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Swansea Bay University  
Health Board



<b>Meeting Date</b>	<b>21<sup>st</sup> December 2021</b>	<b>Agenda Item</b>	<b>4.1</b>
<b>Report Title</b>	<b>Quality &amp; Safety 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 in delivering key local performance measures as well as the national measures outlined in the 2021/22 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.</p> <p>Historically Welsh Government publish a revised NHS Wales Delivery Framework on an annual basis. In 2021/22 a new Single Outcomes Framework for Health and Social Care was due to be published however, development of the framework was delayed due to the COVID19 pandemic. The updated National Delivery Framework 2021/22 was published in October 2021, with the updated framework measures being presented at the November 2021 Management Board meeting. Full updates outlined within the Delivery Framework will be reflected in the December 2021 Integrated Performance Report. The intention of the updated integrated framework measures is to demonstrate how patients and populations are better off through the delivery of services and allowing a different balance across our traditional services.</p> <p>The Health Board continues to refine the organisation's annual plan and develop recovery trajectories. Trajectories for recovery of unscheduled care and cancer performance were submitted for discussion at the September Performance and Finance Committee. Performance against these trajectories continue to be measured.</p> <p><b>Key high level issues to highlight this month are as follows:</b></p> <p><b>2021/22 Delivery Framework</b></p>		

	<p><b>COVID19-</b> The number of new cases of COVID19 has seen an decrease in November 2021, with 8,247 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 in early December 2021.</p> <p><b>Unscheduled Care-</b> Demand for emergency department care within Swansea Bay University (SBU) Health Board increased from January 2021 to June 2021 but has since then been on modest reduction trajectory. Attendances have decreased in October 2021 to 10,138 from 10,737 in October 2021. The Health Board's performance against the 4-hour measure improved from 71.96% in October 2021 to 73.46% in November 2021 and correspondingly the number of patients waiting over 12 hours in Accident and Emergency (A&amp;E) decreased in month also.</p> <p>Revised trajectories will be discussed at the Health Board for adoption in relation to UEC, Cancer and Planned Care.</p> <p><b>Planned Care-</b> November 2021 saw a 2% in-month increase in the number of patients waiting over 26 weeks for a new outpatient appointment. Additionally, the number of patients waiting over 36 weeks increased by 1.8% to 37,064. There has been an increase in the number of referrals received by secondary care in November 2021 up 7% to 11,238 on October 2021. Therapy waiting times have increased in November 2021 to 629 from 414 in October.</p> <p><b>Cancer-</b> Both September 2021 and October 2021 saw 62% performance against the Single Cancer Pathway measure of patients receiving definitive treatment within 62 days (measure reported a month in arrears). The backlog of patients waiting over 63 days has decreased in November 2021 to under 600 for the first time since June 2021.</p> <p><b>Mental Health-</b> performance against the Mental Health Measures continues to be maintained. All Welsh Government targets were achieved in September 2021. Psychological therapies within 26 weeks continue to be maintained at 100%.</p> <p><b>Child and Adolescent Mental Health Services (CAMHS)-</b>Access times for crisis performance has improved by 2% to 97% in October 2021. Neurodevelopmental Disorders (NDD) access times within 26 weeks continues to be a challenge, with performance the same in both September 2021 and October 2021 at 34% against a target of 80%. The committee will receive a separate update report on CAMHS at the meeting.</p> <p><b>Serious Incidents closures-</b> In November 2021, performance against the 80% target of submitting closure forms within 60 working days was 0%.</p>
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	<b>Patient Experience-</b> A new feedback system was introduced in March 2021, which has resulted in no data being reported for April 2021 as the system, was not fully operational until the end of April 2021. November 2021 data is included in this report showing 94% satisfaction through #3,194 surveys completed.			
<b>Specific Action Required</b>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>	<b>Approval</b>
	✓		✓	
<b>Recommendations</b>	Members are asked to: <ul style="list-style-type: none"> <li>• <b>NOTE-</b> current Health Board performance against key measures and targets.</li> </ul>			

# QUALITY & SAFETY 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 was due to be published but was delayed due to the COVID19 pandemic. Welsh Government has confirmed that during 2021/22 the Single Outcomes Framework will be developed for adoption in 2022/23 and that the 2020/21 measures will be rolled over into 2021/22.

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

- **Quadruple Aim 1:** People in Wales have improved health and well-being with better prevention and self-management
- **Quadruple Aim 2:** People in Wales have better quality and more accessible health and social care services, enabled by digital and supported by engagement
- **Quadruple Aim 3:** The health and social care workforce in Wales is motivated and sustainable
- **Quadruple Aim 4:** Wales has a higher value health and social care system that has demonstrated rapid improvement and innovation, enabled by data and focused on outcomes

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

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

**Appendix 1** provides an overview of the Health Board's latest performance against the Delivery Framework measures along with key local quality and safety measures. A number of local COVID-19 specific measures have been included in this iteration of the performance report.

The traditional format for the report includes identifying actions where performance is not compliant with national or local targets as well as highlighting both short term and long terms risks to delivery. However, due to the operational pressures within the Health Board relating to the COVID-19 pandemic, it was agreed that the narrative update would be omitted from this performance report until operational pressures significantly ease. Despite a reduction in the narrative contained within this report, considerable work has been undertaken to include additional measures that aid in describing how the healthcare systems has changed as a result of the pandemic.

### **3. GOVERNANCE AND RISK ISSUES**

**Appendix 1** of this report provides an overview of how the Health Board is performing against the National Delivery measures and key local measures. Mitigating actions are listed where performance is not compliant with national or local targets as well as highlighting both short term and long terms risks to delivery.

### **4. FINANCIAL IMPLICATIONS**

At this stage in the financial year there are no direct impacts on the Health Board's financial bottom line resulting from the performance reported herein.

### **5. RECOMMENDATION**

Members are asked to:

- **NOTE-** current Health Board performance against key measures and targets

Governance and Assurance		
Link to Enabling Objectives (please choose)	Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities	
	Partnerships for Improving Health and Wellbeing	<input checked="" type="checkbox"/>
	Co-Production and Health Literacy	<input checked="" type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input checked="" type="checkbox"/>
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	<input checked="" type="checkbox"/>
	Partnerships for Care	<input checked="" type="checkbox"/>
	Excellent Staff	<input checked="" type="checkbox"/>
	Digitally Enabled Care	<input checked="" type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input checked="" type="checkbox"/>
Health and Care Standards		
(please choose)	Staying Healthy	<input checked="" type="checkbox"/>
	Safe Care	<input checked="" type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input checked="" type="checkbox"/>
	Timely Care	<input checked="" type="checkbox"/>
	Individual Care	<input checked="" type="checkbox"/>
	Staff and Resources	<input checked="" type="checkbox"/>
Quality, Safety and Patient Experience		
<p>The performance report outlines performance over the domains of quality and safety and patient experience, and outlines areas and actions for improvement. Quality, safety and patient experience are central principles underpinning the National Delivery Framework and this report is aligned to the domains within that framework.</p> <p>There are no directly related Equality and Diversity implications as a result of this report.</p>		
Financial Implications		
At this stage in the financial year there are no direct impacts on the Health Board's financial bottom line resulting from the performance reported herein.		
Legal Implications (including equality and diversity assessment)		
A number of indicators monitor progress in relation to legislation, such as the Mental Health Measure.		
Staffing Implications		
A number of indicators monitor progress in relation to Workforce, such as Sickness and Personal Development Review rates. Specific issues relating to staffing are also addressed individually in this report.		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
<p>The '5 Ways of Working' are demonstrated in the report as follows:</p> <ul style="list-style-type: none"> <li><b>Long term</b> – Actions within this report are both long and short term in order to balance the immediate service issues with long term objectives.</li> </ul>		

- **Prevention** – the NHS Wales Delivery framework provides a measurable 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 Groups leads are key in identifying performance issues and identifying actions to take forward.

<b>Report History</b>	The last iteration of the Quality & Safety Performance Report was presented to Quality & Safety committee in November 2021. This is a routine monthly report.
<b>Appendices</b>	Appendix 1: Quality & Safety performance report



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# Appendix 1- Quality & Safety Performance Report

## December 2021





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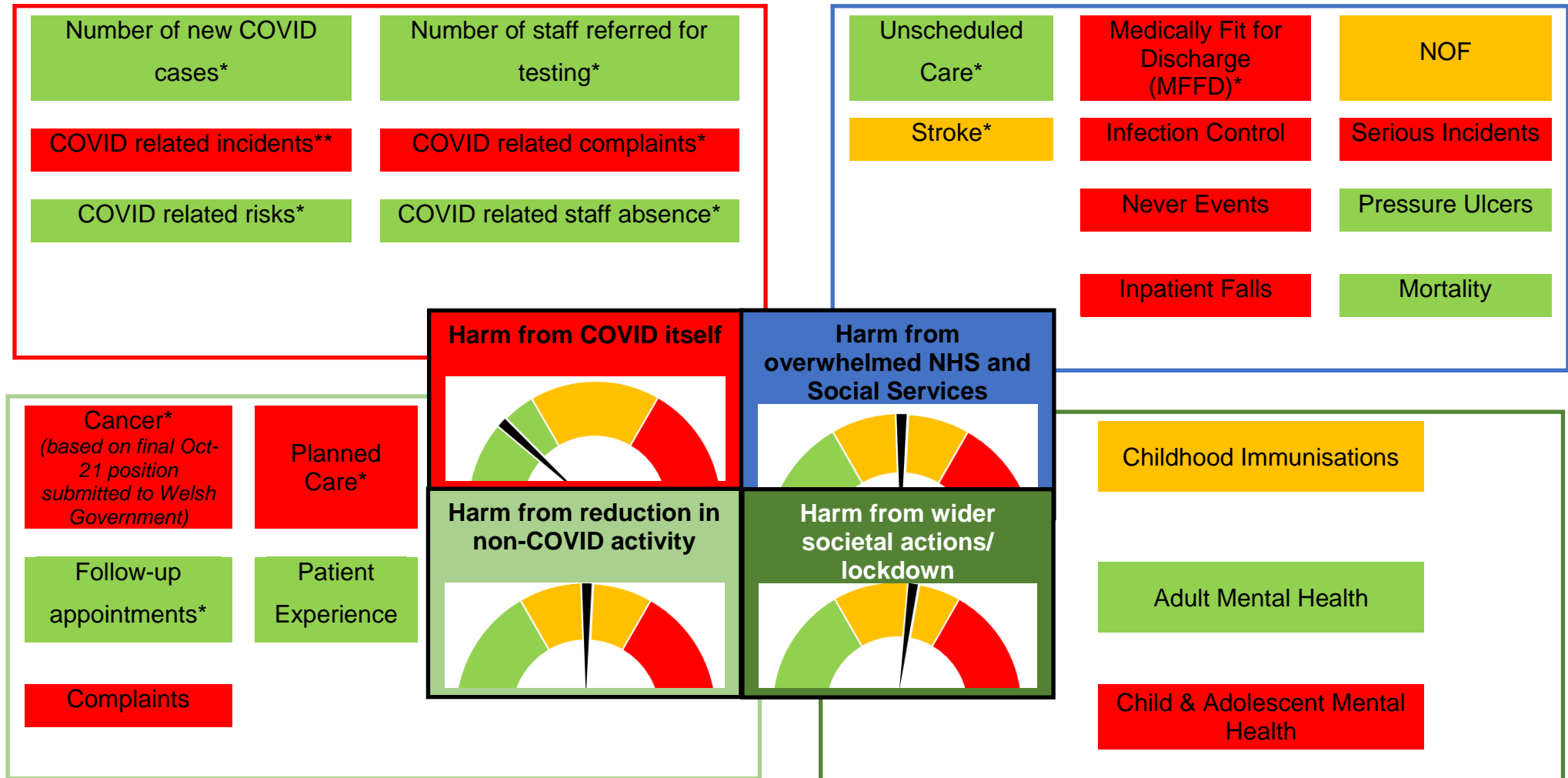
## 1. OVERVIEW- KEY PERFORMANCE INDICATORS SUMMARY

Key messages for consideration of the committee arising from the detail in this report below are: -

- Q&S report detail is reduced to reflect data capture currently available.
- 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%. Access times for routine CAMHS still continue to not meet the required targets, with a detailed discussion scheduled at Performance and Finance Committee scheduled for the December 2021 meeting. Crisis performance has improved to 97% in month.
- Demand for emergency department care within Swansea Bay University (SBU) Health Board increased from January 2021 to June 2021 but has since then been on modest reduction trajectory. Attendances have decreased in November 2021 to 10,138 from 10,737 in October 2021. The Health Board's performance against the 4-hour measure improved from 71.96% in October 2021 to 73.46% in November 2021 and correspondingly the number of patients waiting over 12 hours in Accident and Emergency (A&E) decreased in month also.
- Planned care system is still challenging and November 2021 saw a 2% in-month increase in the number of patients waiting over 26 weeks for a new outpatient appointment. In November 2021, there were 37,064 patients waiting over 36 weeks which is a 1.8% in-month increase from October 2021.
- There has been an increase in the number of referrals received by secondary care in November 2021 of 7% over October 2021
- Therapy waiting times have increased in November 2021 to 629 patients waiting over 14 weeks.
- September 2021 and October 2021 saw 62% performance against the Single Cancer Pathway measure of patients receiving definitive treatment within 62 days. The backlog of patients waiting over 63 days has decreased in November 2021, with a further reduction projected for December 2021. November's figures are in the process of being validated at the time of writing this report.
- Concern response performance surpassed the national target of 80% in August 2021 but has reduced slightly in September 2021 to 75%.
- The number of formal complaints received in September 2021 was the same as in August 2021 at 115.
- Health Board Friends & Family patient satisfaction level in November 2021 was 94% and 3,194 surveys were completed.
- There were eight Serious Incidents (SI's) reported to Welsh Government in November 2021.
- There was one new Never events reported for November 2021 relating to a surgical prosthesis incident.
- Fractured neck of femur performance in October 2021 continues to be broadly at Welsh National levels (see detail below) and showing an improved position compared with March 2019-2020 for most indicators.

## 2. 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

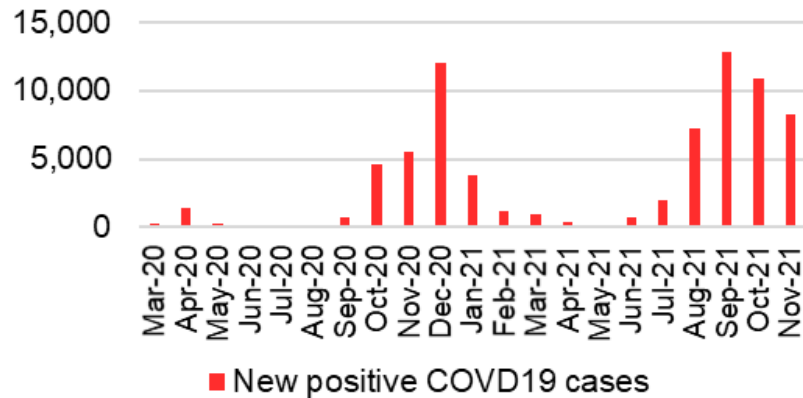
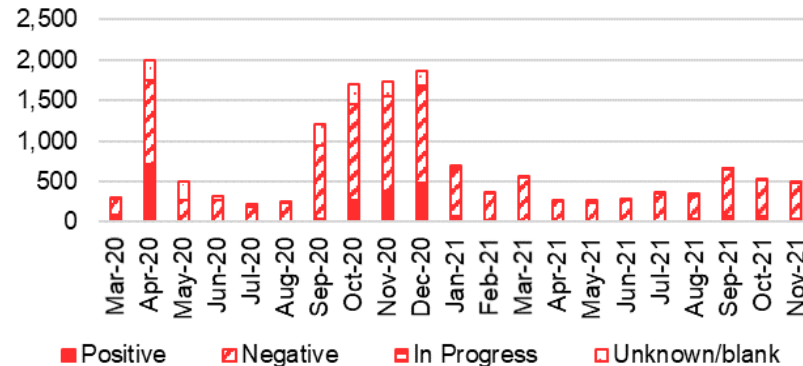
\*RAG status based on in-month movement in the absence of local profiles

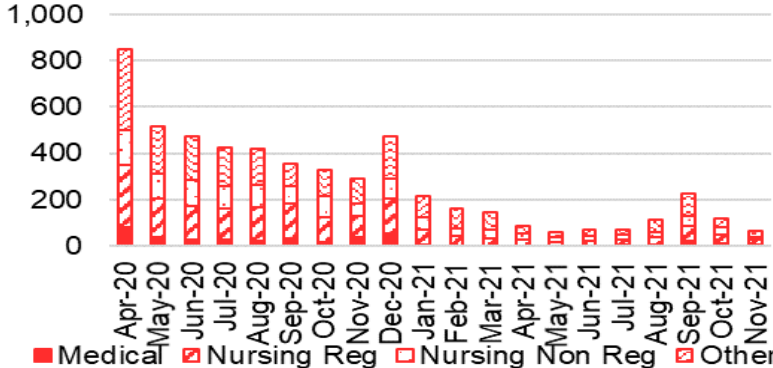
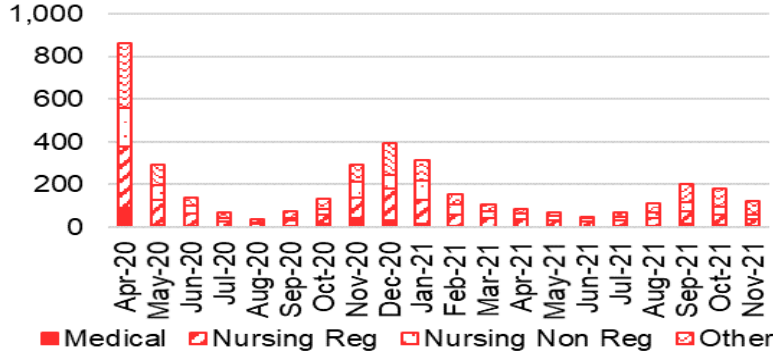
### 3. HARM QUADRANT- HARM FROM COVID ITSELF

#### Overview

Harm quadrant- Harm from Covid itself																	
Measure	Locality	National/ Local Target	Internal profile	Trend	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21
Number of new COVID19 cases*	HB Total				5,525	11,976	3,759	1,208	907	406	189	708	1,946	7,177	12,839	10,918	8,247
Number of staff referred for Antigen Testing	HB Total				1,741	1,864	684	366	568	274	267	281	367	406	673	524	494
Number of staff awaiting results of COVID19 test*	HB Total				41 (as at 06/12/20)	99 (as at 05/01/21)	78 (as at 07/02/21)	69 (as at 06/03/21)	2 (as at 11/04/21)	0	0	0	0	0	0	0	0
Number of COVID19 related incidents*	HB Total				141	127	84	63	53	74	67	23	24	36	36	73	
Number of COVID19 related serious incidents*	HB Total				1	0	0	0	0	0	0	0	0	0	0	0	
Number of COVID19 related complaints*	HB Total				50	83	106	131	98	38	13	16	4	6	3	4	14
Number of COVID19 related risks*	HB Total				7	10	3	3	3	2	2	1	1	1	0	0	0
Number of staff self isolated (asymptomatic)*	Medical				36	55	7	2	3	2	1	3	7	5	20	13	6
	Nursing Registered				93	152	61	40	32	28	18	21	19	35	67	38	20
	Nursing Non Registered				56	81	57	33	35	25	20	18	24	21	43	28	12
	Other				106	187	93	85	75	29	22	28	21	54	97	41	27
Number of staff self isolated (symptomatic)*	Medical				41	34	16	5	1	1	1	2	3	7	15	10	5
	Nursing Registered				97	145	112	52	44	39	33	23	28	36	57	51	34
	Nursing Non Registered				77	68	88	49	29	24	20	18	18	27	44	34	20
	Other				79	147	100	50	34	23	17	7	18	44	88	85	61
% sickness*	Medical				7.3%	8.3%	2.2%	0.7%	0.4%	0.3%	0.2%	0.5%	0.9%	1.3%	3.6%	2.4%	1.2%
	Nursing Registered				4.7%	7.4%	4.3%	2.3%	1.9%	1.6%	1.2%	1.1%	1.4%	1.8%	3.1%	2.2%	1.3%
	Nursing Non Registered				6.5%	7.3%	7.0%	3.9%	3.1%	2.4%	1.9%	1.8%	1.8%	2.3%	4.3%	3.1%	1.6%
	Other				3.0%	5.4%	3.1%	2.2%	1.7%	0.8%	0.6%	0.6%	0.7%	1.6%	2.9%	2.0%	1.4%
	All				4.4%	6.5%	4.0%	2.4%	1.9%	1.3%	1.0%	0.9%	1.1%	1.7%	3.2%	2.3%	1.4%

## Updates on key measures

COVID TESTING		
Description	Current Performance	Trend
<p>1. Number of new COVID19 cases in Swansea Bay population area</p> <p>2. Number of staff referred for Antigen testing</p>	<p><b>1. Number of new COVID cases</b> In November 2021, there were an additional 8,247 positive cases recorded bringing the cumulative total to 73,354 in Swansea Bay since March 2020.</p>	<p><b>1. Number of new COVID19 cases for Swansea Bay population</b></p>  <p>■ New positive COVID19 cases</p>
	<p><b>2. Staff referred for Antigen testing</b> The cumulative number of staff referred for COVID testing between March 2020 and November 2021 is 14,969 of which 16% have been positive (Cumulative total).</p>	<p><b>2. Outcome of staff referred for Antigen testing</b></p>  <p>■ Positive ■ Negative ■ In Progress ■ Unknown/blank</p>

