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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	27th April 2021	Agenda Item	4.1
Report Title	Quality & Safety Performance Report		
Report Author	Darren Griffiths, Director of Finance and Performance (interim)		
Report Sponsor	Darren Griffiths, Director of Finance and Performance (interim)		
Presented by	Darren Griffiths, Director of Finance and Performance (interim)		
Freedom of Information	Open		
Purpose of the Report	The purpose of this report is to provide an update on the current performance of the Health Board at the end of the most recent reporting window in delivering key local performance measures as well as the national measures outlined in the 2020/21 NHS Wales Delivery Framework.		
Key Issues	<p>The Integrated Performance Report is a routine report that provides an overview of how the Health Board is performing against the National Delivery measures and key local quality and safety measures. 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 iteration of the performance report.</p> <p>From the 1st April 2020, RAG'ing has not been applied to the targeted intervention priorities as the profiles were based on the actions within the 2020/21 annual plan which are now not being progressed due to the COVID-19 pandemic. In the absence of local profiles, in-month movement will now be utilised as the basis of RAGing for these measures until revised profiles are received. However, this is unlikely to happen until the pandemic has subsided and services start to return to a new level of normality.</p> <p>Key high level issues to highlight this month are as follows:</p> <p>COVID19- The number of new cases of COVID19 continues to reduce with March 2021 having the lowest amount of new cases of COVID19 since September 2020. Consequently, the occupancy rate of confirmed COVID patients in general medical and critical care beds continue to be reduce.</p> <p>Unscheduled Care- Demand for emergency department care within Swansea Bay University (SBU) Health Board significantly increased in March 2021 however, despite this increase in</p>		

	<p>demand, there was an in-month improvement in the percentage of patients seen within 4 hours in A&E as well as the number of patients waiting over 12 hours in A&E.</p> <p>Planned Care- March 2021 saw an in-month increase in the number of patients waiting over 36 weeks for treatment and the number of patients waiting over 26 weeks appears to have stabilised. Diagnostics and Therapy waiting times have significantly increased since March 2020 however, the number of patients waiting over target reduced again in March 2021 with some therapy services maintaining a nil breach position (i.e. Occupational Therapy and Physiotherapy).</p> <p>Cancer- February 2021 saw a deterioration in performance against the Single Cancer Pathway measure of patients receiving definitive treatment within 62 days. The backlog of patients waiting over 63 days increased in March 2021 but remained lower than the monthly positions seen in quarters 2 and 3 for 2020/21. March's figures are in the process of being validated at the time of writing this report.</p> <p>Mental Health- performance against the Mental Health Measures continues to be maintained. All targets were achieved in February 2021. Psychological therapies access times were 100% for the fourth month in a row in February 2021.</p> <p>Child and Adolescent Mental Health Services (CAMHS)-Access times for routine CAMHS significantly improved to 97% in February 2021 and crisis waiting times continue to be maintained at 100%. Neurodevelopmental Disorders (NDD) access times within 26 weeks continues to be a challenge achieving 28% in February 2021 against a target of 80%.</p> <p>Serious Incidents closures- Performance against the 80% target was 0% in March 2021 as none of the eleven closure forms due to be submitted to Welsh Government were submitted on time.</p>			
Specific Action Required	Information	Discussion	Assurance	Approval
	✓		✓	
Recommendations	<p>Members are asked to:</p> <ul style="list-style-type: none"> • NOTE- current Health Board performance against key measures and targets. 			

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 2020/21 NHS Wales Delivery Framework and local quality & safety measures.

2. BACKGROUND

The 2020/21 NHS Wales Delivery Framework sets out the 78 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 and the Health Board's Q2 Operational Plan. 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 and further work will be undertaken over the next quarter to introduce additional measures that will aid in measuring harm in the system.

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)

The '5 Ways of Working' are demonstrated in the report as follows:

- **Long term** – Actions within this report are both long and short term in order to balance the immediate service issues with long term objectives. In addition, profiles have been included for the Targeted Intervention Priorities for 2019/20 which provides focus on the expected delivery for every month as well as the year end position in March 2020.
- **Prevention** – the NHS Wales Delivery framework provides a measureable mechanism to evidence how the NHS is positively influencing the health and well-being of the citizens of Wales with a particular focus upon maximising people's physical and mental well-being.
- **Integration** – this integrated performance report brings together key performance measures across the seven domains of the NHS Wales Delivery Framework, which identify the priority areas that patients, clinicians and stakeholders wanted the NHS to be measured against. The framework covers a wide spectrum of measures that are aligned with the Well-being of Future Generations (Wales) Act 2015.
- **Collaboration** – in order to manage performance, the Corporate Functions within the Health Board liaise with leads from the Service Groups as well as key individuals from partner organisations including the Local Authorities, Welsh Ambulance Services Trust, Public Health Wales and external Health Boards.
- **Involvement** – Corporate and Service Groups leads are key in identifying performance issues and identifying actions to take forward.

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



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Appendix 1- Quality & Safety Performance Report

April 2021



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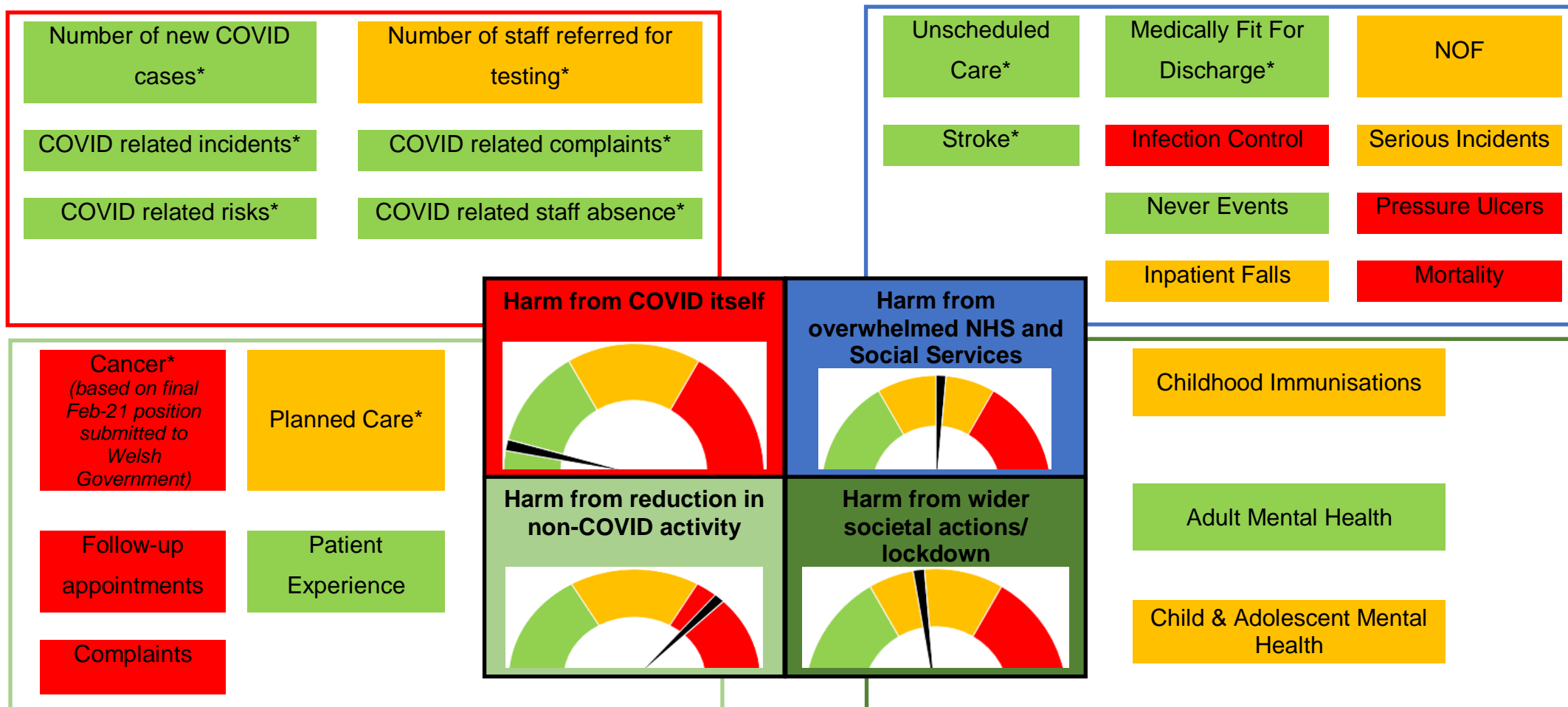
1. OVERVIEW- KEY PERFORMANCE INDICATORS SUMMARY

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.
- Adult Mental health access performance remains excellent and Psychological Therapy performance continues to be over target, achieving 100% in February 2021. CAMHS access to assessments within 28 days significantly improved from 29% in January 2021 to 97% in February 2021.
- Despite an increase in demand on the unscheduled care system in March 2021, performance against the 4 and 12 hour A&E access targets improved.
- Planned care system is still challenging, especially for treatment within 36 weeks. The rate at which the size of the waiting list is increasing was slowing down however, referrals and additions to the waiting list both increased in March 2021. Although there are a significant number of patients waiting over target for diagnostics and therapies, the number of breaches continues to reduce month on month.
- Performance against the Single Cancer Pathway measure of patients receiving definitive treatment within 62 days, deteriorated in February 2021 however, the draft March 2021 shows an improving position.
- All categories of healthcare acquired infections were above target in March 2021 with the exception of *Pseudomonas aeruginosa* which was on target.
- Concerns response performance did not achieve the internal profile of 80% or the national target of 75% in January 2021. The number of formal complaints received increased in March 2021 to pre-COVID levels.
- The number of Friends & Family surveys completed increased in March 2021 and the overall recommendation rate was 87% against an internal target of 90%.
- Serious Incident (SI) numbers have reduced. SI closure performance remained poor in March 2021 (0%)
- The last new Never Event was recorded in November 2020.
- Fractured neck of femur performance in January 2020 continues to be broadly at Welsh National levels (see detail below) and showing an improved position compared with January 2019 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

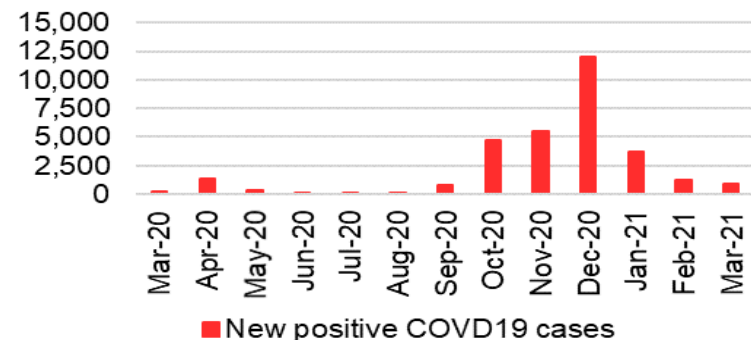
*RAG status based on in-month movement in the absence of local profiles

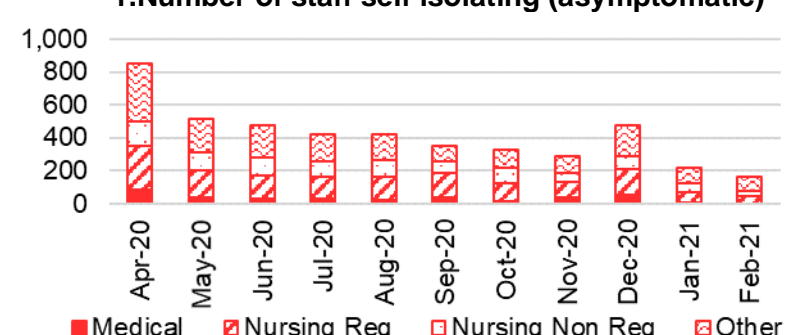
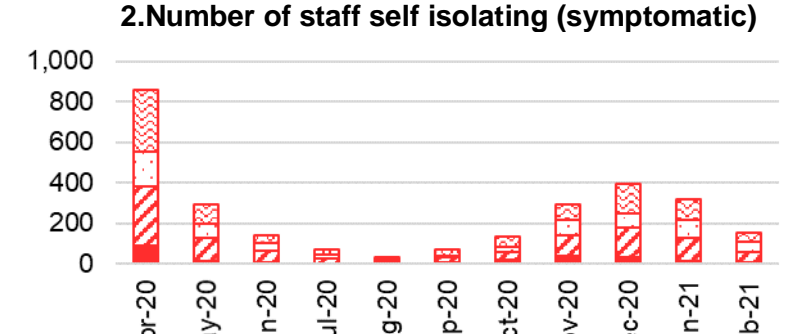
3. HARM QUADRANT- HARM FROM COVID ITSELF

3.1 Overview

Harm quadrant- Harm from Covid itself																	
Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
Number of new COVID19 cases*	HB Total					1,381	303	57	53	66	787	4,664	5,525	11,976	3,759	1,208	907
Number of staff referred for Antigen Testing	HB Total					1,988	504	317	227	235	1,201	1,695	1,741	1,864	684	366	568
Number of staff awaiting results of COVID19 test*	HB Total					0	19	16	1	0	38 (as at 10/10/20)	21 (as at 06/11/20)	41 (as at 06/12/20)	99 (as at 05/01/21)	78 (as at 07/02/21)	69 (as at 06/03/21)	2 (as at 11/04/21)
Number of COVID19 related incidents*	HB Total					119	67	40	26	39	30	87	141	127	84	63	53
Number of COVID19 related serious incidents*	HB Total					1	0	2	0	11	1	1	1	0	0	0	0
Number of COVID19 related complaints*	HB Total					77	61	39	58	27	30	37	50	83	106	131	98
Number of COVID19 related risks*	HB Total					19	20	19	5	8	2	6	7	10	3	3	3
Number of staff self isolated (asymptomatic)*	Medical					81	39	27	29	24	34	17	36	55	7	2	
	Nursing Registered					270	166	145	133	142	149	106	93	152	61	40	
	Nursing Non Registered					148	105	112	97	96	77	95	56	81	57	33	
	Other					352	206	190	163	158	93	111	106	187	93	85	
Number of staff self isolated (symptomatic)*	Medical					90	13	7	2	0	8	17	41	34	16	5	
	Nursing Registered					289	117	56	23	14	25	44	97	145	112	52	
	Nursing Non Registered					177	67	37	18	9	8	25	77	68	88	49	
	Other					304	95	41	27	13	31	46	79	147	100	50	
% sickness*	Medical					14.9%	4.0%	3.0%	2.8%	2.5%	4.0%	3.2%	7.3%	8.3%	2.2%	0.7%	
	Nursing Registered					14.2%	7.0%	5.1%	4.0%	4.0%	4.4%	3.8%	4.7%	7.4%	4.3%	2.3%	
	Nursing Non Registered					16.6%	8.0%	7.2%	5.5%	5.2%	4.2%	6.0%	6.5%	7.3%	7.0%	3.9%	
	Other					11.0%	5.0%	3.6%	2.9%	2.7%	2.0%	2.5%	3.0%	5.4%	3.1%	2.2%	
	All					13.2%	6.0%	4.5%	3.6%	3.5%	3.2%	3.5%	4.4%	6.5%	4.0%	2.4%	

