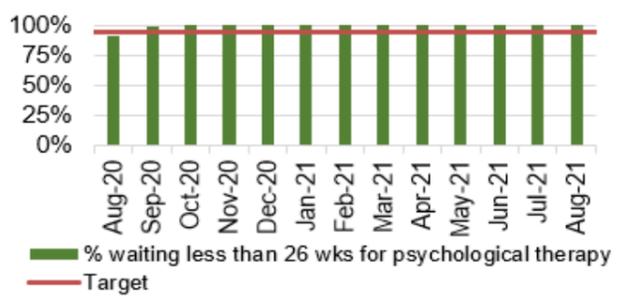
**Chart 2: % of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS**



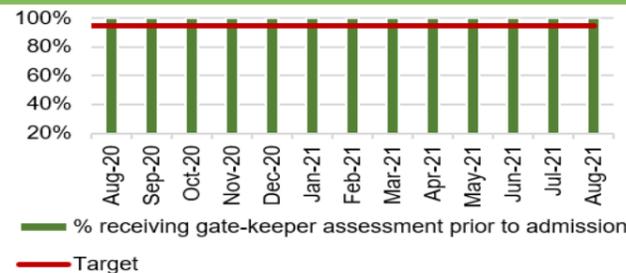
**Chart 3: % of health board residents in receipt of secondary mental health services (all ages) who have a valid care and treatment plan**



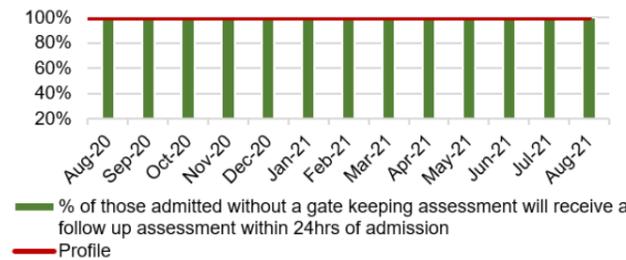
**Chart 4: % of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health**



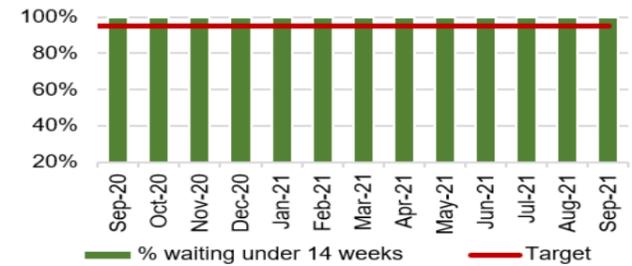
**Chart 5: 95% of those admitted 0900-2100 will receive a gate-keeping assessment by the CRHTS prior to admission**



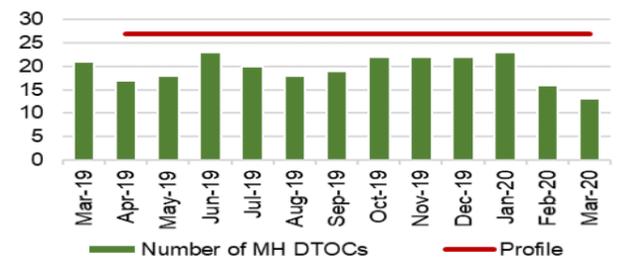
**Chart 6: 100% of those admitted without a gate keeping assessment will receive a follow up assessment by CRHTS within 24hrs of admission**



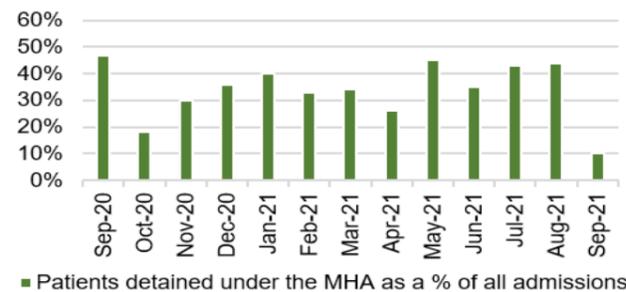
**Chart 7: % of patients waiting under 14 weeks for Therapies**



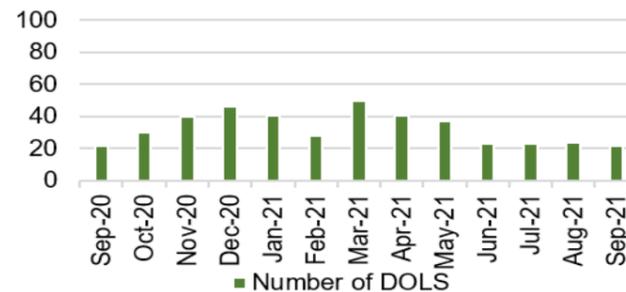
**Chart 8: Number of Mental Health Delayed Transfers of Care (DTCOs)**



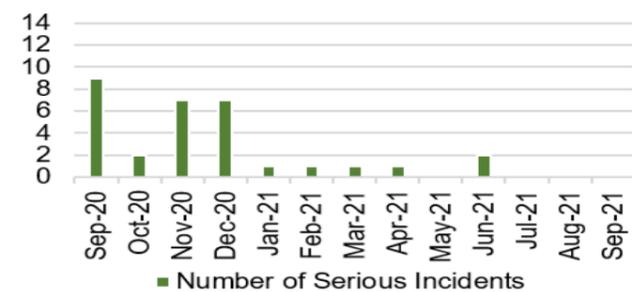
**Chart 9: Number of patients detained under the Mental Health Act as a percentage of all admissions**



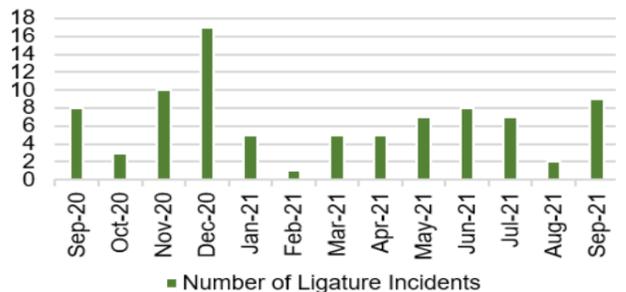
**Chart 10: Number of patients subject to Deprivation of Liberty Safeguards (DOLS)**