COVID RELATED STAFF ABSENCE																																																																																																																														
Description		Current Performance							Trend																																																																																																																					
Staff absence due to COVID19		The following data is based on the mid-month position and broken down into the categories requested by Welsh Government.																																																																																																																												
	1.Number of staff self-isolating (asymptomatic)	1. & 2. Number of staff self-isolating (asymptomatic and symptomatic) Between October and November 2021, the number of staff self-isolating (asymptomatic) reduced from 120 to 65 and the number of staff self-isolating (symptomatic) reduced from 180 to 120. In November 2021, “other staff” had the largest number of self-isolating staff who are asymptomatic and the largest number of self-isolating staff who are symptomatic.																																																																																																																												
	2.Number of staff self isolating (symptomatic)																																																																																																																													
	3.% staff sickness	3. % Staff sickness The percentage of staff sickness absence due to COVID19 has decreased from 2.3% in October 2021 to 1.4% in November 2021.																																																																																																																												
		<div>1.Number of staff self isolating (asymptomatic)</div>  <div>2.Number of staff self isolating (symptomatic)</div>  <div>3.% staff sickness</div> <table><tr><th></th><th>Jul-20</th><th>Aug-20</th><th>Sep-20</th><th>Oct-20</th><th>Nov-20</th><th>Dec-20</th><th>Jan-21</th><th>Feb-21</th><th>Mar-21</th><th>Apr-21</th><th>May-21</th><th>Jun-21</th><th>Jul-21</th><th>Aug-21</th><th>Sep-21</th><th>Oct-21</th><th>Nov-21</th></tr><tr><td>Medical</td><td>2.8%</td><td>2.5%</td><td>4.0%</td><td>3.2%</td><td>7.3%</td><td>8.3%</td><td>2.2%</td><td>0.7%</td><td>0.4%</td><td>0.3%</td><td>0.2%</td><td>0.5%</td><td>0.9%</td><td>1.3%</td><td>3.6%</td><td>2.4%</td><td>1.2%</td></tr><tr><td>Nursing Reg</td><td>4.0%</td><td>4.0%</td><td>4.4%</td><td>3.8%</td><td>4.7%</td><td>7.4%</td><td>4.3%</td><td>2.3%</td><td>1.9%</td><td>1.6%</td><td>1.2%</td><td>1.1%</td><td>1.4%</td><td>1.8%</td><td>3.1%</td><td>2.2%</td><td>1.3%</td></tr><tr><td>Nursing Non Reg</td><td>5.5%</td><td>5.2%</td><td>4.2%</td><td>6.0%</td><td>6.5%</td><td>7.3%</td><td>7.0%</td><td>3.9%</td><td>3.1%</td><td>2.4%</td><td>1.9%</td><td>1.8%</td><td>1.8%</td><td>2.3%</td><td>4.3%</td><td>3.1%</td><td>1.6%</td></tr><tr><td>Other</td><td>2.9%</td><td>2.7%</td><td>2.0%</td><td>2.5%</td><td>3.0%</td><td>5.4%</td><td>3.1%</td><td>2.2%</td><td>1.7%</td><td>0.8%</td><td>0.6%</td><td>0.6%</td><td>0.7%</td><td>1.6%</td><td>2.9%</td><td>2.0%</td><td>1.4%</td></tr><tr><td>All</td><td>3.6%</td><td>3.5%</td><td>3.2%</td><td>3.5%</td><td>4.4%</td><td>6.5%</td><td>4.0%</td><td>2.4%</td><td>1.9%</td><td>1.3%</td><td>1.0%</td><td>0.9%</td><td>1.1%</td><td>1.7%</td><td>3.2%</td><td>2.3%</td><td>1.4%</td></tr></table>																		Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Medical	2.8%	2.5%	4.0%	3.2%	7.3%	8.3%	2.2%	0.7%	0.4%	0.3%	0.2%	0.5%	0.9%	1.3%	3.6%	2.4%	1.2%	Nursing Reg	4.0%	4.0%	4.4%	3.8%	4.7%	7.4%	4.3%	2.3%	1.9%	1.6%	1.2%	1.1%	1.4%	1.8%	3.1%	2.2%	1.3%	Nursing Non Reg	5.5%	5.2%	4.2%	6.0%	6.5%	7.3%	7.0%	3.9%	3.1%	2.4%	1.9%	1.8%	1.8%	2.3%	4.3%	3.1%	1.6%	Other	2.9%	2.7%	2.0%	2.5%	3.0%	5.4%	3.1%	2.2%	1.7%	0.8%	0.6%	0.6%	0.7%	1.6%	2.9%	2.0%	1.4%	All	3.6%	3.5%	3.2%	3.5%	4.4%	6.5%	4.0%	2.4%	1.9%	1.3%	1.0%	0.9%	1.1%	1.7%	3.2%	2.3%	1.4%
	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21																																																																																																													
Medical	2.8%	2.5%	4.0%	3.2%	7.3%	8.3%	2.2%	0.7%	0.4%	0.3%	0.2%	0.5%	0.9%	1.3%	3.6%	2.4%	1.2%																																																																																																													
Nursing Reg	4.0%	4.0%	4.4%	3.8%	4.7%	7.4%	4.3%	2.3%	1.9%	1.6%	1.2%	1.1%	1.4%	1.8%	3.1%	2.2%	1.3%																																																																																																													
Nursing Non Reg	5.5%	5.2%	4.2%	6.0%	6.5%	7.3%	7.0%	3.9%	3.1%	2.4%	1.9%	1.8%	1.8%	2.3%	4.3%	3.1%	1.6%																																																																																																													
Other	2.9%	2.7%	2.0%	2.5%	3.0%	5.4%	3.1%	2.2%	1.7%	0.8%	0.6%	0.6%	0.7%	1.6%	2.9%	2.0%	1.4%																																																																																																													
All	3.6%	3.5%	3.2%	3.5%	4.4%	6.5%	4.0%	2.4%	1.9%	1.3%	1.0%	0.9%	1.1%	1.7%	3.2%	2.3%	1.4%																																																																																																													

### 3.1 HARM QUADRANT- HARM FROM OVERWHELMED NHS AND SOCIAL CARE SYSTEM




















#### 4.1 Overview

Measure	Locality	National/ Local Target	Internal profile	Trend	Unscheduled Care					Unscheduled Care							
					Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21
Fractured Neck of Femur (NOF)																	
Prompt orthogeriatric assessment- % patients receiving an assessment by a senior geriatrician within 72 hours of presentation	Morrison	75%			84.7%	86.0%	86.8%	87.6%	88.3%	89.7%	90.7%	91.0%	90.5%	88.2%	87.3%	88.0%	
Prompt surgery - % patients undergoing surgery by the day following presentation with hip fracture	Morrison	75%			51.8%	54.1%	55.5%	56.3%	56.2%	56.6%	57.2%	60.0%	59.5%	59.4%	58.4%	57.7%	
NICE compliant surgery - % of operations consistent with the recommendations of NICE CG124	Morrison	75%			69.6%	68.5%	70.3%	71.2%	70.5%	70.4%	70.1%	71.0%	71.2%	69.8%	69.4%	69.9%	
Prompt mobilisation after surgery - % of patients out of bed (standing or hoisted) by the day after operation	Morrison	75%			76.0%	74.3%	74.1%	74.1%	74.6%	75.4%	75.9%	76.0%	75.7%	74.4%	72.6%	71.1%	
Not delirious when tested- % patients (<4 on 4AT test) when tested in the week after operation	Morrison	75%			71.1%	73.5%	74.4%	75.2%	75.3%	75.4%	75.9%	76.0%	76.8%	77.7%	76.1%	76.8%	
Return to original residence- % patients discharged back to original residence, or in that residence at 120 day follow-up	Morrison	75%			75.9%	75.6%	73.7%	74.3%	70.7%	70.2%	71.3%	73.0%	68.4%	67.7%	66.1%		
30 day mortality - crude and adjusted figures, noting ONS data only correct after around 6 months	Morrison	12 month improvement trend			7.6%	8.4%	7.5%										
% of survival within 30 days of emergency admission for a hip fracture	HB Total	12 month improvement trend			67.9%	68.0%	65.3%	70.7%	59.6%	71.1%	72.1%	78.3%	84.8%	86.7%			

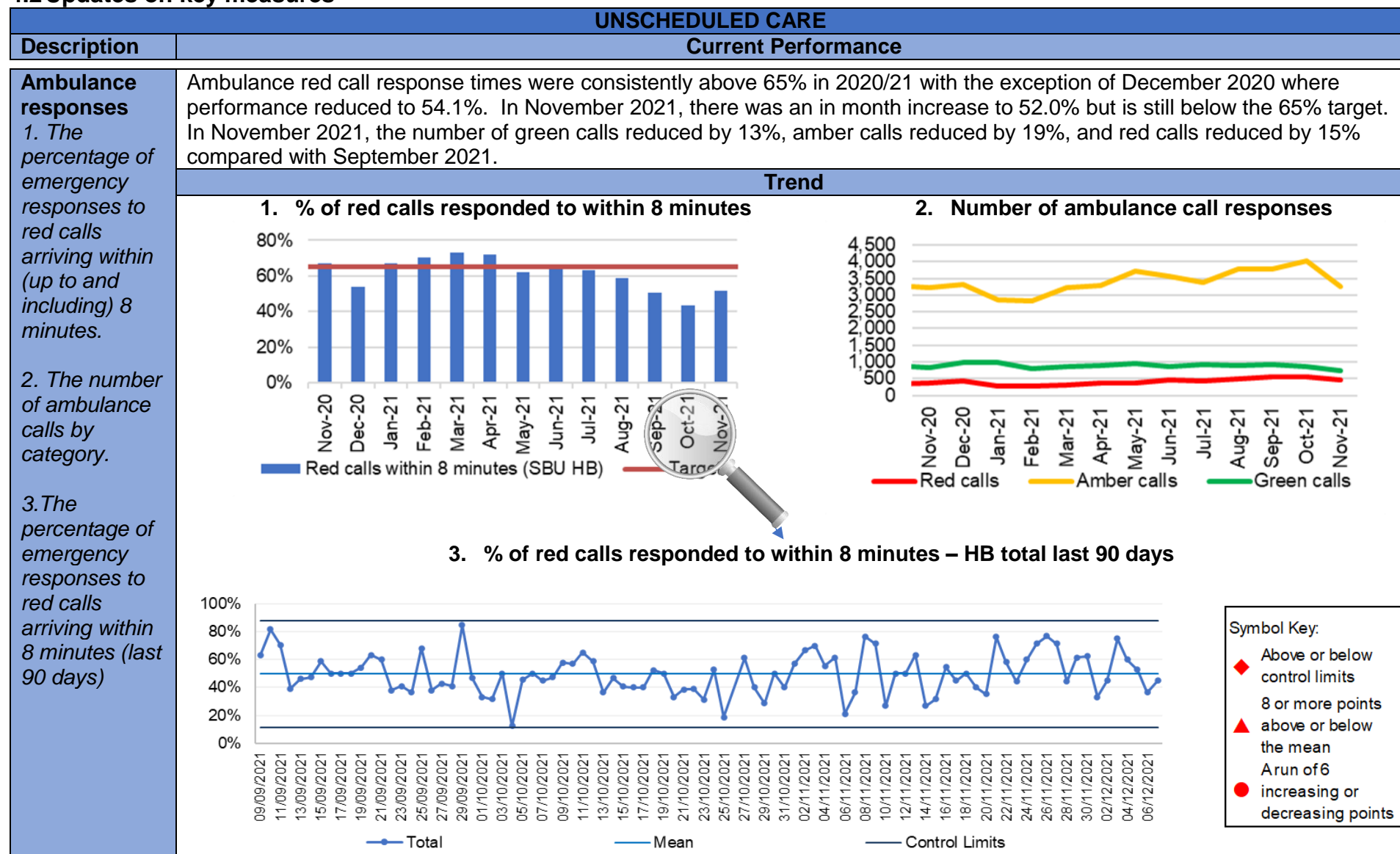


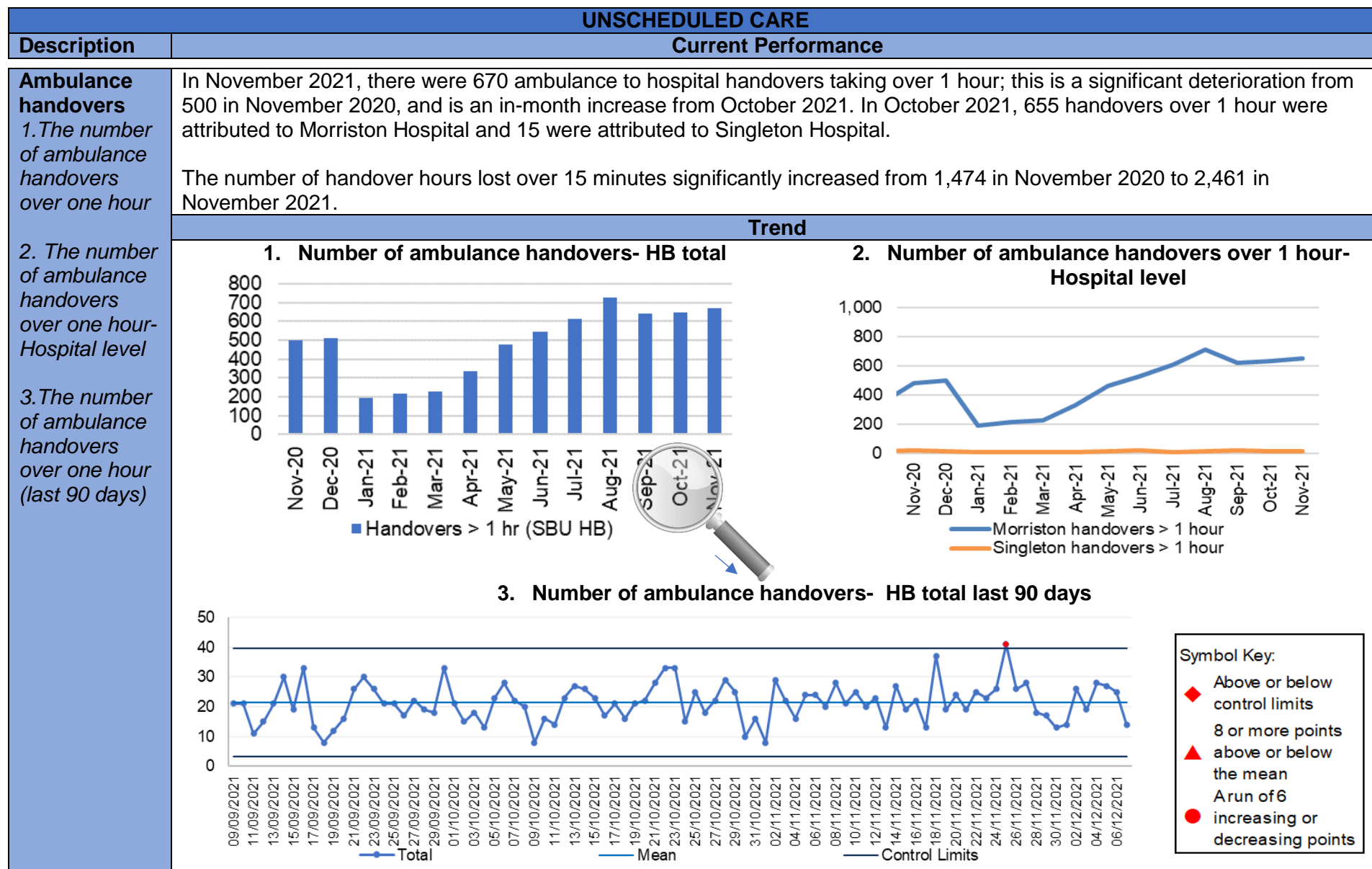
Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21
Healthcare Acquired Infections																	
Number of E.Coli bacteraemia cases	PCCS Community	12 month reduction trend	11		11	7	12	11	19	20	15	23	15	25	12	12	17
	PCCS Hospital		0		0	0	0	0	0	0	1	0	0	0	1	0	0
	MH&LD		0		0	0	0	0	0	0	0	0	0	0	0	0	0
	Morrison		3		2	2	3	3	5	5	8	2	3	4	5	5	3
	NPTH		1		1	0	1	0	1	2	2	1	3	2	2	1	0
	Singleton		2		2	3	2	3	3	5	0	2	2	3	1	1	2
	Total		17		16	12	18	17	28	32	26	28	23	34	21	19	22
Number of S.aureus bacteraemia cases	PCCS Community	12 month reduction trend	5		6	3	4	2	7	9	10	2	4	4	4	7	3
	PCCS Hospital		0		0	0	0	0	0	0	0	0	0	0	0	0	0
	MH&LD		0		0	0	0	0	0	0	0	0	0	0	0	0	0
	Morrison		3		3	1	5	4	2	2	1	3	3	4	8	9	0
	NPTH		1		1	1	0	0	0	0	0	0	0	1	0	0	0
	Singleton		2		3	4	0	3	2	2	4	2	4	4	4	2	1
	Total		11		13	9	9	9	11	13	15	7	11	12	17	18	4
Number of C.difficile cases	PCCS Community	12 month reduction trend	5		2	3	0	2	5	5	5	6	7	2	5	5	10
	PCCS Hospital		0		0	0	0	0	0	0	0	0	1	0	0	0	0
	MH&LD		0		0	0	0	0	0	0	0	0	0	0	0	0	1
	Morrison		4		5	5	0	5	3	10	5	3	7	10	6	7	6
	NPTH		1		1	0	1	2	1	1	1	0	1	0	0	0	0
	Singleton		3		2	1	2	2	3	4	1	2	8	9	3	3	3
	Total		13		10	9	3	11	12	20	12	12	23	22	14	15	20
Number of Klebsiella cases	PCCS Community	12 month reduction trend	3		4	4	5	2	9	5	2	7	1	4	3	5	5
	PCCS Hospital		0		0	0	0	0	0	0	0	0	0	0	0	0	0
	MH&LD		0		0	0	0	0	0	0	0	0	0	0	0	0	0
	Morrison		4		6	4	7	2	0	3	2	1	2	4	6	6	1
	NPTH		0		0	2	0	1	0	1	0	0	0	0	0	0	0
	Singleton		1		1	2	1	1	1	0	1	4	0	0	2	2	1
	Total		8		11	12	13	6	10	9	5	12	3	8	11	13	7
Number of Aeruginosa cases	PCCS Community	12 month reduction trend	1		1	0	1	1	1	1	1	1	1	1	0	0	0
	PCCS Hospital		0		0	0	0	0	0	0	0	0	0	0	0	0	0
	MH&LD		0		0	0	0	0	0	0	0	0	0	0	0	0	0
	Morrison		1		1	1	0	0	0	2	0	1	0	0	2	0	2
	NPTH		0		0	0	0	0	0	0	0	0	0	0	0	0	0
	Singleton		0		0	0	0	0	0	0	0	0	0	1	0	0	1
	Total		2		2	1	1	1	1	3	1	2	1	2	2	0	3
Compliance with hand hygiene audits	PCCS	95%			100.0%	100.0%	100.0%	100.0%	100.0%	96.3%	-	100.0%	100.0%	100.0%	100.0%	-	-
	MH&LD				96.1%	96.8%	98.7%	97.4%	96.7%	98.1%	99.6%	98.3%	95.9%	99.4%	98.3%	96.0%	90.3%
	Morrison				98.7%	96.8%	95.0%	92.8%	96.3%	95.8%	99.2%	94.5%	93.8%	93.5%	99.0%	97.9%	95.5%
	NPTH				100.0%	95.7%	100.0%	100.0%	100.0%	100.0%	90.0%	95.0%	93.3%	89.7%	100.0%	100.0%	100.0%
	Singleton				98.7%	96.0%	90.0%	88.5%	95.5%	100.0%	93.8%	93.9%	94.1%	92.0%	90.0%	97.0%	87.8%
	Total				97.3%	96.2%	95.1%	92.8%	97.0%	96.3%	98.3%	96.0%	94.9%	94.9%	96.0%	97.1%	92.2%

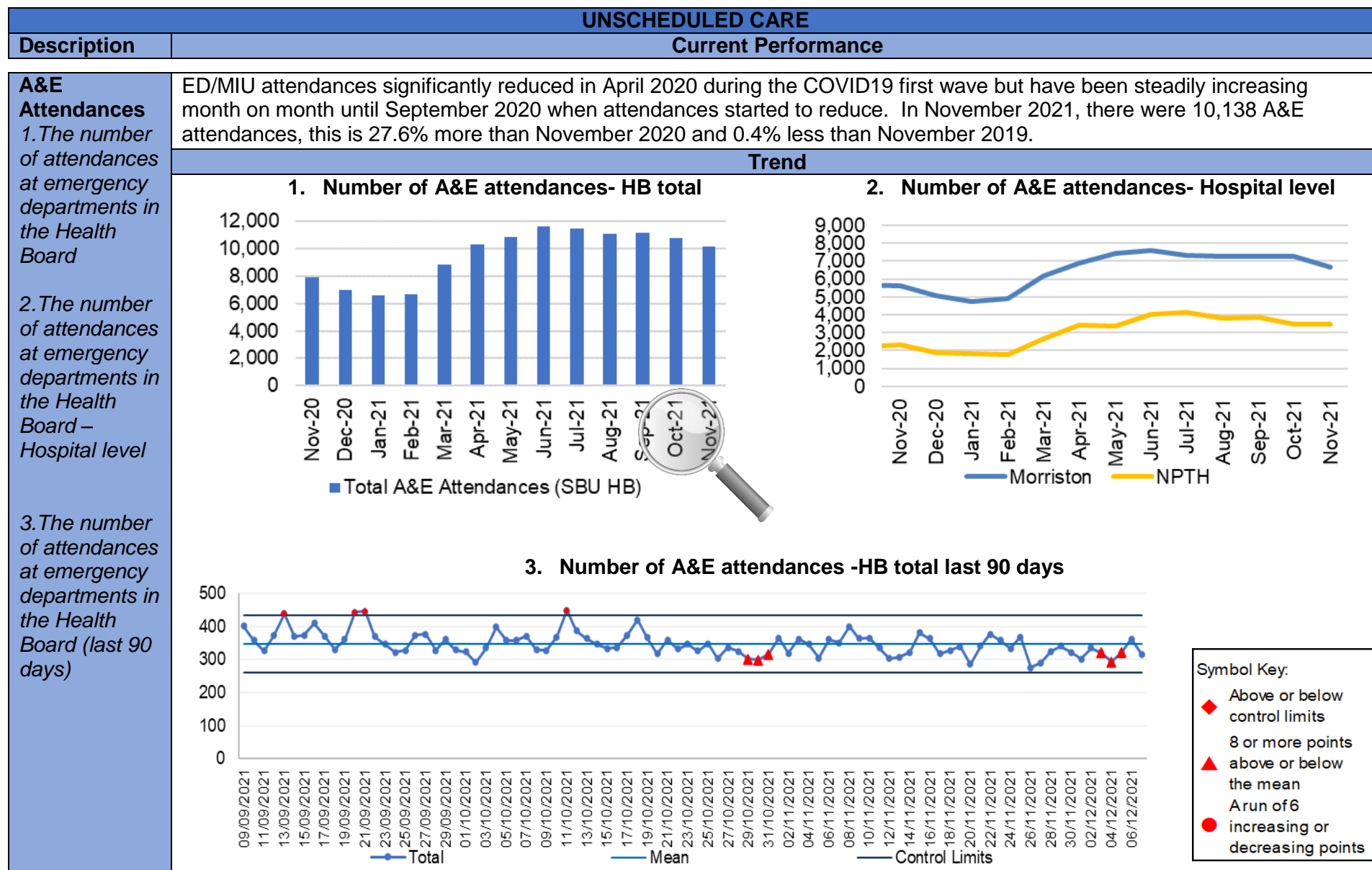
Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21
Serious Incidents & Risks																	
Number of Serious Incidents	PCCS	12 month reduction trend			1	0	0	2	1	2	3	1	0	1	0	0	1
	MH&LD				7	7	1	1	1	1	0	2	0	0	0	1	0
	Morrison				5	1	2	1	2	0	2	1	1	0	2	0	6
	NPTH				1	0	0	0	0	0	0	0	0	0	1	1	0
	Singleton				3	4	1	1	0	1	1	2	1	4	2	2	1
	Total				17	12	4	5	4	4	6	6	1	5	5	4	8
Of the serious incidents due for assurance, the % which were assured within the agreed timescales	Total	90%			0%	4%	0%	10%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Number of Never Events	PCCS	0			0	0	0	0	0	0	0	0	0	0	0	0	0
	MH&LD				0	0	0	0	0	0	0	0	0	0	0	0	0
	Morrison				1	0	0	0	0	0	0	1	0	0	0	0	1
	NPTH				0	0	0	0	0	0	0	0	0	0	0	0	0
	Singleton				0	0	0	0	0	0	0	0	0	0	0	0	0
	Total				1	0	0	0	0	0	0	1	0	0	0	0	1
Pressure Ulcers																	
Total number of Pressure Ulcers	PCCS Community	12 month reduction trend			29	26	25	24	26	31	20	21	33	34	39	32	
	PCCS Hospital				0	0	0	0	0	0	0	0	0	1	0	0	
	MH&LD				0	0	0	1	0	0	2	0	3	1	1	0	
	Morrison				27	41	31	26	24	25	30	25	37	32	47	32	
	NPTH				0	0	1	4	3	3	2	3	2	5	0	1	
	Singleton				15	20	19	17	9	31	19	25	16	14	17	9	
	Total				71	87	76	72	62	90	73	74	91	87	104	74	
Total number of Grade 3+ Pressure Ulcers	PCCS Community	12 month reduction trend			5	7	5	4	2	10	2	4	2	8	6	7	
	PCCS Hospital				0	0	0	0	0	0	0	0	0	0	0	0	
	MH&LD				0	0	0	0	0	0	0	0	0	0	1	0	
	Morrison				1	2	2	2	1	1	0	0	3	1	0	1	
	NPTH				0	0	0	0	0	1	0	0	0	1	0	0	
	Singleton				3	1	0	1	0	2	1	2	0	0	0	0	
	Total				9	10	7	7	3	14	3	6	5	10	7	8	
Pressure Ulcer (Hosp) patients per 100,000 admissions	Total	12 month reduction trend			877	1,128	928	951	533	896	756	723	853	767	955	613	

