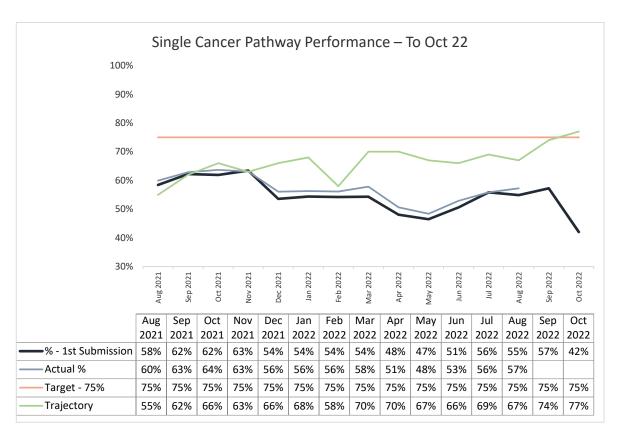


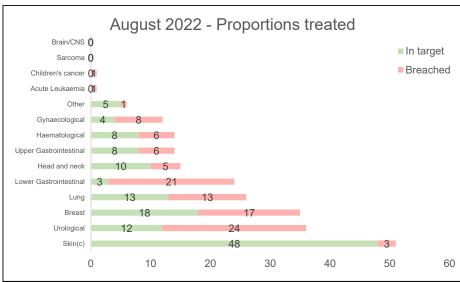
Performance & Finance Committee Cancer Update

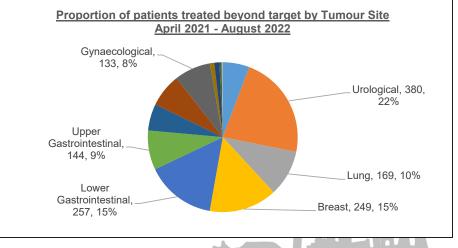
November 2022



Performance



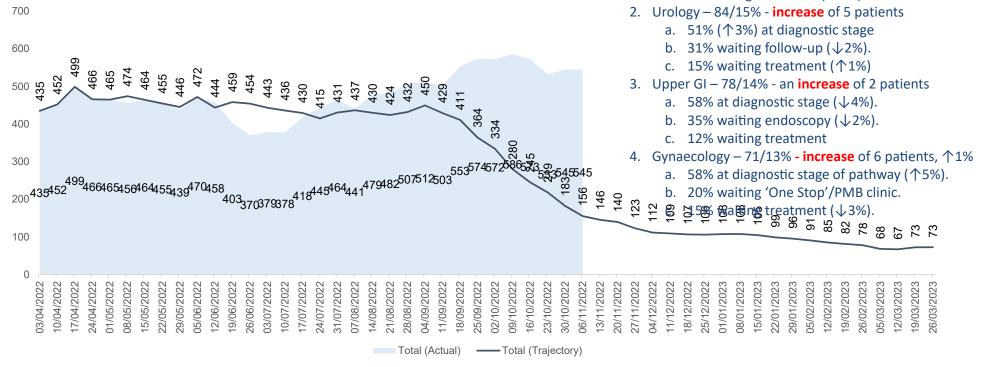




Backlog Trajectories

- Total volume 2% higher than this time last = 54 patients
- Backlog is now 545.
- The top 4 tumour sites with backlog are:
- 1. Lower GI 169/31% a decrease of 19 patients, ($\sqrt{3}\%$).
 - a. 70% at diagnostic stage (\downarrow 2%).
- b. 38% waiting endoscopy (↑3%).

All Sites - Backlog Trajectory v Actual reported totals. 10% waiting treatment (\$\sqrt{1}\%)





Overview – demand (new suspicions of cancer)