3.2 Updates on key measures

COVID CASES AND TESTING																														
Description	Current Performance	Trend																												
1. Number of new COVID19 cases in Swansea Bay population area	1. Number of new COVID cases In March 2021, there were an additional 907 positive cases recorded bringing the cumulative total to 30,948 in Swansea Bay since March 2020. In March 2021, 39,287 tests were carried out of which 2% (9077) were positive. This is the lowest positivity rate since August 2020.	<div>1.Number of new COVID19 cases for Swansea Bay population</div>  <table border="1"><caption>1. Number of new COVID19 cases for Swansea Bay population</caption><thead><tr><th>Month</th><th>New positive COVID19 cases</th></tr></thead><tbody><tr><td>Mar-20</td><td>0</td></tr><tr><td>Apr-20</td><td>1,000</td></tr><tr><td>May-20</td><td>500</td></tr><tr><td>Jun-20</td><td>200</td></tr><tr><td>Jul-20</td><td>100</td></tr><tr><td>Aug-20</td><td>100</td></tr><tr><td>Sep-20</td><td>500</td></tr><tr><td>Oct-20</td><td>4,500</td></tr><tr><td>Nov-20</td><td>5,500</td></tr><tr><td>Dec-20</td><td>12,500</td></tr><tr><td>Jan-21</td><td>4,000</td></tr><tr><td>Feb-21</td><td>1,500</td></tr><tr><td>Mar-21</td><td>1,000</td></tr></tbody></table> <div>■ New positive COVID19 cases</div>	Month	New positive COVID19 cases	Mar-20	0	Apr-20	1,000	May-20	500	Jun-20	200	Jul-20	100	Aug-20	100	Sep-20	500	Oct-20	4,500	Nov-20	5,500	Dec-20	12,500	Jan-21	4,000	Feb-21	1,500	Mar-21	1,000
	Month		New positive COVID19 cases																											
	Mar-20		0																											
Apr-20	1,000																													
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Aug-20	100																													
Sep-20	500																													
Oct-20	4,500																													
Nov-20	5,500																													
Dec-20	12,500																													
Jan-21	4,000																													
Feb-21	1,500																													
Mar-21	1,000																													
2. Number of staff referred for Antigen testing	2. Staff referred for Antigen testing The cumulative number of staff referred for COVID testing between March 2020 and March 2021 is 11,683 of which 2,102 have had a positive COVID test result (18%).																													
3. Number of staff awaiting results of Antigen test	3. Number of staff awaiting results of Antigen test Occupational Health has implemented a new reporting system that is now integrated with the Health Board's internal COVID dashboard. The new data is reported on a weekly rather than daily basis. The latest figures as at 9 th April 2021 shows that 2 members of staff awaiting their antigen test result.																													

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. & 2. Number of staff self-isolating (asymptomatic and symptomatic) Between January and February 2021, the number of staff self-isolating (asymptomatic) significantly reduced from 218 to 160 and the number of staff self-isolating (symptomatic) reduced from 316 to 156. In February 2021, "other" staff had the largest number of self-isolating staff who are asymptomatic and Registered Nursing had the largest number of self-isolating staff who are symptomatic.	<div>1.Number of staff self isolating (asymptomatic)</div> 																																																																																
	2. % Staff sickness The percentage of staff sickness absence due to COVID19 has significantly reduced from 13.2% in April 2020 to 2.4% in February 2021.	<div>2.Number of staff self isolating (symptomatic)</div> 																																																																																
	February saw the lowest level of COVID19 related sickness since the pandemic began in March 2020.	<div>3. % staff sickness</div> <table><tr><th></th><th>Apr-20</th><th>May-20</th><th>Jun-20</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></tr><tr><td>Medical</td><td>14.9%</td><td>4.0%</td><td>3.0%</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></tr><tr><td>Nursing Reg</td><td>14.2%</td><td>7.0%</td><td>5.1%</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></tr><tr><td>Nursing Non Reg</td><td>16.6%</td><td>8.0%</td><td>7.2%</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></tr><tr><td>Other</td><td>11.0%</td><td>5.0%</td><td>3.6%</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></tr><tr><td>All</td><td>13.2%</td><td>6.0%</td><td>4.5%</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></tr></table>											Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Medical	14.9%	4.0%	3.0%	2.8%	2.5%	4.0%	3.2%	7.3%	8.3%	2.2%	0.7%	Nursing Reg	14.2%	7.0%	5.1%	4.0%	4.0%	4.4%	3.8%	4.7%	7.4%	4.3%	2.3%	Nursing Non Reg	16.6%	8.0%	7.2%	5.5%	5.2%	4.2%	6.0%	6.5%	7.3%	7.0%	3.9%	Other	11.0%	5.0%	3.6%	2.9%	2.7%	2.0%	2.5%	3.0%	5.4%	3.1%	2.2%	All	13.2%	6.0%	4.5%	3.6%	3.5%	3.2%	3.5%	4.4%	6.5%	4.0%
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










2. HARM QUADRANT- HARM FROM OVERWHELMED NHS AND SOCIAL CARE SYSTEM

4.1 Overview

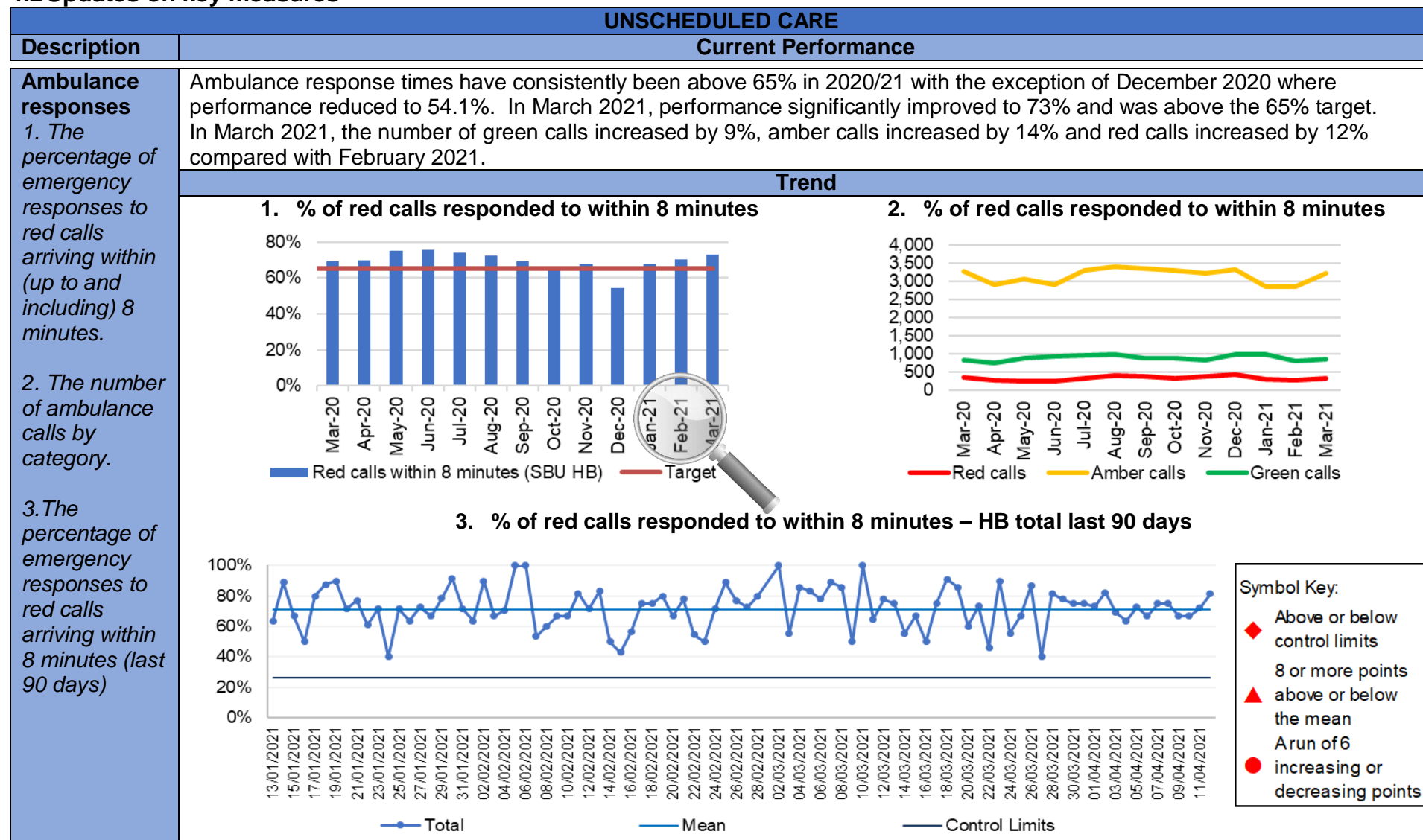
Harm from overwhelmed NHS and social care system																	
Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
Unscheduled Care																	
Number of ambulance handovers over one hour*	Morrison	0			433	43	19	45	116	160	401	340	484	499	187	215	225
	Singleton				29	18	1	2	4	3	9	15	16	11	8	4	6
	Total				462	~1w	20	47	120	163	410	355	500	510	195	219	231
% of patients who spend less than 4 hours in all major and minor emergency care (i.e. A&E) facilities from arrival until admission, transfer or discharge*	Morrison	95%			63.1%	69.8%	75.6%	82.3%	71.8%	72.6%	66.8%	68.4%	65.4%	62.7%	68.2%	61.0%	67.7%
	NPTH				96.3%	99.5%	99.9%	99.4%	99.8%	97.5%	99.8%	99.5%	99.0%	99.6%	99.7%	98.5%	
	Total				72.8%	78.4%	83.5%	87.7%	80.1%	80.6%	76.4%	77.2%	75.4%	72.6%	76.8%	71.3%	76.9%
Number of patients who spend 12 hours or more in all hospital major and minor care facilities from arrival until admission, transfer or discharge*	Morrison	0			557	130	97	81	223	286	536	493	626	775	570	534	457
	NPTH				0	1	0	0	0	1	1	0	1	0	0	0	
	Total				557	131	97	81	223	286	537	494	626	776	570	534	457
Stroke																	
% of patients who have a direct admission to an acute stroke unit within 4 hours*	Morrison	59.8% (UK SNAP average)			47%	Data not available	52.7%	57.4%	51.4%	50.0%	29.8%	23.7%	7.1%	6.8%	18.2%	20.4%	
	Total			47%	52.7%		57.4%	51.4%	50.0%	29.8%	23.7%	7.1%	6.8%	18.2%	20.4%		
% of patients who receive a CT scan within 1 hour*	Morrison	54.5% (UK SNAP average)			43%		49.1%	48.2%	52.8%	62.5%	42.1%	31.7%	22.7%	42.2%	30.6%	40.8%	
	Total			43%	49.1%		48.2%	52.8%	62.5%	42.1%	31.7%	22.7%	42.2%	30.6%	40.8%		
% of patients who are assessed by a stroke specialist consultant physician within 24 hours*	Morrison	84.2% (UK SNAP average)			98%		100.0%	94.6%	97.2%	97.5%	98.2%	96.7%	95.5%	95.6%	97.2%	100.0%	
	Total			98%	100.0%		94.6%	97.2%	97.5%	98.2%	96.7%	95.5%	95.6%	97.2%	100.0%		
% of thrombolysed stroke patients with a door to door needle time of less than or equal to 45 *minutes	Morrison	12 month improvement trend			0%		30.0%	25.0%	0.0%	12.5%	11.1%	28.6%	0.0%	12.5%	0.0%	55.6%	
	Total			0%	30.0%		25.0%	0.0%	12.5%	11.1%	28.6%	0.0%	12.5%	0.0%	55.6%		
% of patients receiving the required minutes for speech and language therapy	Morrison	12 month improvement trend			33%		30.7%	44.3%	61.7%	80.1%	86.5%	65.1%	63.4%	65.7%	61.2%	55.9%	
Fractured Neck of Femur (NOF)																	
Prompt orthogeriatric assessment- % patients receiving an assessment by a senior geriatrician within 72 hours of presentation	Morrison	75%			79.1%	79.5%	80.6%	82.0%	82.8%	83.6%	84.4%	84.4%	84.7%	86.0%	86.8%		
Prompt surgery - % patients undergoing surgery by the day following presentation with hip fracture	Morrison	75%			57.5%	56.4%	57.6%	54.2%	53.7%	53.3%	51.7%	51.0%	51.8%	54.1%	55.5%		
NICE compliant surgery - % of operations consistent with the recommendations of NICE CG124	Morrison	75%			74.5%	69.9%	70.0%	69.8%	70.0%	70.3%	70.2%	70.1%	69.6%	68.5%	70.3%		
Prompt mobilisation after surgery - % of patients out of bed (standing or hoisted) by the day after operation	Morrison	75%			73.3%	73.6%	74.6%	74.5%	75.9%	75.6%	75.6%	76.3%	76.0%	74.3%	74.1%		
Not delirious when tested- % patients (<4 on 4AT test) when tested in the week after operation	Morrison	75%			54.7%	55.8%	59.2%	60.8%	64.1%	66.7%	68.9%	70.5%	71.1%	73.5%	74.4%		
Return to original residence- % patients discharged back to original residence, or in that residence at 120 day follow-up	Morrison	75%			73.1%	73.3%	74.0%	75.5%	77.2%	78.0%	77.3%	76.2%	75.9%	75.6%	73.7%		
30 day mortality - crude and adjusted figures, noting ONS data only correct after around 6 months	Morrison	12 month improvement trend			8.7%	8.3%	8.3%	8.2%	8.2%	7.6%	7.3%	7.7%	7.6%	8.4%			
% of survival within 30 days of emergency admission for a hip fracture	HB Total	12 month improvement trend			75.0%	78.9%	77.1%	95.5%	93.5%	93.9%	89.4%	90.0%	67.9%	68.0%			

Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
Healthcare Acquired Infections																	
Number of E.Coli bacteraemia cases	PCCS Community	12 month reduction trend	14		15	8	8	14	17	24	16	11	11	7	12	11	19
	PCCS Hospital		0	0	0	0	0	0	1	0	0	0	0	0	0	0	0
	MH&LD		0	1	0	0	0	0	0	0	0	0	0	0	0	0	0
	Morrison		6	3	3	1	5	5	2	9	2	2	3	3	5		
	NPTH		1	2	1	2	1	0	2	2	1	0	1	0	1		
	Singleton		2	1	1	1	3	1	2	3	2	3	2	3	3		
	Total		23	23	14	14	17	25	32	23	25	16	12	18	17	28	
Number of S.aureus bacteraemia cases	PCCS Community	12 month reduction trend	3		5	6	4	8	3	7	7	6	6	3	4	2	7
	PCCS Hospital		0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	MH&LD		0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Morrison		2	1	3	1	3	2	4	5	4	3	1	5	4	2	
	NPTH		0	0	0	0	0	0	0	0	1	1	0	0	0	0	
	Singleton		1	3	1	1	1	1	2	2	3	4	0	3	2		
	Total		6	9	10	6	12	6	12	14	12	13	9	9	9	11	
Number of C.difficile cases	PCCS Community	12 month reduction trend	2		3	2	10	6	4	14	6	3	2	3	0	2	5
	PCCS Hospital		0	0	0	0	1	0	1	1	0	0	0	0	0	0	
	MH&LD		0	0	0	0	0	0	0	1	0	0	0	0	0	0	
	Morrison		3	4	6	4	8	6	5	7	6	5	5	0	5	3	
	NPTH		0	1	1	0	1	0	1	2	2	1	0	1	2	1	
	Singleton		0	2	2	4	1	2	2	3	2	1	2	2	3		
	Total		5	8	11	16	20	11	23	18	15	10	9	3	11	12	
Number of Klebsiella cases	PCCS Community	12 month reduction trend	2		3	5	2	5	2	4	2	2	4	4	5	2	9
	PCCS Hospital		0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	MH&LD		0	0	0	1	0	0	0	0	0	0	0	0	0	0	
	Morrison		2	2	1	3	0	2	6	3	5	6	4	7	2	0	
	NPTH		0	0	0	0	2	0	0	0	1	0	2	0	1	0	
	Singleton		1	2	0	1	1	1	0	0	1	1	2	1	1	1	
	Total		5	7	6	6	9	5	10	5	9	11	12	13	6	10	
Number of Aeruginosa cases	PCCS Community	12 month reduction trend	0		0	0	2	0	1	3	0	1	1	0	1	1	1
	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		0	2	1	0	0	0	0	1	1	1	0	0	0	0	
	NPTH		0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Singleton		1	0	2	0	0	0	0	0	0	0	0	0	0	0	
	Total		1	1	2	5	0	1	3	0	2	2	1	1	1	1	
Compliance with hand hygiene audits	PCCS	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%	100.0%
	MH&LD				98.2%	98.3%	98.3%	97.9%	98.3%	96.8%	97.6%	98.1%	96.1%	96.8%	98.7%	97.4%	96.7%
	Morrison				100.0%	96.6%	100.0%	96.6%	96.2%	97.2%	95.4%	99.3%	98.7%	96.8%	95.0%	92.8%	96.3%
	NPTH				100.0%	100.0%	100.0%	100.0%	100.0%	94.4%	100.0%	100.0%	100.0%	95.7%	100.0%	100.0%	100.0%
	Singleton				99.5%	97.3%	100.0%	98.9%	99.7%	84.3%	95.0%	94.2%	98.7%	96.0%	90.0%	88.5%	95.5%
	Total				99.4%	97.8%	99.3%	97.9%	98.1%	93.7%	96.2%	97.2%	97.3%	96.2%	95.1%	92.8%	97.0%

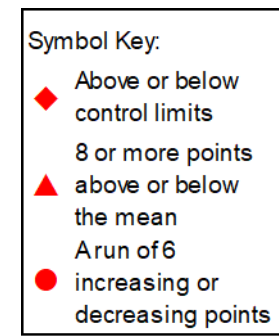
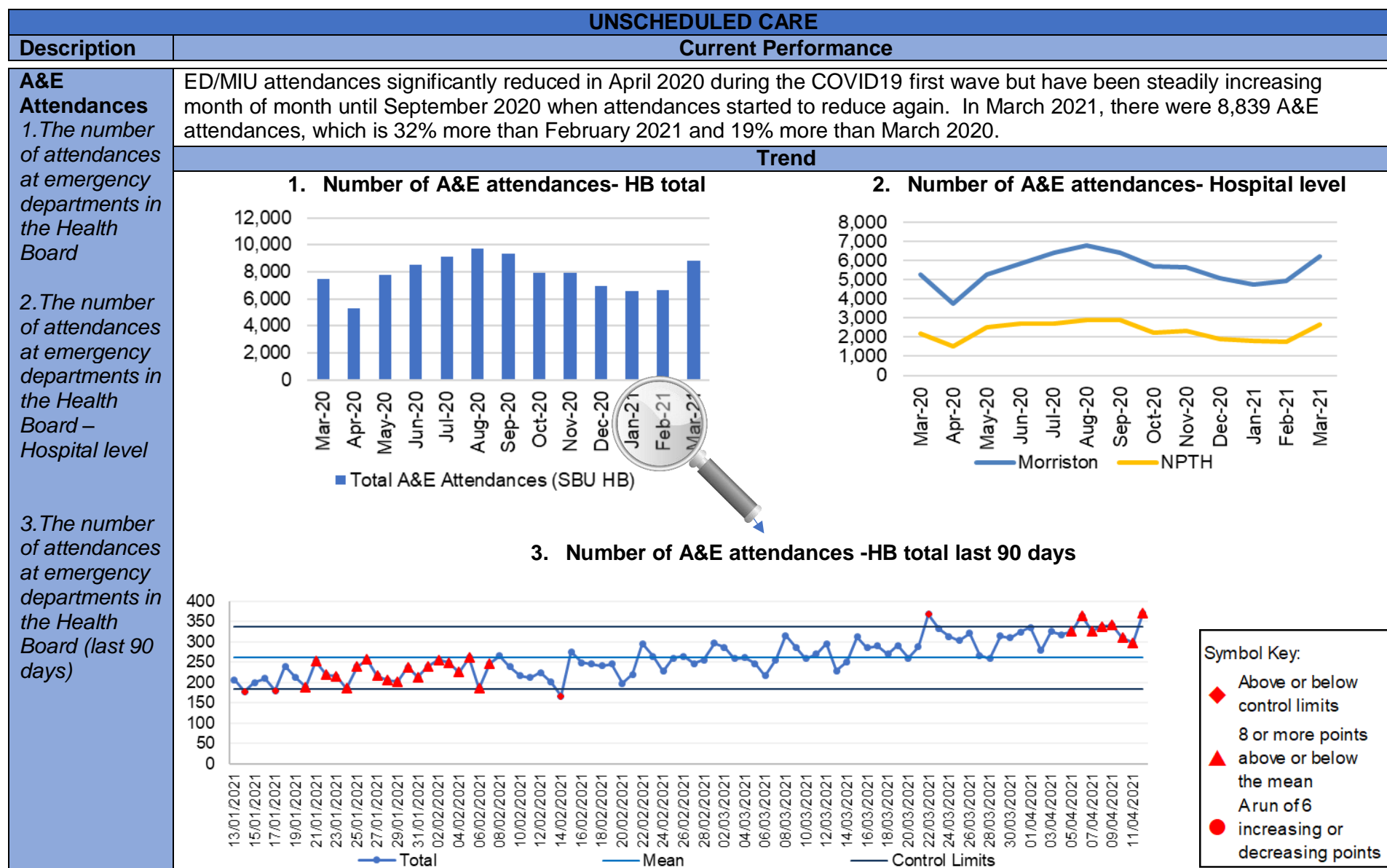
Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
Serious Incidents & Risks																	
Number of Serious Incidents	PCCS	12 month reduction trend			2	0	0	0	0	0	1	2	1	0	0	2	1
	MH&LD				10	7	5	7	9	4	9	2	7	7	1	1	1
	Morrison				4	0	1	1	1	1	4	3	5	1	2	1	2
	NPTH				2	0	0	0	0	0	4	1	1	0	0	0	0
	Singleton				2	2	0	0	0	1	3	6	3	4	1	1	0
	Total				20	9	6	8	10	6	21	14	17	12	4	5	4
Of the serious incidents due for assurance, the % which were assured within the agreed timescales	Total	90%			30%	7%	29%	0%	0%	50%	20%	0%	0%	4%	0%	10%	0%
Number of Never Events	PCCS	0			0	0	0	0	0	0	0	0	0	0	0	0	0
	MH&LD				0	0	0	0	0	0	0	0	0	0	0	0	0
	Morrison				0	0	0	1	0	0	0	0	1	0	0	0	0
	NPTH				0	0	0	0	0	0	0	0	0	0	0	0	0
	Singleton				0	0	0	0	0	0	0	1	0	0	0	0	0
	Total				0	0	0	1	0	0	0	1	1	0	0	0	0
Pressure Ulcers																	
Total number of Pressure Ulcers	PCCS Community	12 month reduction trend			39	34	33	34	28	25	21	34	29	26	25	24	
	PCCS Hospital				0	3	0	0	0	0	0	0	0	0	0	0	
	MH&LD				1	0	0	0	0	1	0	3	0	0	0	1	
	Morrison				18	10	21	8	12	18	25	27	27	41	31	26	
	NPTH				1	4	2	0	1	2	1	4	0	0	1	4	
	Singleton				11	8	6	10	6	16	18	25	15	20	19	17	
	Total				70	59	62	52	47	62	65	93	71	87	76	72	
Total number of Grade 3+ Pressure Ulcers	PCCS Community	12 month reduction trend			8	4	6	9	4	5	5	11	5	7	5	4	
	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	0	0	
	Morrison				0	2	0	1	0	2	0	1	1	2	2	2	
	NPTH				0	0	0	0	0	0	0	0	0	0	0	0	
	Singleton				1	0	0	0	0	2	0	3	3	1	0	1	
	Total		9	6	6	10	4	9	5	15	9	10	7	7			
Pressure Ulcer (Hosp) patients per 100,000 admissions	Total	12 month reduction trend			540	635	540	296	279	546	692	990	877	1,128	928	951	

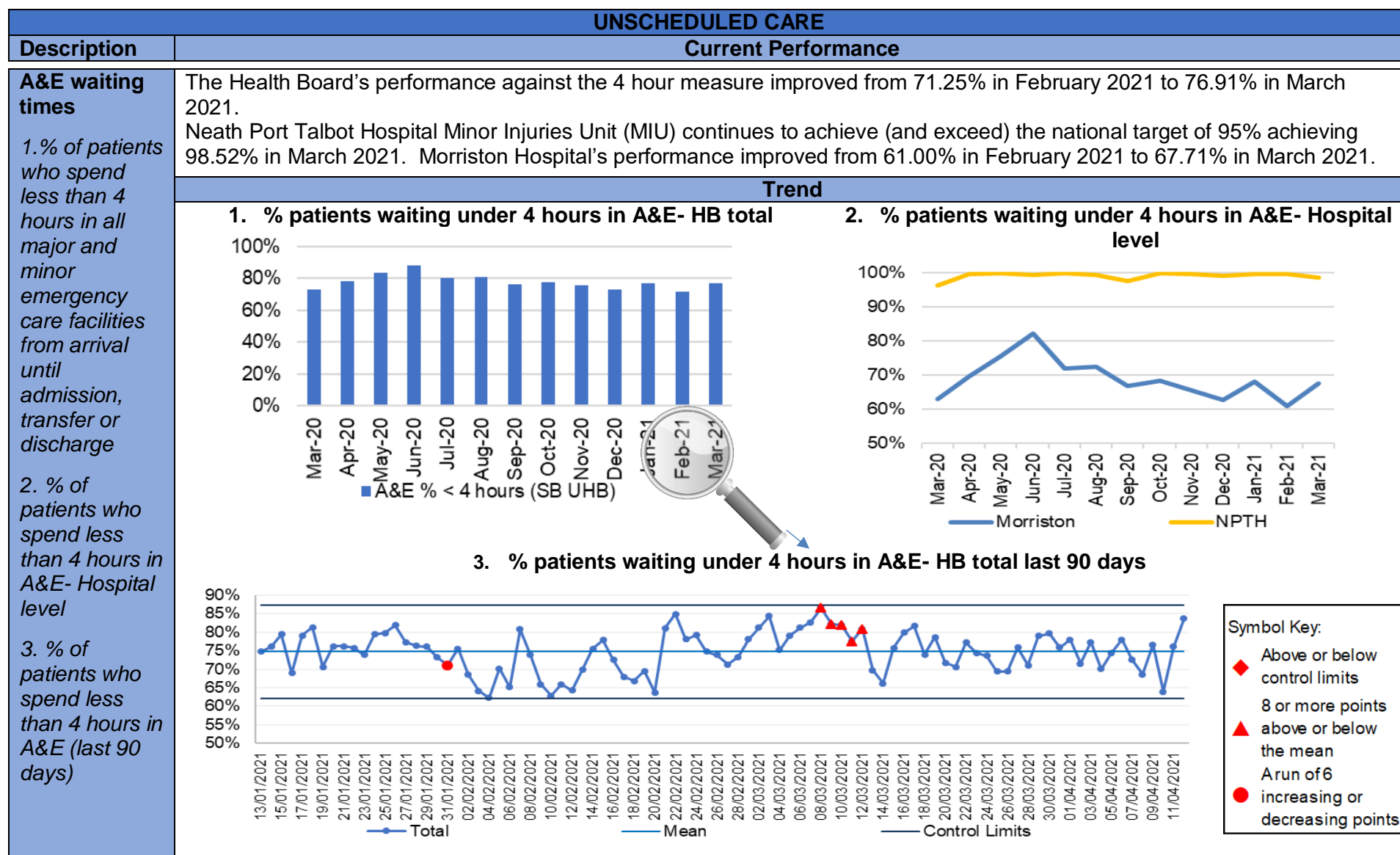
Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
Inpatient Falls																	
Total number of Inpatient Falls	PCCS	12 month reduction trend			9	1	4	7	8	7	14	8	9	8	9	10	4
	MH&LD				42	52	55	48	48	71	35	44	31	29	27	27	22
	Morrison				69	60	73	52	69	85	81	77	120	129	92	67	84
	NPTH				56	47	32	55	45	30	41	29	32	30	33	30	28
	Singleton				34	33	45	34	38	34	48	28	47	48	38	42	33
	Total				210	193	209	196	208	227	219	187	247	247	203	177	171
Inpatient Falls per 1,000 beddays	HB Total	Between 3.0 & 5.0			5.73	7.76	7.71	6.64	6.44	6.53	6.07	5.23	7.26	6.91	5.56	5.40	6.91
Mortality																	
Universal Mortality reviews undertaken within 28 days (Stage 1 reviews)	Morrison	95%			98%	100%	100%	100%	97%	96%	100%	100%	98%	99%	100%	100%	
	Singleton				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
	NPTH				29%	69%	92%	100%	57%	86%	83%	100%	92%	100%	100%	100%	
	Total				96%	96%	99%	100%	96%	97%	99%	100%	98%	99%	100%	100%	
Stage 2 mortality reviews completed within 60 days	Morrison	95%			0%	33%	38%	44%	100%	33%	56%	38%	25%	80%			
	Singleton				0%	33%	0%	-	67%	75%	50%	-	-	50%			
	NPTH				-	-	0%	100%	-	-	83%	0%	100%	-			
	Total				0%	30%	27%	50%	90%	50%	55%	33%	36%	75%			
Crude hospital mortality rate by Delivery Unit (74 years of age or less)	Morrison	12 month reduction trend			1.30%	1.45%	1.49%	1.49%	1.54%	1.56%	1.58%	1.66%	1.75%	1.86%	1.97%	2.05%	
	Singleton				0.43%	0.46%	0.47%	0.48%	0.49%	0.49%	0.46%	0.48%	0.50%	0.54%	0.56%	0.57%	
	NPTH				0.16%	0.21%	0.22%	0.22%	0.23%	0.23%	0.23%	0.22%	0.21%	0.20%	0.24%	0.18%	
	Total (SBU)				0.75%	0.80%	0.88%	0.89%	0.92%	0.90%	0.93%	0.97%	1.01%	1.08%	1.14%	1.24%	