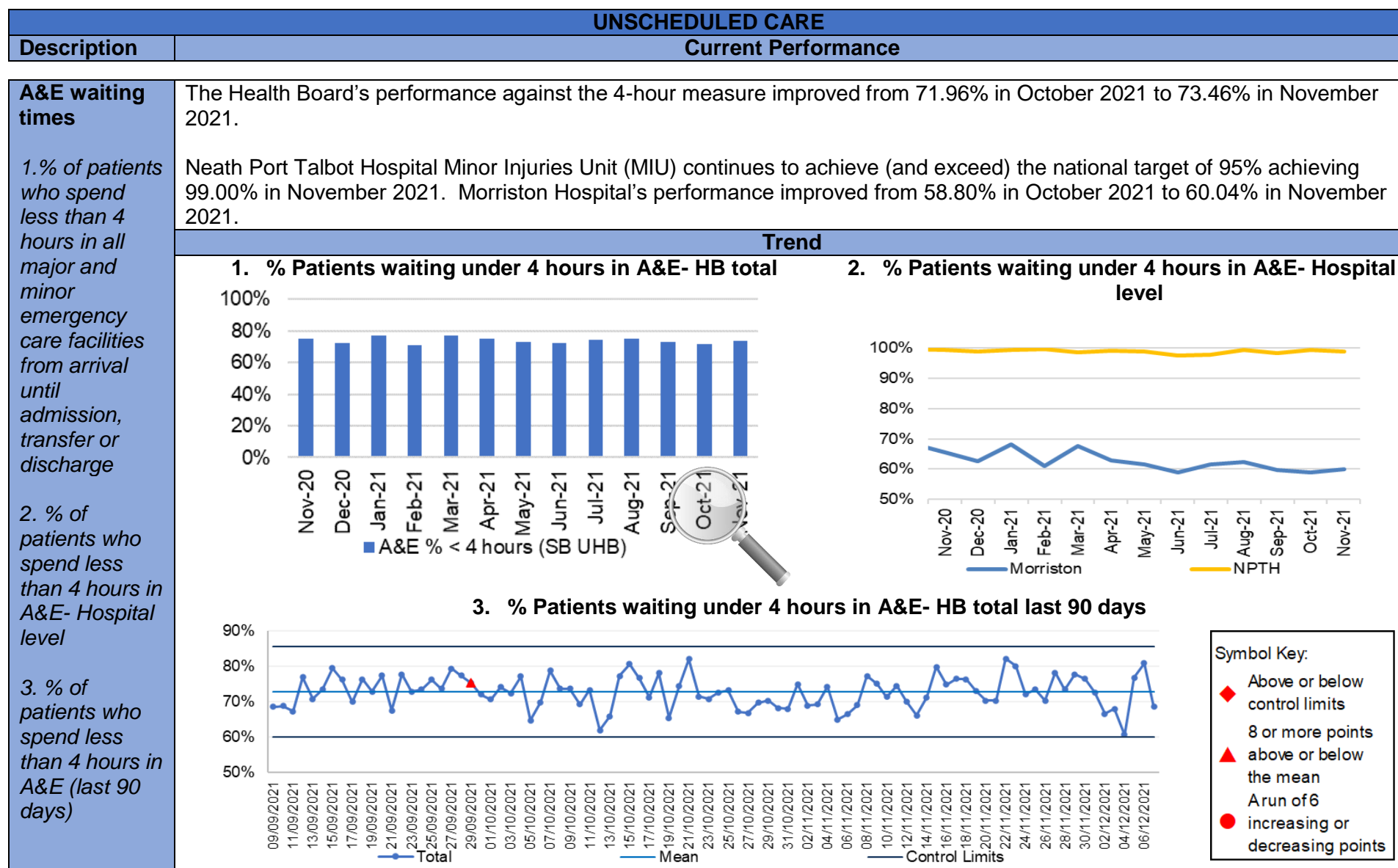
Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21
Inpatient Falls																	
Total number of Inpatient Falls	PCCS	12 month reduction trend			9	8	9	10	4	12	5	8	6	6	8	4	6
	MH&LD				31	29	27	27	22	18	42	24	32	40	25	28	36
	Morrison				120	129	92	67	84	81	105	69	66	73	96	114	91
	NPTH				32	30	33	30	28	31	34	32	41	31	25	35	27
	Singleton				47	48	38	42	33	34	42	41	48	48	53	58	53
	Total				247	247	203	177	171	176	228	174	193	198	207	240	213
Inpatient Falls per 1,000 beddays	HB Total	Between 3.0 & 5.0			7.26	6.91	5.56	5.40	4.62	4.85	5.94	4.50	4.88	4.95	5.18	5.81	5.35
Mortality																	
Universal Mortality reviews undertaken within 28 days (Stage 1 reviews)	Morrison	95%			98%	99%	100%	100%	98%	99%	98%	98%	97%	90%	97%	96%	
	Singleton				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
	NPTH				92%	100%	100%	100%	86%	100%	88%	100%	100%	100%	100%	80%	
	Total				98%	99%	100%	100%	98%	99%	98%	99%	98%	93%	98%	97%	
Stage 2 mortality reviews completed within 60 days	Morrison	95%			25%	80%	43%	100%	86%	50%	38%	33%	50%				
	Singleton				-	50%	50%	100%	67%	-	25%	0%	0%				
	NPTH				100%	-	0%	-	100%	100%	100%	0%	-				
	Total				36%	75%	37%	100%	82%	60%	39%	25%	43%				
Crude hospital mortality rate by Delivery Unit (74 years of age or less)	Morrison	12 month reduction trend			1.75%	1.86%	1.97%	2.05%	2.04%	1.80%	1.76%	1.71%	1.73%	1.70%	1.72%	1.71%	
	Singleton				0.50%	0.54%	0.56%	0.57%	0.56%	0.50%	0.52%	0.52%	0.52%	0.53%	0.53%	0.54%	
	NPTH				0.21%	0.20%	0.24%	0.18%	0.17%	0.15%	0.15%	0.13%	0.12%	0.23%	0.11%	0.10%	
	Total (SBU)				1.01%	1.08%	1.14%	1.17%	1.17%	1.04%	1.04%	1.01%	1.03%	1.02%	1.03%	1.03%	

## 4.2 Updates on key measures





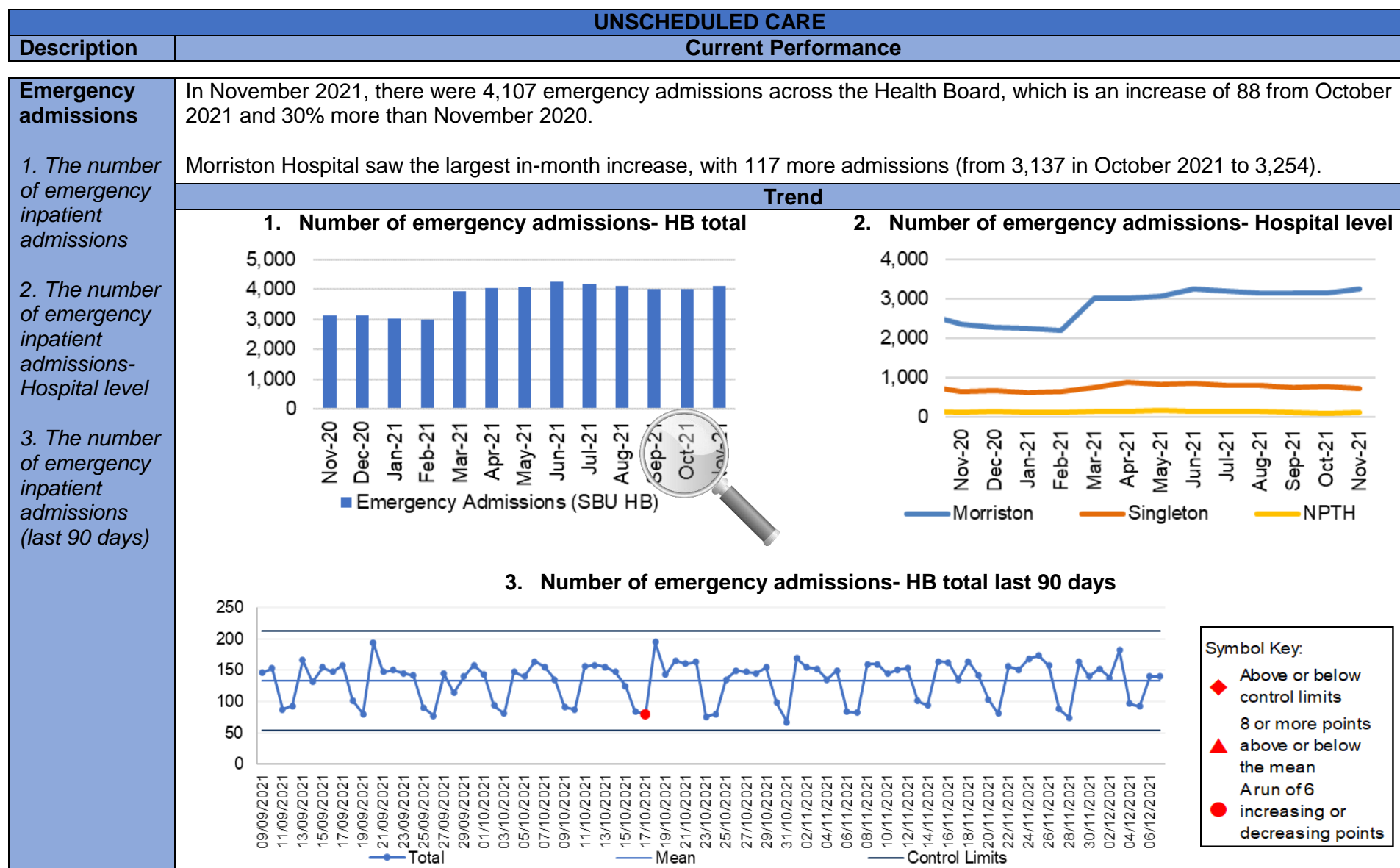






UNSCHEDULED CARE																																																																																																																																																																																																																																																														
Description	Current Performance																																																																																																																																																																																																																																																													
<b>A&amp;E waiting times</b>  <i>1.Number of patients who spend 12 hours or more in A&amp;E</i>  <i>2.Number of patients who spend 12 hours or more in A&amp;E- Hospital level</i>  <i>3.Number of patients who spend 12 hours or more in A&amp;E (last 90 days)</i>	<p>In November 2021, performance against the 12-hour measure improved compared with October 2021, decreasing from 1,276 to 1,055.</p> <p>1,054 patients waiting over 12 hours in November 2021 were in Morriston Hospital, with 1 patient waiting over 12 hours in Neath Port Talbot Hospital. This is an increase of 429 compared to November 2020.</p>																																																																																																																																																																																																																																																													
	<b>Trend</b>																																																																																																																																																																																																																																																													
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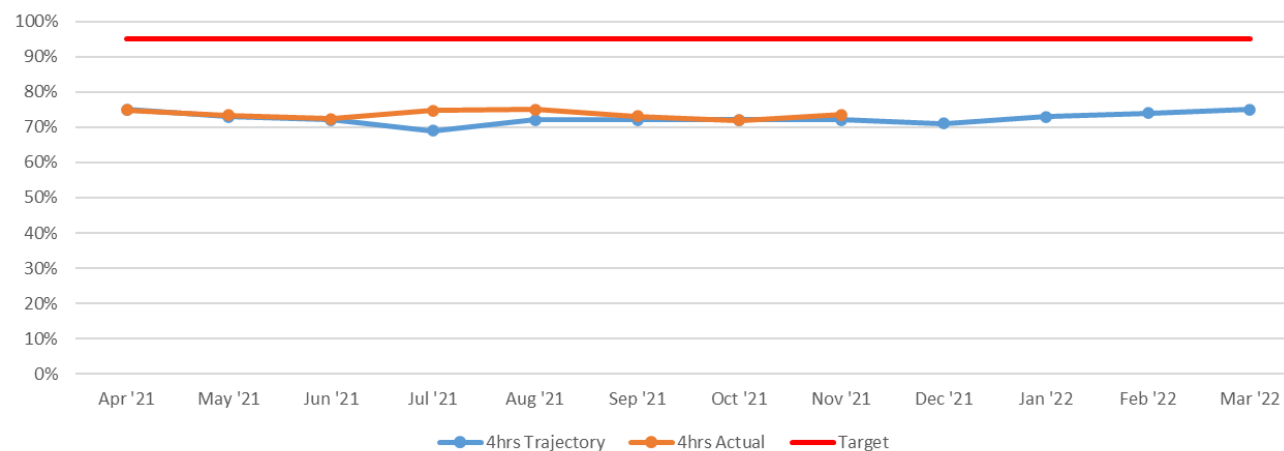




## UNSCHEDULED CARE – Performance Escalation updates

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

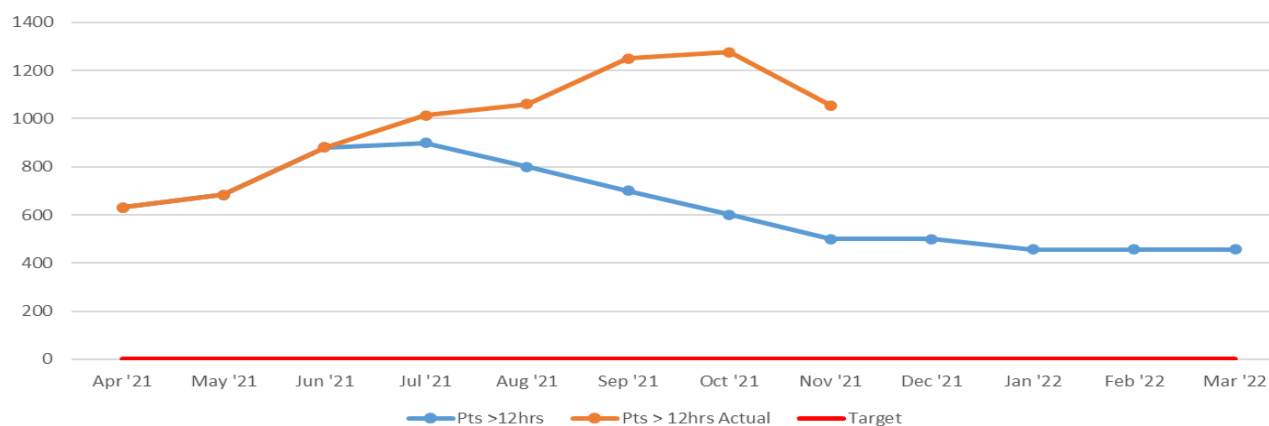
SBUHB 4hr Performance 2021-22



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

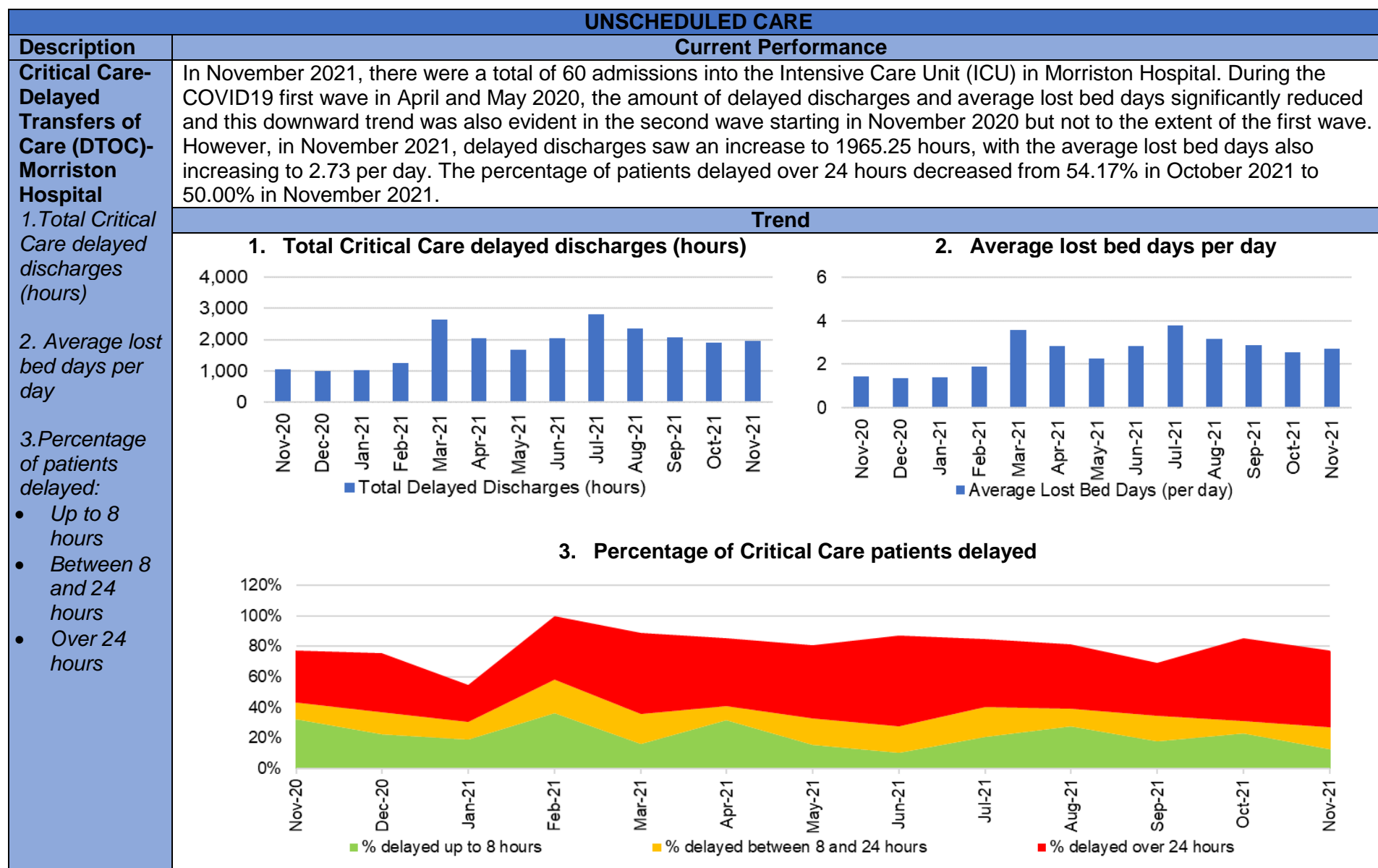
### 2. Submitted recovery trajectory for A&E12-hour performance

Patients > 12 hours Performance 2021-22



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

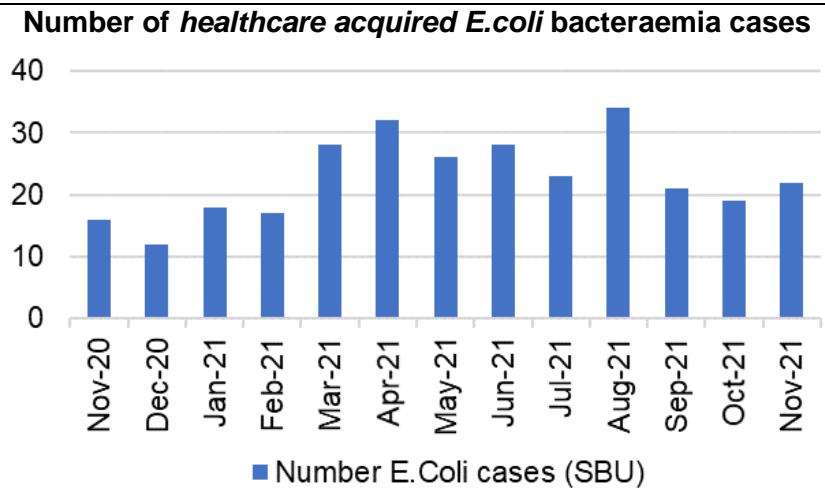
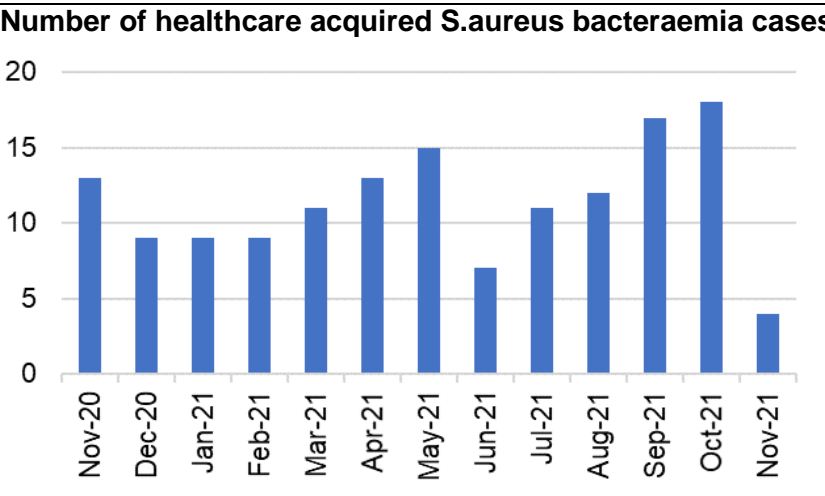
*A detailed recovery plan outlining key actions was shared in the September 2021 PFC agenda.*