**Chart 11: Number of Serious Incidents**

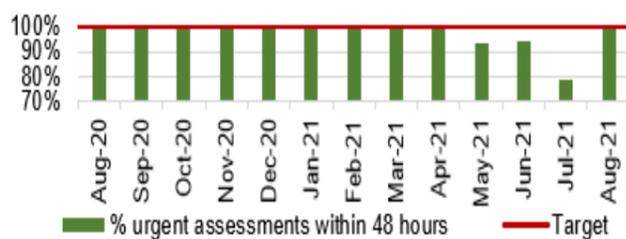


**Chart 12: Number of ligature incidents**

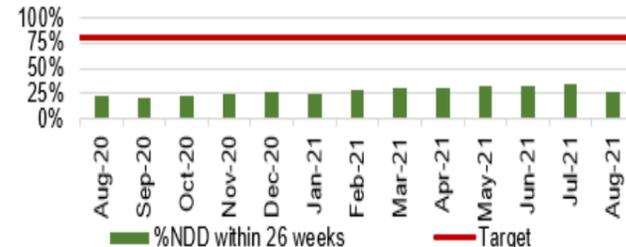


## Child & Adolescent Mental Health Services (CAMHS)

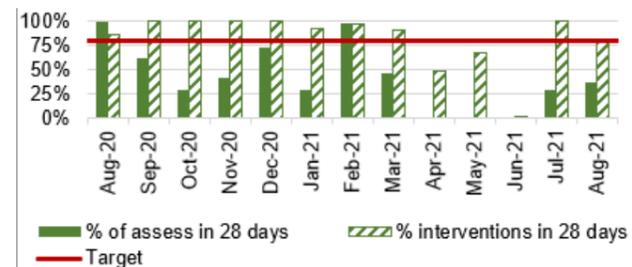
**Chart 13: Urgent assessments undertaken within 48 hours from receipt of referral**



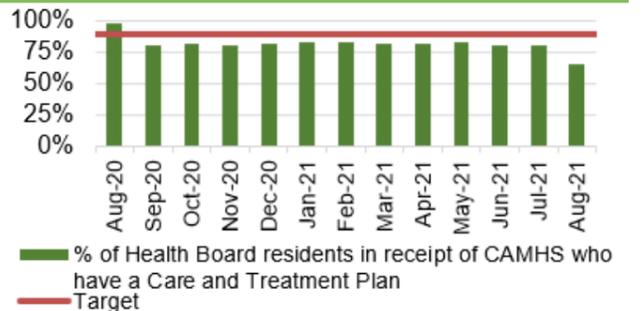
**Chart 14: Neuro-developmental disorder assessment and intervention received within 26 weeks**