New Suspicion of Cancer	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22
Acute Leukaemia	4	0	2	2	2	1	0	2	0	1	2	1	0	0	1	3	1	1	1	0	0
Brain CNS	4	2	5	7	6	7	6	4	5	4	0	2	5	4	5	5	0	7	5	11	14
Children's Cancer	0	4	0	0	1	1	0	0	0	1	3	1	1	2	2	1	7	10	8	4	8
Breast	172	184	198	239	226	239	211	177	146	242	224	223	158	192	181	171	143	198	179	158	166
Gynaecological	140	180	183	215	203	224	234	239	201	225	197	197	168	185	198	218	192	0	202	209	269
Haematological	21	9	23	20	23	18	25	24	15	15	25	13	15	13	5	18	10	25	26	13	15
Head & Neck	103	122	149	171	195	183	192	193	152	162	145	166	119	135	167	176	170	0	154	201	218
Lower GI	222	272	268	342	362	343	350	385	330	424	373	354	361	361	330	381	342	501	453	543	502
Lung	36	27	38	50	60	48	51	49	43	55	47	38	32	49	51	39	49	0	52	88	86
Other	74	58	67	73	67	75	102	90	49	58	53	58	42	70	54	65	57	70	61	83	85
Sarcoma	55	65	57	59	81	59	71	67	63	68	42	45	35	48	44	53	16	18	22	23	34
Skin	224	262	269	336	320	322	359	407	303	363	285	303	234	252	268	360	348	390	351	339	428
Upper GI	142	159	175	229	189	195	256	255	256	241	289	228	214	260	237	242	189	292	246	272	313
Urological	143	131	160	189	145	156	157	170	179	146	136	142	133	137	120	156	118	130	138	148	203
Monthly Totals	1340	1475	1594	1932	1880	1871	2014	2062	1742	2005	1821	1771	1517	1708	1663	1888	1642	1642	1898	2092	2341
Quarterly Totals	JI .							5818		8.8% increase between same quarter 21/22							6331				



PTL Comparison Nov-21 to Nov 22

Cancer PTL - 19th November 2021

	Days W -								
Tumour Site	↓ 0-10	11-20	21 - 31	32 - 42	43 - 52	53 - 62	63 - 100	> 100	Grand Total
Lower Gastrointestinal	51	107	130	93	83	58	165	142	829
Breast	100	65	86	86	66	12	34	15	464
Gynaecological	71	46	74	48	46	23	38	18	364
Upper Gastrointestinal	52	89	64	31	28	14	33	29	340
Skin	114	70	69	22	19	7	27	10	338
Urological	45	42	33	25	20	11	67	75	318
Other	118	14	14	6	7	2	3	1	165
Head and Neck	43	20	19	12	10	8	17	13	142
Lung	4	6	10	13	8	9	23	21	94
Sarcoma	7	7	12	4	2	2	5	1	40
Haematological	5	6	2	4	4		9	10	40
Brain/CNS						1		2	3
Children's Cancer		1	1						2
Unknown Primary					1				1
Grand Total	610	473	514	344	294	147	421	337	3140

Cancer PTL - 10th November 2022

		1							
Tumour Site	0 - 10	11 - 20	21 - 31	32 - 42	43 - 52	53 - 62	63 - 100	>100	Grand Total
Lower Gastrointestinal	89	100	149	86	91	72	132	83	802
Gynaecological	66	60	102	69	58	29	59	31	474
Skin	75	93	126	48	22	19	57	24	464
Upper Gastrointestinal	50	69	86	50	35	25	51	43	409
Urological	48	26	33	19	18	11	53	45	253
Head and Neck	63	37	48	19	26	5	21	10	229
Breast	42	20	21	12	12	3	18	7	135
Other	66	29	14		5	4	8	3	129
Lung	16	10	14	12	8	12	22	19	113
Haematological	6	1	2	2	1	2	9	20	43
Sarcoma	2	5	8	2	6	5	4	7	39
Children's Cancer	3	2		2		1			8
Brain/CNS		1	1			1			3
Grand Total	526	453	604	321	282	189	434	292	3101

- Change in overall volume 1.2% Reduction
- Biggest change by tumour site –

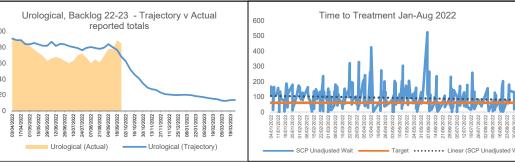
Tumour Site	+/-	% Change
Lower Gastrointestinal	-27.00	-3.3%
Breast	-329.00	-70.9%
Gynaecological	110.00	30.2%
Upper Gastrointestinal	69.00	20.3%
Skin	126.00	37.3%
Urological	-65.00	-20.4%
Other	-36.00	-21.8%
Head and Neck	87.00	61.3%
Lung	19.00	20.2%
Sarcoma	-1.00	-2.5%
Haematological	3.00	7.5%
Brain/CNS	0.00	0.0%
Children's Cancer	6.00	300.0%
Unknown Primary	-1.00	-100.0%
Grand Total	-39.00	-1.2%