UNSCHEDULED CARE																																																																								
Description	Current Performance	Trend																																																																						
<b>Clinically Optimised</b> <i>The number of patients waiting at each site in the Health Board that are clinically optimised</i>	<p>In November 2021, there were on average 268 patients who were deemed clinically optimised but were still occupying a bed in one of the Health Board's Hospitals.</p> <p>The number of medically/ discharge fit patients returned to the average that was seen in quarter 3 for 2021/21 in March 2021, after a significant increase in February 2021. October 2021 saw the first decrease in numbers, but there has been an increase to 268 in November 2021 from 238 in October 2021.</p> <p>In November 2021, Morriston Hospital had the largest proportion of clinically optimised patients with 112, followed by Neath Port Talbot Hospital with 81.</p>	<p><b>The number of clinically optimised patients by site</b></p> <table><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>NPTH</th><th>Gorseinon</th></tr></thead><tbody><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>35</td><td>20</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>5</td></tr><tr><td>Mar-21</td><td>40</td><td>35</td><td>70</td><td>10</td></tr><tr><td>Apr-21</td><td>70</td><td>35</td><td>70</td><td>5</td></tr><tr><td>May-21</td><td>65</td><td>40</td><td>75</td><td>5</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>5</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><tr><td>Oct-21</td><td>90</td><td>50</td><td>80</td><td>20</td></tr><tr><td>Nov-21</td><td>112</td><td>60</td><td>81</td><td>15</td></tr></tbody></table>	Month	Morriston	Singleton	NPTH	Gorseinon	Nov-20	60	40	25	10	Dec-20	55	35	20	20	Jan-21	55	40	25	10	Feb-21	65	45	45	5	Mar-21	40	35	70	10	Apr-21	70	35	70	5	May-21	65	40	75	5	Jun-21	80	50	75	10	Jul-21	90	50	70	5	Aug-21	95	60	70	15	Sep-21	105	70	85	15	Oct-21	90	50	80	20	Nov-21	112	60	81	15
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Mar-21	40	35	70	10																																																																				
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May-21	65	40	75	5																																																																				
Jun-21	80	50	75	10																																																																				
Jul-21	90	50	70	5																																																																				
Aug-21	95	60	70	15																																																																				
Sep-21	105	70	85	15																																																																				
Oct-21	90	50	80	20																																																																				
Nov-21	112	60	81	15																																																																				
<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>In November 2021, there were 61 elective procedures cancelled due to lack of beds on the day of surgery. This is 48 more cancellations than in November 2020 and 7 more than October 2021.</p> <p>59 of the cancelled procedures were attributed to Morriston Hospital, with 1 attributed to Singleton Hospital and 1 attributed to Neath Port Talbot Hospital.</p>	<p><b>Total number of elective procedures cancelled due to lack of beds</b></p> <table><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>NPTH</th></tr></thead><tbody><tr><td>Nov-20</td><td>15</td><td>0</td><td>0</td></tr><tr><td>Dec-20</td><td>5</td><td>0</td><td>0</td></tr><tr><td>Jan-21</td><td>5</td><td>0</td><td>0</td></tr><tr><td>Feb-21</td><td>10</td><td>0</td><td>0</td></tr><tr><td>Mar-21</td><td>12</td><td>0</td><td>0</td></tr><tr><td>Apr-21</td><td>5</td><td>0</td><td>0</td></tr><tr><td>May-21</td><td>5</td><td>0</td><td>0</td></tr><tr><td>Jun-21</td><td>8</td><td>0</td><td>0</td></tr><tr><td>Jul-21</td><td>18</td><td>0</td><td>0</td></tr><tr><td>Aug-21</td><td>12</td><td>0</td><td>0</td></tr><tr><td>Sep-21</td><td>25</td><td>0</td><td>0</td></tr><tr><td>Oct-21</td><td>50</td><td>1</td><td>1</td></tr><tr><td>Nov-21</td><td>61</td><td>1</td><td>1</td></tr></tbody></table>	Month	Morriston	Singleton	NPTH	Nov-20	15	0	0	Dec-20	5	0	0	Jan-21	5	0	0	Feb-21	10	0	0	Mar-21	12	0	0	Apr-21	5	0	0	May-21	5	0	0	Jun-21	8	0	0	Jul-21	18	0	0	Aug-21	12	0	0	Sep-21	25	0	0	Oct-21	50	1	1	Nov-21	61	1	1														
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Oct-21	50	1	1																																																																					
Nov-21	61	1	1																																																																					

FRACTURED NECK OF FEMUR (#NOF)		
Description	Current Performance	Trend
<b>Fractured Neck of Femur (#NOF)</b> 1. Prompt orthogeriatric assessment- % patients receiving an assessment by a senior geriatrician within 72 hours of presentation  2. Prompt surgery - % patients undergoing surgery the day following presentation with hip fracture  3. NICE compliant surgery - % of operations consistent with the recommendations of NICE CG124  4. Prompt mobilisation after surgery - % patients out of bed (standing or hoisted) by the day after operation	<p><b>1. Prompt orthogeriatric assessment-</b> In October 2021, 88.0% of patients in Morriston hospital received an assessment by a senior geriatrician within 72 hours. This is 3.6% more than in October 2020.</p> <p><b>2. Prompt surgery-</b> In October 2021, 57.7% of patients had surgery the day following presentation with a hip fracture. This is an improvement from October 2020 which was 51.0%.</p> <p><b>3. NICE compliant surgery-</b> 69.9% of operations were consistent with the NICE recommendations in October 2021. This is 0.2% less than in October 2020. In October 2021, Morriston was below the all-Wales average of 71.6%.</p> <p><b>4. Prompt mobilisation-</b> In October 2021, 71.1% of patients were out of bed the day after surgery. This is 5.2% less than in October 2020.</p>	<p><b>1. Prompt orthogeriatric assessment</b></p> <p><b>2. Prompt surgery</b></p> <p><b>3. NICE compliant Surgery</b></p> <p><b>4. Prompt mobilisation</b></p>

FRACTURED NECK OF FEMUR (#NOF)																																																														
Description	Current Performance	Trend																																																												
5. <i>Not delirious when tested- % patients (&lt;4 on 4AT test) when tested in the week after operation</i>	1. <b>Not delirious when tested-</b> 76.8% of patients were not delirious in the week after their operation in October 2021. This is an improvement of 6.3% compared with October 2020.	<p><b>5. Not delirious when tested</b></p> <table><caption>5. Not delirious when tested (Estimated Data)</caption><thead><tr><th>Month</th><th>Morriston (%)</th><th>All-Wales (%)</th><th>Eng, Wal &amp; N. Ire (%)</th></tr></thead><tbody><tr><td>Sep-20</td><td>60</td><td>60</td><td>60</td></tr><tr><td>Oct-20</td><td>62</td><td>60</td><td>60</td></tr><tr><td>Nov-20</td><td>64</td><td>60</td><td>60</td></tr><tr><td>Dec-20</td><td>66</td><td>60</td><td>60</td></tr><tr><td>Jan-21</td><td>68</td><td>60</td><td>60</td></tr><tr><td>Feb-21</td><td>70</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>74</td><td>60</td><td>60</td></tr><tr><td>May-21</td><td>76</td><td>60</td><td>60</td></tr><tr><td>Jun-21</td><td>77</td><td>60</td><td>60</td></tr><tr><td>Jul-21</td><td>77</td><td>60</td><td>60</td></tr><tr><td>Aug-21</td><td>77</td><td>60</td><td>60</td></tr><tr><td>Sep-21</td><td>77</td><td>60</td><td>60</td></tr><tr><td>Oct-21</td><td>77</td><td>60</td><td>60</td></tr></tbody></table>	Month	Morriston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)	Sep-20	60	60	60	Oct-20	62	60	60	Nov-20	64	60	60	Dec-20	66	60	60	Jan-21	68	60	60	Feb-21	70	60	60	Mar-21	72	60	60	Apr-21	74	60	60	May-21	76	60	60	Jun-21	77	60	60	Jul-21	77	60	60	Aug-21	77	60	60	Sep-21	77	60	60	Oct-21	77	60	60
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Oct-21	77	60	60																																																											
6. <i>Return to original residence- % patients discharged back to original residence, or in that residence at 120 day follow-up</i>	5. <b>Return to original residence-</b> 66.1% of patients in September 2021 were discharged back to their original residence. This is 11.2% less than in September 2020.	<p><b>6. Return to original residence</b></p> <table><caption>6. Return to original residence (Estimated Data)</caption><thead><tr><th>Month</th><th>Morriston (%)</th><th>All-Wales (%)</th><th>Eng, Wal &amp; N. Ire (%)</th></tr></thead><tbody><tr><td>Sep-20</td><td>75</td><td>70</td><td>70</td></tr><tr><td>Oct-20</td><td>74</td><td>70</td><td>70</td></tr><tr><td>Nov-20</td><td>73</td><td>70</td><td>70</td></tr><tr><td>Dec-20</td><td>72</td><td>70</td><td>70</td></tr><tr><td>Jan-21</td><td>71</td><td>70</td><td>70</td></tr><tr><td>Feb-21</td><td>70</td><td>70</td><td>70</td></tr><tr><td>Mar-21</td><td>69</td><td>70</td><td>70</td></tr><tr><td>Apr-21</td><td>68</td><td>70</td><td>70</td></tr><tr><td>May-21</td><td>67</td><td>70</td><td>70</td></tr><tr><td>Jun-21</td><td>66</td><td>70</td><td>70</td></tr><tr><td>Jul-21</td><td>65</td><td>70</td><td>70</td></tr><tr><td>Aug-21</td><td>64</td><td>70</td><td>70</td></tr><tr><td>Sep-21</td><td>63</td><td>70</td><td>70</td></tr></tbody></table>	Month	Morriston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)	Sep-20	75	70	70	Oct-20	74	70	70	Nov-20	73	70	70	Dec-20	72	70	70	Jan-21	71	70	70	Feb-21	70	70	70	Mar-21	69	70	70	Apr-21	68	70	70	May-21	67	70	70	Jun-21	66	70	70	Jul-21	65	70	70	Aug-21	64	70	70	Sep-21	63	70	70				
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Sep-21	63	70	70																																																											
7. <i>30 day mortality rate</i>	6. <b>30 day mortality rate-</b> In January 2021 the mortality rate for Morriston Hospital was 7.5% which is 0.5% less than January 2020. The mortality rate in Morriston Hospital in January 2021 is higher than the all-Wales average of 6.9% but lower than the national average of 7.6%.  * Updated data is currently not available, but is being reviewed.	<p><b>7. 30 day mortality rate</b></p> <table><caption>7. 30 day mortality rate (Estimated Data)</caption><thead><tr><th>Month</th><th>Morriston (%)</th><th>All-Wales (%)</th><th>Eng, Wal &amp; N. Ire (%)</th></tr></thead><tbody><tr><td>Jan-20</td><td>8.0</td><td>7.5</td><td>7.5</td></tr><tr><td>Feb-20</td><td>8.0</td><td>7.5</td><td>7.5</td></tr><tr><td>Mar-20</td><td>8.0</td><td>7.5</td><td>7.5</td></tr><tr><td>Apr-20</td><td>8.0</td><td>7.5</td><td>7.5</td></tr><tr><td>May-20</td><td>8.0</td><td>7.5</td><td>7.5</td></tr><tr><td>Jun-20</td><td>8.0</td><td>7.5</td><td>7.5</td></tr><tr><td>Jul-20</td><td>8.0</td><td>7.5</td><td>7.5</td></tr><tr><td>Aug-20</td><td>8.0</td><td>7.5</td><td>7.5</td></tr><tr><td>Sep-20</td><td>8.0</td><td>7.5</td><td>7.5</td></tr><tr><td>Oct-20</td><td>8.0</td><td>7.5</td><td>7.5</td></tr><tr><td>Nov-20</td><td>8.0</td><td>7.5</td><td>7.5</td></tr><tr><td>Dec-20</td><td>8.0</td><td>7.5</td><td>7.5</td></tr><tr><td>Jan-21</td><td>7.5</td><td>7.5</td><td>7.5</td></tr></tbody></table>	Month	Morriston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)	Jan-20	8.0	7.5	7.5	Feb-20	8.0	7.5	7.5	Mar-20	8.0	7.5	7.5	Apr-20	8.0	7.5	7.5	May-20	8.0	7.5	7.5	Jun-20	8.0	7.5	7.5	Jul-20	8.0	7.5	7.5	Aug-20	8.0	7.5	7.5	Sep-20	8.0	7.5	7.5	Oct-20	8.0	7.5	7.5	Nov-20	8.0	7.5	7.5	Dec-20	8.0	7.5	7.5	Jan-21	7.5	7.5	7.5				
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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>22 cases of <i>E. coli</i> bacteraemia were identified in November 2021, of which 5 were hospital acquired and 17 were community acquired.</li><li>Cumulative cases from April 2021 to November 2021 are 23.5% higher than the equivalent period in 2020/21. (205 in 2021/22 compared with 166 in 2020/21).</li></ul>	<p><b>Number of healthcare acquired E.coli bacteraemia cases</b></p>  <table><caption>Number of healthcare acquired E.coli bacteraemia cases (SBU)</caption><thead><tr><th>Month</th><th>Number of cases</th></tr></thead><tbody><tr><td>Nov-20</td><td>16</td></tr><tr><td>Dec-20</td><td>12</td></tr><tr><td>Jan-21</td><td>18</td></tr><tr><td>Feb-21</td><td>17</td></tr><tr><td>Mar-21</td><td>28</td></tr><tr><td>Apr-21</td><td>32</td></tr><tr><td>May-21</td><td>26</td></tr><tr><td>Jun-21</td><td>28</td></tr><tr><td>Jul-21</td><td>23</td></tr><tr><td>Aug-21</td><td>34</td></tr><tr><td>Sep-21</td><td>21</td></tr><tr><td>Oct-21</td><td>19</td></tr><tr><td>Nov-21</td><td>22</td></tr></tbody></table>	Month	Number of cases	Nov-20	16	Dec-20	12	Jan-21	18	Feb-21	17	Mar-21	28	Apr-21	32	May-21	26	Jun-21	28	Jul-21	23	Aug-21	34	Sep-21	21	Oct-21	19	Nov-21	22
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<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 4 cases of <i>Staph. aureus</i> bacteraemia in November 2021, of which 1 was hospital acquired and 3 were community acquired.</li><li>Cumulative cases from April 2021 to November 2021 are 14.1% higher than the equivalent period in 2020/21 (97 in 2021/22 compared with 85 in 2020/21).</li></ul>	<p><b>Number of healthcare acquired S.aureus bacteraemia cases</b></p>  <table><caption>Number of healthcare acquired S.aureus bacteraemia cases (SBU)</caption><thead><tr><th>Month</th><th>Number of cases</th></tr></thead><tbody><tr><td>Nov-20</td><td>13</td></tr><tr><td>Dec-20</td><td>9</td></tr><tr><td>Jan-21</td><td>9</td></tr><tr><td>Feb-21</td><td>9</td></tr><tr><td>Mar-21</td><td>11</td></tr><tr><td>Apr-21</td><td>13</td></tr><tr><td>May-21</td><td>15</td></tr><tr><td>Jun-21</td><td>7</td></tr><tr><td>Jul-21</td><td>11</td></tr><tr><td>Aug-21</td><td>12</td></tr><tr><td>Sep-21</td><td>17</td></tr><tr><td>Oct-21</td><td>18</td></tr><tr><td>Nov-21</td><td>4</td></tr></tbody></table>	Month	Number of cases	Nov-20	13	Dec-20	9	Jan-21	9	Feb-21	9	Mar-21	11	Apr-21	13	May-21	15	Jun-21	7	Jul-21	11	Aug-21	12	Sep-21	17	Oct-21	18	Nov-21	4
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HEALTHCARE ACQUIRED INFECTIONS																														
Description	Current Performance	Trend																												
<b>Healthcare Acquired Infections (HCAI)- C.difficile-</b> <i>Number of laboratory confirmed C.difficile cases</i>	<ul style="list-style-type: none"><li>There were 20 <i>Clostridium difficile</i> toxin positive cases in November 2021, of which 10 were hospital acquired and 10 were community acquired.</li><li>Cumulative cases from April 2021 to November 2021 are 11.3% more than the equivalent period of 2020/21 (138 in 2021/22 compared with 124 in 2020/21).</li></ul>	<p><b>Number of healthcare acquired C.difficile cases</b></p> <table><tr><th>Month</th><th>Number of C.diff cases (SBU)</th></tr><tr><td>Nov-20</td><td>10</td></tr><tr><td>Dec-20</td><td>9</td></tr><tr><td>Jan-21</td><td>3</td></tr><tr><td>Feb-21</td><td>11</td></tr><tr><td>Mar-21</td><td>12</td></tr><tr><td>Apr-21</td><td>20</td></tr><tr><td>May-21</td><td>12</td></tr><tr><td>Jun-21</td><td>12</td></tr><tr><td>Jul-21</td><td>23</td></tr><tr><td>Aug-21</td><td>22</td></tr><tr><td>Sep-21</td><td>14</td></tr><tr><td>Oct-21</td><td>15</td></tr><tr><td>Nov-21</td><td>20</td></tr></table> <p>■ Number of C.diff cases (SBU)</p>	Month	Number of C.diff cases (SBU)	Nov-20	10	Dec-20	9	Jan-21	3	Feb-21	11	Mar-21	12	Apr-21	20	May-21	12	Jun-21	12	Jul-21	23	Aug-21	22	Sep-21	14	Oct-21	15	Nov-21	20
Month	Number of C.diff cases (SBU)																													
Nov-20	10																													
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<b>Healthcare Acquired Infections (HCAI)- Klebsiella sp-</b> <i>Number of laboratory confirmed Klebsiella sp cases</i>	<ul style="list-style-type: none"><li>There were 7 cases of Klebsiella sp in November 2021, of which 2 were hospital acquired and 5 were community acquired.</li><li>Cumulative cases from April 2021 to November 2021 are 11.4% higher than the equivalent period in 2020/21 (68 in 2021/22 compared with 61 in 2020/21).</li></ul>	<p><b>Number of healthcare acquired Klebsiella cases</b></p> <table><tr><th>Month</th><th>Number of Klebsiella cases (SBU)</th></tr><tr><td>Nov-20</td><td>11</td></tr><tr><td>Dec-20</td><td>12</td></tr><tr><td>Jan-21</td><td>13</td></tr><tr><td>Feb-21</td><td>6</td></tr><tr><td>Mar-21</td><td>10</td></tr><tr><td>Apr-21</td><td>9</td></tr><tr><td>May-21</td><td>5</td></tr><tr><td>Jun-21</td><td>12</td></tr><tr><td>Jul-21</td><td>3</td></tr><tr><td>Aug-21</td><td>8</td></tr><tr><td>Sep-21</td><td>11</td></tr><tr><td>Oct-21</td><td>13</td></tr><tr><td>Nov-21</td><td>7</td></tr></table> <p>■ Number of Klebsiella cases (SBU)</p>	Month	Number of Klebsiella cases (SBU)	Nov-20	11	Dec-20	12	Jan-21	13	Feb-21	6	Mar-21	10	Apr-21	9	May-21	5	Jun-21	12	Jul-21	3	Aug-21	8	Sep-21	11	Oct-21	13	Nov-21	7
Month	Number of Klebsiella cases (SBU)																													
Nov-20	11																													
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HEALTHCARE ACQUIRED INFECTIONS		
Description	Current Performance	Trend
<b>Healthcare Acquired Infections (HCAI)- Aeruginosa-</b> <i>Number of laboratory confirmed Aeruginosa cases</i>	<ul style="list-style-type: none"> <li>There were 3 cases of <i>P.Aeruginosa</i> in November 2021, all of which were hospital acquired.</li> <li>Cumulative cases from April 2021 to November 2021 are 6.6% less than the equivalent period in 2020/21.</li> </ul>	<p><b>Number of healthcare acquired Pseudomonas cases</b></p> <p>■ Number of Pseudomonas cases (SBU)</p>
PRESSURE ULCERS		
Description	Current Performance	Trend
<b>Number of pressure ulcers</b> <i>1. Total number of pressure ulcers developed in hospital and in the community</i>  <i>2. Rate of pressure ulcers per 100,000 admissions</i>	<ul style="list-style-type: none"> <li>In October 2021 there were 74 cases of healthcare acquired pressure ulcers, 32 of which were community acquired and 42 were hospital acquired.</li> <li>There were 8 grade 3+ pressure ulcers in October 2021, of which 7 were community acquired and 1 was hospital acquired.</li> <li>The rate per 100,000 admissions decreased from 955 in September 2021 to 613 in October 2021.</li> </ul>	<p><b>Total number of hospital and community acquired Pressure Ulcers (PU) and rate per 100,000 admissions</b></p> <p>■ Pressure Ulcers (Community) ■ Pressure Ulcers (Hospital) — Rate per 100,00 admissions</p>

SERIOUS INCIDENTS																																												
Description	Current Performance	Trend																																										
<b>Serious Incidents-</b> <i>1. The number of serious incidents</i>  <i>2. The number of Never Events</i>  <i>3. Of the serious incidents due for assurance, the percentage which were assured within the agreed timescales</i>	<p>1. The Health Board reported 8 Serious Incidents for the month of November 2021 to Welsh Government. The breakdown of incidents in November 2021 are set out below:</p> <ul style="list-style-type: none"><li>- Morriston – 6</li><li>- Singleton – 1</li><li>- Primary, Community and Therapies – 1</li></ul>	<p><b>1. and 2. Number of serious incidents and never events</b></p> <table><tr><th>Month</th><th>Number of Serious Incidents</th><th>Number of never events</th></tr><tr><td>Nov-20</td><td>18</td><td>0</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>7</td><td>0</td></tr><tr><td>Jul-21</td><td>1</td><td>0</td></tr><tr><td>Aug-21</td><td>5</td><td>0</td></tr><tr><td>Sep-21</td><td>5</td><td>0</td></tr><tr><td>Oct-21</td><td>4</td><td>0</td></tr><tr><td>Nov-21</td><td>9</td><td>0</td></tr></table>	Month	Number of Serious Incidents	Number of never events	Nov-20	18	0	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	7	0	Jul-21	1	0	Aug-21	5	0	Sep-21	5	0	Oct-21	4	0	Nov-21	9	0
	Month	Number of Serious Incidents	Number of never events																																									
	Nov-20	18	0																																									
Dec-20	12	0																																										
Jan-21	4	0																																										
Feb-21	5	0																																										
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Jun-21	7	0																																										
Jul-21	1	0																																										
Aug-21	5	0																																										
Sep-21	5	0																																										
Oct-21	4	0																																										
Nov-21	9	0																																										
<p>2. There was one new Never Event reported in November 2021 for Morriston Hospital which relates to a surgical prosthesis incident.</p>	<p><b>3. % of serious incidents closed within 60 days</b></p> <table><tr><th>Month</th><th>% SI's assured</th><th>Target</th></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><tr><td>Oct-21</td><td>0%</td><td>80%</td></tr><tr><td>Nov-21</td><td>0%</td><td>80%</td></tr></table>	Month	% SI's assured	Target	Nov-20	0%	80%	Dec-20	5%	80%	Jan-21	0%	80%	Feb-21	10%	80%	Mar-21	0%	80%	Apr-21	0%	80%	May-21	0%	80%	Jun-21	0%	80%	Jul-21	35%	80%	Aug-21	0%	80%	Sep-21	0%	80%	Oct-21	0%	80%	Nov-21	0%	80%	
Month	% SI's assured	Target																																										
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Oct-21	0%	80%																																										
Nov-21	0%	80%																																										
<p>3. In November 2021, performance against the 80% target of submitting closure forms within 60 working days was 0% as the one closure form in Morriston due to be submitted to Welsh Government, was not submitted on time.</p>	<p>* 0% compliance in November 2020 and January, March, April, May, June, August, October and November 2021</p>																																											



















INPATIENT FALLS																														
Description	Current Performance	Trend																												
<div><b>Inpatient Falls</b> <i>The total number of inpatient falls</i></div>	<div><ul style="list-style-type: none"><li>The number of Falls reported via Datix web for Swansea Bay UHB was 213 in November 2021. This is 13.7% less than November 2020 where 247 falls were recorded.</li></ul></div>	<div><div>Number of inpatient Falls</div><table><thead><tr><th>Month</th><th>Number of Falls</th></tr></thead><tbody><tr><td>Nov-20</td><td>247</td></tr><tr><td>Dec-20</td><td>247</td></tr><tr><td>Jan-21</td><td>200</td></tr><tr><td>Feb-21</td><td>175</td></tr><tr><td>Mar-21</td><td>170</td></tr><tr><td>Apr-21</td><td>175</td></tr><tr><td>May-21</td><td>225</td></tr><tr><td>Jun-21</td><td>170</td></tr><tr><td>Jul-21</td><td>190</td></tr><tr><td>Aug-21</td><td>200</td></tr><tr><td>Sep-21</td><td>205</td></tr><tr><td>Oct-21</td><td>240</td></tr><tr><td>Nov-21</td><td>213</td></tr></tbody></table><div>■ Inpatient falls</div></div>	Month	Number of Falls	Nov-20	247	Dec-20	247	Jan-21	200	Feb-21	175	Mar-21	170	Apr-21	175	May-21	225	Jun-21	170	Jul-21	190	Aug-21	200	Sep-21	205	Oct-21	240	Nov-21	213
Month	Number of Falls																													
Nov-20	247																													
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Jun-21	170																													
Jul-21	190																													
Aug-21	200																													
Sep-21	205																													
Oct-21	240																													
Nov-21	213																													

DISCHARGE SUMMARIES																														
Description	Current Performance	Trend																												
<b>Discharge Summaries</b> <i>Percentage of discharge summaries approved and sent to patients' doctor following discharge</i>	The latest data shows that in November 2021, the percentage of completed discharge summaries was 63%.	<div><div>% discharge summaries approved and sent</div><table><thead><tr><th>Month</th><th>% of completed discharge summaries</th></tr></thead><tbody><tr><td>Nov-20</td><td>65%</td></tr><tr><td>Dec-20</td><td>58%</td></tr><tr><td>Jan-21</td><td>66%</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>66%</td></tr><tr><td>Jun-21</td><td>68%</td></tr><tr><td>Jul-21</td><td>62%</td></tr><tr><td>Aug-21</td><td>62%</td></tr><tr><td>Sep-21</td><td>67%</td></tr><tr><td>Oct-21</td><td>61%</td></tr><tr><td>Nov-21</td><td>63%</td></tr></tbody></table></div>	Month	% of completed discharge summaries	Nov-20	65%	Dec-20	58%	Jan-21	66%	Feb-21	63%	Mar-21	64%	Apr-21	63%	May-21	66%	Jun-21	68%	Jul-21	62%	Aug-21	62%	Sep-21	67%	Oct-21	61%	Nov-21	63%
	Month		% of completed discharge summaries																											
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	In November 2021, compliance ranged from 51% in Singleton Hospital to 79% in Mental Health & Learning Disabilities.																													