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



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



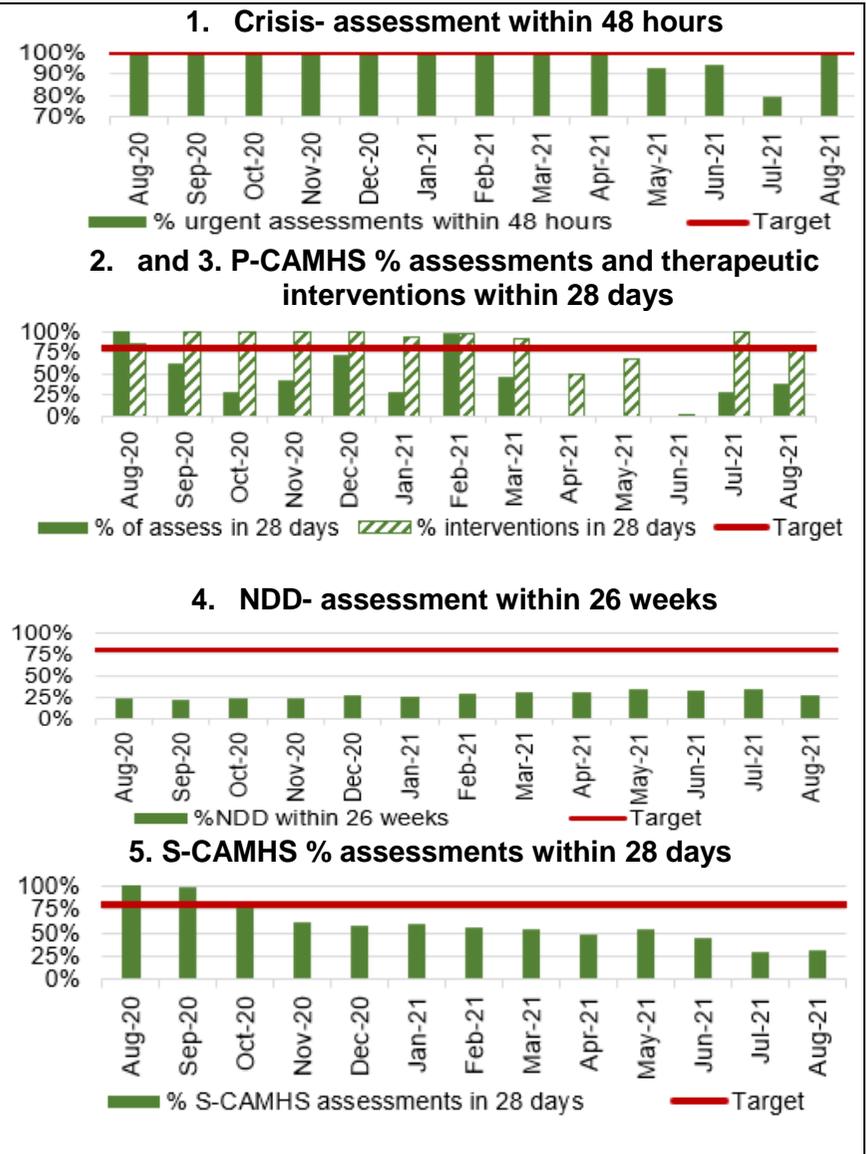
### 6.3 Updates on key measures

ADULT MENTAL HEALTH																														
Description	Current Performance	Trend																												
<p>Adult Mental Health Measures:</p> <p>1. % of MH assessments undertaken within 28 days from the date of receipt of referral (18 years and over)</p> <p>2. % of therapeutic interventions started within 28 days following an assessment by LPMHSS (18 years and over)</p> <p>3. % of health board residents in receipt of secondary mental health services who have a valid Care and Treatment Plan (CTP) (18 years and over)</p> <p>4. % of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health</p>	<p>1. In August 2021, 100% of assessments were undertaken within 28 days of referral for patients 18 years and over.</p>	<p><b>1. % Mental Health assessments undertaken within 28 days from receipt of referral</b></p> <table border="1"> <caption>% assessments within 28 days (&gt;18 yrs)</caption> <thead> <tr> <th>Month</th> <th>%</th> </tr> </thead> <tbody> <tr><td>Aug-20</td><td>100</td></tr> <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> </tbody> </table>	Month	%	Aug-20	100	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
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<p>2. In August 2021, the percentage of therapeutic interventions started within 28 days following an assessment by the Local Primary Mental Health Support Service (LPMHSS) was 100%.</p>	<p><b>2. % Mental Health therapeutic interventions started within 28 days following LPMHSS assessment</b></p> <table border="1"> <caption>% therapeutic interventions started within 28 days (&gt;18 yrs)</caption> <thead> <tr> <th>Month</th> <th>%</th> </tr> </thead> <tbody> <tr><td>Aug-20</td><td>100</td></tr> <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> </tbody> </table>	Month	%	Aug-20	100	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	
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<p>3. 84% of residents in receipt of secondary care mental health services had a valid Care and Treatment Plan in August 2021.</p>	<p><b>3. % residents with a valid Care and Treatment Plan (CTP)</b></p> <table border="1"> <caption>% patients with valid CTP (&gt;18 yrs)</caption> <thead> <tr> <th>Month</th> <th>%</th> </tr> </thead> <tbody> <tr><td>Aug-20</td><td>90</td></tr> <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>85</td></tr> <tr><td>Jul-21</td><td>85</td></tr> <tr><td>Aug-21</td><td>84</td></tr> </tbody> </table>	Month	%	Aug-20	90	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	85	Jul-21	85	Aug-21	84	
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<p>4. In August 2021, 100% of patients waited less than 26 weeks for psychological therapy. This was above the national target of 95%.</p>	<p><b>4. % waiting less than 26 weeks for Psychology Therapy</b></p> <table border="1"> <caption>% waiting less than 26 wks for psychological therapy</caption> <thead> <tr> <th>Month</th> <th>%</th> </tr> </thead> <tbody> <tr><td>Aug-20</td><td>100</td></tr> <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> </tbody> </table>	Month	%	Aug-20	100	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	
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**CHILD & ADOLESCENT MENTAL HEALTH (CAMHS)**

Description	Current Performance	Trend
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1. Crisis - % Urgent Assessment by CAMHS undertaken within 48 Hours from receipt of referral	1. In August 2021, 100% of CAMHS patients received an assessment within 48 hours.
2. Primary CAMHS (P-CAMHS) - % Routine Assessment by CAMHS undertaken within 28 days from receipt of referral	2. 37% of routine assessments were undertaken within 28 days from referral in August 2021 against a target of 80%.
3. Primary CAMHS (P-CAMHS) - % Therapeutic interventions started within 28 days following assessment by LPMHSS	3. 82% of therapeutic interventions were started within 28 days following assessment by LPMHSS in August 2021.
4. NDD - % Neurodevelopmental Disorder patients receiving a Diagnostic Assessment within 26 weeks	4. 27% of NDD patients received a diagnostic assessment within 26 weeks in August 2021 against a target of 80%.
5. Specialist CAMHS (S-CAMHS) - % Routine Assessment by SCAMHS undertaken within 28 days from receipt of referral	5. 37% of routine assessments by SCAMHS were undertaken within 28 days in August 2021.