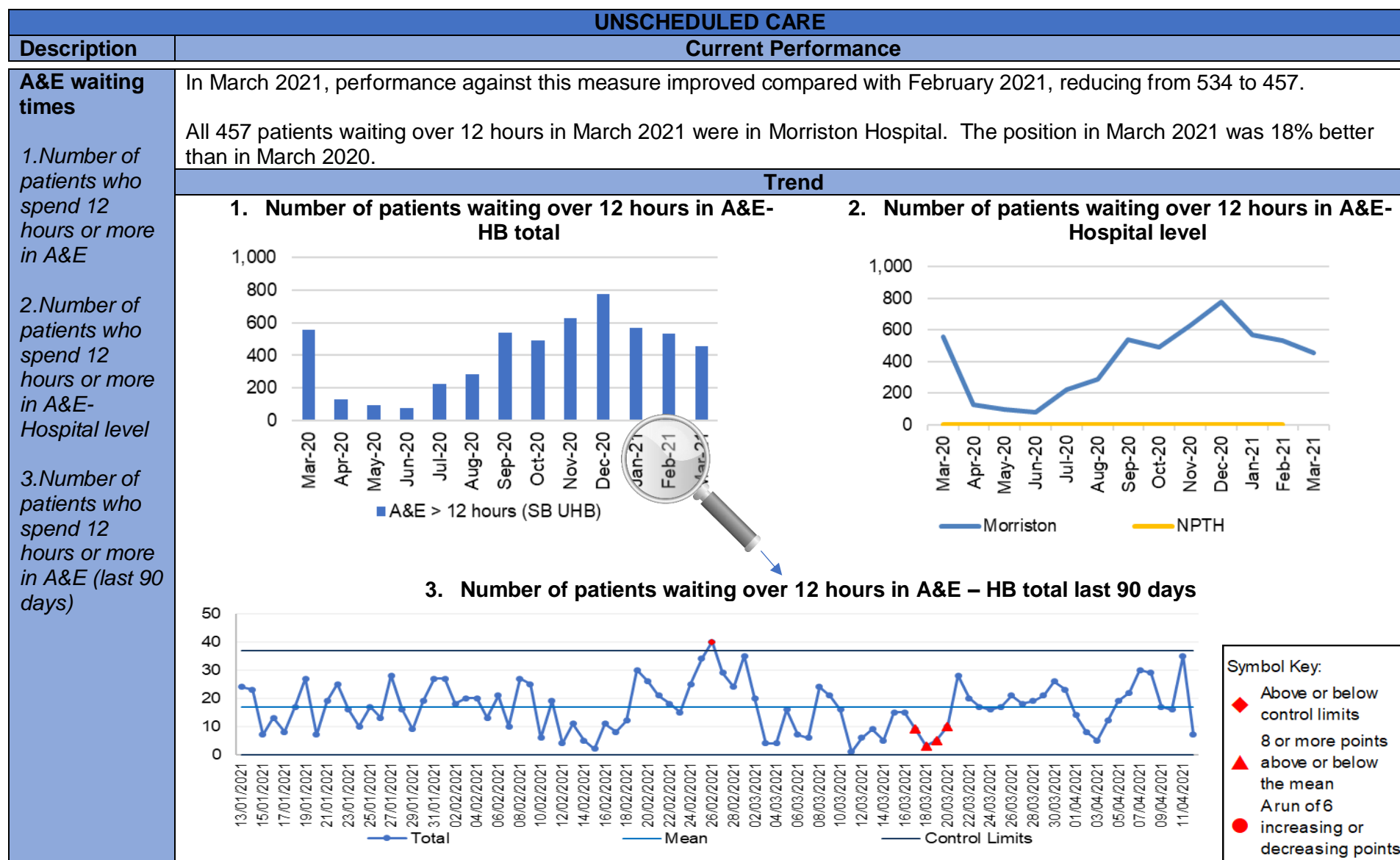
4.2 Updates on key measures

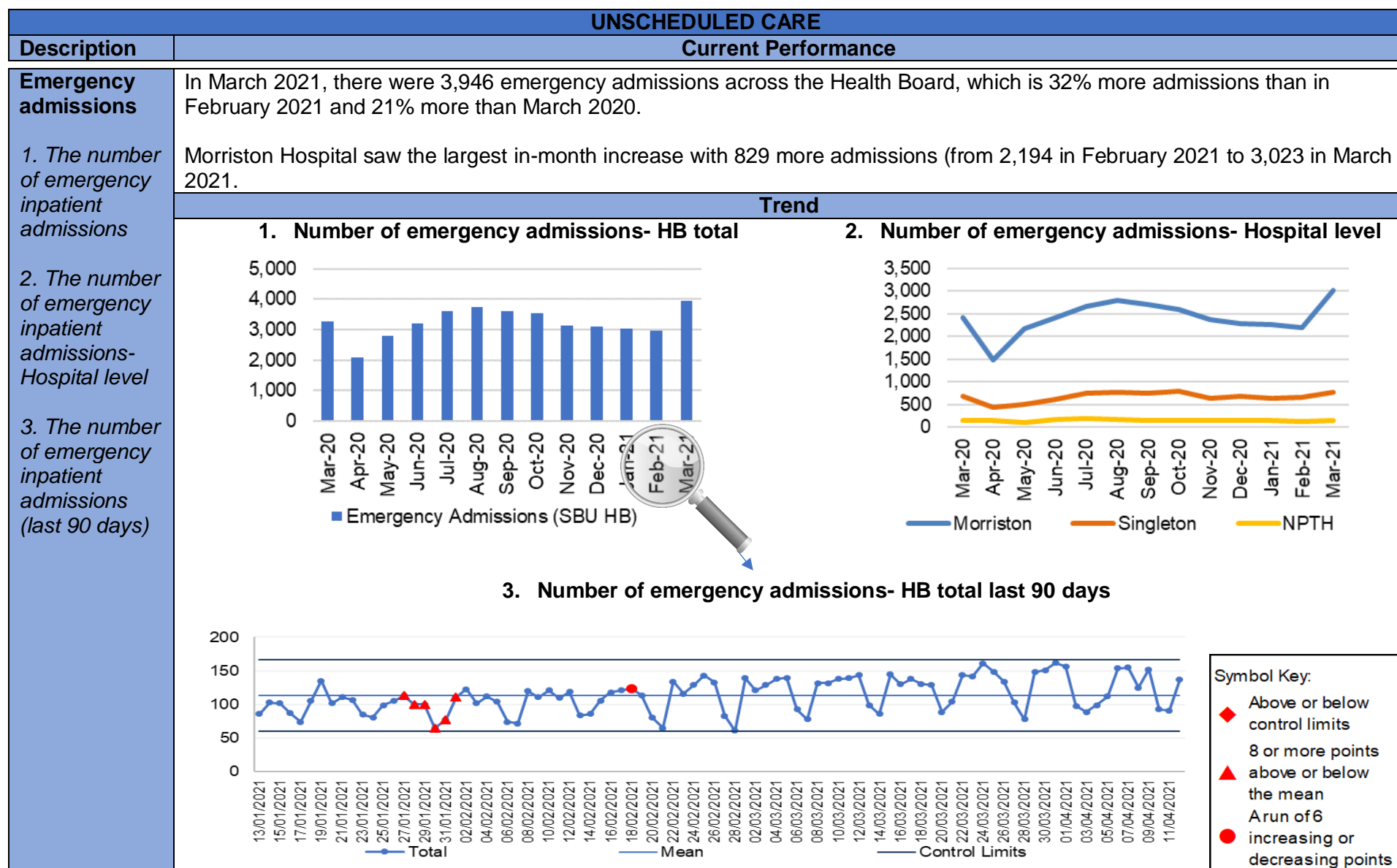


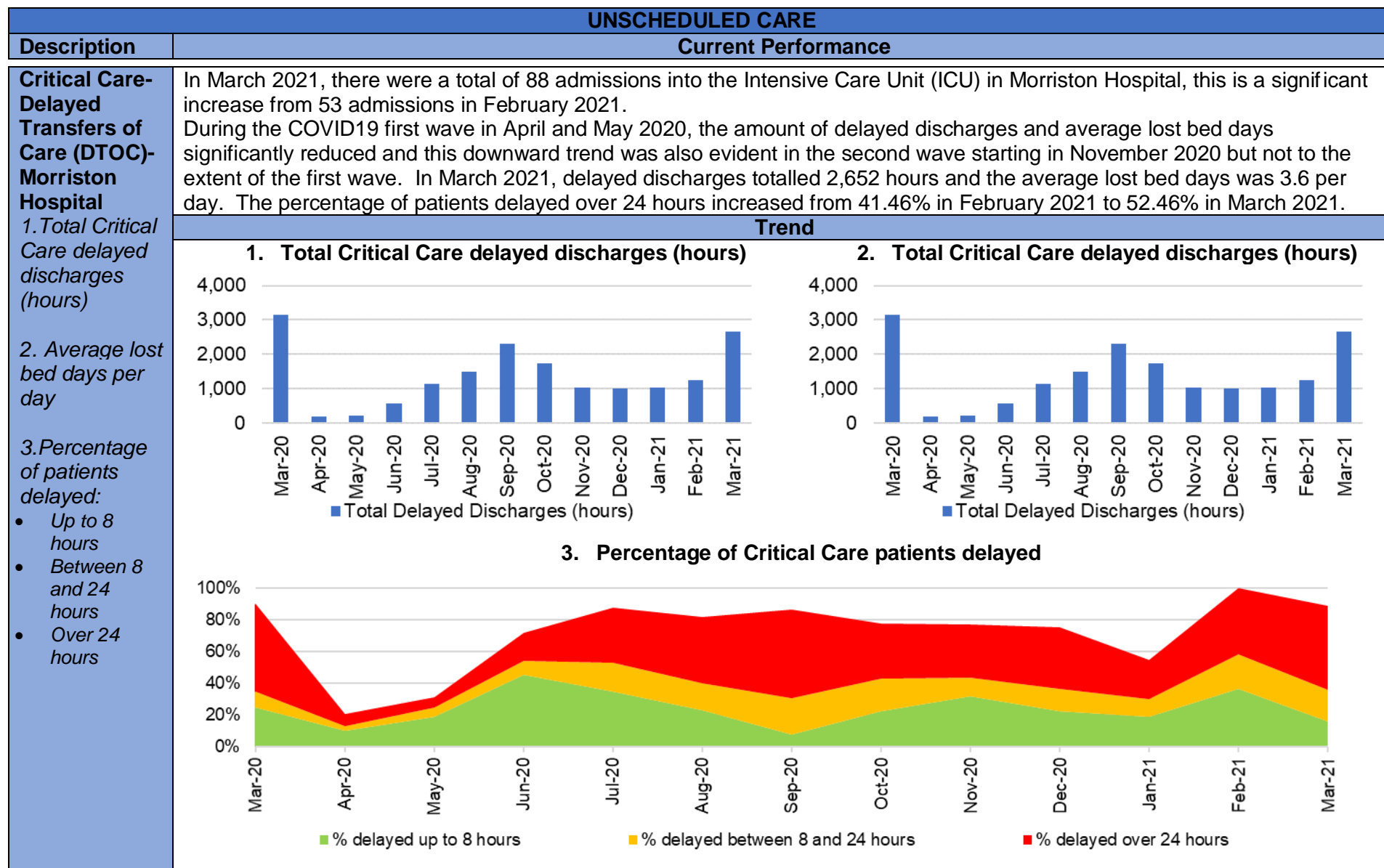
UNSCHEDULED CARE																																																																																																																																																																			
Description	Current Performance																																																																																																																																																																		
Ambulance handovers 1. The number of ambulance handovers over one hour 2. The number of ambulance handovers over one hour- Hospital level 3. The number of ambulance handovers over one hour (last 90 days)	<p>In March 2021, there were 231 ambulance to hospital handovers taking over 1 hour; this is a significant improvement from 462 in March 2020 but an in-month deterioration from February 2021 (from 219 to 231). In March 2021, 225 handovers over 1 hour were attributed to Morriston Hospital and 6 were attributed to Singleton Hospital.</p> <p>The number of handover hours lost over 15 minutes significantly reduced from 1,623 in March 2020 to 583 in March 2021.</p>																																																																																																																																																																		
	<p>Trend</p> <div><div><p>1. Number of ambulance handovers- HB total</p><table><caption>1. Number of ambulance handovers- HB total</caption><thead><tr><th>Month</th><th>Handovers > 1 hr (SBU HB)</th></tr></thead><tbody><tr><td>Mar-20</td><td>462</td></tr><tr><td>Apr-20</td><td>60</td></tr><tr><td>May-20</td><td>20</td></tr><tr><td>Jun-20</td><td>40</td></tr><tr><td>Jul-20</td><td>110</td></tr><tr><td>Aug-20</td><td>160</td></tr><tr><td>Sep-20</td><td>410</td></tr><tr><td>Oct-20</td><td>350</td></tr><tr><td>Nov-20</td><td>500</td></tr><tr><td>Dec-20</td><td>510</td></tr><tr><td>Jan-21</td><td>200</td></tr><tr><td>Feb-21</td><td>219</td></tr><tr><td>Mar-21</td><td>231</td></tr></tbody></table></div><div><p>2. Number of ambulance handovers- HB total</p><table><caption>2. Number of ambulance handovers- HB total</caption><thead><tr><th>Month</th><th>Morriston handovers > 1 hour</th><th>Singleton handovers > 1 hour</th></tr></thead><tbody><tr><td>Mar-20</td><td>462</td><td>0</td></tr><tr><td>Apr-20</td><td>60</td><td>0</td></tr><tr><td>May-20</td><td>20</td><td>0</td></tr><tr><td>Jun-20</td><td>40</td><td>0</td></tr><tr><td>Jul-20</td><td>110</td><td>0</td></tr><tr><td>Aug-20</td><td>160</td><td>0</td></tr><tr><td>Sep-20</td><td>410</td><td>0</td></tr><tr><td>Oct-20</td><td>350</td><td>0</td></tr><tr><td>Nov-20</td><td>500</td><td>0</td></tr><tr><td>Dec-20</td><td>510</td><td>0</td></tr><tr><td>Jan-21</td><td>200</td><td>0</td></tr><tr><td>Feb-21</td><td>219</td><td>0</td></tr><tr><td>Mar-21</td><td>231</td><td>0</td></tr></tbody></table></div><div><p>3. Number of ambulance handovers- HB total last 90 days</p><table><caption>3. Number of ambulance handovers- HB total last 90 days</caption><thead><tr><th>Date</th><th>Total</th></tr></thead><tbody><tr><td>13/01/2021</td><td>15</td></tr><tr><td>15/01/2021</td><td>5</td></tr><tr><td>17/01/2021</td><td>5</td></tr><tr><td>19/01/2021</td><td>5</td></tr><tr><td>21/01/2021</td><td>15</td></tr><tr><td>23/01/2021</td><td>5</td></tr><tr><td>25/01/2021</td><td>10</td></tr><tr><td>27/01/2021</td><td>10</td></tr><tr><td>29/01/2021</td><td>5</td></tr><tr><td>31/01/2021</td><td>5</td></tr><tr><td>02/02/2021</td><td>10</td></tr><tr><td>04/02/2021</td><td>10</td></tr><tr><td>06/02/2021</td><td>5</td></tr><tr><td>08/02/2021</td><td>25</td></tr><tr><td>10/02/2021</td><td>5</td></tr><tr><td>12/02/2021</td><td>5</td></tr><tr><td>14/02/2021</td><td>5</td></tr><tr><td>16/02/2021</td><td>5</td></tr><tr><td>18/02/2021</td><td>5</td></tr><tr><td>20/02/2021</td><td>5</td></tr><tr><td>22/02/2021</td><td>35</td></tr><tr><td>24/02/2021</td><td>25</td></tr><tr><td>26/02/2021</td><td>25</td></tr><tr><td>28/02/2021</td><td>25</td></tr><tr><td>02/03/2021</td><td>15</td></tr><tr><td>04/03/2021</td><td>5</td></tr><tr><td>06/03/2021</td><td>5</td></tr><tr><td>08/03/2021</td><td>15</td></tr><tr><td>10/03/2021</td><td>5</td></tr><tr><td>12/03/2021</td><td>5</td></tr><tr><td>14/03/2021</td><td>10</td></tr><tr><td>16/03/2021</td><td>5</td></tr><tr><td>18/03/2021</td><td>5</td></tr><tr><td>20/03/2021</td><td>15</td></tr><tr><td>22/03/2021</td><td>15</td></tr><tr><td>24/03/2021</td><td>10</td></tr><tr><td>26/03/2021</td><td>10</td></tr><tr><td>28/03/2021</td><td>5</td></tr><tr><td>30/03/2021</td><td>25</td></tr><tr><td>01/04/2021</td><td>5</td></tr><tr><td>03/04/2021</td><td>5</td></tr><tr><td>05/04/2021</td><td>5</td></tr><tr><td>07/04/2021</td><td>30</td></tr><tr><td>09/04/2021</td><td>10</td></tr><tr><td>11/04/2021</td><td>5</td></tr></tbody></table></div></div>	Month	Handovers > 1 hr (SBU HB)	Mar-20	462	Apr-20	60	May-20	20	Jun-20	40	Jul-20	110	Aug-20	160	Sep-20	410	Oct-20	350	Nov-20	500	Dec-20	510	Jan-21	200	Feb-21	219	Mar-21	231	Month	Morriston handovers > 1 hour	Singleton handovers > 1 hour	Mar-20	462	0	Apr-20	60	0	May-20	20	0	Jun-20	40	0	Jul-20	110	0	Aug-20	160	0	Sep-20	410	0	Oct-20	350	0	Nov-20	500	0	Dec-20	510	0	Jan-21	200	0	Feb-21	219	0	Mar-21	231	0	Date	Total	13/01/2021	15	15/01/2021	5	17/01/2021	5	19/01/2021	5	21/01/2021	15	23/01/2021	5	25/01/2021	10	27/01/2021	10	29/01/2021	5	31/01/2021	5	02/02/2021	10	04/02/2021	10	06/02/2021	5	08/02/2021	25	10/02/2021	5	12/02/2021	5	14/02/2021	5	16/02/2021	5	18/02/2021	5	20/02/2021	5	22/02/2021	35	24/02/2021	25	26/02/2021	25	28/02/2021	25	02/03/2021	15	04/03/2021	5	06/03/2021	5	08/03/2021	15	10/03/2021	5	12/03/2021	5	14/03/2021	10	16/03/2021	5	18/03/2021	5	20/03/2021	15	22/03/2021	15	24/03/2021	10	26/03/2021	10	28/03/2021	5	30/03/2021	25	01/04/2021	5	03/04/2021	5	05/04/2021	5	07/04/2021	30	09/04/2021	10	11/04/2021	5
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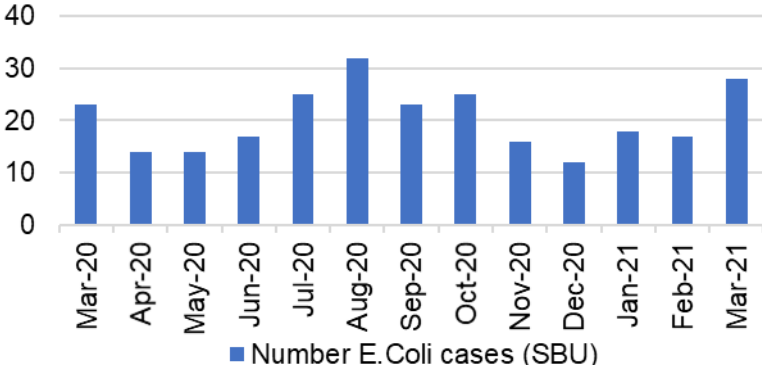
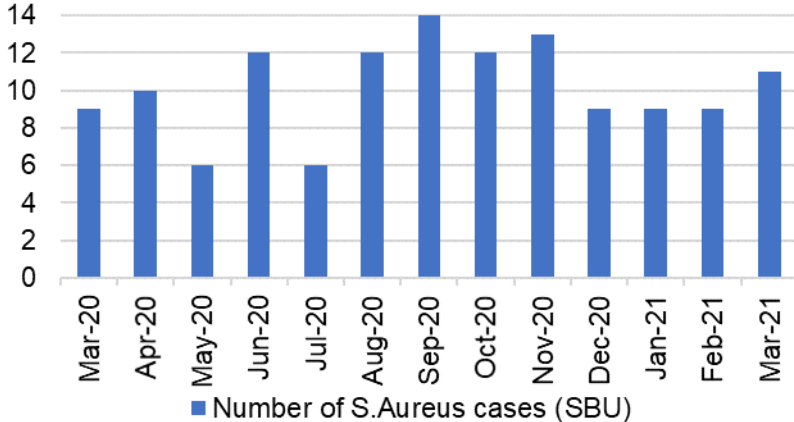