CRUDE MORTALITY																																																																								
Description	Current Performance	Trend																																																																						
Crude Mortality Rate	October 2021 reports the crude mortality rate for the Health Board at 1.03%, the same as reported for September 2021.	<b>Crude hospital mortality rate by Hospital (74 years of age or less)</b> <table><caption>Crude hospital mortality rate by Hospital (74 years of age or less)</caption><thead><tr><th>Month</th><th>Morriston Hospital</th><th>Singleton Hospital</th><th>NPT Hospital</th><th>HB Total</th></tr></thead><tbody><tr><td>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>0.5%</td><td>0.2%</td><td>1.0%</td></tr><tr><td>Dec-20</td><td>1.8%</td><td>0.5%</td><td>0.2%</td><td>1.1%</td></tr><tr><td>Jan-21</td><td>1.9%</td><td>0.5%</td><td>0.3%</td><td>1.2%</td></tr><tr><td>Feb-21</td><td>2.1%</td><td>0.6%</td><td>0.2%</td><td>1.2%</td></tr><tr><td>Mar-21</td><td>1.8%</td><td>0.5%</td><td>0.2%</td><td>1.1%</td></tr><tr><td>Apr-21</td><td>1.7%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr><tr><td>May-21</td><td>1.6%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr><tr><td>Jun-21</td><td>1.6%</td><td>0.5%</td><td>0.1%</td><td>1.0%</td></tr><tr><td>Jul-21</td><td>1.7%</td><td>0.5%</td><td>0.1%</td><td>1.0%</td></tr><tr><td>Aug-21</td><td>1.7%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr><tr><td>Sep-21</td><td>1.7%</td><td>0.5%</td><td>0.1%</td><td>1.0%</td></tr><tr><td>Oct-21</td><td>1.7%</td><td>0.5%</td><td>0.1%</td><td>1.0%</td></tr></tbody></table>	Month	Morriston Hospital	Singleton Hospital	NPT Hospital	HB Total	Oct-20	1.6%	0.4%	0.2%	0.9%	Nov-20	1.7%	0.5%	0.2%	1.0%	Dec-20	1.8%	0.5%	0.2%	1.1%	Jan-21	1.9%	0.5%	0.3%	1.2%	Feb-21	2.1%	0.6%	0.2%	1.2%	Mar-21	1.8%	0.5%	0.2%	1.1%	Apr-21	1.7%	0.5%	0.2%	1.0%	May-21	1.6%	0.5%	0.2%	1.0%	Jun-21	1.6%	0.5%	0.1%	1.0%	Jul-21	1.7%	0.5%	0.1%	1.0%	Aug-21	1.7%	0.5%	0.2%	1.0%	Sep-21	1.7%	0.5%	0.1%	1.0%	Oct-21	1.7%	0.5%	0.1%	1.0%
	Month		Morriston Hospital	Singleton Hospital	NPT Hospital	HB Total																																																																		
Oct-20	1.6%	0.4%	0.2%	0.9%																																																																				
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	A breakdown by Hospital for October 2021: <ul style="list-style-type: none"><li>• Morriston – 1.71%</li><li>• Singleton – 0.54%</li><li>• NPT – 0.10%</li></ul>																																																																							

## 5 HARM QUADRANT- HARM FROM REDUCTION IN NON-COVID ACTIVITY

### 5.1 Overview

Harm from reduction in non-Covid activity																	
Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21
Cancer																	
Single Cancer Pathway- % of patients started treatment within 62 days (without suspensions)	Total	12 month improvement trend			55.4%	61.0%	67.9%	56.4%	71.6%	65.7%	60.0%	66.8%	55.0%	58.4%	62.2%	61.9%	47.0%
Planned Care																	
Number of patients waiting > 26 weeks for outpatient appointment*	Morrison	0			12,306	12,543	12,487	12,479	12,870	13,398	14,047	13,867	14,080	14,661	15,092	15,906	16,385
	NPTH				75	49	61	111	73	92	157	228	271	335	407	378	387
	Singleton				8,394	8,336	8,427	8,414	8,575	9,027	9,327	9,053	8,769	8,383	8,447	8,162	7,955
	PC&CS				230	251	233	221	232	235	169	131	105	65	51	37	25
	Total				21,005	21,179	21,208	21,225	21,750	22,752	23,700	23,279	23,225	23,444	23,997	24,483	24,752
Number of patients waiting > 36 weeks for treatment*	Morrison	0			22,298	22,391	21,695	21,199	21,228	21,579	22,095	22,414	22,968	23,364	23,214	23,874	24,121
	NPTH				48	42	41	43	45	46	45	57	98	167	189	191	198
	Singleton				11,865	11,629	11,385	10,788	10,942	11,134	11,727	12,022	11,980	11,920	11,764	11,841	12,245
	PC&CS				220	247	219	204	196	181	115	119	82	53	43	35	25
	Total (inc. diagnostics > 36 wks)				35,387	35,126	33,991	32,719	32,874	33,395	34,447	35,040	35,583	35,999	35,711	36,420	37,064
Number of patients waiting > 8 weeks for a specified diagnostics*	Morrison	0			4,559	4,361	3,938	2,978	2,517	2,757	2,739	3,162	3,390	3,573	3,528	3,320	3,217
	Singleton				2,051	2,218	2,301	2,109	2,037	2,047	2,103	2,068	2,035	1,950	2,204	2,619	2,791
	Total				6,610	6,579	6,239	5,087	4,554	4,804	4,842	5,230	5,425	5,523	5,732	5,939	6,008
Number of patients waiting > 14 weeks for a specified therapy*	MH&LD	0			0	0	0	0	0	0	1	0	0	0	0	0	0
	NPTH				99	93	127	129	60	18	8	15	1	15	18	28	29
	PC&CS				718	615	457	362	309	183	157	156	150	171	302	386	600
	Total				817	708	584	491	369	201	166	171	151	186	320	414	629

Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21
Planned Care																	
Total number of patients waiting for a follow-up outpatient appointment *	Total	HB Target TBC			120,874	119,963	119,999	120,882	121,403	122,303	123,088	127,444	130,208	127,391	130,963	131,554	129,255
Number of patients delayed by over 100% past their target date *	Total				27,156	27,641	28,419	28,862	29,316	29,334	30,062	30,550	31,316	29,770	32,574	33,121	30,946
Number of patients delayed past their agreed target date (booked and not booked) *	Total				56,647	56,210	57,297	57,458	55,944	55,086	54,664	55,254	60,618	54,993	60,340	60,447	56,618
Number of Ophthalmology patients without an allocated health risk factor	Total	0			464	326	212	281	294	614	326	486	539	628	702	413	
Number of patients without a documented clinical review date	Total	0			55	90	32	25	14	9	5	6	5	6	7	3	4
Patient Experience/ Feedback																	
Number of friends and family surveys completed	PCCS	12 month improvement trend			231	84	144	97	255		159	532	79	245	213	89	360
	MH&LD				82	56	22	8	11		3	0	0	59	18	10	36
	Morrison				155	152	168	211	326		1,330	934	699	642	995	941	1,131
	NPTH				24	18	43	31	16								
	Singleton				377	330	323	459	453		3,098	1,808	1,029	1,106	1,452	1,118	1,602
	Total				787	584	678	798	1,050		4,590	3,297	1,912	2,075	2,025	2,733	3,194
% of patients who would recommend and highly recommend	PCCS	90%	80%		80%	62%	76%	77%	90%		100%	100%	89%	94%	90%	90%	94%
	MH&LD				41%	21%	36%	88%	73%		100%	0%	0%	93%	94%	90%	97%
	Morrison				86%	70%	76%	82%	86%		96%	97%	93%	92%	93%	92%	93%
	NPTH				75%	67%	58%	32%	75%								
	Singleton				87%	85%	85%	92%	87%		97%	97%	91%	92%	90%	92%	94%
	Total				84%	77%	79%	85%	87%		96%	97%	92%	92%	92%	92%	94%
% of all-Wales surveys scoring 9 or 10 on overall satisfaction	PCCS	90%	80%		80%	67%	90%	100%	100%		100%	-		95%	92%	94%	89%
	MH&LD				-	-	-	-	50%								
	Morrison				100%	33%	80%	71%	90%		93%	97%		96%	96%	94%	93%
	NPTH				-	67%	67%	100%	100%								
	Singleton				86%	80%	77%	95%	92%		93%	97%		95%	96%	95%	93%
	Total				85%	65%	81%	94%	93%		92%	96%		92%	96%	93%	93%
Number of new complaints received	PCCS	12 month reduction rend			24	24	9	10	22	8	16	16	18	8	11		
	MH&LD				13	6	11	15	10	26	15	19	24	13	12		
	Morrison				40	38	33	40	50	23	53	69	51	50	61		
	NPTH				7	1	7	6	7	4	3	10	6	6	6		
	Singleton				20	20	15	20	24	24	23	31	28	32	21		
	Total				103	83	78	94	117	100	115	159	139	115	115		
% of complaints that have received a final reply (under Regulation 24) or an interim reply (under Regulation 26) up to and including 30 working days from the date the complaint was first received by the organisation	PCCS	75%	80%		76%	77%	63%	67%	67%	88%	81%	72%	54%	75%	73%		
	MH&LD				92%	75%	73%	64%	67%	69%	67%	50%	58%	62%	92%		
	Morrison				89%	91%	81%	95%	92%	100%	92%	80%	76%	94%	84%		
	NPTH				86%	0%	57%	67%	100%	100%	100%	70%	100%	67%	50%		
	Singleton				70%	70%	57%	68%	67%	61%	68%	43%	54%	81%	52%		
	Total				82%	80%	71%	80%	81%	78%	78%	68%	69%	83%	75%		

## 5.2 Updates on key measures

PLANNED CARE	
Description	Current Performance
<b>Referrals and shape of the waiting list</b>  <b>1. GP Referrals</b> <i>The number of Stage 1 additions per week</i>  <b>2. Stage 1 additions</b> <i>The number of new patients that have been added to the outpatient waiting list</i>  <b>3. Size of the waiting list</b> <i>Total number of patients on the waiting list by stage as at December 2019</i>  <b>4. Size of the waiting list</b> <i>Total number of patients on the waiting list by stage as at November 2021</i>	<p>The number of GP referrals and additions to the outpatient waiting list has increased each month since May 2020, this is reflected in the reduction in the size of the waiting list in April 2020 and subsequent increase every month since May 2020. November 2021 has seen an increase in referral figures. Since September 2020 the number of referrals and additions appeared to stabilise but then started to increase again from January 2021. Chart 4 shows the shape of the current waiting list, there are currently 9,749 patients waiting over 104 weeks at all stages. Chart 3 shows the waiting list as at December 2019 as this reflects a typical monthly snapshot of the waiting list prior to the COVID19 pandemic.</p> <p><b>Trend</b></p> <div> <div> <b>1. Number of GP referrals received by SBU Health Board</b> <p>GP Referrals (routine) GP Referrals (urgent)</p> </div> <div> <b>2. Number of stage 1 additions per week</b> <p>Additions to outpatients (stage 1) waiting list</p> </div> <div> <b>3. Total size of the waiting list and movement (December 2019)</b> <p>STAGE 1 STAGE 2 STAGE 3 STAGE 4 STAGE 5</p> </div> <div> <b>4. Total size of the waiting list and movement</b> <p>STAGE 1 STAGE 2 STAGE 3 STAGE 4 STAGE 5</p> </div> </div>



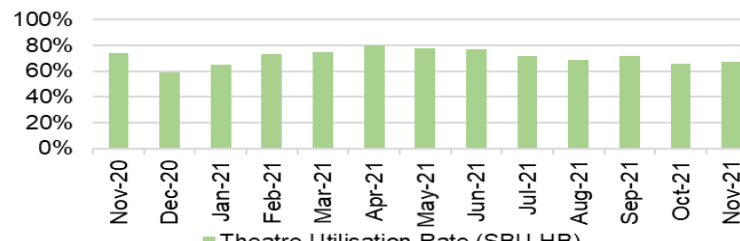
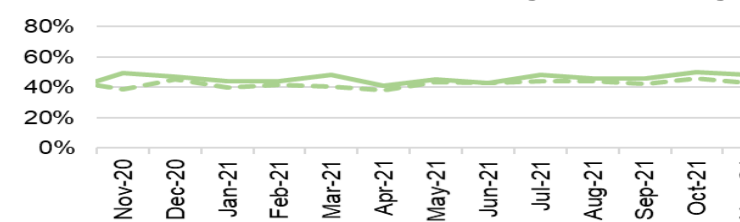
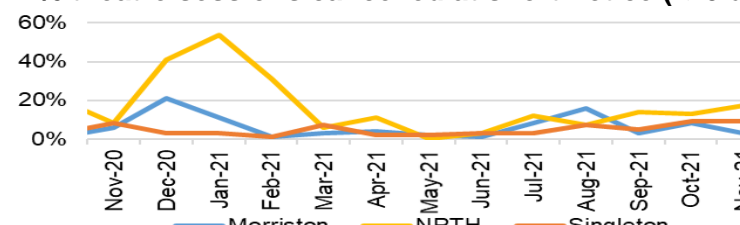
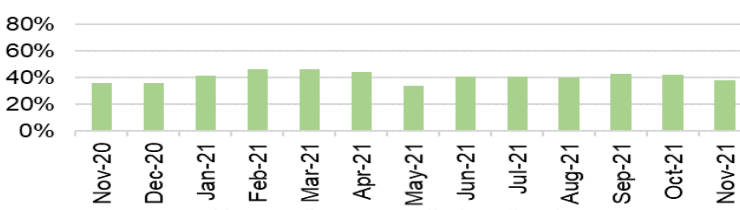
PLANNED CARE	
Description	Current Performance
<b>Outpatient waiting times</b>  1. Number of patients waiting more than 26 weeks for an outpatient appointment (stage 1)- Health Board Total  2. Number of patients waiting more than 26 weeks for an outpatient appointment (stage 1)- Hospital Level  3. Patients waiting over 26 weeks for an outpatient appointment by specialty  4. Outpatient activity undertaken	<p>The number of patients waiting over 26 weeks for a first outpatient appointment is still a challenge. November 2021 saw an in-month increase in the number of patients waiting over 26 weeks for an outpatient appointment. The number of breaches increased from 24,483 in October 2021 to 24,752 in November 2021. Ophthalmology has the largest proportion of patients waiting over 26 weeks for an outpatient appointment closely followed by Orthopaedics and ENT. The number of outpatient attendances has significantly reduced since February 2020 due to COVID19. Chart 4 shows that the number of attendances started to increase from April 2021 before remaining steady for a period and then increasing again in November 2021.</p> <p><b>Trend</b></p> <div> <div> <p><b>1. Number of stage 1 over 26 weeks- HB total</b></p> <p>■ Outpatients &gt; 26 wks (SB UHB)</p> </div> <div> <p><b>2. Number of stage 1 over 26 weeks- Hospital level</b></p> <p>— Morriston — Singleton — PCT — NPTH</p> </div> <div> <p><b>3. Patients waiting over 26 weeks for an outpatient appointment by specialty as at November 2021</b></p> </div> <div> <p><b>4. Outpatient activity undertaken</b></p> <p>— New outpatient attendances - - - Follow-up attendances</p> </div> </div> <p><b>**Please note – reporting measures changed from June 2021 – Using power BI platform</b></p>