- Volume > 62 days:
 - 2021 758
 - 2022 726
- > 100 days
 - 2021 337
 - 2022 292 (**13**%)



Key Tumour Sites – Urology, incl. NOP compliance

Indicator (see 'Metric Methodology')		Jul-22	Jun-22	May-22	Apr-22	Jul-21	Long Term Trend (24 Months)
Total Patients Treated			27	47	30	29 ⊎ -6	~~~\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Total Patients Treated, Downgraded or Deceased		119 ⊎ -21	140	143	123	152 ⊎ -33	~~~~\\
Percentage Straight to Test	rcentage Straight to Test		61.9%	43.8%	50.6%	57.9% ♠ 12.3%	~~~~
First Appointment (Where Recorded) Within 10 Days	10	32% n 15.6%	16.5%	31.2%	26.7%	17.3% • 14.8%	~~~~
First Diagnostic Within 21 Days	21	51.3% (19.1%	32.1%	36.4%	40.7%	30.3% n 21.0%	<u></u>
Informed they <u>DO NOT</u> have Car Within 28 Days			30.1%	14.3%	31.9%	23.8% • 11.8%	
Informed they <u>DO</u> have Cancer, 28 Days	Within	6.8% ⊎ -1.8%	8.6%	5.1%	5.8%	5.0% • 1.8%	M
Treatment Within 21 Days of DT	73.9% № -3.9%	77.8%	66.0%	66.7%	62.1% ♠ 11.8%	\sim	
First Definitive Treatment Within Days	60.9% № 16.4%	44.4%	34.0%	36.7%	34.5% ♠ 26.4%	√ √√√	
Urological, Backlog 22-2	ıal	600	Time to	o Treatment	Jan-Aug 2022		



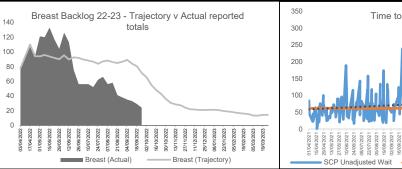
- Urology is the main contributor to poor overall performance, with the largest volume of breaches. This reflects the plan for backlog removal.
- Is the 2nd largest proportion of patients in backlog that has been increasing over recent weeks.
- Diagnostic waits are a main factor for poor performance, TURBT accounting for a significant proportion (TURBT no longer a 'stop clock' for all patients).
- TURBT low risk patients now have this procedure at NPTH.
 High risk patients needing access at Morriston that impacts pathway due to unscheduled care pressures.
- Capacity for RALP at UHW is an issue needs further engagement with C&VUHB colleagues. Meeting arranged for end of November
- Complex, non-Swansea Bay referrals

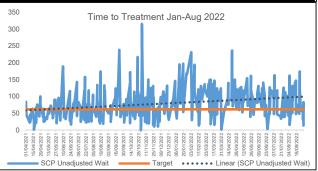
Improvement Plan

- Development of Enhanced Recovery Unit at NPTH will reduce demand for "Morriston only" lists.
- Weekly focussed meetings with Service, including consultant urologist and pathology input.
- Increased capacity for 1st outpatient and follow-up appointments to reduce time to DDT.

Key Tumour Sites – Breast, incl. NOP compliance

SBUHB	Indicator (see 'Metric Methodology')	Jul-22	Jun-22	May-22	Apr-22	Jul-21 Long Term Trend (24 Months)
Breast, S	Total Patients Treated	24 ⊎ -6	30	24	20	40 🖖
-1	Total Patients Treated, Downgraded or Deceased	187 ⊎ -33	220	152	145	222 🖖
Dashboard	Percentage Straight to Test	96.1% № -2.5%	98.5%	98.6%	97.0%	96.5% 100 -0.4%
	First Appointment (Where Recorded) Within 10 Days	9% № 5.3%	3.2%	5.9%	2.1%	2.7% n 5.9%
Compliance	First Diagnostic Within 21 Days 21	12.8% • 4.7%	8.2%	12.5%	8.3%	11.3%
	Informed they <u>DO NOT</u> have Cancer, Within 28 Days	3.8% 🀬 3.8%	0.0%	3.4%	8.0%	11.2% ⊎ -7.3%
SCP	Informed they <u>DO</u> have Cancer, Within 28 Days	38.5% ⋒ 16.6%	21.9%	6.9%	8.0%	8.9% n 29.5%
e: DU	Treatment Within 21 Days of DTT	50.0% ♠ 26.7%	23.3%	29.2%	5.0%	62.5% U -12.5%
Source:	First Definitive Treatment Within 62 Days	37.5% ♠ 17.5%	20.0%	20.8%	10.0%	67.5% ⊎ -30.0%
-	Breast Backlog 22-23 - Trajectory v	Actual reporte	d	350	Time t	to Treatment Jan-Aug 2022