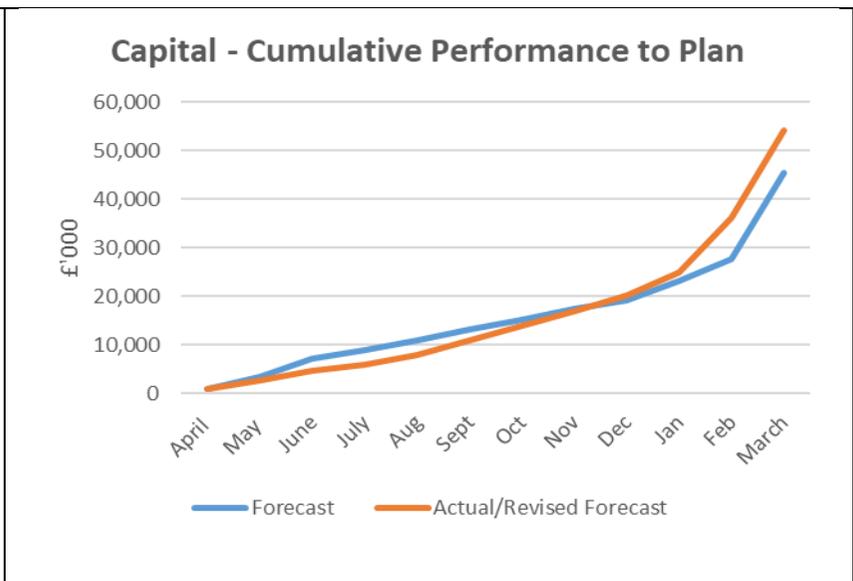
## 8. FINANCE UPDATES

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

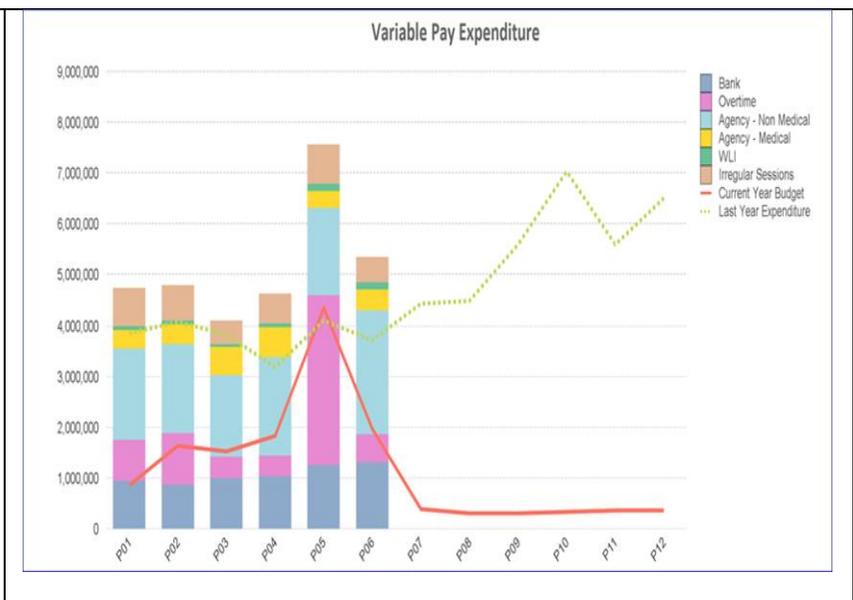
Description	Current Performance	Trend																																							
<p><b>Revenue Financial Position –</b> expenditure incurred against revenue resource limit</p>	<ul style="list-style-type: none"> <li>The Health Board’s annual plan produces a forecast deficit for 2021/22 of £42.077m. This includes £17.672m impact on savings delivery from 2020/21.</li> <li>The £42.077m forecast deficit equates to an expected monthly overspend of £3.506m.</li> <li>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.</li> <li>This was reflected in the May position.</li> <li>The Health Board has reported a cumulative overspend of £12.006m against a forecast position of £12.002m.</li> </ul>	<table border="1"> <caption>HEALTH BOARD FINANCIAL PERFORMANCE 2021/22</caption> <thead> <tr> <th>Month</th> <th>Operational Position (£'000)</th> <th>Target Overspend (£'000)</th> </tr> </thead> <tbody> <tr> <td>M1</td> <td>3,541</td> <td>3,506</td> </tr> <tr> <td>M2</td> <td>564</td> <td>2,034</td> </tr> <tr> <td>M3</td> <td>1,976</td> <td>2,034</td> </tr> <tr> <td>M4</td> <td>1,973</td> <td>2,034</td> </tr> <tr> <td>M5</td> <td>2,131</td> <td>2,034</td> </tr> <tr> <td>M6</td> <td>1,821</td> <td>2,034</td> </tr> <tr> <td>M7</td> <td></td> <td>2,034</td> </tr> <tr> <td>M8</td> <td></td> <td>2,034</td> </tr> <tr> <td>M9</td> <td></td> <td>2,034</td> </tr> <tr> <td>M10</td> <td></td> <td>2,034</td> </tr> <tr> <td>M11</td> <td></td> <td>2,034</td> </tr> <tr> <td>M12</td> <td></td> <td>2,034</td> </tr> </tbody> </table>	Month	Operational Position (£'000)	Target Overspend (£'000)	M1	3,541	3,506	M2	564	2,034	M3	1,976	2,034	M4	1,973	2,034	M5	2,131	2,034	M6	1,821	2,034	M7		2,034	M8		2,034	M9		2,034	M10		2,034	M11		2,034	M12		2,034
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M12		2,034																																							

Description	Current Performance	Trend
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<p><b>Capital Financial Position –</b> expenditure incurred against capital resource limit</p>	<ul style="list-style-type: none"> <li>The forecast outturn capital position for 2021/22 is an overspend of £8.906m. Allocations are anticipated from WG which will balance this position. These include a new COVID recovery allocation of £8.340m.</li> <li>The reported forecast outturn position assumes that £0.552m of disposal income will be received.</li> </ul>
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<p><b>Workforce Spend –</b> workforce expenditure profile</p>	<ul style="list-style-type: none"> <li>The pay budgets are underspent by £4.3m after 6 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.</li> <li>Variable pay remains high, this reflects operational pressures, increasing sickness levels and recovery actions, however it should be notes that medical and dental variable pay reduced in September.</li> <li>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.</li> </ul>
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Description	Current Performance	Trend
<p><b>PSPP</b> – pay 95% of Non-NHS invoices within 30 days of receipt of goods or valid invoice</p>	<ul style="list-style-type: none"> <li>The Health Board failed to deliver this target in 2020/21, with the target only being met on three of the twelve months.</li> <li>It is positive to note that the target has been met in each month to date this financial year, with a cumulative achievement of 96.07% for the first six months.</li> <li>It should be highlighted that there are some risks on maintaining this level of performance in forthcoming months, due to volumes of nurse agency invoices to be processed and also the impact of the Oracle system upgrade.</li> <li>The main reason for the failure to meet this target is delay in the receipting of goods and services, which prevent invoices being processed for payment and non-compliance with no PO no Pay policy.</li> <li>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.</li> </ul>	<p><b>Percentage of non-NHS invoices paid within 30 days of receipt of goods or valid invoice</b></p> <p>The chart displays two data series: 'PSPP In Month' (blue line) and 'PSPP Cumulative' (orange line). The Y-axis represents the percentage of invoices paid within 30 days, ranging from 94.00% to 97.50% in 0.50% increments. The X-axis represents months from M1 to M12. A horizontal line at 97.00% indicates the PSPP Target. The 'PSPP In Month' data points are approximately: M1 (95.4%), M2 (96.9%), M3 (95.2%), M4 (95.6%), M5 (96.8%), M6 (96.4%). The 'PSPP Cumulative' data points are approximately: M1 (95.4%), M2 (96.2%), M3 (95.9%), M4 (95.8%), M5 (96.0%), M6 (96.1%).</p>