PLANNED CARE																																																																																																																														
Description	Current Performance																																																																																																																													
<b>Patients waiting over 36 weeks for treatment</b>  1. Number of patients waiting more than 36 weeks for treatment and the number of elective patients admitted for treatment- Health Board Total  2. Number of patients waiting more than 36 weeks for treatment and the number of elective patients admitted for treatment- Hospital level  3. Number of elective admissions	<p>The number of patients waiting longer than 36 weeks from referral to treatment has increased every month since the first wave of COVID19 in March 2020. December 2020 was the first month in 2020 that saw an in-month reduction and this trend continued into January and February 2021 however, the number of breaches increased again from March 2021. In November 2021, there was 37,064 patients waiting over 36 weeks which is a 1.8% in-month increase from October 2021. 27,728 of the 37,064 were waiting over 52 weeks in November 2021.</p>																																																																																																																													
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	<div><div><p><b>1. Number of patients waiting over 36 weeks- HB total</b></p><table><caption>1. Number of patients waiting over 36 weeks- HB total</caption><thead><tr><th>Month</th><th>&gt;36 wks (SB UHB)</th></tr></thead><tbody><tr><td>Nov-20</td><td>35,000</td></tr><tr><td>Dec-20</td><td>35,000</td></tr><tr><td>Jan-21</td><td>34,000</td></tr><tr><td>Feb-21</td><td>33,000</td></tr><tr><td>Mar-21</td><td>33,000</td></tr><tr><td>Apr-21</td><td>33,000</td></tr><tr><td>May-21</td><td>34,000</td></tr><tr><td>Jun-21</td><td>35,000</td></tr><tr><td>Jul-21</td><td>36,000</td></tr><tr><td>Aug-21</td><td>36,000</td></tr><tr><td>Sep-21</td><td>36,000</td></tr><tr><td>Oct-21</td><td>37,000</td></tr><tr><td>Nov-21</td><td>37,064</td></tr></tbody></table></div><div><p><b>2. Number of patients waiting over 36 weeks- Hospital level</b></p><table><caption>2. Number of patients waiting over 36 weeks- Hospital level</caption><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>PCT</th><th>NPTH</th></tr></thead><tbody><tr><td>Nov-20</td><td>22,000</td><td>12,000</td><td>0</td><td>0</td></tr><tr><td>Dec-20</td><td>23,000</td><td>12,000</td><td>0</td><td>0</td></tr><tr><td>Jan-21</td><td>22,000</td><td>11,000</td><td>0</td><td>0</td></tr><tr><td>Feb-21</td><td>21,000</td><td>10,000</td><td>0</td><td>0</td></tr><tr><td>Mar-21</td><td>21,000</td><td>11,000</td><td>0</td><td>0</td></tr><tr><td>Apr-21</td><td>22,000</td><td>12,000</td><td>0</td><td>0</td></tr><tr><td>May-21</td><td>23,000</td><td>13,000</td><td>0</td><td>0</td></tr><tr><td>Jun-21</td><td>24,000</td><td>12,000</td><td>0</td><td>0</td></tr><tr><td>Jul-21</td><td>25,000</td><td>12,000</td><td>0</td><td>0</td></tr><tr><td>Aug-21</td><td>24,000</td><td>12,000</td><td>0</td><td>0</td></tr><tr><td>Sep-21</td><td>25,000</td><td>12,000</td><td>0</td><td>0</td></tr><tr><td>Oct-21</td><td>26,000</td><td>12,000</td><td>0</td><td>0</td></tr><tr><td>Nov-21</td><td>27,000</td><td>12,000</td><td>0</td><td>0</td></tr></tbody></table></div><div><p><b>3. Number of elective admissions</b></p><table><caption>3. Number of elective admissions</caption><thead><tr><th>Month</th><th>Admitted elective patients</th></tr></thead><tbody><tr><td>Nov-20</td><td>3,500</td></tr><tr><td>Dec-20</td><td>3,000</td></tr><tr><td>Jan-21</td><td>3,500</td></tr><tr><td>Feb-21</td><td>3,500</td></tr><tr><td>Mar-21</td><td>4,500</td></tr><tr><td>Apr-21</td><td>4,000</td></tr><tr><td>May-21</td><td>4,500</td></tr><tr><td>Jun-21</td><td>5,500</td></tr><tr><td>Jul-21</td><td>5,000</td></tr><tr><td>Aug-21</td><td>4,500</td></tr><tr><td>Sep-21</td><td>4,000</td></tr><tr><td>Oct-21</td><td>4,000</td></tr><tr><td>Nov-21</td><td>4,500</td></tr></tbody></table></div></div>	Month	>36 wks (SB UHB)	Nov-20	35,000	Dec-20	35,000	Jan-21	34,000	Feb-21	33,000	Mar-21	33,000	Apr-21	33,000	May-21	34,000	Jun-21	35,000	Jul-21	36,000	Aug-21	36,000	Sep-21	36,000	Oct-21	37,000	Nov-21	37,064	Month	Morriston	Singleton	PCT	NPTH	Nov-20	22,000	12,000	0	0	Dec-20	23,000	12,000	0	0	Jan-21	22,000	11,000	0	0	Feb-21	21,000	10,000	0	0	Mar-21	21,000	11,000	0	0	Apr-21	22,000	12,000	0	0	May-21	23,000	13,000	0	0	Jun-21	24,000	12,000	0	0	Jul-21	25,000	12,000	0	0	Aug-21	24,000	12,000	0	0	Sep-21	25,000	12,000	0	0	Oct-21	26,000	12,000	0	0	Nov-21	27,000	12,000	0	0	Month	Admitted elective patients	Nov-20	3,500	Dec-20	3,000	Jan-21	3,500	Feb-21	3,500	Mar-21	4,500	Apr-21	4,000	May-21	4,500	Jun-21	5,500	Jul-21	5,000	Aug-21	4,500	Sep-21	4,000	Oct-21	4,000	Nov-21
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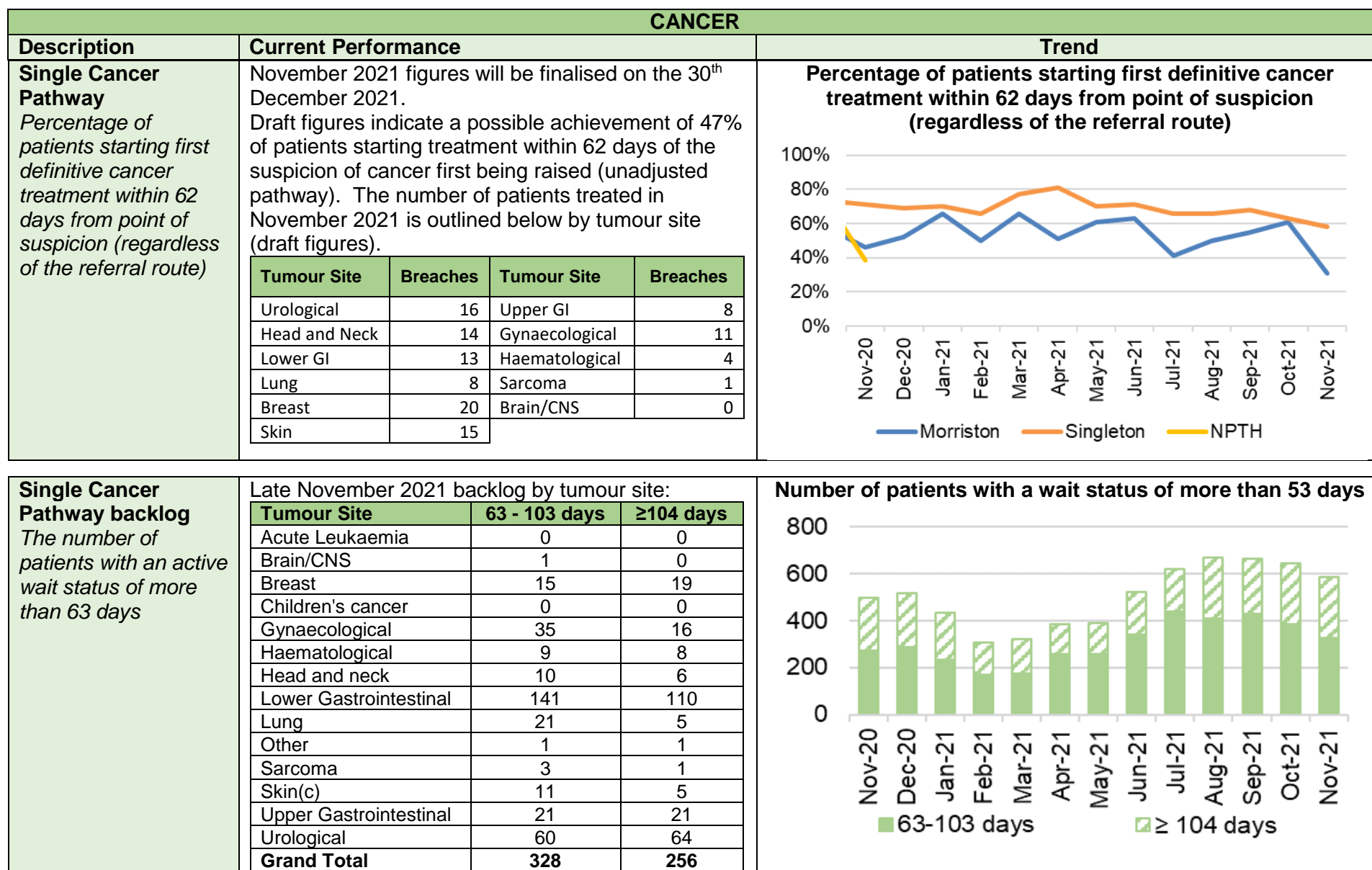
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<b>Total waiting times</b> <i>Percentage of patients waiting less than 26 weeks from referral to treatment</i>	Throughout 2019/20 the overall percentage of patients waiting less than 26 weeks from referral to treatment ranged between 80% and 88%. Whereas, throughout the Covid19 pandemic in 2020/21 the percentage ranged between 41% and 72%.	<b>Percentage of patient waiting less than 26 weeks</b> <table><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>PCT</th><th>NPTH</th></tr></thead><tbody><tr><td>Nov-20</td><td>40%</td><td>48%</td><td>40%</td><td>90%</td></tr><tr><td>Dec-20</td><td>40%</td><td>48%</td><td>40%</td><td>92%</td></tr><tr><td>Jan-21</td><td>40%</td><td>48%</td><td>40%</td><td>90%</td></tr><tr><td>Feb-21</td><td>42%</td><td>48%</td><td>42%</td><td>88%</td></tr><tr><td>Mar-21</td><td>42%</td><td>48%</td><td>42%</td><td>90%</td></tr><tr><td>Apr-21</td><td>40%</td><td>48%</td><td>40%</td><td>90%</td></tr><tr><td>May-21</td><td>42%</td><td>48%</td><td>45%</td><td>85%</td></tr><tr><td>Jun-21</td><td>42%</td><td>48%</td><td>50%</td><td>82%</td></tr><tr><td>Jul-21</td><td>42%</td><td>48%</td><td>55%</td><td>80%</td></tr><tr><td>Aug-21</td><td>42%</td><td>48%</td><td>70%</td><td>78%</td></tr><tr><td>Sep-21</td><td>42%</td><td>48%</td><td>75%</td><td>75%</td></tr><tr><td>Oct-21</td><td>42%</td><td>48%</td><td>78%</td><td>72%</td></tr><tr><td>Nov-21</td><td>42%</td><td>48%</td><td>80%</td><td>70%</td></tr></tbody></table>	Month	Morriston	Singleton	PCT	NPTH	Nov-20	40%	48%	40%	90%	Dec-20	40%	48%	40%	92%	Jan-21	40%	48%	40%	90%	Feb-21	42%	48%	42%	88%	Mar-21	42%	48%	42%	90%	Apr-21	40%	48%	40%	90%	May-21	42%	48%	45%	85%	Jun-21	42%	48%	50%	82%	Jul-21	42%	48%	55%	80%	Aug-21	42%	48%	70%	78%	Sep-21	42%	48%	75%	75%	Oct-21	42%	48%	78%	72%	Nov-21	42%	48%	80%	70%
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In November 2021, 46.8% of patients were waiting under 26 weeks from referral to treatment, which is a reduction from October 2021.																																																																								

<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>	In October 2021, 48.6% of Ophthalmology R1 patients were waiting within their clinical target date or within 25% of the target date.	<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> <table><thead><tr><th>Month</th><th>% of R1 ophthalmology patient pathways waiting within target date or within 25% beyond target date for an outpatient appointment</th><th>Target</th></tr></thead><tbody><tr><td>Oct-20</td><td>45%</td><td>100%</td></tr><tr><td>Nov-20</td><td>48%</td><td>100%</td></tr><tr><td>Dec-20</td><td>48%</td><td>100%</td></tr><tr><td>Jan-21</td><td>48%</td><td>100%</td></tr><tr><td>Feb-21</td><td>48%</td><td>100%</td></tr><tr><td>Mar-21</td><td>48%</td><td>100%</td></tr><tr><td>Apr-21</td><td>48%</td><td>100%</td></tr><tr><td>May-21</td><td>48%</td><td>100%</td></tr><tr><td>Jun-21</td><td>48%</td><td>100%</td></tr><tr><td>Jul-21</td><td>48%</td><td>100%</td></tr><tr><td>Aug-21</td><td>48%</td><td>100%</td></tr><tr><td>Sep-21</td><td>48%</td><td>100%</td></tr><tr><td>Oct-21</td><td>48.6%</td><td>100%</td></tr></tbody></table>	Month	% of R1 ophthalmology patient pathways waiting within target date or within 25% beyond target date for an outpatient appointment	Target	Oct-20	45%	100%	Nov-20	48%	100%	Dec-20	48%	100%	Jan-21	48%	100%	Feb-21	48%	100%	Mar-21	48%	100%	Apr-21	48%	100%	May-21	48%	100%	Jun-21	48%	100%	Jul-21	48%	100%	Aug-21	48%	100%	Sep-21	48%	100%	Oct-21	48.6%	100%
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There was an upward trend in performance in 2019/20 however, there was a continuous downward trend in performance in 2020/21, however performance seems to be improving slightly in 2021/22.																																												

THEATRE EFFICIENCY																																																									
Description	Current Performance	Trend																																																							
<b>Theatre Efficiency</b> <i>1. Theatre Utilisation Rates</i>  <i>2. % of theatre sessions starting late</i>  <i>3. % of theatre sessions finishing early</i>  <i>4. % of theatre sessions cancelled at short notice (&lt;28 days)</i>  <i>5. % of operations cancelled on the day</i>	<p>In November 2021 the Theatre Utilisation rate was 67%. This is an in-month increase of 1% and a 7% decrease compared to November 2020.</p>	<p><b>1. Theatre Utilisation Rates</b></p>  <table><caption>1. Theatre Utilisation Rates (SBU HB)</caption><thead><tr><th>Month</th><th>Utilisation Rate (%)</th></tr></thead><tbody><tr><td>Nov-20</td><td>75</td></tr><tr><td>Dec-20</td><td>60</td></tr><tr><td>Jan-21</td><td>65</td></tr><tr><td>Feb-21</td><td>70</td></tr><tr><td>Mar-21</td><td>72</td></tr><tr><td>Apr-21</td><td>78</td></tr><tr><td>May-21</td><td>75</td></tr><tr><td>Jun-21</td><td>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>70</td></tr><tr><td>Oct-21</td><td>65</td></tr><tr><td>Nov-21</td><td>67</td></tr></tbody></table>	Month	Utilisation Rate (%)	Nov-20	75	Dec-20	60	Jan-21	65	Feb-21	70	Mar-21	72	Apr-21	78	May-21	75	Jun-21	75	Jul-21	70	Aug-21	68	Sep-21	70	Oct-21	65	Nov-21	67																											
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<p>43% of theatre sessions started late in November 2021. This is a decline from 39% in November 2020.</p>	<p><b>2. and 3. % theatre sessions starting late/finishing early</b></p>  <table><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>Nov-20</td><td>45</td><td>45</td></tr><tr><td>Dec-20</td><td>45</td><td>45</td></tr><tr><td>Jan-21</td><td>45</td><td>45</td></tr><tr><td>Feb-21</td><td>45</td><td>45</td></tr><tr><td>Mar-21</td><td>45</td><td>45</td></tr><tr><td>Apr-21</td><td>45</td><td>45</td></tr><tr><td>May-21</td><td>45</td><td>45</td></tr><tr><td>Jun-21</td><td>45</td><td>45</td></tr><tr><td>Jul-21</td><td>45</td><td>45</td></tr><tr><td>Aug-21</td><td>45</td><td>45</td></tr><tr><td>Sep-21</td><td>45</td><td>45</td></tr><tr><td>Oct-21</td><td>45</td><td>45</td></tr><tr><td>Nov-21</td><td>43</td><td>48</td></tr></tbody></table>	Month	Late Starts (%)	Early Finishes (%)	Nov-20	45	45	Dec-20	45	45	Jan-21	45	45	Feb-21	45	45	Mar-21	45	45	Apr-21	45	45	May-21	45	45	Jun-21	45	45	Jul-21	45	45	Aug-21	45	45	Sep-21	45	45	Oct-21	45	45	Nov-21	43	48														
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<p>In November 2021, 48% of theatre sessions finished early. This is 2% lower than figures seen in both October 2021 November 2020.</p>	<p><b>4. % theatre sessions cancelled at short notice (&lt;28 days)</b></p>  <table><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>Nov-20</td><td>10</td><td>15</td><td>10</td></tr><tr><td>Dec-20</td><td>20</td><td>40</td><td>10</td></tr><tr><td>Jan-21</td><td>10</td><td>55</td><td>10</td></tr><tr><td>Feb-21</td><td>10</td><td>10</td><td>10</td></tr><tr><td>Mar-21</td><td>10</td><td>10</td><td>10</td></tr><tr><td>Apr-21</td><td>10</td><td>10</td><td>10</td></tr><tr><td>May-21</td><td>10</td><td>10</td><td>10</td></tr><tr><td>Jun-21</td><td>10</td><td>10</td><td>10</td></tr><tr><td>Jul-21</td><td>10</td><td>10</td><td>10</td></tr><tr><td>Aug-21</td><td>10</td><td>10</td><td>10</td></tr><tr><td>Sep-21</td><td>10</td><td>10</td><td>10</td></tr><tr><td>Oct-21</td><td>10</td><td>10</td><td>10</td></tr><tr><td>Nov-21</td><td>10</td><td>10</td><td>10</td></tr></tbody></table>	Month	Morriston (%)	NPTH (%)	Singleton (%)	Nov-20	10	15	10	Dec-20	20	40	10	Jan-21	10	55	10	Feb-21	10	10	10	Mar-21	10	10	10	Apr-21	10	10	10	May-21	10	10	10	Jun-21	10	10	10	Jul-21	10	10	10	Aug-21	10	10	10	Sep-21	10	10	10	Oct-21	10	10	10	Nov-21	10	10	10
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<p>7% of theatre sessions were cancelled at short notice in November 2021. This is a reduction of 2% from October 2021 and is the same as reported in November 2020.</p>	<p><b>5. % of operations cancelled on the day</b></p>  <table><caption>5. % of operations cancelled on the day</caption><thead><tr><th>Month</th><th>% operations cancelled on the day (%)</th></tr></thead><tbody><tr><td>Nov-20</td><td>35</td></tr><tr><td>Dec-20</td><td>35</td></tr><tr><td>Jan-21</td><td>40</td></tr><tr><td>Feb-21</td><td>45</td></tr><tr><td>Mar-21</td><td>45</td></tr><tr><td>Apr-21</td><td>40</td></tr><tr><td>May-21</td><td>35</td></tr><tr><td>Jun-21</td><td>40</td></tr><tr><td>Jul-21</td><td>40</td></tr><tr><td>Aug-21</td><td>40</td></tr><tr><td>Sep-21</td><td>40</td></tr><tr><td>Oct-21</td><td>40</td></tr><tr><td>Nov-21</td><td>38</td></tr></tbody></table>	Month	% operations cancelled on the day (%)	Nov-20	35	Dec-20	35	Jan-21	40	Feb-21	45	Mar-21	45	Apr-21	40	May-21	35	Jun-21	40	Jul-21	40	Aug-21	40	Sep-21	40	Oct-21	40	Nov-21	38																												
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<b>Diagnostics waiting times</b> <i>The number of patients waiting more than 8 weeks for specified diagnostics</i>	<p>In November 2021, there was an increase in the number of patients waiting over 8 weeks for specified diagnostics. It increased from 5,939 in October 2021 to 6,008 in November 2021.</p> <p>The following is a breakdown for the 8-week breaches by diagnostic test for November 2021:</p> <ul style="list-style-type: none"><li>• Endoscopy= 2,804</li><li>• Cardiac tests= 1,856</li><li>• Cystoscopy= 13</li></ul>	<p><b>Number of patients waiting longer than 8 weeks for diagnostics</b></p> <table><caption>Approximate data for 8-week diagnostic breaches</caption><thead><tr><th>Month</th><th>Cardiac tests</th><th>Endoscopy</th><th>Other diagnostics (inc. radiology)</th></tr></thead><tbody><tr><td>Nov-20</td><td>1,500</td><td>2,000</td><td>3,000</td></tr><tr><td>Dec-20</td><td>1,500</td><td>2,200</td><td>2,800</td></tr><tr><td>Jan-21</td><td>1,300</td><td>2,300</td><td>2,500</td></tr><tr><td>Feb-21</td><td>1,400</td><td>2,100</td><td>1,800</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>2,000</td><td>2,000</td><td>1,400</td></tr><tr><td>Aug-21</td><td>1,800</td><td>1,900</td><td>1,600</td></tr><tr><td>Sep-21</td><td>2,000</td><td>2,100</td><td>1,500</td></tr><tr><td>Oct-21</td><td>1,800</td><td>2,500</td><td>1,500</td></tr><tr><td>Nov-21</td><td>1,856</td><td>2,804</td><td>1,348</td></tr></tbody></table>	Month	Cardiac tests	Endoscopy	Other diagnostics (inc. radiology)	Nov-20	1,500	2,000	3,000	Dec-20	1,500	2,200	2,800	Jan-21	1,300	2,300	2,500	Feb-21	1,400	2,100	1,800	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	2,000	2,000	1,400	Aug-21	1,800	1,900	1,600	Sep-21	2,000	2,100	1,500	Oct-21	1,800	2,500	1,500	Nov-21	1,856	2,804	1,348
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<b>Therapy waiting times</b> <i>The number of patients waiting more than 14 weeks for specified therapies</i>	<p>In November 2021 there were 629 patients waiting over 14 weeks for specified Therapies.</p> <p>The breakdown for the breaches in November 2021 are:</p> <ul style="list-style-type: none"><li>• Podiatry = 438</li><li>• Speech &amp; Language Therapy= 162</li><li>• Dietetics = 22</li><li>• Physiotherapy = 7</li></ul>	<p><b>Number of patients waiting longer than 14 weeks for therapies</b></p> <table><caption>Approximate data for 14-week therapy breaches (Nov-21)</caption><thead><tr><th>Therapy</th><th>Count</th></tr></thead><tbody><tr><td>Podiatry</td><td>438</td></tr><tr><td>Speech &amp; Language Therapy</td><td>162</td></tr><tr><td>Dietetics</td><td>22</td></tr><tr><td>Physiotherapy</td><td>7</td></tr></tbody></table>	Therapy	Count	Podiatry	438	Speech & Language Therapy	162	Dietetics	22	Physiotherapy	7																																														
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CANCER		
Description	Current Performance	Trend
Cancer demand and shape of the waiting list  1. Number of Urgent Suspected Cancer (USC) referrals received	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.	<b>1. Number of USC referrals</b> 
	2. Source of suspicion for patients on Single Cancer Pathway (SCP)	Gastroenterology referrals are assigned to the tumour site ‘Other’ on receipt of referral, where possible this is refined to Upper or Lower GI as investigations are initiated and the suspected tumour site becomes clearer to trackers.  