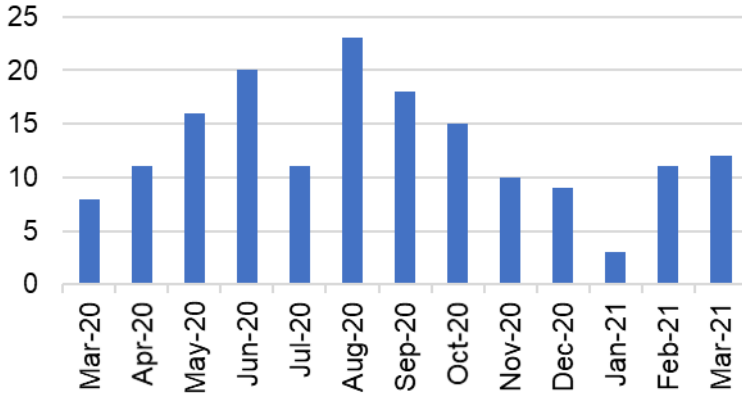
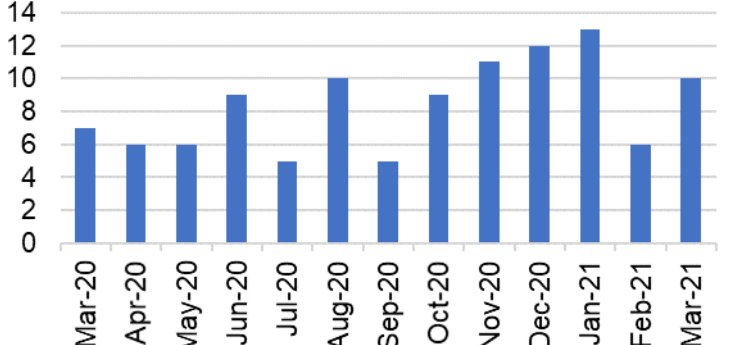


UNSCHEDULED CARE		
Description	Current Performance	Trend
Medically Fit <i>The number of patients waiting at each site in the Health Board that are deemed discharge/medically fit</i>	<p>In March 2021, there were on average 136 patients who were deemed medically/ discharge fit but were still occupying a bed in one of the Health Board's Hospitals.</p> <p>The number of medically/ discharge fit patients has steadily reduced every month since November 2020 however, February 2021 saw the highest number of medically/ discharge fit patients since February 2020. In March 2021, the number of patients reduced significantly and was in line with the monthly average that was seen in quarter 3 for 2020/21.</p> <p>In March 2021, Singleton and Neath Port Talbot Hospitals both had the largest proportion of medically/ discharge fit patients with 43 each, followed by Morriston Hospital with 40.</p>	<p>The number of discharge/ medically fit patients by site</p> <p>*Consistent data capture for Gorseinon not available before April 2020</p>
Elective procedures cancelled due to lack of beds <i>The number of elective procedure cancelled across the hospital where the main cancellation reasons was lack of beds</i>	<p>In March 2021, there were 11 elective procedures cancelled due to lack of beds on the day of surgery. This is 35 less cancellation than in March 2020 but 3 more than February 2021.</p> <p>In March 2021, 11 of the 12 cancelled procedures were attributed to Morriston Hospital and 1 was attributed to Neath Port Talbot Hospital.</p>	<p>Total number of elective procedures cancelled due to lack of beds</p>

FRACTURED NECK OF FEMUR (#NOF)		
Description	Current Performance	Trend
Fractured Neck of Femur (#NOF) 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>1. Prompt orthogeriatric assessment- In January 2021, 86.8% of patients in Morriston hospital received an assessment by a senior geriatrician within 72 hours. This is 7.0% more than in January 2020.</p> <p>2. Prompt surgery- In January 2021, 55.5% of patients had surgery the day following presentation with a hip fracture. This is a reduction from January 2020 which was 56.8%</p> <p>3. NICE compliant surgery- 70.3% of operations were consistent with the NICE recommendations in January 2021. This is 2.7% less than in January 2020. In January 2021, Morriston was below the all-Wales average of 72.3%.</p> <p>4. Prompt mobilisation- In January 2021, 74.1% of patients were out of bed the day after surgery. This is 1.3% more than in January 2020.</p>	<p>1. Prompt orthogeriatric assessment</p> <p>2. Prompt surgery</p> <p>3. NICE compliant Surgery</p> <p>4. Prompt mobilisation</p>

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5. <i>Not delirious when tested- % patients (<4 on 4AT test) when tested in the week after operation</i>	5. Not delirious when tested- 74.4% of patients were not delirious in the week after their operation in January 2021. This is an improvement of 25.8% compared with January 2020.	<p>5. Not delirious when tested</p> <table><thead><tr><th>Month</th><th>Morryston (%)</th><th>All-Wales (%)</th><th>Eng, Wal & N. Ire (%)</th></tr></thead><tbody><tr><td>Jan-20</td><td>45</td><td>50</td><td>65</td></tr><tr><td>Feb-20</td><td>48</td><td>52</td><td>65</td></tr><tr><td>Mar-20</td><td>50</td><td>53</td><td>65</td></tr><tr><td>Apr-20</td><td>52</td><td>54</td><td>65</td></tr><tr><td>May-20</td><td>55</td><td>55</td><td>65</td></tr><tr><td>Jun-20</td><td>58</td><td>56</td><td>65</td></tr><tr><td>Jul-20</td><td>60</td><td>57</td><td>65</td></tr><tr><td>Aug-20</td><td>62</td><td>58</td><td>65</td></tr><tr><td>Sep-20</td><td>65</td><td>59</td><td>65</td></tr><tr><td>Oct-20</td><td>68</td><td>60</td><td>65</td></tr><tr><td>Nov-20</td><td>70</td><td>61</td><td>65</td></tr><tr><td>Dec-20</td><td>72</td><td>62</td><td>65</td></tr><tr><td>Jan-21</td><td>74.4</td><td>63</td><td>65</td></tr></tbody></table>	Month	Morryston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)	Jan-20	45	50	65	Feb-20	48	52	65	Mar-20	50	53	65	Apr-20	52	54	65	May-20	55	55	65	Jun-20	58	56	65	Jul-20	60	57	65	Aug-20	62	58	65	Sep-20	65	59	65	Oct-20	68	60	65	Nov-20	70	61	65	Dec-20	72	62	65	Jan-21	74.4	63	65
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6. <i>Return to original residence- % patients discharged back to original residence, or in that residence at 120 day follow-up</i>	6. Return to original residence- 73.7% of patients in January 2021 were discharged back to their original residence. This was above the all-Wales average of 73.6%.	<p>6. Return to original residence</p> <table><thead><tr><th>Month</th><th>Morryston (%)</th><th>All-Wales (%)</th><th>Eng, Wal & N. Ire (%)</th></tr></thead><tbody><tr><td>Jan-20</td><td>72</td><td>74</td><td>70</td></tr><tr><td>Feb-20</td><td>73</td><td>74</td><td>70</td></tr><tr><td>Mar-20</td><td>74</td><td>74</td><td>70</td></tr><tr><td>Apr-20</td><td>74</td><td>74</td><td>70</td></tr><tr><td>May-20</td><td>75</td><td>74</td><td>70</td></tr><tr><td>Jun-20</td><td>76</td><td>74</td><td>70</td></tr><tr><td>Jul-20</td><td>77</td><td>74</td><td>70</td></tr><tr><td>Aug-20</td><td>78</td><td>74</td><td>70</td></tr><tr><td>Sep-20</td><td>77</td><td>74</td><td>70</td></tr><tr><td>Oct-20</td><td>76</td><td>74</td><td>70</td></tr><tr><td>Nov-20</td><td>75</td><td>74</td><td>70</td></tr><tr><td>Dec-20</td><td>74</td><td>74</td><td>70</td></tr><tr><td>Jan-21</td><td>73.7</td><td>73.6</td><td>70</td></tr></tbody></table>	Month	Morryston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)	Jan-20	72	74	70	Feb-20	73	74	70	Mar-20	74	74	70	Apr-20	74	74	70	May-20	75	74	70	Jun-20	76	74	70	Jul-20	77	74	70	Aug-20	78	74	70	Sep-20	77	74	70	Oct-20	76	74	70	Nov-20	75	74	70	Dec-20	74	74	70	Jan-21	73.7	73.6	70
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7. <i>30 day mortality rate</i>	7. 30 day mortality rate- In December 2020 the mortality rate for Morryston Hospital was 8.4% which is 0.3% more than December 2020. The mortality rate in Morryston Hospital in December 2020 is higher than the all-Wales average of 7.3% and higher than the national average of 8.2%.	<p>7. 30 day mortality rate</p> <table><thead><tr><th>Month</th><th>Morryston (%)</th><th>All-Wales (%)</th><th>Eng, Wal & N. Ire (%)</th></tr></thead><tbody><tr><td>Dec-19</td><td>7.8</td><td>7.5</td><td>6.5</td></tr><tr><td>Jan-20</td><td>7.8</td><td>7.4</td><td>6.5</td></tr><tr><td>Feb-20</td><td>8.2</td><td>7.3</td><td>6.5</td></tr><tr><td>Mar-20</td><td>8.5</td><td>7.2</td><td>6.5</td></tr><tr><td>Apr-20</td><td>8.1</td><td>7.3</td><td>6.5</td></tr><tr><td>May-20</td><td>8.1</td><td>7.4</td><td>6.5</td></tr><tr><td>Jun-20</td><td>7.9</td><td>7.5</td><td>6.5</td></tr><tr><td>Jul-20</td><td>7.8</td><td>7.6</td><td>6.5</td></tr><tr><td>Aug-20</td><td>7.5</td><td>7.7</td><td>6.5</td></tr><tr><td>Sep-20</td><td>7.4</td><td>7.8</td><td>6.5</td></tr><tr><td>Oct-20</td><td>7.6</td><td>7.9</td><td>6.5</td></tr><tr><td>Nov-20</td><td>7.5</td><td>7.8</td><td>6.5</td></tr><tr><td>Dec-20</td><td>8.4</td><td>7.3</td><td>6.5</td></tr></tbody></table>	Month	Morryston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)	Dec-19	7.8	7.5	6.5	Jan-20	7.8	7.4	6.5	Feb-20	8.2	7.3	6.5	Mar-20	8.5	7.2	6.5	Apr-20	8.1	7.3	6.5	May-20	8.1	7.4	6.5	Jun-20	7.9	7.5	6.5	Jul-20	7.8	7.6	6.5	Aug-20	7.5	7.7	6.5	Sep-20	7.4	7.8	6.5	Oct-20	7.6	7.9	6.5	Nov-20	7.5	7.8	6.5	Dec-20	8.4	7.3	6.5
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HEALTHCARE ACQUIRED INFECTIONS																														
Description	Current Performance	Trend																												
Healthcare Acquired Infections (HCAI) - E.coli bacteraemia- <i>Number of laboratory confirmed E.coli bacteraemia cases</i>	<ul style="list-style-type: none">28 cases of <i>E. coli</i> bacteraemia were identified in March 2021, of which 9 were hospital acquired and 19 were community acquired.Cumulative cases from April 2020 to March 2021 are 24% less than the equivalent period in 2019/20.	Number of healthcare acquired E.coli bacteraemia cases  <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>Mar-20</td><td>23</td></tr><tr><td>Apr-20</td><td>14</td></tr><tr><td>May-20</td><td>14</td></tr><tr><td>Jun-20</td><td>17</td></tr><tr><td>Jul-20</td><td>25</td></tr><tr><td>Aug-20</td><td>32</td></tr><tr><td>Sep-20</td><td>23</td></tr><tr><td>Oct-20</td><td>25</td></tr><tr><td>Nov-20</td><td>16</td></tr><tr><td>Dec-20</td><td>12</td></tr><tr><td>Jan-21</td><td>18</td></tr><tr><td>Feb-21</td><td>17</td></tr><tr><td>Mar-21</td><td>28</td></tr></tbody></table>	Month	Number of cases	Mar-20	23	Apr-20	14	May-20	14	Jun-20	17	Jul-20	25	Aug-20	32	Sep-20	23	Oct-20	25	Nov-20	16	Dec-20	12	Jan-21	18	Feb-21	17	Mar-21	28
Month	Number of cases																													
Mar-20	23																													
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Nov-20	16																													
Dec-20	12																													
Jan-21	18																													
Feb-21	17																													
Mar-21	28																													
Healthcare Acquired Infections (HCAI)- S.aureus bacteraemia- <i>Number of laboratory confirmed S.aureus bacteraemias (MRSA & MSSA) cases</i>	<ul style="list-style-type: none">There were 11 cases of Staph. aureus bacteraemia in March 2021, of which 4 were hospital acquired and 7 were community acquired.Cumulative cases from April 2020 to March 2021 are 8% less than the equivalent period in 2019/20.	Number of healthcare acquired S.aureus bacteraemia cases  <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>Mar-20</td><td>9</td></tr><tr><td>Apr-20</td><td>10</td></tr><tr><td>May-20</td><td>6</td></tr><tr><td>Jun-20</td><td>12</td></tr><tr><td>Jul-20</td><td>6</td></tr><tr><td>Aug-20</td><td>12</td></tr><tr><td>Sep-20</td><td>14</td></tr><tr><td>Oct-20</td><td>12</td></tr><tr><td>Nov-20</td><td>13</td></tr><tr><td>Dec-20</td><td>9</td></tr><tr><td>Jan-21</td><td>9</td></tr><tr><td>Feb-21</td><td>9</td></tr><tr><td>Mar-21</td><td>11</td></tr></tbody></table>	Month	Number of cases	Mar-20	9	Apr-20	10	May-20	6	Jun-20	12	Jul-20	6	Aug-20	12	Sep-20	14	Oct-20	12	Nov-20	13	Dec-20	9	Jan-21	9	Feb-21	9	Mar-21	11
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Feb-21	9																													
Mar-21	11																													