## APPENDIX 2: INTEGRATED PERFORMANCE DASHBOARD

Harm from Covid itself																								
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	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	
COVID19 related measures	Number of new COVID19 cases	Local	Sep-21	12,839		Reduce					787	4,664	5,525	11,976	3,759	1,208	907	406	189	708	1,946	7,177	12,839	
	Number of staff referred for Antigen Testing	Local	Sep-21	13,951		Reduce					4,765	6,460	8,201	10,065	10,749	11,115	11,683	11,957	12,224	12,505	12,872	13,278	13,951	
	Number of staff awaiting results of COVID19 test	Local	Sep-21	0		Reduce					38 (as at 10/10/20)	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	Local	Sep-21	36		Reduce					30	87	141	127	84	63	53	74	67	23	24	36	36	
	Number of COVID19 related serious incidents	Local	Sep-21	0		Reduce					1	1	1	0	0	0	0	0	0	0	0	0	0	0
	Number of COVID19 related complaints	Local	Sep-21	3		Reduce					30	37	50	83	106	131	98	38	13	16	4	6	3	
	Number of COVID19 related risks	Local	Sep-21	0		Reduce					2	6	7	10	3	3	3	2	2	1	1	1	0	
	Number of staff self isolated (asymptomatic)	Local	Sep-21	227		Reduce					353	329	291	475	218	160	145	84	71	70	71	115	227	
	Number of staff self isolated (symptomatic)	Local	Sep-21	204		Reduce					72	132	294	394	316	156	108	87	71	50	67	114	204	
% sickness	Local	Sep-21	0		Reduce					3.2%	3.5%	4.4%	6.5%	4.0%	2.4%	1.9%	1.9%	1.9%	0.9%	1.9%	1.9%	1.9%		
Harm from overwhelmed NHS and social care system																								
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	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	
Unscheduled Care	% of emergency responses to red calls arriving within (up to and including) 8 minutes	National	Sep-21	50%	65%	65%	✘	61% (Apr-21)	1st (Apr-21)		69%	66%	67%	54%	67%	70%	73%	72%	62%	67%	64%	59%	50%	
	Number of ambulance handovers over one hour	National	Sep-21	642	0			3,124 (Apr-21)	4th (Apr-21)		410	355	500	510	195	219	231	337	477	547	616	726	642	
	Handover hours lost over 15 minutes	Local	Sep-21	2467							1,100	916	1,474	1,804	455	550	583	877	1,154	1,386	1,937	2,443	2,467	
	% of patients who spend less than 4 hours in all major and minor emergency care (i.e. A&E) facilities from arrival until admission, transfer or discharge	National	Sep-21	73%	95%			75.7% (Mar-21)	4th (Mar-21)		76.4%	77.2%	75.4%	72.6%	77%	71%	77%	75%	73%	72%	75%	75%	73%	
	Number of patients who spend 12 hours or more in all hospital major and minor care facilities from arrival until admission, transfer or discharge	National	Sep-21	1250	0			4,317 (Mar-21)	3rd (Mar-21)		537	494	626	776	570	534	457	631	684	880	1,014	1,060	1,250	
NOF	% of survival within 30 days of emergency admission for a hip fracture	National	Feb-21	70.7%	12 month ↑			82.0% (Feb-21)	5th (Feb-21)		89.4%	90.0%	67.9%	68.0%	65.3%	70.7%								
	% of patients (age 60 years and over) who presented with a hip fracture that received an orthogeriatrician assessment within 72 hours	National	Feb-21	88.0%	12 month ↑			60% (Feb-21)	2nd (Feb-21)		84.0%	84.0%	85.0%	86.0%	87.0%	88.0%								
Stroke	Direct admission to Acute Stroke Unit (<4 hrs)	National	Sep-21	15%	54.0%			22.6% (Mar-21)	4th out of 6 organisations (Mar-21)		50.0%	29.8%	23.7%	7.1%	6.8%	18.2%	20.4%	20.3%	27.5%	28.3%	13.5%	15.4%	15.4%	
	CT Scan (<1 hrs) (local)	Local	Sep-21	34%							62.5%	42.1%	31.7%	22.7%	42.2%	30.6%	40.8%	29.7%	36.5%	29.6%	34.6%	48.7%	34.1%	
	Assessed by a Stroke Specialist Consultant Physician (< 24 hrs)	National	Sep-21	90%	85.3%			87.6% (Mar-21)	1st (Mar-21)		97.5%	98.2%	96.7%	95.5%	95.6%	97.2%	100.0%	96.9%	98.1%	100.0%	100.0%	92.3%	90.2%	
	Thrombolysis door to needle <= 45 mins	Local	Sep-21	0%	12 month ↑						12.5%	11.1%	28.6%	0.0%	12.5%	0.0%	55.6%	25.0%	0.0%	33.3%	28.6%	20.0%	0.0%	
	% compliance against the therapy target of an average of 16.1 minutes if speech and language therapist input per stroke patient	National	Sep-21	59%	12 month ↑			46.8% (Mar-21)	3rd (Mar-21)		80.1%	86.5%	65.1%	63.4%	65.7%	61.2%	55.9%	47.1%	39.7%	41.9%	45.4%	58.9%	58.6%	
% of stroke patients who receive a 6 month follow-up assessment	National	Q3 19/20	49.6%	Qtr on qtr ↑			62.2% (Q3 19/20)	5th out of 6 organisations (Q3 19/20)																
DTCs	Number of mental health HB DTCs	National	Mar-20	13	12 month ↓	27	✔				DTC reporting temporarily suspended													
	Number of non-mental health HB DTCs	National	Mar-20	60	12 month ↓	50	✘				DTC reporting temporarily suspended													
	% critical care bed days lost to delayed transfer of care	National	Q1 20/21	26.2%	Quarter on quarter ↓			5.3% (Q1 20/21)	2nd (Q1 20/21)															