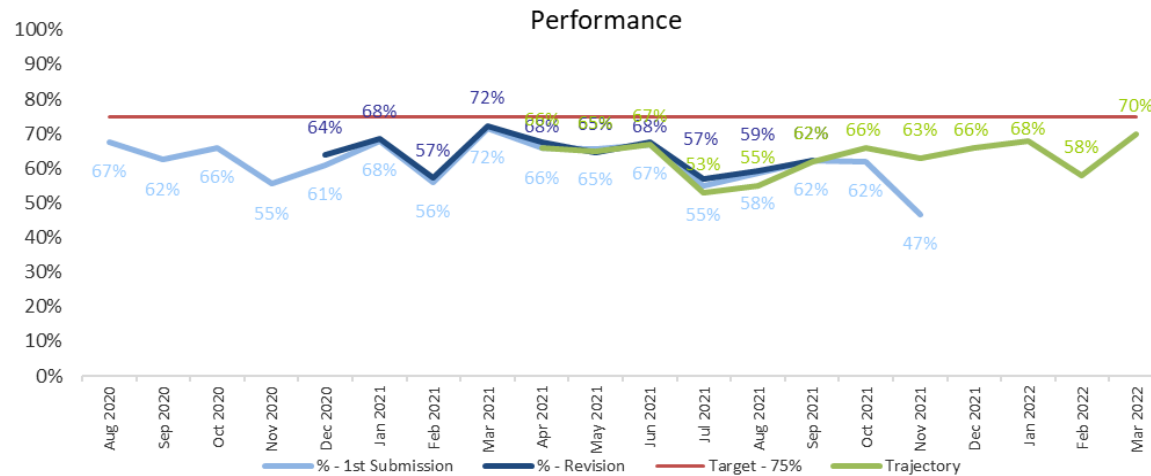


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<b>USC First Outpatient Appointments</b> <i>The number of patients at first outpatient appointment stage by days waiting</i>	To date, early December 2021 figures show total wait volumes have decreased by 10%, which can be attributed to a change in the data recording following the introduction of a new category of patients who are first reviewed in a 'diagnostic one stop' outpatient appointment.	<b>The number of patients waiting for a first outpatient appointment (by total days waiting) – Early December 2021</b>																																																																	
		<table><tr><th>FIRST OPA</th><th>28-Nov</th><th>05-Dec</th><th>% change</th></tr><tr><td>Acute Leukaemia</td><td>0</td><td>0</td><td>0%</td></tr><tr><td>Brain/CNS</td><td>0</td><td>0</td><td>0%</td></tr><tr><td>Breast</td><td>6</td><td>0</td><td>-100%</td></tr><tr><td>Children's Cancer</td><td>0</td><td>0</td><td>0%</td></tr><tr><td>Gynaecological</td><td>74</td><td>109</td><td>47%</td></tr><tr><td>Haematological</td><td>3</td><td>4</td><td>33%</td></tr><tr><td>Head and Neck</td><td>70</td><td>69</td><td>-1%</td></tr><tr><td>Lower GI</td><td>48</td><td>28</td><td>-42%</td></tr><tr><td>Lung</td><td>7</td><td>5</td><td>-29%</td></tr><tr><td>Other</td><td>128</td><td>59</td><td>-54%</td></tr><tr><td>Sarcoma</td><td>15</td><td>13</td><td>-13%</td></tr><tr><td>Skin</td><td>117</td><td>110</td><td>-6%</td></tr><tr><td>Upper GI</td><td>17</td><td>31</td><td>82%</td></tr><tr><td>Urological</td><td>16</td><td>24</td><td>50%</td></tr><tr><td></td><td><b>501</b></td><td><b>452</b></td><td><b>-10%</b></td></tr></table>	FIRST OPA	28-Nov	05-Dec	% change	Acute Leukaemia	0	0	0%	Brain/CNS	0	0	0%	Breast	6	0	-100%	Children's Cancer	0	0	0%	Gynaecological	74	109	47%	Haematological	3	4	33%	Head and Neck	70	69	-1%	Lower GI	48	28	-42%	Lung	7	5	-29%	Other	128	59	-54%	Sarcoma	15	13	-13%	Skin	117	110	-6%	Upper GI	17	31	82%	Urological	16	24	50%		<b>501</b>	<b>452</b>	<b>-10%</b>	
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<b>Radiotherapy waiting times</b>  <i>The percentage of patients receiving radiotherapy treatment</i>	Radiotherapy waiting times are challenging however the provision of emergency radiotherapy within 1 and 2 days has been maintained at 100% throughout the COVID19 outbreak.	<table><tr><th>Measure</th><th>Target</th><th>Nov-21</th></tr><tr><td>Scheduled (21 Day Target)</td><td>80%</td><td>30%</td></tr><tr><td>Scheduled (28 Day Target)</td><td>100%</td><td>61%</td></tr><tr><td>Urgent SC (7 Day Target)</td><td>80%</td><td>60%</td></tr><tr><td>Urgent SC (14 Day Target)</td><td>100%</td><td>100%</td></tr><tr><td>Emergency (within 1 day)</td><td>80%</td><td>100%</td></tr><tr><td>Emergency (within 2 days)</td><td>100%</td><td>100%</td></tr><tr><td>Elective Delay (21 Day Target)</td><td>80%</td><td>79%</td></tr><tr><td>Elective Delay (28 Day Target)</td><td>100%</td><td>86%</td></tr></table>	Measure	Target	Nov-21	Scheduled (21 Day Target)	80%	30%	Scheduled (28 Day Target)	100%	61%	Urgent SC (7 Day Target)	80%	60%	Urgent SC (14 Day Target)	100%	100%	Emergency (within 1 day)	80%	100%	Emergency (within 2 days)	100%	100%	Elective Delay (21 Day Target)	80%	79%	Elective Delay (28 Day Target)	100%	86%	<div><div><h3>Radiotherapy waiting times</h3><table><thead><tr><th>Measure</th><th>Nov-20</th><th>Dec-20</th><th>Jan-21</th><th>Feb-21</th><th>Mar-21</th><th>Apr-21</th><th>May-21</th><th>Jun-21</th><th>Jul-21</th><th>Aug-21</th><th>Sep-21</th><th>Oct-21</th><th>Nov-21</th></tr></thead><tbody><tr><td>Scheduled (21 Day Target)</td><td>65%</td><td>70%</td><td>60%</td><td>35%</td><td>35%</td><td>35%</td><td>40%</td><td>60%</td><td>60%</td><td>58%</td><td>35%</td><td>35%</td><td>30%</td></tr><tr><td>Scheduled (28 Day Target)</td><td>85%</td><td>85%</td><td>85%</td><td>75%</td><td>80%</td><td>80%</td><td>85%</td><td>85%</td><td>90%</td><td>90%</td><td>85%</td><td>85%</td><td>60%</td></tr><tr><td>Urgent SC (7 Day Target)</td><td>35%</td><td>50%</td><td>50%</td><td>25%</td><td>35%</td><td>35%</td><td>50%</td><td>45%</td><td>55%</td><td>55%</td><td>25%</td><td>30%</td><td>60%</td></tr><tr><td>Urgent SC (14 Day Target)</td><td>95%</td><td>85%</td><td>90%</td><td>90%</td><td>90%</td><td>85%</td><td>85%</td><td>80%</td><td>85%</td><td>90%</td><td>85%</td><td>90%</td><td>85%</td></tr><tr><td>Emergency (within 1 day)</td><td>100%</td><td>100%</td><td>100%</td><td>100%</td><td>100%</td><td>100%</td><td>100%</td><td>100%</td><td>100%</td><td>100%</td><td>100%</td><td>100%</td><td>100%</td></tr><tr><td>Emergency (within 2 days)</td><td>100%</td><td>100%</td><td>100%</td><td>100%</td><td>100%</td><td>100%</td><td>100%</td><td>100%</td><td>100%</td><td>100%</td><td>100%</td><td>100%</td><td>100%</td></tr><tr><td>Elective Delay (21 Day Target)</td><td>60%</td><td>65%</td><td>65%</td><td>60%</td><td>75%</td><td>80%</td><td>80%</td><td>85%</td><td>90%</td><td>90%</td><td>85%</td><td>85%</td><td>80%</td></tr><tr><td>Elective Delay (28 Day Target)</td><td>75%</td><td>85%</td><td>85%</td><td>80%</td><td>85%</td><td>85%</td><td>90%</td><td>90%</td><td>95%</td><td>95%</td><td>90%</td><td>90%</td><td>85%</td></tr></tbody></table></div></div>	Measure	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Scheduled (21 Day Target)	65%	70%	60%	35%	35%	35%	40%	60%	60%	58%	35%	35%	30%	Scheduled (28 Day Target)	85%	85%	85%	75%	80%	80%	85%	85%	90%	90%	85%	85%	60%	Urgent SC (7 Day Target)	35%	50%	50%	25%	35%	35%	50%	45%	55%	55%	25%	30%	60%	Urgent SC (14 Day Target)	95%	85%	90%	90%	90%	85%	85%	80%	85%	90%	85%	90%	85%	Emergency (within 1 day)	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	Emergency (within 2 days)	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	Elective Delay (21 Day Target)	60%	65%	65%	60%	75%	80%	80%	85%	90%	90%	85%	85%	80%	Elective Delay (28 Day Target)	75%	85%	85%	80%	85%	85%	90%	90%	95%	95%	90%	90%	85%
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Urgent SC (14 Day Target)	95%	85%	90%	90%	90%	85%	85%	80%	85%	90%	85%	90%	85%																																																																																																																																															
Emergency (within 1 day)	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%																																																																																																																																															
Emergency (within 2 days)	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%																																																																																																																																															
Elective Delay (21 Day Target)	60%	65%	65%	60%	75%	80%	80%	85%	90%	90%	85%	85%	80%																																																																																																																																															
Elective Delay (28 Day Target)	75%	85%	85%	80%	85%	85%	90%	90%	95%	95%	90%	90%	85%																																																																																																																																															

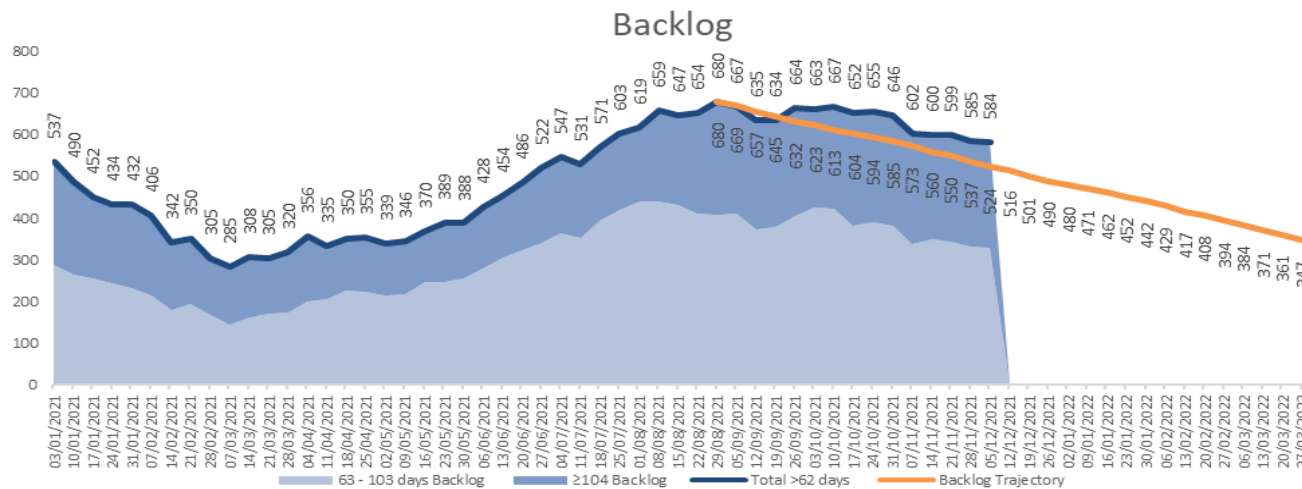
## Cancer Services – Performance Escalation Updates

### 1.SCP performance trajectory



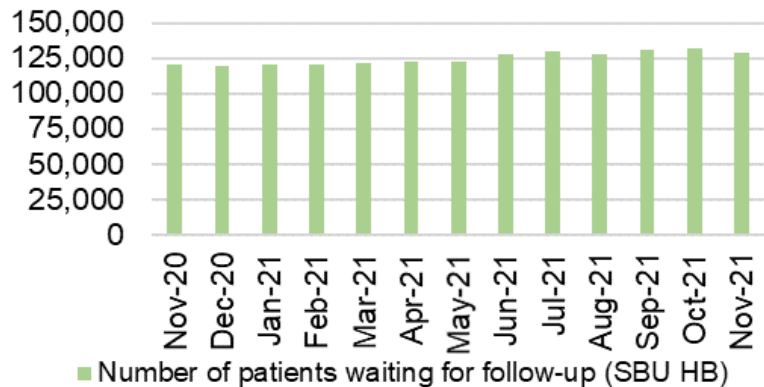
1. SCP performance in October 2021 was 62% which was below the outlined trajectory of 66%. November 2021 performance is still in draft format and takes 30 days to validate from the month end.

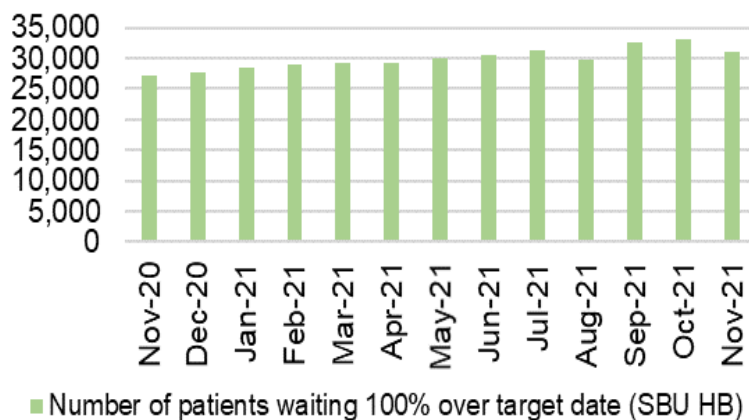
### 1. Proposed backlog improvements to support SCP performance



2. Shows the weekly breakdown of the backlog reduction against the proposed trajectories. There are a few key service areas who are off target against their trajectories, however the backlog is beginning to show a reduction.



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

	<b>2. Delayed follow-ups: Number of patients waiting 100% over target</b>  <table><caption>2. Delayed follow-ups: Number of patients waiting 100% over target date (SBU HB)</caption><thead><tr><th>Month</th><th>Number of patients</th></tr></thead><tbody><tr><td>Nov-20</td><td>28,000</td></tr><tr><td>Dec-20</td><td>28,000</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>28,000</td></tr><tr><td>Apr-21</td><td>28,000</td></tr><tr><td>May-21</td><td>28,000</td></tr><tr><td>Jun-21</td><td>28,000</td></tr><tr><td>Jul-21</td><td>28,000</td></tr><tr><td>Aug-21</td><td>28,000</td></tr><tr><td>Sep-21</td><td>28,000</td></tr><tr><td>Oct-21</td><td>28,000</td></tr><tr><td>Nov-21</td><td>28,000</td></tr></tbody></table>	Month	Number of patients	Nov-20	28,000	Dec-20	28,000	Jan-21	28,000	Feb-21	28,000	Mar-21	28,000	Apr-21	28,000	May-21	28,000	Jun-21	28,000	Jul-21	28,000	Aug-21	28,000	Sep-21	28,000	Oct-21	28,000	Nov-21	28,000
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PATIENT EXPERIENCE		
Description	Current Performance	Trend
<b>Patient experience</b>  1. Number of friends and family surveys completed  2. Percentage of patients/ service users who would recommend and highly recommend	<ul style="list-style-type: none"> <li>Health Board Friends &amp; Family patient satisfaction level in November 2021 was 94% and 3,194 surveys were completed.               <ul style="list-style-type: none"> <li>Singleton/ Neath Port Talbot Hospitals Service Group completed 1,602 surveys in November 2021, with a recommended score of 94%.</li> <li>Morrison Hospital completed 1,131 surveys in November 2021, with a recommended score of 93%.</li> <li>Primary &amp; Community Care completed 360 surveys for November 2021, with a recommended score of 94%.</li> <li>The Mental Health Service Group completed 36 surveys for November 2021, with a recommended score of 97%.</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																																																												
<b>Patient concerns</b>  <i>1. Number of formal complaints received</i>          <i>2. Percentage of concerns that have received a final reply or an interim reply up to and including 30 working days from the date the concern was first received by the organisation</i>	<p>1. In September 2021, the Health Board received 115 formal complaints; this is equal to the number seen in August 2021.</p> <p>Since the COVID19 outbreak began in March 2020, the monthly number of complaints received has been significantly low. The numbers have gradually increased each month and numbers are now consistent with those seen pre-Covid.</p>	<p><b>1. Number of formal complaints received</b></p> <table border="1"><caption>1. Number of formal complaints received</caption><thead><tr><th>Month</th><th>MH &amp; LD</th><th>Morriston Hospital</th><th>NPT Hospital</th><th>PCCS</th><th>Singleton Hospital</th></tr></thead><tbody><tr><td>Jan-21</td><td>10</td><td>35</td><td>5</td><td>10</td><td>15</td></tr><tr><td>Feb-21</td><td>15</td><td>40</td><td>5</td><td>10</td><td>20</td></tr><tr><td>Mar-21</td><td>10</td><td>50</td><td>5</td><td>20</td><td>25</td></tr><tr><td>Apr-21</td><td>25</td><td>25</td><td>5</td><td>10</td><td>25</td></tr><tr><td>May-21</td><td>15</td><td>55</td><td>5</td><td>15</td><td>25</td></tr><tr><td>Jun-21</td><td>20</td><td>70</td><td>10</td><td>15</td><td>30</td></tr><tr><td>Jul-21</td><td>25</td><td>50</td><td>5</td><td>20</td><td>30</td></tr><tr><td>Aug-21</td><td>15</td><td>50</td><td>5</td><td>10</td><td>35</td></tr><tr><td>Sep-21</td><td>15</td><td>60</td><td>5</td><td>15</td><td>20</td></tr></tbody></table> <p>■ MH &amp; LD ■ Morriston Hospital ■ NPT Hospital ■ PCCS ■ Singleton Hospital</p>	Month	MH & LD	Morriston Hospital	NPT Hospital	PCCS	Singleton Hospital	Jan-21	10	35	5	10	15	Feb-21	15	40	5	10	20	Mar-21	10	50	5	20	25	Apr-21	25	25	5	10	25	May-21	15	55	5	15	25	Jun-21	20	70	10	15	30	Jul-21	25	50	5	20	30	Aug-21	15	50	5	10	35	Sep-21	15	60	5	15	20
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	<p>2. The overall Health Board rate for responding to concerns within 30 working days was 75% in September 2021, against the Welsh Government target of 75% and Health Board target of 80%.</p> <p>Below is a breakdown of performance against the 30-day response target:</p> <table border="1"><thead><tr><th></th><th>30 day response rate</th></tr></thead><tbody><tr><td>Neath Port Talbot Hospital</td><td>50%</td></tr><tr><td>Morriston Hospital</td><td>84%</td></tr><tr><td>Mental Health &amp; Learning Disabilities</td><td>92%</td></tr><tr><td>Primary, Community and Therapies</td><td>73%</td></tr><tr><td>Singleton Hospital</td><td>52%</td></tr></tbody></table>		30 day response rate	Neath Port Talbot Hospital	50%	Morriston Hospital	84%	Mental Health & Learning Disabilities	92%	Primary, Community and Therapies	73%	Singleton Hospital	52%	<p><b>2. Response rate for concerns within 30 days</b></p> <table border="1"><caption>2. Response rate for concerns within 30 days</caption><thead><tr><th>Month</th><th>Health Board Total</th></tr></thead><tbody><tr><td>Sep-20</td><td>80%</td></tr><tr><td>Oct-20</td><td>75%</td></tr><tr><td>Nov-20</td><td>80%</td></tr><tr><td>Dec-20</td><td>80%</td></tr><tr><td>Jan-21</td><td>70%</td></tr><tr><td>Feb-21</td><td>80%</td></tr><tr><td>Mar-21</td><td>80%</td></tr><tr><td>Apr-21</td><td>80%</td></tr><tr><td>May-21</td><td>80%</td></tr><tr><td>Jun-21</td><td>68%</td></tr><tr><td>Jul-21</td><td>68%</td></tr><tr><td>Aug-21</td><td>82%</td></tr><tr><td>Sep-21</td><td>75%</td></tr></tbody></table> <p>■ Health Board Total ■ HB Profile</p>	Month	Health Board Total	Sep-20	80%	Oct-20	75%	Nov-20	80%	Dec-20	80%	Jan-21	70%	Feb-21	80%	Mar-21	80%	Apr-21	80%	May-21	80%	Jun-21	68%	Jul-21	68%	Aug-21	82%	Sep-21	75%																				
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## 6.1 Overview

Harm from wider societal actions/lockdown																	
Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21
Childhood immunisations																	
% children who received 3 doses of the hexavalent '6 in 1' vaccine by age 1	NPT	95%	90%	↑	97.2%	94.1%		95.5%		96.6%							
	Swansea			↑	96.4%	96.3%		95.9%									
	HB Total			↑	96.7%	95.4%		95.7%		96.2%							
% children who received MenB2 vaccine by age 1	NPT	95%	90%	↑	97.8%	93.8%		95.2%		96.6%							
	Swansea			↑	95.8%	96.1%		96.3%		95.5%							
	HB Total			↑	96.6%	95.2%		95.8%		95.9%							
% children who received PCV2 vaccine by age 1	NPT	95%	90%	↑	98.1%	96.6%		94.4%		98.2%							
	Swansea			↑	96.2%	97.2%		95.4%		96.8%							
	HB Total			↑	96.9%	96.9%		95.0%		97.3%							
% children who received Rotavirus vaccine by age 1	NPT	95%	90%	↑	95.0%	93.8%		94.0%		96.6%							
	Swansea			↑	95.1%	94.1%		94.8%		94.4%							
	HB Total			↑	95.1%	94.0%		94.6%		95.2%							
% children who received MMR1 vaccine by age 2	NPT	95%	90%	↑	93.6%	95.5%		94.0%		94.3%							
	Swansea			↑	95.2%	93.1%		94.8%		93.8%							
	HB Total			↑	94.6%	94.0%		94.6%		94.0%							
% children who received PCV13 vaccine by age 2	NPT	95%	90%	↑	93.9%	96.1%		94.4%		95.6%							
	Swansea			↑	95.2%	93.3%		95.4%		93.0%							
	HB Total			↑	94.7%	94.3%		95.0%		93.9%							
% children who received MenB4 vaccine by age 2	NPT	95%	90%	↑	93.9%	95.5%		94.1%		95.3%							
	Swansea			↑	95.2%	93.3%		95.5%		93.0%							
	HB Total			↑	94.7%	94.1%		95.0%		93.8%							
% children who received Hib/MenC vaccine by age 2	NPT	95%	90%	↑	93.6%	95.2%		93.5%		95.3%							
	Swansea			↑	94.8%	92.7%		95.7%		93.5%							
	HB Total			↑	94.4%	96.3%		94.9%		94.1%							
Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21
% children who are up to date in schedule by age 4	NPT	95%	90%	↑	86.4%	86.6%		87.9%		86.4%							
	Swansea			↑	87.8%	86.2%		88.1%		88.3%							
	HB Total			↑	87.2%	86.3%		88.0%		87.6%							
% of children who received 2 doses of the MMR vaccine by age 5	NPT	95%	90%	↑	92.0%	93.9%		90.8%		89.0%							
	Swansea			↑	92.0%	91.4%		91.3%		90.3%							
	HB Total			↑	92.0%	92.4%		91.1%		89.8%							
% children who received 5 in 1 vaccine by age 5	NPT	95%	90%	↑	92.5%	93.7%		91.3%		89.3%							
	Swansea			↑	93.1%	90.5%		92.0%		92.0%							
	HB Total			↑	92.9%	91.7%		91.7%		91.0%							
% children who received MMR vaccination by age 16	NPT	95%	90%	↑	96.0%	90.5%		90.1%		94.0%							
	Swansea			↑	93.6%	87.8%		91.2%		90.0%							
	HB Total			↑	94.5%	88.9%		90.8%		91.6%							
% children who received Teenage booster by age 16	NPT	90%	85%	↑	92.7%	91.3%		91.6%		90.4%							
	Swansea			↑	92.2%	90.0%		89.9%		90.0%							
	HB Total			↑	92.4%	90.5%		90.6%		90.2%							
% children who received MenACWY vaccine by age 16	NPT	Improve		↑	92.9%	92.1%		92.1%		90.9%							
	Swansea			↑	92.3%	90.8%		91.1%		90.4%							
	HB Total			↑	92.5%	91.3%		91.5%		90.6%							

Measure	Locality	National/ Local Target	Internal profile	Trend	SBU													
					Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	
Mental Health Services																		
% of urgent assessments undertaken within 48 hours from receipt of referral (Crisis) (< 18 yrs)	< 18 years old (CAMHS)	100%			100%	100%	100%	100%	100%	100%	100%	93%	94%	79%	100%	95%	97%	
% of patients waiting less than 28 days for 1st outpatient appointment (< 18 yrs)	< 18 years old (CAMHS)	80%			88%	61%	53%	66%	63%	60%	61%	58%	41%	48%	40%	40%		
% of routine assessments undertaken within 28 days from receipt of referral (PCAMHS) (< 18 yrs)	< 18 years old (CAMHS)	80%			41%	73%	29%	97%	46%	0%	0%	0%	29%	37%	89%	65%		
% of routine assessments undertaken within 28 days from receipt of referral (SCAMHS) (< 18 yrs)	< 18 years old (CAMHS)	80%			62%	58%	60%	56%	53%	48%	53%	44%	29%	32%	41%	3%		
% of mental health assessments undertaken within (up to and including) 28 days from the date of receipt of referral (> 18 yrs)	> 18 years old	80%			98%	99%	96%	98%	97%	97%	98%	99%	98%	100%	96%	98%		
% of therapeutic interventions started within 28 days following assessment by LPMHSS (< 18 yrs)	< 18 years old (CAMHS)	80%			100%	100%	93%	97%	91%	49%	67%	1%	100%	82%	35%	0%		
% of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS (> 18 yrs)	> 18 years old	80%			98%	95%	95%	98%	97%	92%	96%	99%	97%	100%	90%	98%		
% of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health (> 18 yrs)	> 18 years old	95%			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%		
% of patients with NDD receiving diagnostic assessment and intervention within 26 weeks (< 18 yrs)	< 18 years old (CAMHS)	80%			24%	26%	24%	28%	30%	30%	33%	32%	34%	27%	34%	34%		
% residents in receipt of secondary mental health services (all ages) who have a valid care and treatment plan (CTP) (< 18 yrs)	< 18 years old (CAMHS)	90%			81%	82%	83%	84%	82%	82%	83%	81%	81%	65%	84%	84%		
% residents in receipt of secondary mental health services (all ages) who have a valid care and treatment plan (CTP) (> 18 yrs)	> 18 years old	90%			91%	89%	91%	91%	91%	91%	92%	88%	88%	84%	84%	83%		

## 6.2 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 October 2021, 97.8% of assessments were undertaken within 28 days of referral for patients 18 years and over.</p> <p>2. In October 2021, the percentage of therapeutic interventions started within 28 days following an assessment by the Local Primary Mental Health Support Service (LPMHSS) was 98%.</p> <p>3. 83% of residents in receipt of secondary care mental health services had a valid Care and Treatment Plan in October 2021.</p> <p>4. In October 2021, 100% of patients waited less than 26 weeks for psychological therapy. This was above the national target of 95%.</p>	<p><b>1. % Mental Health assessments undertaken within 28 days from receipt of referral</b></p> <p><b>2. % Mental Health therapeutic interventions started within 28 days following LPMHSS assessment</b></p> <p><b>3. % residents with a valid Care and Treatment Plan (CTP)</b></p> <p><b>4. % waiting less than 26 weeks for Psychology Therapy</b></p>