HEALTHCARE ACQUIRED INFECTIONS																														
Description	Current Performance	Trend																												
Healthcare Acquired Infections (HCAI)- C.difficile- <i>Number of laboratory confirmed C.difficile cases</i>	<ul style="list-style-type: none">There were 12 <i>Clostridium difficile</i> toxin positive cases in March 2021, of which 7 were hospital acquired and 5 were community acquired.Cumulative cases from April 2020 to March 2021 are 15% more than the equivalent period of 2019/20 (159 in 2020/21 compared with 138 in 2019/20).	<p>Number of healthcare acquired C.difficile cases</p>  <table><caption>Number of healthcare acquired C.difficile cases (SBU)</caption><thead><tr><th>Month</th><th>Number of C.diff cases (SBU)</th></tr></thead><tbody><tr><td>Mar-20</td><td>8</td></tr><tr><td>Apr-20</td><td>11</td></tr><tr><td>May-20</td><td>16</td></tr><tr><td>Jun-20</td><td>20</td></tr><tr><td>Jul-20</td><td>11</td></tr><tr><td>Aug-20</td><td>23</td></tr><tr><td>Sep-20</td><td>18</td></tr><tr><td>Oct-20</td><td>15</td></tr><tr><td>Nov-20</td><td>10</td></tr><tr><td>Dec-20</td><td>9</td></tr><tr><td>Jan-21</td><td>3</td></tr><tr><td>Feb-21</td><td>11</td></tr><tr><td>Mar-21</td><td>12</td></tr></tbody></table> <p>■ Number of C.diff cases (SBU)</p>	Month	Number of C.diff cases (SBU)	Mar-20	8	Apr-20	11	May-20	16	Jun-20	20	Jul-20	11	Aug-20	23	Sep-20	18	Oct-20	15	Nov-20	10	Dec-20	9	Jan-21	3	Feb-21	11	Mar-21	12
Month	Number of C.diff cases (SBU)																													
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Jan-21	3																													
Feb-21	11																													
Mar-21	12																													
Healthcare Acquired Infections (HCAI)- Klebsiella sp- <i>Number of laboratory confirmed Klebsiella sp cases</i>	<ul style="list-style-type: none">There were 10 cases of Klebsiella sp in March 2021, of which 1 was hospital acquired and 9 were community acquired.Cumulative cases from April 2020 to March 2021 are 24% more than the equivalent period in 2019/20 (102 in 2020/21 compared with 82 in 2019/20).	<p>Number of healthcare acquired Klebsiella cases</p>  <table><caption>Number of healthcare acquired Klebsiella cases (SBU)</caption><thead><tr><th>Month</th><th>Number of Klebsiella cases (SBU)</th></tr></thead><tbody><tr><td>Mar-20</td><td>7</td></tr><tr><td>Apr-20</td><td>6</td></tr><tr><td>May-20</td><td>6</td></tr><tr><td>Jun-20</td><td>9</td></tr><tr><td>Jul-20</td><td>5</td></tr><tr><td>Aug-20</td><td>10</td></tr><tr><td>Sep-20</td><td>5</td></tr><tr><td>Oct-20</td><td>9</td></tr><tr><td>Nov-20</td><td>11</td></tr><tr><td>Dec-20</td><td>12</td></tr><tr><td>Jan-21</td><td>13</td></tr><tr><td>Feb-21</td><td>6</td></tr><tr><td>Mar-21</td><td>10</td></tr></tbody></table> <p>■ Number of Klebsiella cases (SBU)</p>	Month	Number of Klebsiella cases (SBU)	Mar-20	7	Apr-20	6	May-20	6	Jun-20	9	Jul-20	5	Aug-20	10	Sep-20	5	Oct-20	9	Nov-20	11	Dec-20	12	Jan-21	13	Feb-21	6	Mar-21	10
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HEALTHCARE ACQUIRED INFECTIONS		
Description	Current Performance	Trend
Healthcare Acquired Infections (HCAI)- Aeruginosa- <i>Number of laboratory confirmed Aeruginosa cases</i>	<ul style="list-style-type: none"> There was 1 hospital acquired case of <i>P.Aeruginosa</i> bacteraemia in March 2021. Cumulative cases from April 2020 to February 2021 are 32% less than the equivalent period in 2019/20. 	<p>Number of healthcare acquired Pseudomonas cases</p> <p>■ Number of Pseudomonas cases (SBU)</p>
PRESSURE ULCERS		
Description	Current Performance	Trend
Number of pressure ulcers 1. <i>Total number of pressure ulcers developed in hospital and in the community</i> 2. <i>Rate of pressure ulcers per 100,000 admissions</i>	<ul style="list-style-type: none"> In February 2021 there were 72 cases of healthcare acquired pressure ulcers, of which 24 were community acquired and 48 were hospital acquired. There were 7 grade 3+ pressure ulcers in February 2021, of which 4 were community acquired and 3 were hospital acquired. The rate per 100,000 admissions increased from 948 in January 2021 to 951 in February 2021. 	<p>Total number of hospital and community acquired Pressure Ulcers (PU) and rate per 100,000 admissions</p> <p>■ Pressure Ulcers (Community) ■ Pressure Ulcers (Hospital) — Rate per 100,00 admissions</p>

SERIOUS INCIDENTS																																																																																						
Description	Current Performance	Trend																																																																																				
Serious Incidents- <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 4 Serious Incidents for the month of March 2021 to Welsh Government. The breakdown of incidents in March 2021 are set out below:</p> <ul style="list-style-type: none">• 2 in Morriston Hospital• 1 in Primary, Community and Therapy Services• 1 in Mental Health and Learning Disabilities <p>2. There was no new Never Event reported in March 2021.</p> <p>3. In March 2021, performance against the 80% target of submitting closure forms within 60 working days was 0% as none of the eleven closure forms due to be submitted to Welsh Government in February 2021 were submitted on time. Below is a breakdown of the eleven outstanding forms:</p> <ul style="list-style-type: none">• 7 in Mental Health and Learning Disabilities• 3 in Singleton Hospital• 1 in Morriston Hospital	<p>1. and 2. Number of serious incidents and never events</p> <table><thead><tr><th>Month</th><th>Number of Serious Incidents</th><th>Number of never events</th></tr></thead><tbody><tr><td>Mar-20</td><td>20</td><td>0</td></tr><tr><td>Apr-20</td><td>9</td><td>0</td></tr><tr><td>May-20</td><td>6</td><td>0</td></tr><tr><td>Jun-20</td><td>8</td><td>0</td></tr><tr><td>Jul-20</td><td>10</td><td>0</td></tr><tr><td>Aug-20</td><td>6</td><td>0</td></tr><tr><td>Sep-20</td><td>21</td><td>0</td></tr><tr><td>Oct-20</td><td>15</td><td>0</td></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></tbody></table> <p>3. % of serious incidents closed within 60 days</p> <table><thead><tr><th>Month</th><th>% Serious Incidents assured</th><th>Profile</th></tr></thead><tbody><tr><td>Mar-20</td><td>30%</td><td>80%</td></tr><tr><td>Apr-20</td><td>5%</td><td>80%</td></tr><tr><td>May-20</td><td>28%</td><td>80%</td></tr><tr><td>Jun-20</td><td>0%</td><td>80%</td></tr><tr><td>Jul-20</td><td>0%</td><td>80%</td></tr><tr><td>Aug-20</td><td>50%</td><td>80%</td></tr><tr><td>Sep-20</td><td>20%</td><td>80%</td></tr><tr><td>Oct-20</td><td>0%</td><td>80%</td></tr><tr><td>Nov-20</td><td>0%</td><td>80%</td></tr><tr><td>Dec-20</td><td>5%</td><td>80%</td></tr><tr><td>Jan-21</td><td>0%</td><td>80%</td></tr><tr><td>Feb-21</td><td>10%</td><td>80%</td></tr><tr><td>Mar-21</td><td>0%</td><td>80%</td></tr></tbody></table> <p><i>* 0% compliance in June, July, October and November 2020 and January and March 2021</i></p>	Month	Number of Serious Incidents	Number of never events	Mar-20	20	0	Apr-20	9	0	May-20	6	0	Jun-20	8	0	Jul-20	10	0	Aug-20	6	0	Sep-20	21	0	Oct-20	15	0	Nov-20	18	0	Dec-20	12	0	Jan-21	4	0	Feb-21	5	0	Mar-21	4	0	Month	% Serious Incidents assured	Profile	Mar-20	30%	80%	Apr-20	5%	80%	May-20	28%	80%	Jun-20	0%	80%	Jul-20	0%	80%	Aug-20	50%	80%	Sep-20	20%	80%	Oct-20	0%	80%	Nov-20	0%	80%	Dec-20	5%	80%	Jan-21	0%	80%	Feb-21	10%	80%	Mar-21	0%	80%
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INPATIENT FALLS																																												
Description	Current Performance	Trend																																										
Inpatient Falls <i>The total number of inpatient falls</i>	<ul style="list-style-type: none">The number of Falls reported via Datix web for Swansea Bay UHB was 171 in March 2021. This is 19% less than March 2020 where 210 falls were recorded.The Health Board has agreed a targeted action to reduce Falls by 10%.	<p>Number of inpatient Falls</p> <table><thead><tr><th>Month</th><th>Inpatient Falls (SBU HB)</th><th>10% reduction profile</th></tr></thead><tbody><tr><td>Mar-20</td><td>210</td><td>210</td></tr><tr><td>Apr-20</td><td>190</td><td>207</td></tr><tr><td>May-20</td><td>200</td><td>204</td></tr><tr><td>Jun-20</td><td>190</td><td>201</td></tr><tr><td>Jul-20</td><td>200</td><td>198</td></tr><tr><td>Aug-20</td><td>220</td><td>195</td></tr><tr><td>Sep-20</td><td>210</td><td>192</td></tr><tr><td>Oct-20</td><td>180</td><td>189</td></tr><tr><td>Nov-20</td><td>240</td><td>186</td></tr><tr><td>Dec-20</td><td>240</td><td>183</td></tr><tr><td>Jan-21</td><td>200</td><td>180</td></tr><tr><td>Feb-21</td><td>170</td><td>177</td></tr><tr><td>Mar-21</td><td>171</td><td>174</td></tr></tbody></table> <p>■ Inpatient Falls (SBU HB) — 10% reduction profile</p>	Month	Inpatient Falls (SBU HB)	10% reduction profile	Mar-20	210	210	Apr-20	190	207	May-20	200	204	Jun-20	190	201	Jul-20	200	198	Aug-20	220	195	Sep-20	210	192	Oct-20	180	189	Nov-20	240	186	Dec-20	240	183	Jan-21	200	180	Feb-21	170	177	Mar-21	171	174
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Feb-21	170	177																																										
Mar-21	171	174																																										