Harm from overwhelmed NHS and social care system																									
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	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		
Infection control	Cumulative cases of E.coli bacteraemias per 100k pop	National	Sep-21	86.4	<67		✘	77.95 (Apr-21)	5th (Apr-21)		64.0	65.7	63.8	60.7	60.0	59.8	61.9	99.8	88.9	89.4	89.4	90.5	86.4		
	Number of E.Coli bacteraemia cases (Hospital)		Sep-21	9								7	14	5	5	6	6	9	12	11	5	8	9	9	
	Number of E.Coli bacteraemia cases (Community)		Sep-21	12.0									16	11	11	7	12	11	19	20	15	23	15	25	12
	Total number of E.Coli bacteraemia cases		Sep-21	21									23	25	16	12	18	17	28	32	26	28	23	34	21
	Cumulative cases of S.aureus bacteraemias per 100k pop		Sep-21	38.3	<20			✘	27.01 (Apr-21)	6th (Apr-21)		30.7	31.5	32.7	31.7	31.6	31.4	31.6	40.5	44.5	37.0	36.0	35.5	38.3	
	Number of S.aureus bacteraemias cases (Hospital)		Sep-21	17									7	6	7	6	5	7	4	4	5	5	7	8	17
	Number of S.aureus bacteraemias cases (Community)		Sep-21	4.0									7	6	6	3	4	2	7	9	10	2	4	4	4
	Total number of S.aureus bacteraemias cases		Sep-21	17									14	12	13	9	9	9	11	13	15	7	11	12	17
	Cumulative cases of C.difficile per 100k pop		Sep-21	53.2	<26			✘	28.94 (Apr-21)	6th (Apr-21)		51.2	50.4	48.4	45.7	42.0	41.5	41.1	62.3	49.1	46.2	52.0	55.0	53.2	
	Number of C.difficile cases (Hospital)		Sep-21	9									12	12	8	6	3	9	7	15	7	6	16	20	9
	Number of C.difficile cases (Community)		Sep-21	5.0									6	3	2	3	0	2	5	5	5	6	7	2	5
	Total number of C.difficile cases		Sep-21	14									18	15	10	9	3	11	12	20	12	12	23	22	14
	Cumulative cases of Klebsiella per 100k pop		Sep-21	24.5									21.0	21.9	23.4	24.9	26.4	25.8	26.2	28.1	21.5	26.7	0.0	22.6	24.5
	Number of Klebsiella cases (Hospital)		Sep-21	8									3	7	7	8	8	4	1	4	3	5	2	4	8
	Number of Klebsiella cases (Community)		Sep-21	3.0									2	2	4	4	5	2	9	5	2	7	1	4	3
	Total number of Klebsiella cases		Sep-21	11						38 (Apr-21)	6th (Apr-21)		5	9	11	12	13	6	10	9	5	12	3	8	11
	Cumulative cases of Aeruginosa per 100k pop		Sep-21	5.6									5.6	5.7	5.8	5.5	5.2	5.1	4.9	9.4	6.1	6.2	0.0	5.5	5.6
	Number of Aeruginosa cases (Hospital)		Sep-21	2									0	1	1	1	0	0	0	2	0	1	0	1	2
Number of Aeruginosa cases (Community)	Sep-21	0.0									0	1	1	0	1	1	1	1	1	1	1	1	0		
Total number of Aeruginosa cases	Sep-21	2						21 (Apr-21)	Joint 3rd (Apr-21)		0	2	2	1	1	1	1	3	1	2	1	2	2		
Hand Hygiene Audits- compliance with WHO 5 moments	Local	Local	Sep-21	95.0%		95%	✓				96%	97%	97%	96%	95%	93%	97%	96%	98%	96%	95%	95%	96%		
Serious Incidents and risks	Of the serious incidents due for assurance, the % which were assured within the agreed timescales	National	Sep-21	0.0%	90%	80%	✘				20%	0%	0%	4%	0%	10%	0%	0%	0%	0%	0%	0%	0%		
	Number of new Never Events	National	Sep-21	0.00	0	0	✓				0	1	1	0	0	0	0	0	0	1	0	0	0		
	Number of risks with a score greater than 20	Local	Sep-21	33.00		12 month ↓	✘				117	130	138	146	148	140	142	40	41	32	30	31	33		
Number of risks with a score greater than 16	Local	Sep-21	56.00		12 month ↓	✘				206	224	224	238	242	233	230	54	58	50	50	52	56			
Pressure Ulcers	Number of pressure ulcers acquired in hospital	Local	Aug-21	53.00		12 month ↓	✘				44	59	42	61	51	48	36	59	53	53	58	53			
	Number of pressure ulcers developed in the community		Aug-21	34.00		12 month ↓	✓				21	34	29	26	26	24	26	31	20	21	33	34			
	Total number of pressure ulcers		Aug-21	87.00		12 month ↓	✘				65	93	71	87	76	72	62	90	73	74	91	87			
	Number of grade 3+ pressure ulcers acquired in hospital		Aug-21	2.00		12 month ↓	✘				0	4	4	3	2	3	1	4	1	2	3	2			
	Number of grade 3+ pressure ulcers acquired in community		Aug-21	8.00		12 month ↓	✓				5	11	5	7	5	4	2	10	2	4	2	8			
Total number of grade 3+ pressure ulcers	Aug-21	10.00		12 month ↓	✘						5	15	9	10	7	7	3	14	3	6	5	10			
Inpatient Falls	Local	Local	Sep-21	207		12 month ↓	✓				219	187	247	247	203	177	171	176	228	174	193	198	207		
Mortality	% of universal mortality reviews (UMRs) undertaken within 28 days of a death	Local	Sep-21	98%	95%	95%	✓				99.2%	100.0%	98.1%	99.0%	100.0%	100.0%	97.6%	99.3%	98.0%	98.6%	97.6%	93.0%	98.0%		
	Stage 2 mortality reviews required	Local	Sep-21	10							11	9	17	12	19	6	11	5	18	12	7	17	10		
	% stage 2 mortality reviews completed	Local	Aug-21	0.00%		100%	✘				54.5%	33.3%	35.7%	75.0%	36.8%					25.0%	0.0%	0.0%			
	Crude hospital mortality rate (74 years of age or less)	National	Aug-21	1.02%		12 month ↓		1.56% (Mar-21)	4th (Mar-21)		0.93%	0.97%	1.01%	1.08%	1.14%	1.17%	1.17%	1.04%			1.01%	1.03%	1.02%		
% of deaths scrutinised by a medical examiner	National				Qtr on qtr ↑					New measure for 2020/21- awaiting data															
NEWS	% patients with completed NEWS scores & appropriate responses actioned	Local	Sep-21	92%		98%	✓				93.6%	93.9%	94.6%	98.5%	95.0%	96.3%	93.5%	97.4%	98.9%	95.0%	89.7%	91.7%	91.6%		
Coding	% of episodes clinically coded within 1 month of discharge	Local	Aug-21	94%	95%	95%	✓				96%	95%	93%	93%	95%	96%	96%	96%	96%	89%	90%	94%	0%		
E-TOC	% of completed discharge summaries (total signed and sent)	Local	Sep-21	68%		100%	✘				70%	68%	66%	59%	67%	63%	64%	63%	67%	69%	62%	62%	68%		
Workforce	% of headcount by organisation who have had a PADR/medical appraisal in the previous 12 months (excluding doctors and dentists in training)	National	Sep-21	85%	85%	85%	✘	61.0% (Oct-20)	7th out of 10 organisations (Aug-20)		58%	58%	56%	54%	52%	51%	53%	57%	60%	65%	60%	85%	85%		
	% compliance for all completed Level 1 competency with the Core Skills and Training Framework	National	Sep-21	80%	85%	85%	✘	79.4% (Oct-20)	5th out of 10 organisations (Aug-20)		80%	80%	80%	80%	80%	80%	80%	80%	80%	81%	81%	81%	80%		
	% workforce sickness absence (12 month rolling)	National	Aug-21	7.11%		12 month ↓		5.87% (Oct-20)	10th out of 10 organisations (Oct-20)		7.03%	7.07%	7.23%	7.48%	7.57%	7.56%	7.44%	7.12%	6.93%	6.91%	6.99%	7.11%			