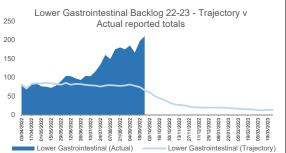
- Significant progress made within backlog this year. Is ahead of profile, now 10 patients above end of March 2023 trajectory.
- Breaches are primarily due to waits to the triple assessment clinic or for surgery at Morriston - waits are reducing.
- One-stop clinics maintained 100%.
- · Time to Treatment waits are reducing.
- Recent recruitment to Consultant Surgeon (x2) and Radiologist (x1.5) vacancies.

Improvement Plan

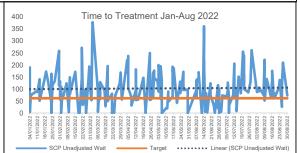
- Addition Mammogram machine to be in commission by end of Q3.
- WLI's are being undertaken to reduce backlog and improve waits until the additional mammogram is in service (approx 60 sessions since Feb-22 via 6-day working).
- Imminent commissioning of Enhanced Recovery Unit at Singelton Hospital will reduce demand for Morriston theatres/bed capacity for complex surgery/high risk patients.

Key Tumour Sites – Lower GI, incl. NOP compliance

Indicator (see 'Metric Methodology')	Jul-22	Jun-22	May-22	Apr-22	Jul-21	Long Term Trend (24 Months)	
Total Patients Treated		25 ⊎ -2	27	24	28	41 ⊎ -16	W.~~
Total Patients Treated, Downgraded or Deceased		419 ♠ 63	356	342	264	359 ♠ 60	~~~
Percentage Straight to Test		73.4% ♠ 8.3%	65.1%	64.3%	53.2%	57.0% • 16.4%	~~~
First Appointment (Where Recorded) Within 10 Days	10	12% ⊎ -2.9%	14.8%	12.3%	22.1%	18.6% ⊎ -6.7%	^
First Diagnostic Within 21 Days	21	15.8% ⊎ -3.3%	19.1%	20.8%	18.9%	31.8% ⊎ -16.0%	V~\
Informed they <u>DO NOT</u> have Cancer, Within 28 Days		11.6% ⊎ -13.2%	24.8%	22.6%	26.8%	15.2% ⊎ -3.6%	~~~
Informed they <u>DO</u> have Cancer, Within 28 Days		4.2% ⋒ 1.2%	3.0%	5.2%	3.9%	5.7% ⊎ -1.5%	\
Treatment Within 21 Days of DT	24.0% ⊎ -31.6%	55.6%	29.2%	46.4%	48.8% ⊎ -24.8%	~~~\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
First Definitive Treatment Within Days	24.0% ⊎ -13.0%	37.0%	33.3%	25.0%	26.8% ⊎ -2.8%	M	



Source: DU SCP Compliance Dashboard – LGI, SBUHB



- Significant increase in referrals rates resulting in increased breach volumes.
- Has the highest proportion of patients in backlog.
- Operating capacity for complex patients is constrained at Morriston Hospital.
- High demand for Endoscopy causing diagnostic delays plans in place to reduce waits to 2-3 weeks by end of December.
- Complex, non-SBUHB pelvic cases requiring increased capacity across multiple tumour sites.

Improvement Plan

- Working with WCN and DU to understand variation in demand / conversion rates.
- Working with Industry to map pathway (Amgen)
- Pathway redesign with Primary Care to reduce delays and support STT pathways. This will further reduce SCP waits for Endoscopy.
- Reducing variation between Surgical and Gastroenterology pathways to DDT
- Imminently commission Enhanced Recovery Unit at Singelton Hospital will reduce demand for Morriston theatres/bed capacity for complex surgery/high risk patients
- Swift response to change in referral guidance to appropriately manage demand.