DISCHARGE SUMMARIES																														
Description	Current Performance	Trend																												
Discharge Summaries <i>Percentage of discharge summaries approved and sent to patients' doctor following discharge</i>	<p>The latest data shows that in March 2021, the percentage of completed discharge summaries was 64%.</p> <p>In March 2021, compliance ranged from 59% in Singleton Hospital to 84% in Mental Health & Learning Disabilities.</p>	<p>% discharge summaries approved and sent</p> <table><thead><tr><th>Month</th><th>% of completed discharge summaries</th></tr></thead><tbody><tr><td>Mar-20</td><td>68%</td></tr><tr><td>Apr-20</td><td>60%</td></tr><tr><td>May-20</td><td>62%</td></tr><tr><td>Jun-20</td><td>66%</td></tr><tr><td>Jul-20</td><td>62%</td></tr><tr><td>Aug-20</td><td>65%</td></tr><tr><td>Sep-20</td><td>69%</td></tr><tr><td>Oct-20</td><td>67%</td></tr><tr><td>Nov-20</td><td>65%</td></tr><tr><td>Dec-20</td><td>58%</td></tr><tr><td>Jan-21</td><td>66%</td></tr><tr><td>Feb-21</td><td>62%</td></tr><tr><td>Mar-21</td><td>64%</td></tr></tbody></table> <p>■ % of completed discharge summaries</p>	Month	% of completed discharge summaries	Mar-20	68%	Apr-20	60%	May-20	62%	Jun-20	66%	Jul-20	62%	Aug-20	65%	Sep-20	69%	Oct-20	67%	Nov-20	65%	Dec-20	58%	Jan-21	66%	Feb-21	62%	Mar-21	64%
Month	% of completed discharge summaries																													
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CRUDE MORTALITY																																																																								
Description	Current Performance	Trend																																																																						
Crude Mortality Rate	February 2021 reports the crude mortality rate for the Health Board at 1.24% compared with 1.14% in February 2021.	Crude hospital mortality rate by Hospital (74 years of age or less) <table><caption>Crude hospital mortality rate by Hospital (74 years of age or less)</caption><thead><tr><th>Month</th><th>Morriston Hospital</th><th>Singleton Hospital</th><th>NPT Hospital</th><th>HB Total</th></tr></thead><tbody><tr><td>Feb-20</td><td>1.2%</td><td>0.4%</td><td>0.2%</td><td>0.7%</td></tr><tr><td>Mar-20</td><td>1.2%</td><td>0.4%</td><td>0.2%</td><td>0.7%</td></tr><tr><td>Apr-20</td><td>1.4%</td><td>0.4%</td><td>0.2%</td><td>0.8%</td></tr><tr><td>May-20</td><td>1.4%</td><td>0.4%</td><td>0.2%</td><td>0.8%</td></tr><tr><td>Jun-20</td><td>1.4%</td><td>0.4%</td><td>0.2%</td><td>0.8%</td></tr><tr><td>Jul-20</td><td>1.5%</td><td>0.4%</td><td>0.2%</td><td>0.8%</td></tr><tr><td>Aug-20</td><td>1.5%</td><td>0.4%</td><td>0.2%</td><td>0.8%</td></tr><tr><td>Sep-20</td><td>1.5%</td><td>0.4%</td><td>0.2%</td><td>0.8%</td></tr><tr><td>Oct-20</td><td>1.6%</td><td>0.4%</td><td>0.2%</td><td>0.9%</td></tr><tr><td>Nov-20</td><td>1.7%</td><td>0.5%</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>0.2%</td><td>1.1%</td></tr><tr><td>Feb-21</td><td>2.0%</td><td>0.6%</td><td>0.2%</td><td>1.2%</td></tr></tbody></table>	Month	Morriston Hospital	Singleton Hospital	NPT Hospital	HB Total	Feb-20	1.2%	0.4%	0.2%	0.7%	Mar-20	1.2%	0.4%	0.2%	0.7%	Apr-20	1.4%	0.4%	0.2%	0.8%	May-20	1.4%	0.4%	0.2%	0.8%	Jun-20	1.4%	0.4%	0.2%	0.8%	Jul-20	1.5%	0.4%	0.2%	0.8%	Aug-20	1.5%	0.4%	0.2%	0.8%	Sep-20	1.5%	0.4%	0.2%	0.8%	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%	0.2%	1.1%	Feb-21	2.0%	0.6%	0.2%	1.2%
	Month		Morriston Hospital	Singleton Hospital	NPT Hospital	HB Total																																																																		
Feb-20	1.2%	0.4%	0.2%	0.7%																																																																				
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	A breakdown by Hospital for December 2020: <ul style="list-style-type: none">• Morriston – 2.05%• Singleton – 0.57%• NPT – 0.18%																																																																							

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

5.1 Overview

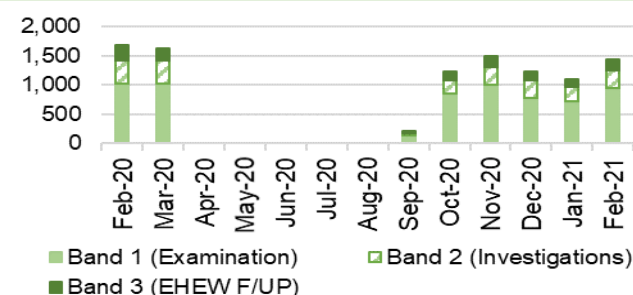
Harm from reduction in non-Covid activity																	
Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
Cancer																	
Single Cancer Pathway- % of patients started treatment within 62 days (without suspensions)	Total	12 month improvement trend			58.0%	54.7%	61.8%	59.9%	68.2%	67.4%	62.4%	65.9%	55.4%	61.0%	67.9%	56.4%	64.0%
Planned Care																	
Number of patients waiting > 26 weeks for outpatient appointment*	Morrison	0			901	2,704	4,785	6,496	8,661	11,359	12,882	12,617	12,306	12,543	12,487	12,479	12,870
	NPTH				0	2	18	18	50	181	208	129	75	49	61	111	73
	Singleton				1,141	2,762	4,445	5,387	6,929	8,792	9,748	9,073	8,394	8,336	8,427	8,414	8,575
	PC&CS				13	31	52	63	81	165	231	231	230	251	233	221	232
	Total				2,055	5,499	9,300	11,964	15,721	20,497	23,069	22,050	21,005	21,179	21,208	21,225	21,750
Number of patients waiting > 36 weeks for treatment*	Morrison	0			4,701	5,762	6,944	8,977	11,882	14,722	16,846	20,035	22,298	22,391	21,695	21,199	21,228
	NPTH				0	0	0	0	3	15	17	33	48	42	41	43	45
	Singleton				1,807	2,590	3,296	4,423	6,135	7,650	8,810	10,514	11,865	11,629	11,385	10,788	10,942
	PC&CS				1	3	7	17	45	66	82	153	220	247	219	204	196
	Total (inc. diagnostics > 36 wks)				6,509	8,355	10,247	13,419	18,078	22,494	26,046	30,735	34,431	34,309	33,340	32,234	32,411
Number of patients waiting > 8 weeks for a specified diagnostics*	Morrison	0			1,407	5,461	7,197	6,816	6,236	6,627	5,956	4,564	4,559	4,361	3,938	2,978	2,517
	Singleton				0	327	1,149	1,217	1,274	1,443	1,710	2,081	2,051	2,218	2,301	2,109	2,037
	Total				1,407	5,788	8,346	8,033	7,510	8,070	7,666	6,645	6,610	6,579	6,239	5,087	4,554
Number of patients waiting > 14 weeks for a specified therapy*	MH&LD	0			0	1	11	0	0	0	0	0	0	0	0	0	0
	NPTH				12	52	78	130	138	145	138	110	99	93	127	129	60
	PC&CS				39	334	893	1,516	1,416	1,373	1,212	1,025	718	615	457	362	309
	Total				51	387	982	1,646	1,554	1,518	1,350	1,135	817	708	584	491	369

Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
Planned Care																	
Total number of patients waiting for a follow-up outpatient appointment	Total	Reduce by at least 35% by Mar-21	97,902		125,708	123,082	121,434	120,468	120,062	120,969	120,962	120,968	120,874	119,963	119,999	120,882	121,403
Number of patients delayed by over 100% past their target date	Total		16,952		18,258	19,538	21,026	21,448	22,101	23,209	24,472	26,217	27,156	27,641	28,419	28,862	29,316
Number of patients delayed past their agreed target date (booked and not booked)	Total		44,140		45,963	51,028	53,046	51,933	52,278	55,446	56,843	57,380	56,647	56,210	57,297	57,458	55,944
Number of Ophthalmology patients without an allocated health risk factor	Total	0			143	57	43	48	213	162	513	780	464	326	212	281	
Number of patients without a documented clinical review date	Total	0			5	11	27	50	43	65	95	43	55	90	32	25	14
Patient Experience/ Feedback																	
Number of friends and family surveys completed	PCCS	12 month improvement trend			105	38	48	167	183	220	239	208	231	84	144	97	255
	MH&LD				25	11	14	7	6	34	49	48	82	56	22	8	11
	Morrison				646	43	88	110	143	174	679	269	155	152	168	211	326
	NPTH				173	10	12	17	22	24	62	40	24	18	43	31	16
	Singleton				796	60	104	99	154	207	1,824	530	377	330	323	459	453
	Total				1,720	150	247	393	502	625	2,804	1,047	787	584	678	798	1,050
% of patients who would recommend and highly recommend	PCCS	90%	80%		88%	84%	77%	88%	91%	79%	74%	65%	80%	62%	76%	77%	90%
	MH&LD				44%	36%	57%	57%	33%	41%	39%	19%	41%	21%	36%	88%	73%
	Morrison				96%	98%	94%	94%	94%	83%	91%	82%	86%	70%	76%	82%	86%
	NPTH				97%	60%	67%	47%	68%	92%	94%	90%	75%	67%	58%	32%	75%
	Singleton				95%	93%	96%	83%	92%	87%	96%	88%	87%	85%	85%	92%	87%
	Total				95%	90%	92%	87%	91%	83%	93%	82%	84%	77%	79%	85%	87%
% of all-Wales surveys scoring 9 or 10 on overall satisfaction	PCCS	90%	80%		100%	-	100%	100%	94%	83%	100%	100%	80%	67%	90%	100%	100%
	MH&LD				-	-	-	-	0%	100%	100%	100%	-	-	-	-	50%
	Morrison				100%	100%	100%	67%	90%	80%	79%	58%	100%	33%	80%	71%	90%
	NPTH				67%	-	-	-	100%	100%	90%	100%	-	67%	67%	100%	100%
	Singleton				90%	95%	100%	67%	90%	82%	79%	90%	86%	80%	77%	95%	92%
	Total				90%	95%	100%	79%	91%	83%	84%	79%	85%	65%	81%	94%	93%
Number of new complaints received	PCCS	12 month reduction rend			4	7	11	16	14	10	18	22	24	24	9	10	22
	MH&LD				3	4	9	8	13	10	10	20	13	6	11	15	10
	Morrison				42	8	18	27	34	31	51	44	40	38	33	40	50
	NPTH				1	8	5	7	5	2	7	6	7	1	7	6	7
	Singleton				34	8	8	12	12	17	24	25	20	20	15	20	24
	Total				92	37	52	73	77	74	107	121	103	83	78	94	117
% 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%		29%	83%	73%	50%	80%	60%	92%	67%	76%	77%	63%		
	MH&LD				67%	100%	78%	63%	69%	50%	80%	70%	92%	75%	73%		
	Morrison				40%	88%	94%	89%	88%	84%	90%	86%	89%	91%	81%		
	NPTH				100%	75%	80%	71%	100%	50%	100%	67%	86%	0%	57%		
	Singleton				58%	75%	75%	83%	50%	65%	63%	64%	70%	70%	57%		
	Total				48%	81%	81%	75%	79%	72%	82%	75%	82%	80%	71%		

HARM FROM REDUCTION IN NON-COVID ACTIVITY

5.2 Primary and Community Care Overview

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



No claims submitted between April and August 2020

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

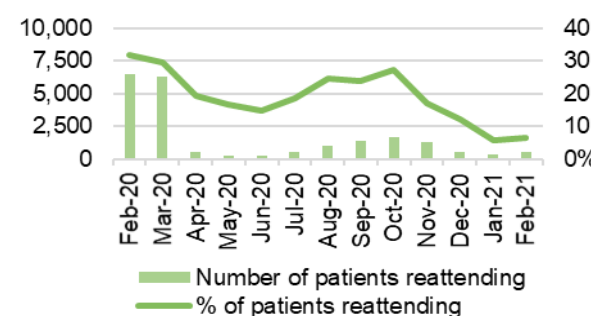


Chart 9: District Nursing- Number of patients on caseload

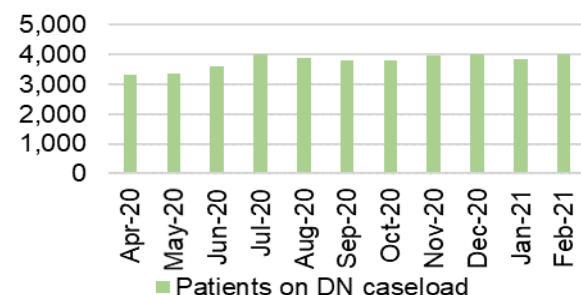


Chart 13: % of patients with a RTT (referral to stage 1) of 26 weeks or less for Restorative Dentistry

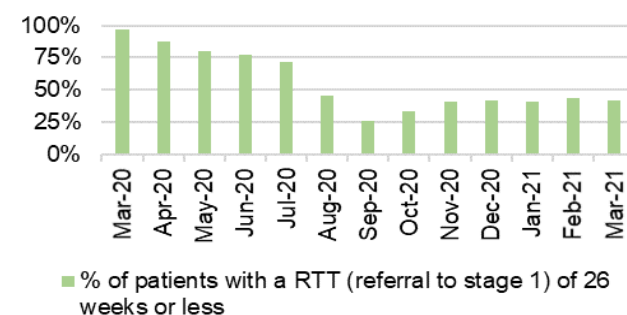


Chart 2: Common Ailment Scheme - Number of consultations provided

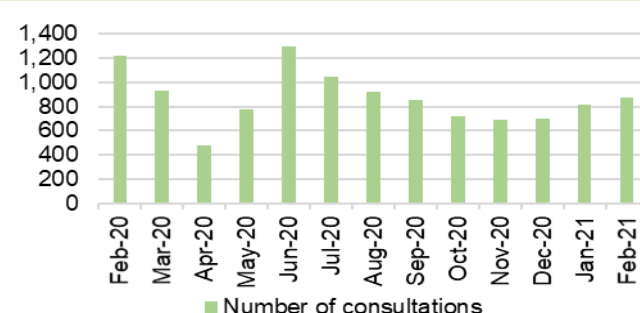


Chart 6: Pregnancy Advisory Service- Referral to appointment within 5 days and treatment within 10 days

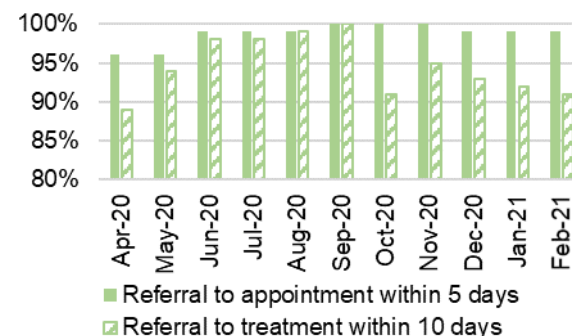


Chart 10: District Nursing- Total number of contacts

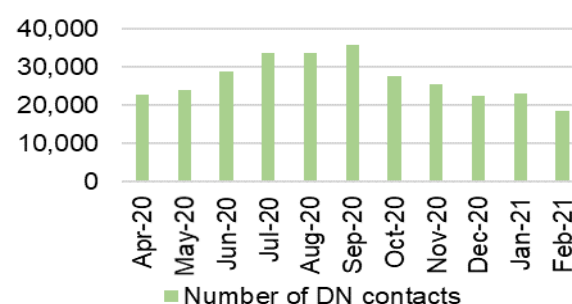
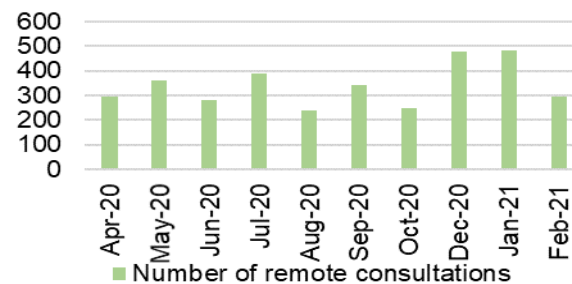