Harm from reduction in non-Covid activity																								
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	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	
Cancer	% of patients starting definitive treatment within 62 days from point of suspicion (without adjustments)	National	Sep-21 (Draft)	58.4%	12 month ↑			67.1% (Mar-21)	2nd out of 6 organisations (Mar-21)		62.4%	65.9%	55.4%	61.0%	67.9%	56.4%	71.6%	65.7%	65.4%	65.4%	66.8%	55.0%	58.4%	
Radiotherapy waiting times	Scheduled (21 Day Target)	Local	Sep-21	58%	80%		✘				60%	75%	58%	71%	45%	35%	42%	37%	40%	31%	60%	57%	58%	
	Scheduled (28 Day Target)	Local	Sep-21	89%	100%		✘				86%	90%	85%	88%	82%	80%	85%	77%	87%	70%	84%	91%	89%	
	Urgent SC (7 Day Target)	Local	Sep-21	22%	80%		✘				54%	43%	31%	50%	50%	23%	41%	38%	50%	45%	46%	55%	22%	
	Urgent SC (14 Day Target)	Local	Sep-21	76%	100%		✘				92%	86%	100%	85%	94%	91%	90%	83%	86%	87%	77%	95%	76%	
	Emergency (within 1 day)	Local	Sep-21	100%	80%		✔				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
	Emergency (within 2 days)	Local	Sep-21	100%	100%		✔				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
	Elective Delay (21 Day Target)	Local	Sep-21	81%	80%		✔				58%	58%	56%	71%	69%	61%	86%	82%	81%	91%	90%	94%	81%	
Elective Delay (28 Day Target)	Local	Sep-21	97%	100%		✘				60%	75%	73%	88%	89%	75%	93%	92%	84%	95%	97%	97%	97%	97%	
Planned Care	Number of patients waiting > 8 weeks for a specified diagnostics	National	Sep-21	5732	0			41,693 (Mar-21)	2nd (Mar-21)		7,666	6,645	6,610	6,579	6,239	5,087	4,554	4,804	4,842	5,230	5,425	5,523	5,732	
	Number of patients waiting > 14 weeks for a specified therapy	National	Sep-21	320	0			4,066 (Mar-21)	2nd (Mar-21)		1,350	1,135	817	708	584	491	369	201	166	171	151	186	320	
	% of patients waiting < 26 weeks for treatment	National	Sep-21	48%	95%			52.5% (Mar-21)	6th (Mar-21)		41.0%	44.8%	47.6%	48.0%	47.0%	47.3%	48.8%	49.1%	49.1%	50.7%	47.8%	48.3%	48.1%	
	Number of patients waiting > 26 weeks for outpatient appointment	Local	Sep-21	23997	0						23,069	22,050	21,005	21,179	21,208	21,225	21,750	22,752	23,700	23,279	23,225	23,444	23,997	
	Number of patients waiting > 36 weeks for treatment	National	Sep-21	35711	0			216,418 (Mar-21)	3rd (Mar-21)		26,046	31,508	35,387	35,126	33,991	32,719	32,874	33,395	34,447	35,040	35,583	35,999	35,711	
	The number of patients waiting for a follow-up outpatient appointment	National	Sep-21	130963	HB target TBC			747,782 (Mar-21)	5th (Mar-21)		120,962	120,968	120,874	119,963	119,999	120,882	121,403	122,303	123,088	127,444	130,208	127,391	130,963	
	The number of patients waiting for a follow-up outpatients appointment who are delayed over 100%	National	Sep-21	32574	HB target TBC			194,689 (Mar-21)	5th (Mar-21)		24,472	26,217	27,156	27,641	28,419	28,862	29,316	29,334	30,062	30,550	31,316	29,770	32,574	
% of RI ophthalmology patient pathways waiting within target date or within 25% beyond target date for an outpatient appointment	National	Sep-21	48%	95%			44.8% (Mar-21)	3rd (Mar-21)		47.7%	45.2%	48.4%	47.3%	46.7%	47.4%	47.7%	47.2%		46.7%	46.3%	46.1%	47.9%		
Hepatitis C	Number of patients with Hepatitis C who have successfully completed their course of treatment in the reporting year	National			HB target TBC						New measure for 2020/21- awaiting data													
DNAs	% of patients who did not attend a new outpatient appointment	Local	Sep-21	7.2%	12 month ↓						6.4%	6.0%	6.6%	7.7%	7.1%	6.2%	5.6%	5.3%	5.7%	6.5%	6.5%	6.4%	7.2%	
	% of patients who did not attend a follow-up outpatient appointment	Local	Sep-21	7.6%	12 month ↓						6.9%	6.5%	7.2%	8.2%	7.1%	6.2%	6.7%	6.1%	6.9%	5.5%	7.5%	7.5%	7.6%	
Theatre Efficiencies	Theatre Utilisation rates	Local	Sep-21	72.0%		90%	✘				75%	75%	74%	59%	65%	73%	75%	80%	78%	77%	72%	69%	72%	
	% of theatre sessions starting late	Local	Sep-21	42.0%		<25%	✘				49%	44%	39%	45%	40%	42%	40%	38%	43%	43%	44%	44%	42%	
	% of theatre sessions finishing early	Local	Sep-21	46.0%		<20%	✘				39%	38%	50%	47%	44%	44%	48%	41%	45%	43%	48%	46%	46%	
Postponed operations	Number of procedures postponed either on the day or the day before for specified non-clinical reasons	National	Jan-21	1,200	> 5% annual ↓			5,398 (Jan-21)	6th (Jan-21)		2,090	1,888	1,677	1,509	1,200									
Treatment Fund	All new medicines must be made available no later than 2 months after NICE and AWMMSG appraisals	National	Q2 20/21	98.8%	100%	100%	✘	98.3% (Q2 20/21)	3rd out of 6 organisations (Q2 20/21)		98.8%													
Prescribing	Total antibacterial items per 1,000 STAR-PUs	National	Q3 20/21	258.8	4 quarter ↓			241.96 (Q3 20/21)	6th (Q3 20/21)		249.9			258.8										
	Patients aged 65 years or over prescribed an antipsychotic	National	Q2 20/21	1,511	Quarter on quarter ↓			10,205 (Q2 20/21)	5th (Q2 20/21)		1,511													
	Number of women of child bearing age prescribed valproate as a % of all women of child bearing age	National	Q2 20/21	0.23%	Quarter on quarter ↓			0.16% (Q2 20/21)	7th (Q2 20/21)		0.23%													
	Opioid average daily quantities per 1,000 patients	National	Q2 20/21	4,369	4 quarter ↓			4,390.4 (Q2 20/21)	3rd (Q2 20/21)		4,369													
Patient experience	Biosimilar medicines prescribed as % of total 'reference' product plus biosimilar	National	Q2 20/21	78.6%	Quarter on quarter ↑			82.6% (Q2 20/21)	4th (Q2 20/21)		78.6%													
	Number of friends and family surveys completed	Local	Sep-21	2,025	12 month ↑		✔				2,804	1,047	787	584	678	798	1,050		4,590	3,297	1,912	2,075	2,025	
	% of who would recommend and highly recommend	Local	Sep-21	92%	90%		✘				93%	82%	84%	77%	79%	85%	87%		96%	97%	92%	92%	92%	
Complaints	% of all-Wales surveys scoring 9 out of 10 on overall satisfaction	Local	Sep-21	1	90%		✔				84%	79%	85%	65%	81%	94%	93%		92%	96%	95%	92%	96%	
	Number of new formal complaints received	Local	Jul-21	139	12 month trend ↓		✘				107	121	103	83	78	94	117	100	115	159	139	0	0	
	% concerns that had final reply (Reg 24)/interim reply (Reg 26) within 30 working days of concern received	National	Jun-21	0	75%	80%	✔		71.9% (Q3 20/21)	2nd (Q3 20/21)		82%	75%	82%	80%	71%	80%	81%						
% of acknowledgements sent within 2 working days	Local	Sep-21	100%	100%		✔					100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		