CHILD & ADOLESCENT MENTAL HEALTH (CAMHS)																																												
Description	Current Performance	Trend																																										
1. Crisis - % Urgent Assessment by CAMHS undertaken within 48 Hours from receipt of referral	1. In October 2021, 97% of CAMHS patients received an assessment within 48 hours.	<div>1. Crisis- assessment within 48 hours</div> <table><thead><tr><th>Month</th><th>% urgent assessments within 48 hours</th></tr></thead><tbody><tr><td>Oct-20</td><td>95%</td></tr><tr><td>Nov-20</td><td>95%</td></tr><tr><td>Dec-20</td><td>95%</td></tr><tr><td>Jan-21</td><td>95%</td></tr><tr><td>Feb-21</td><td>95%</td></tr><tr><td>Mar-21</td><td>95%</td></tr><tr><td>Apr-21</td><td>95%</td></tr><tr><td>May-21</td><td>90%</td></tr><tr><td>Jun-21</td><td>90%</td></tr><tr><td>Jul-21</td><td>75%</td></tr><tr><td>Aug-21</td><td>95%</td></tr><tr><td>Sep-21</td><td>95%</td></tr><tr><td>Oct-21</td><td>97%</td></tr></tbody></table>	Month	% urgent assessments within 48 hours	Oct-20	95%	Nov-20	95%	Dec-20	95%	Jan-21	95%	Feb-21	95%	Mar-21	95%	Apr-21	95%	May-21	90%	Jun-21	90%	Jul-21	75%	Aug-21	95%	Sep-21	95%	Oct-21	97%														
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2. Primary CAMHS (P-CAMHS) - % Routine Assessment by CAMHS undertaken within 28 days from receipt of referral	2. 65% of routine assessments were undertaken within 28 days from referral in October 2021 against a target of 80%.	<div>2. and 3. P-CAMHS % assessments and therapeutic interventions within 28 days</div> <table><thead><tr><th>Month</th><th>% of assess in 28 days</th><th>% interventions in 28 days</th></tr></thead><tbody><tr><td>Oct-20</td><td>25%</td><td>85%</td></tr><tr><td>Nov-20</td><td>45%</td><td>85%</td></tr><tr><td>Dec-20</td><td>75%</td><td>85%</td></tr><tr><td>Jan-21</td><td>25%</td><td>85%</td></tr><tr><td>Feb-21</td><td>85%</td><td>85%</td></tr><tr><td>Mar-21</td><td>45%</td><td>85%</td></tr><tr><td>Apr-21</td><td>55%</td><td>55%</td></tr><tr><td>May-21</td><td>65%</td><td>65%</td></tr><tr><td>Jun-21</td><td>0%</td><td>0%</td></tr><tr><td>Jul-21</td><td>25%</td><td>85%</td></tr><tr><td>Aug-21</td><td>45%</td><td>85%</td></tr><tr><td>Sep-21</td><td>85%</td><td>45%</td></tr><tr><td>Oct-21</td><td>65%</td><td>0%</td></tr></tbody></table>	Month	% of assess in 28 days	% interventions in 28 days	Oct-20	25%	85%	Nov-20	45%	85%	Dec-20	75%	85%	Jan-21	25%	85%	Feb-21	85%	85%	Mar-21	45%	85%	Apr-21	55%	55%	May-21	65%	65%	Jun-21	0%	0%	Jul-21	25%	85%	Aug-21	45%	85%	Sep-21	85%	45%	Oct-21	65%	0%
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3. Primary CAMHS (P-CAMHS) - % Therapeutic interventions started within 28 days following assessment by LPMHSS	3. 0% of therapeutic interventions were started within 28 days following assessment by LPMHSS in October 2021.																																											
4. NDD - % Neurodevelopmental Disorder patients receiving a Diagnostic Assessment within 26 weeks	4. 34% of NDD patients received a diagnostic assessment within 26 weeks in October 2021 against a target of 80%.	<div>4. NDD- assessment within 26 weeks</div> <table><thead><tr><th>Month</th><th>%NDD within 26 weeks</th></tr></thead><tbody><tr><td>Oct-20</td><td>25%</td></tr><tr><td>Nov-20</td><td>25%</td></tr><tr><td>Dec-20</td><td>25%</td></tr><tr><td>Jan-21</td><td>25%</td></tr><tr><td>Feb-21</td><td>25%</td></tr><tr><td>Mar-21</td><td>25%</td></tr><tr><td>Apr-21</td><td>25%</td></tr><tr><td>May-21</td><td>25%</td></tr><tr><td>Jun-21</td><td>25%</td></tr><tr><td>Jul-21</td><td>25%</td></tr><tr><td>Aug-21</td><td>25%</td></tr><tr><td>Sep-21</td><td>25%</td></tr><tr><td>Oct-21</td><td>34%</td></tr></tbody></table>	Month	%NDD within 26 weeks	Oct-20	25%	Nov-20	25%	Dec-20	25%	Jan-21	25%	Feb-21	25%	Mar-21	25%	Apr-21	25%	May-21	25%	Jun-21	25%	Jul-21	25%	Aug-21	25%	Sep-21	25%	Oct-21	34%														
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5. Specialist CAMHS (S-CAMHS) - % Routine Assessment by SCAMHS undertaken within 28 days from receipt of referral	5. 3% of routine assessments by SCAMHS were undertaken within 28 days in October 2021.	<div>5. S-CAMHS % assessments within 28 days</div> <table><thead><tr><th>Month</th><th>% S-CAMHS assessments in 28 days</th></tr></thead><tbody><tr><td>Oct-20</td><td>75%</td></tr><tr><td>Nov-20</td><td>65%</td></tr><tr><td>Dec-20</td><td>65%</td></tr><tr><td>Jan-21</td><td>65%</td></tr><tr><td>Feb-21</td><td>65%</td></tr><tr><td>Mar-21</td><td>55%</td></tr><tr><td>Apr-21</td><td>55%</td></tr><tr><td>May-21</td><td>55%</td></tr><tr><td>Jun-21</td><td>45%</td></tr><tr><td>Jul-21</td><td>25%</td></tr><tr><td>Aug-21</td><td>25%</td></tr><tr><td>Sep-21</td><td>45%</td></tr><tr><td>Oct-21</td><td>3%</td></tr></tbody></table>	Month	% S-CAMHS assessments in 28 days	Oct-20	75%	Nov-20	65%	Dec-20	65%	Jan-21	65%	Feb-21	65%	Mar-21	55%	Apr-21	55%	May-21	55%	Jun-21	45%	Jul-21	25%	Aug-21	25%	Sep-21	45%	Oct-21	3%														
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## APPENDIX 2: Summary

The following table provides a high level overview of the Health Board's most recent performance against key quality and safety measures by quadrant component measure.

Harm quadrant- Harm from Covid itself						
Category	Measure	Target Type	Target	Internal HB Profile	Reporting period	HB Total
COVID19 related	Number of new COVID19 cases*	Local			Nov-21	8,247
	Number of staff referred for Antigen Testing*	Local			Nov-21	494
	Number of staff awaiting results of COVID19 test*	Local			Nov-21	0
	Number of COVID19 related incidents*	Local			Oct-21	73
	Number of COVID19 related serious incidents*	Local			Oct-21	0
	Number of COVID19 related complaints*	Local			Nov-21	14
	Number of COVID19 related risks*	Local			Nov-21	0
	Number of staff self isolated (asymptomatic)*	Local			Nov-21	65
	Number of staff self isolated (symptomatic)*	Local			Nov-21	120
	% sickness*	Local			Nov-21	1.4%

\* In the absence of local profiles, RAG is based on in-month movement



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Harm quadrant- Harm from overwhelmed NHS and social care system						
Category	Measure	Target Type	Target	Internal HB Profile	Reporting period	HB Total
Unscheduled Care	Number of ambulance handovers over one hour*	National	0		Nov-21	670
	% 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	95%		Nov-21	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	0		Nov-21	1,055
Stroke	% of patients who have a direct admission to an acute stroke unit within 4 hours*	National	59.8% (UK SNAP average)		Nov-21	11%
	% of patients who receive a CT scan within 1 hour*	National	54.5% (UK SNAP average)		Nov-21	41%
	% of patients who are assessed by a stroke specialist consultant physician within 24 hours*	National	84.2% (UK SNAP average)		Nov-21	96%
	% of thrombolysed stroke patients with a door to door needle time of less than or equal to 45 minutes*	National	12 month improvement trend		Nov-21	9%
	% of patients receiving the required minutes for speech and language therapy*	National	12 month improvement trend		Nov-21	54%
Healthcare acquired infections	Number of E.Coli bacteraemia cases	National	12 month reduction trend	17	Nov-21	22
	Number of S.aureus bacteraemia cases	National		11	Nov-21	4
	Number of C.difficile cases	National		13	Nov-21	20
	Number of Klebsiella cases	National		8	Nov-21	7
	Number of Aeruginosa cases	National		2	Nov-21	3
	Compliance with hand hygiene audits	Local	95%		Nov-21	92%
Serious incidents	Number of Serious Incidents	Local	12 month reduction trend		Nov-21	8
	Of the serious incidents due for assurance, the % which were assured within the agreed timescales	Local	90%		Nov-21	0%
	Number of Never Events	Local	0		Nov-21	1

Harm quadrant- Harm from overwhelmed NHS and social care system						
Category	Measure	Target Type	Target	Internal HB Profile	Reporting period	HB Total
Fractured Neck of Femur (#NOF)	Prompt orthogeriatric assessment- % patients receiving an assessment by a senior geriatrician within 72 hours of presentation	Local	75%		Oct-21	88.0%
	Prompt surgery - % patients undergoing surgery by the day following presentation with hip fracture	Local	75%		Oct-21	57.7%
	NICE compliant surgery - % of operations consistent with the recommendations of NICE CG124	Local	75%		Oct-21	69.9%
	Prompt mobilisation after surgery - % of patients out of bed (standing or hoisted) by the day after operation	Local	75%		Oct-21	71.1%
	Not delirious when tested- % patients (<4 on 4AT test) when tested in the week after operation	Local	75%		Oct-21	76.8%
	Return to original residence- % patients discharged back to original residence, or in that residence at 120 day follow-up	Local	75%		Sep-21	66.1%
	30 day mortality - crude and adjusted figures, noting ONS data only correct after around 6 months	Local	12 month improvement trend		Jan-21	7.5%
	% of survival within 30 days of emergency admission for a hip fracture	Local	12 month improvement trend		Aug-21	86.7%
Pressure Ulcers	Total number of Pressure Ulcers	Local	12 month reduction trend		Oct-21	74
	Total number of Grade 3+ Pressure Ulcers	Local	12 month reduction trend		Oct-21	8
	Pressure Ulcer (Hosp) patients per 100,000 admissions	Local	12 month reduction trend		Oct-21	613
Inpatient Falls	Total number of Inpatient Falls	Local	12 month reduction trend		Nov-21	213
	Inpatient Falls per 1,000 beddays	Local	Between 3.0 & 5.0		Nov-21	5.35
Mortality	Universal Mortality reviews undertaken within 28 days (Sta	Local	95%		Sep-21	97%
	Stage 2 mortality reviews completed within 60 days	Local	95%		Jan-21	37%
	Crude hospital mortality rate by Delivery Unit (74 years of	National	12 month reduction trend		Oct-21	1.03%

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Harm quadrant- Harm from reduction in non-Covid activity						
Category	Measure	Target Type	Target	Internal HB Profile	Reporting period	HB Total
Cancer	Single Cancer Pathway- % of patients started treatment within 62 days (with suspensions)*	National	12 month improvement trend		Nov-21 (Draft)	47%
Planned Care	Number of patients waiting > 26 weeks for outpatient appointment	National	0		Oct-21	24,752
	Number of patients waiting > 36 weeks for treatment (inc. Diagnostics > 36 wks)	National	0		Oct-21	37,064
	Number of patients waiting > 8 weeks for a specified diagnostics	National	0		Oct-21	6,008
	Number of patients waiting > 14 weeks for a specified therapy	National	0		Oct-21	629
	Total number of patients waiting for a follow-up outpatient appointment	National	0		Nov-21	129,255
	Number of patients delayed by over 100% past their target date	National	0		Nov-21	30,946
	Number of patients delayed past their agreed target date (booked and not booked)	Local	0		Nov-21	56,618
	Number of Ophthalmology patients without an allocated health risk factor	Local	0		Oct-21	413
	Number of patients without a documented clinical review date	Local	0		Nov-21	4
Patient Experience/ Feedback	Number of friends and family surveys completed	Local	12 month improvement trend		Nov-21	1,131
	% of patients who would recommend and highly recommend	Local	90%	80%	Nov-21	94%
	% of all-Wales surveys scoring 9 or 10 on overall satisfaction	Local	90%	80%	Nov-21	93%
	Number of new complaints received	Local	12 month reduction trend		Sep-21	115
	% of complaints that have received a final reply (under Regulation 24) or an interim reply (under Regulation 26) up to and including 30 working days from the date the complaint was first received by the organisation	National	75%	80%	Sep-21	75%

\* In the absence of local profiles, RAG is based on in-month movement

Harm Quadrant- Harm from wider societal actions/lockdown						
Category	Measure	Target Type	Target	Internal HB Profile	Reporting period	HB Total
Childhood immunisations	% children who received 3 doses of the hexavalent '6 in 1' vaccine by age 1	National	95%	90%	Q2 2021/22	96.2%
	% children who received MenB2 vaccine by age 1	Local	95%	90%	Q2 2021/22	95.9%
	% children who received PCV2 vaccine by age 1		95%	90%	Q2 2021/22	97.3%
	% children who received Rotavirus vaccine by age 1		95%	90%	Q2 2021/22	95.2%
	% children who received MMR1 vaccine by age 2		95%	90%	Q2 2021/22	94.0%
	% children who received PCVf3 vaccine by age 2		95%	90%	Q2 2021/22	93.9%
	% children who received MenB4 vaccine by age 2		95%	90%	Q2 2021/22	93.8%
	% children who received Hib/MenC vaccine by age 2		95%	90%	Q2 2021/22	94.1%
	% children who are up to date in schedule by age 4		95%	90%	Q2 2021/22	87.6%
	% of children who received 2 doses of the MMR vaccine by age 5	National	95%	90%	Q2 2021/22	89.8%
	% children who received 3 in 1 vaccine by age 5	Local	95%	90%	Q2 2021/22	91.0%
	% children who received MMR vaccination by age 16		95%	90%	Q2 2021/22	91.6%
	% children who received teenage booster by age 16		90%	85%	Q2 2021/22	90.2%
	% children who received MenACWY vaccine by age 16		Improve		Q2 2021/22	90.6%
Mental Health (Adult and Children)	% of urgent assessments undertaken within 48 hours from receipt of referral (Crisis) (< 18 yrs)	Local	100%		Oct-21	97%
	% of patients waiting less than 28 days for 1st outpatient appointment (< 18 yrs)	National	80%		Oct-21	40%
	% of routine assessments undertaken within 28 days from receipt of referral (PCAMHS) (< 18 yrs)	National	80%		Oct-21	65%
	% of routine assessments undertaken within 28 days from receipt of referral (SCAMHS) (< 18 yrs)	Local	80%		Oct-21	3%
	% of mental health assessments undertaken within (up to and including) 28 days from the date of receipt of referral (> 18 yrs)	National	80%		Oct-21	98%
	% of therapeutic interventions started within 28 days following assessment by LPMHSS (< 18 yrs)	National	80%		Oct-21	0%
	% of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS (> 18 yrs)	National	80%		Oct-21	98%
	% of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health (> 18 yrs)	National	95%		Oct-21	100.0%
	% of patients with NDD receiving diagnostic assessment and intervention within 26 weeks (< 18 yrs)	National	80%		Oct-21	34%
	% residents in receipt of secondary mental health services (all ages) who have a valid care and treatment plan (CTP) (< 18 yrs)	National	90%		Oct-21	84%
	% residents in receipt of secondary mental health services (all ages) who have a valid care and treatment plan (CTP) (> 18 yrs)	National	90%		Oct-21	83%

	National or local target achieved
	Target not achieved but within tolerance level
	Performance outside of profile/ target

## APPENDIX 3: INTEGRATED PERFORMANCE DASHBOARD

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



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

Harm from reduction in non-Covid activity																							
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21
Primary Care	% adult dental patients in the health board population re-attending NHS primary dental care between 6 and 9 months	National	Oct-21	6.6%	4 quarter ↓			21.8% (Q3 20/21)	1st (Q3 20/21)		17.2%	12.0%	5.9%	5.3%	6.6%	7.8%	9.0%	10.2%	11.4%	11.0%	11.5%	11.4%	
Cancer	% of patients starting definitive treatment within 62 days from point of suspicion (without adjustments)	National	Nov-21 (Draft)	47.0%	12 month ↑			59.0% (Sep-21)	2nd out of 6 organisations (Sep-21)		55.4%	61.0%	67.9%	56.4%	71.6%	65.7%	65.4%	66.8%	55.0%	58.4%	62.2%	61.9%	47.0%
Radiotherapy waiting times	Scheduled (21 Day Target)	Local	Nov-21	30%	80%		✗				58%	71%	45%	35%	42%	37%	40%	31%	60%	57%	58%	37%	30%
	Scheduled (28 Day Target)	Local	Nov-21	61%	100%		✗				85%	88%	82%	80%	85%	77%	87%	70%	84%	91%	89%	84%	61%
	Urgent SC (7 Day Target)	Local	Nov-21	60%	80%		✗				31%	50%	50%	23%	41%	38%	50%	45%	46%	55%	22%	30%	60%
	Urgent SC (14 Day Target)	Local	Nov-21	100%	100%		✓				100%	85%	94%	91%	90%	83%	86%	87%	77%	95%	76%	90%	100%
	Emergency (within 1 day)	Local	Nov-21	100%	80%		✓				100%	100%	100%	100%	100%	91%	100%	100%	100%	100%	100%	100%	100%
	Emergency (within 2 days)	Local	Nov-21	100%	100%		✓				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
	Elective Delay (21 Day Target)	Local	Nov-21	79%	80%		✗				56%	71%	69%	61%	86%	82%	81%	91%	90%	94%	81%	89%	79%
	Elective Delay (28 Day Target)	Local	Nov-21	86%	100%		✗				73%	88%	89%	75%	93%	92%	84%	95%	97%	97%	97%	94%	86%
Planned Care	Number of patients waiting > 8 weeks for a specified diagnostics	National	Nov-21	6008	0			48,408 (Sep-21)	2nd (Sep-21)		6,610	6,579	6,239	5,087	4,554	4,804	4,842	5,230	5,425	5,523	5,732	5,939	6,008
	Number of patients waiting > 14 weeks for a specified therapy	National	Nov-21	629	0			5,798 (Sep-21)	2nd (Sep-21)		817	708	584	491	369	201	166	171	151	186	320	414	629
	% of patients waiting < 26 weeks for treatment	National	Nov-21	47%	95%			54.9% (Sep-21)	6th (Sep-21)		47.6%	48.0%	47.0%	47.9%	48.8%	49.1%	49.1%	50.7%	47.8%	48.3%	48.1%	47.4%	46.8%
	Number of patients waiting > 26 weeks for outpatient appointment	Local	Nov-21	24752	0						21,005	21,179	21,208	21,225	21,760	22,752	23,700	23,279	23,225	23,444	23,997	24,483	24,752
	Number of patients waiting > 36 weeks for treatment	National	Nov-21	37064	0			240,306 (Sep-21)	3rd (Sep-21)		35,387	35,126	33,991	32,719	32,874	33,395	34,447	35,040	35,583	35,999	35,711	36,420	37,064
	The number of patients waiting for a follow-up outpatient appointment	National	Nov-21	129,255	HB target TBC			779,662 (Oct-21)	5th (Oct-21)		120,874	119,963	119,999	120,882	121,403	122,303	123,088	127,444	130,208	127,391	130,963	131,554	129,255
	The number of patients waiting for a follow-up outpatients appointment who are delayed over 100%	National	Nov-21	30,946				199,698 (Oct-21)	5th (Oct-21)		27,156	27,641	28,419	28,862	29,316	29,334	30,062	30,550	31,316	29,770	32,574	33,121	30,946
	% of R1 ophthalmology patient pathways waiting within target date or within 25% beyond target date for an outpatient appointment	National	Oct-21	49%	95%			63.2% (Oct-21)	6th (Oct-21)		48.4%	47.3%	46.7%	47.4%	47.7%	47.2%	46.7%	46.7%	46.3%	46.1%	47.9%	48.6%	
DNAs	% of patients who did not attend a new outpatient appointment	Local	Nov-21	7.0%	12 month ↓						6.6%	7.7%	7.1%	6.2%	5.6%	5.3%	5.7%	6.5%	6.5%	6.4%	7.2%	7.7%	7.0%
	% of patients who did not attend a follow-up outpatient appointment	Local	Nov-21	7.0%	12 month ↓						7.2%	8.2%	7.1%	6.2%	6.7%	6.1%	6.9%	5.5%	7.5%	7.5%	7.6%	7.8%	7.0%
Theatre Efficiencies	Theatre Utilisation rates	Local	Nov-21	67%		90%	✗				74%	59%	65%	73%	75%	80%	78%	77%	72%	69%	72%	66%	67%
	% of theatre sessions starting late	Local	Nov-21	43%		<25%	✗				39%	45%	40%	42%	40%	38%	43%	43%	44%	44%	42%	46%	43%
	% of theatre sessions finishing early	Local	Nov-21	48%		<20%	✗				50%	47%	44%	44%	48%	41%	45%	43%	48%	46%	46%	50%	48%
Postponed operations	Number of procedures postponed either on the day or the day before for specified non-clinical reasons	Local	Jan-21	1,200							1,677	1,509	1,200										
Treatment Fund	All new medicines must be made available no later than 2 months after NICE and AMMSG appraisals	National	Q1 21/22	99.0%	100%	100%	✗	98.6% (Q1 21/22)	3rd out of 6 organisations (Q1 21/22)			98.9%			98.9%			99.0%					
Patient experience	Total antibacterial items per 1,000 STAR-PUs	National	Q2 21/22	249.7	4 quarter ↓			227.5 (Q2 21/22)	6th (Q2 21/22)			258.8			236.2			249.7					
	Patients aged 65 years or over prescribed an antipsychotic	National	Q1 21/22	1,641	Quarter on quarter ↓			10,221 (Q1 21/22)	5th (Q1 21/22)			1,482			1,442			1,641					
	Opioid average daily quantities per 1,000 patients	National	Q2 20/21	4,378	4 quarter ↓			4462.6 (Q1 21/22)	3rd (Q1 21/22)			4,567.7			4360.2			4,378.2					
	Biosimilar medicines prescribed as % of total 'reference' product plus biosimilar	National	Q1 21/22	79.9%	Quarter on quarter ↑			87.7% (Q1 21/22)	5th (Q1 21/22)			79.7%			80.10%			79.9%					
	Number of friends and family surveys completed	Local	Nov-21	3,194		12 month ↑	✓				787	584	678	798	1,050		4,590	3,297	1,912	2,075	2,025	2,733	3,194
	% of who would recommend and highly recommend	Local	Nov-21	94%		90%	✓				84%	77%	79%	85%	87%		96%	97%	92%	92%	92%	92%	94%
	% of all-Wales surveys scoring 9 out 10 on overall satisfaction	Local	Nov-21	93%		90%	✓				85%	65%	81%	94%	93%		92%	96%	95%	92%	96%	93%	93%
Complaints	Number of new formal complaints received	Local	Sep-21	115		12 month trend ↓	✗				103	83	78	94	117	100	115	159	139	115	115		
	% concerns that had final reply (Reg 24)/interim reply (Reg 26) within 30 working days of concern received	National	Sep-21	75%	75%	80%	✓	71.9% (Q3 20/21)	2nd (Q3 20/21)		82%	80%	71%	80%	81%	78%	78%	68%	69%	83%	75%		
	% of acknowledgements sent within 2 working days	Local	Sep-21	100%		100%	✓				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		

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