Harm from wider societal actions/lockdown																									
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	Mag-21	Jun-21	Jul-21	Aug-21	Sep-21		
Early years measures	% of babies who are exclusively breastfed at 10 days old	National	2019/20	34.2%	Annual ↑			35.3% (2019/20)	5th (2019/20)																
	% children who received 3 doses of the hexavalent '6 in 1' vaccine by age 1	National	Q4 20/21	95.4%	95%			95.3% (Q3 20/21)	1st (Q3 20/21)		96.5%			96.7%			95.4%								
	% of children who received 2 doses of the MMR vaccine by age 5	National	Q4 20/21	92.4%	95%			92.1% (Q3 20/21)	3rd (Q3 20/21)		91.7%			92.0%			92.4%								
Smoking cessation	% of adult smokers who make a quit attempt via smoking cessation services	National	Q1-Q3 20/21	2.25%	5% annual target			2.39% (Q1-3 20/21)	4th (Q1-3 20/21)		1.66%			2.25%											
Alcohol	European age standardised rate of alcohol attributed hospital admissions for individuals resident in Wales	National	Q3 20/21	308.8	4 quarter ↓			349.6 (Q3 20/21)	2nd (Q3 20/21)		331.7			308.8											
	% of people who have been referred to health board services who have completed treatment for alcohol abuse	National	Q4 20/21	45.5%	4 quarter ↑			67.2% (Q4 20/21)	6th (Q4 20/21)		23.2%			39.5%			45.5%								
Influenza	% uptake of influenza among 65 year olds and over	National	Mar-21	75.5%	75%			76.5% (Mar-21)	4th (Mar-21)		Data collection restarts October 2020	65.6%	72.4%	74.8%	75.2%	75.4%	75.5%	Data collection restarts October 2021							
	% uptake of influenza among under 65s in risk groups	National	Mar-21	49.4%	55%			51.07% (Mar-21)	5th (Mar-21)			34.4%	42.8%	47.2%	48.7%	49.4%	49.4%								
	% uptake of influenza among pregnant women	National	2019/20	78.2%	75%			78.5% (2019/20)	5th out of 10 organisations (2019/20)			Data not available													
	% uptake of influenza among children 2 to 3 years old	Local	Mar-21	53.4%	50%			56.3% (Mar-21)	5th (Mar-21)			35.7%	48.8%	52.5%	53.2%	53.4%	53.4%								
	% uptake of influenza among healthcare workers	National	Mar-21	63.4%	60%			58.7% (2019/20)	7th out of 10 organisations (2019/20)			56.2%	62.9%	63.0%	63.4%	63.4%	63.4%								
Screening services	Uptake of screening for bowel cancer	National	2018/19	57.0%	60%			57.3% (2018/19)	4th (2018/19)																
	Uptake of screening for breast cancer	National	2018/19	73.6%	70%			72.8% (2018/19)	2nd (2018/19)																
	Uptake of screening for cervical cancer	National	2018/19	72.1%	80%			73.2% (2018/19)	5th (2018/19)																
CAMHS	% of urgent assessments undertaken within 48 hours from receipt of referral (Crisis)	Local	Aug-21	100%		100%	✓				100%	100%	100%	100%	100%	100%	100%	100%		94%	79%	100%			
	% Patients with Neurodevelopmental Disorders (NDD) receiving a Diagnostic Assessment within 26 weeks	National	Aug-21	27%	80%	80%	✗	32.2% (Mar-21)	5th (Mar-21)		21%	22%	24%	26%	24%	28%	30%	30%		32%	34%	27%			
	% Patients waiting less than 28 days for a first outpatient appointment for CAMHS	National	Aug-21	48%	80%	80%	✗	75.8% (Mar-21)	3rd (Mar-21)		98%	90%	88%	61%	53%	66%	63%	60%		58%	41%	48%			
	P-CAMHS - % of Routine Assessment by CAMHS undertaken within 28 days from receipt of referral	National	Aug-21	37%		80%	✗	62.3% (Mar-21)	4th (Mar-21)		62%	29%	41%	73%	29%	97%	46%	0%		0%	29%	37%			
	P-CAMHS - % of therapeutic interventions started within 28 days following assessment by LPMHSS	National	Aug-21	82%		80%	✗	80.5% (Mar-21)	3rd (Mar-21)		100%	100%	100%	100%	93%	97%	91%	49%		1%	100%	82%			
	S-CAMHS - % of Routine Assessment by SCAMHS undertaken within 28 days from receipt of referral	Local	Aug-21	32%		80%	✗				98%	79%	62%	58%	60%	56%	53%	48%		44%	29%	32%			
	% residents in receipt of CAMHS to have a valid Care and Treatment Plan (CTP)	National	Aug-21	65%		90%	✗	84.6% (Mar-21)	5th (Mar-21)		81%	82%	81%	82%	83%	84%	82%	82%		81%	81%	65%			
Mental Health	% of mental health assessments undertaken within (up to and including) 28 days from the date of receipt of referral (over 18 years of age)	National	Aug-21	100%	80%	80%	✓	73.9% (Mar-21)	1st (Mar-21)		97%	99.5%	98%	99%	96%	98%	97%	97%		99%	98%	100%			
	% of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS (over 18 years of age)	National	Aug-21	100%	80%	80%	✓	81.0% (Mar-21)	2nd (Mar-21)		94%	93%	98%	95%	95%	98%	97%	92%		99%	97%	100%			
	% patients waiting < 26 weeks to start a psychological therapy in Specialist Adult Mental Health	National	Aug-21	100%	95%	95%	✓	61.3% (Mar-21)	1st (Mar-21)		99%	99.7%	100%	100%	100%	100%	100%	100%		100%	100%	100%			
	% residents in receipt of secondary MH services (all ages) who have a valid care and treatment plan (CTP)	National	Aug-21	84%	90%	90%	✓	85.3% (Mar-21)	2nd (Mar-21)		90%	91%	91%	89%	91%	91%	91%	91%		88%	88%	84%			
Self harm	Rate of hospital admissions with any mention of intentional self-harm of children and young people (aged 10-24 years)	National	2019/20	3.29	Annual ↓			3.97 (2019/20)	4th (2019/20)																
Dementia	% of people with dementia in Wales age 65 years or over who are diagnosed (registered on a GP QOF register)	National	2019/20	56.3%	Annual ↑			53.1% (2019/20)	2nd (2019/20)																