Chart 14: Audiology- Number of remote consultations



Nov-20 data not available

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

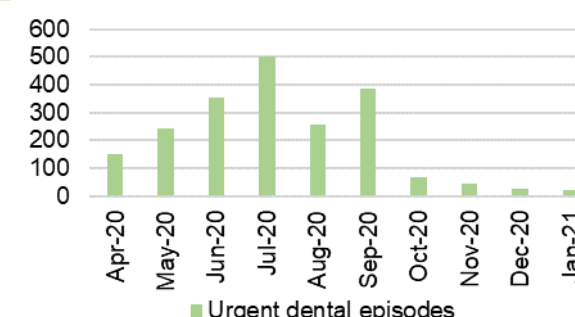


Chart 7: Sexual health services- Attendances at sexual health ambulance

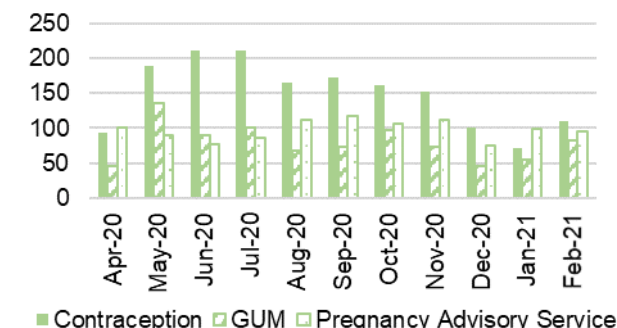


Chart 11: Community wound clinic- Number of attendances and number of home visits

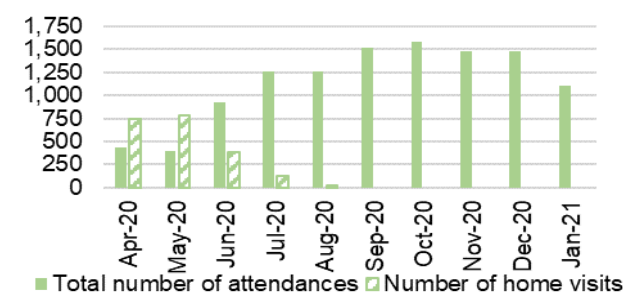
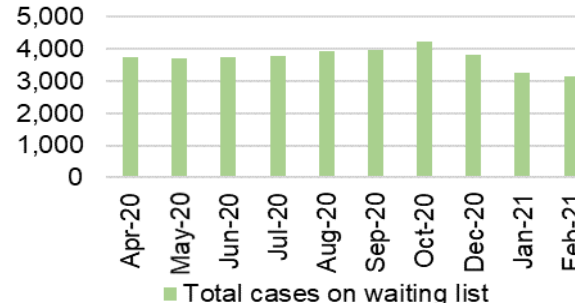


Chart 15: Audiology- Total number of patients on the waiting list



Nov-20 data not available

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

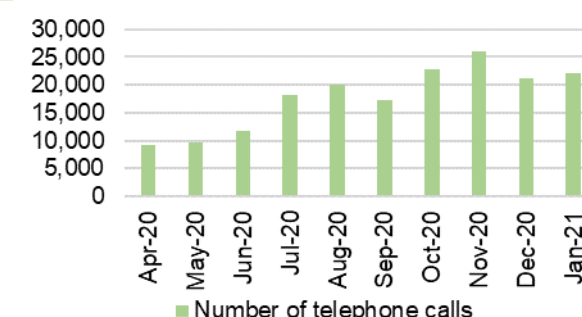


Chart 8: Sexual health services- Patient outcomes

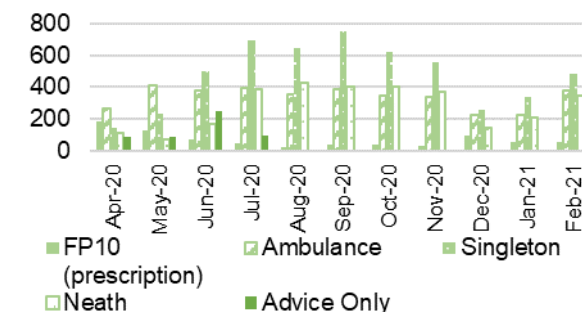


Chart 12: Community wound clinic- Number of assessments by location

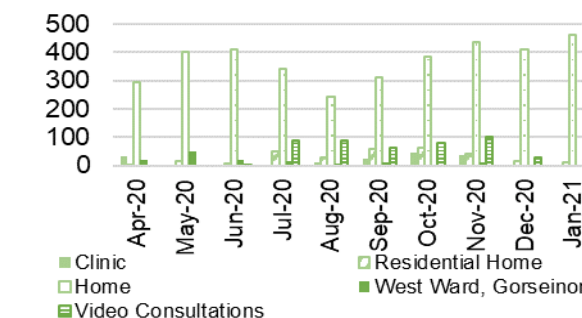
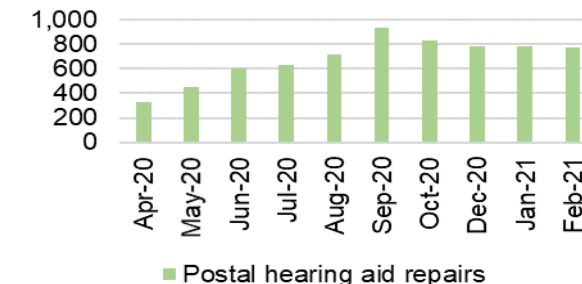


Chart 16: Audiology- Number of postal hearing aid repairs



Nov-20 data not available

5.2 Updates on key measures

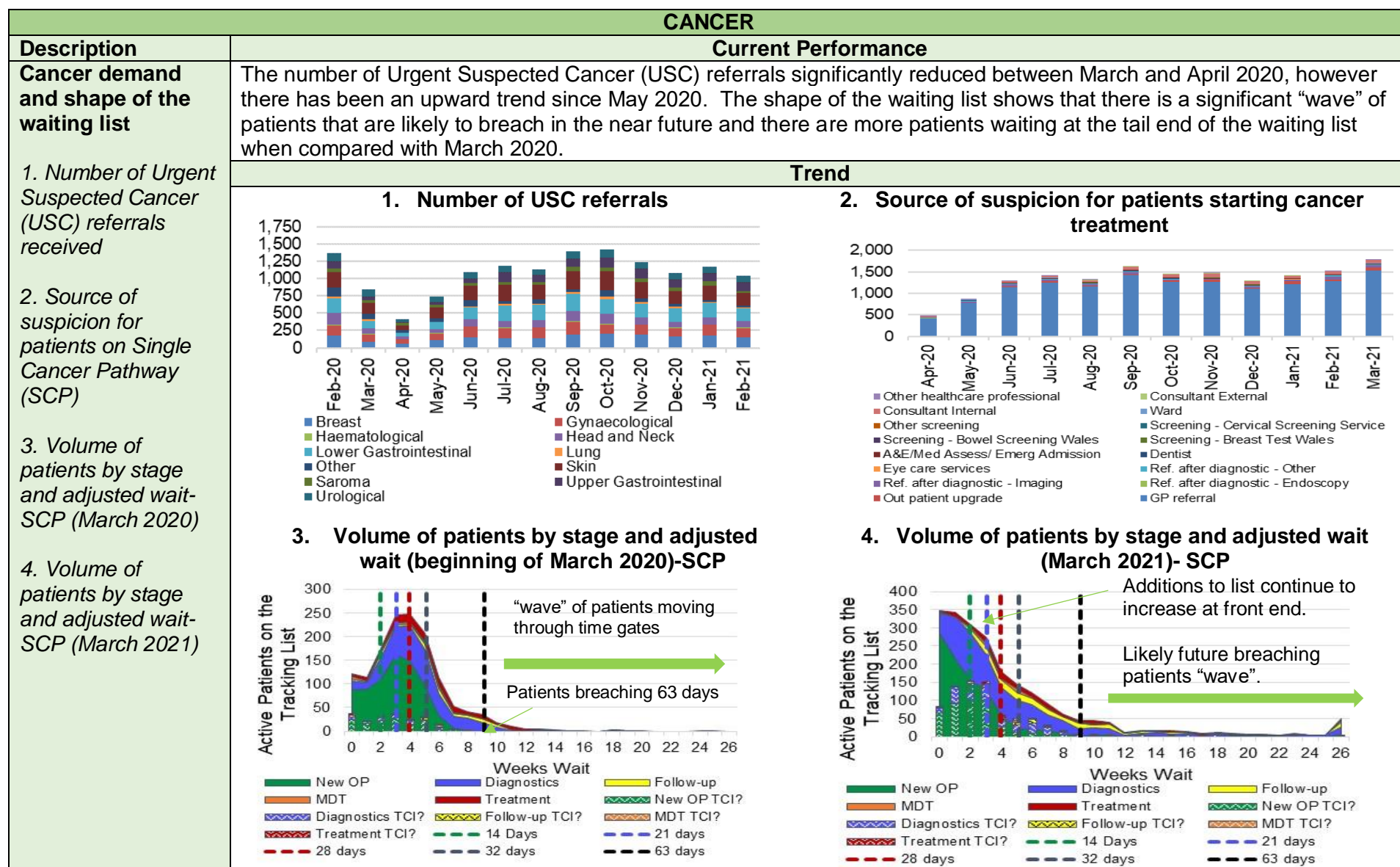
PLANNED CARE	
Description	Current Performance
Referrals and shape of the waiting list	The number of GP referrals and additions to the outpatient waiting list increased each month since May 2020, this is reflected in the reduction in the size of the waiting list in April 2020 and subsequent increase every month since May 2020. Since September 2020 the number of referrals and additions appeared to stabilise but then started to increase again from January 2021. Chart 4 shows the shape of the current waiting list and chart 3 shows the waiting list as at December 2019 as this reflects a typical monthly snapshot of the waiting list prior to the COVID19 pandemic.
1. GP Referrals <i>The number of Stage 1 additions per week</i> 2. Stage 1 additions <i>The number of new patients that have been added to the outpatient waiting list</i> 3. Size of the waiting list <i>Total number of patients on the waiting list by stage as at December 2019</i> 4. Size of the waiting list <i>Total number of patients on the waiting list by stage as at March 2021</i>	<p>Trend</p> <div> <div> 1. Number of GP referrals received by SBU Health Board </div> <div> 2. Number of stage 1 additions per week </div> <div> 3. Total size of the waiting list and movement (December 2019) </div> <div> 4. Total size of the waiting list and movement (March 2021) </div> </div>

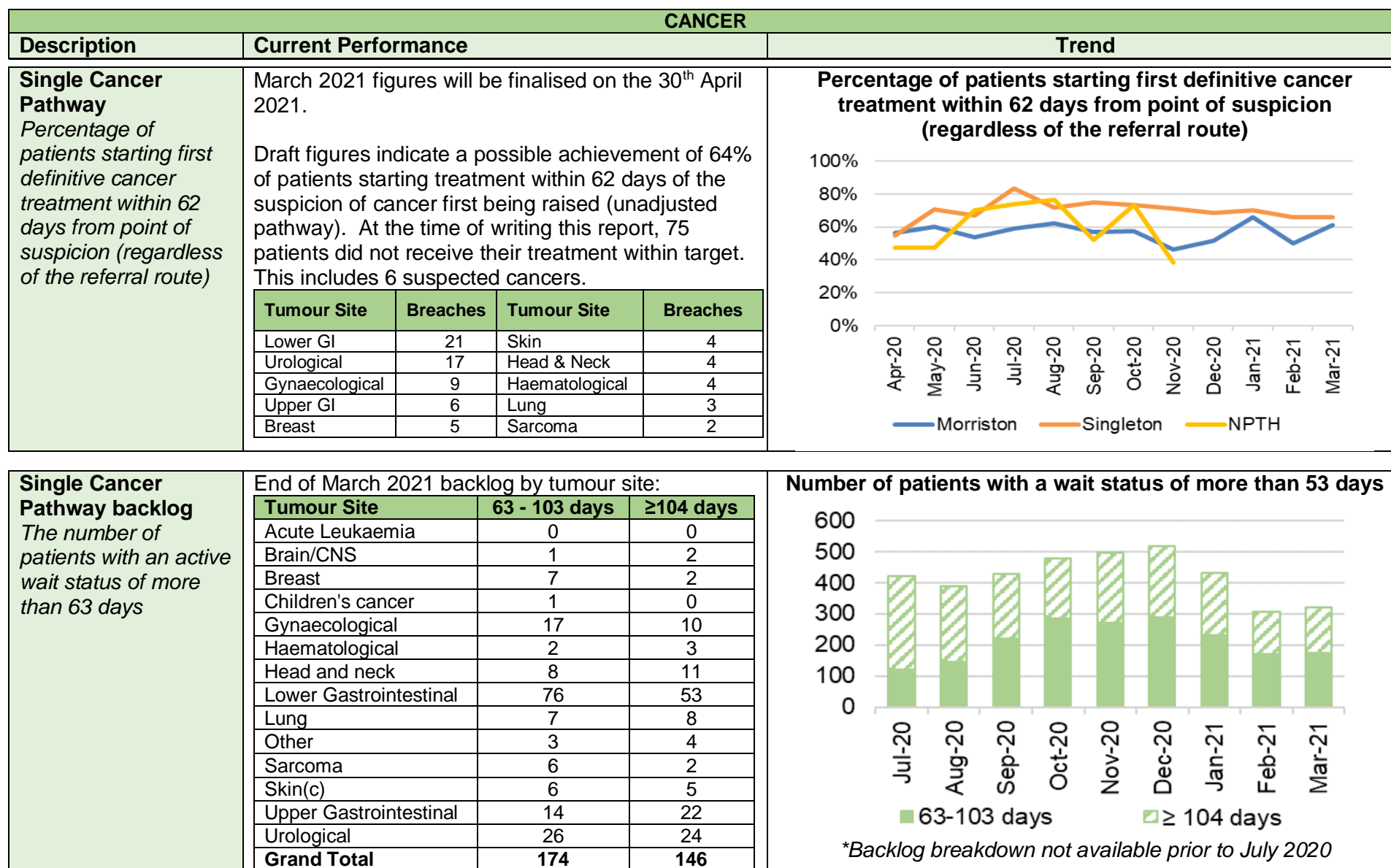
PLANNED CARE	
Description	Current Performance
Outpatient waiting times 1. Number of patients waiting more than 26 weeks for an outpatient appointment (stage 1)- Health Board Total 2. Number of patients waiting more than 26 weeks for an outpatient appointment (stage 1)- Hospital Level 3. Patients waiting over 26 weeks for an outpatient appointment by specialty 4. Outpatient activity undertaken	<p>The number of patients waiting over 26 weeks for a first outpatient appointment is a challenge. March 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 21,225 in February 2021 to 21,750 in March 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 May 2020 but has plateaued from December 2020 onwards. Work continues to be undertaken to accurately record the split between face-to-face and virtual attendances and will be reported through a new Outpatient dashboard.</p> <p>Trend</p> <div> <div> <p>1. Number of stage 1 over 26 weeks- HB total</p> <p>■ Outpatients > 26 wks (SB UHB)</p> </div> <div> <p>2. Number of stage 1 over 26 weeks- Hospital level</p> <p>— Morriston — Singleton — PC&CS — NPTH</p> </div> <div> <p>3. Patients waiting over 26 weeks for an outpatient appointment by specialty as at March 2021</p> </div> <div> <p>4. Outpatient activity undertaken</p> <p>— New outpatient attendances - - - Follow-up attendances</p> </div> </div>

PLANNED CARE																																																																																																																														
Description	Current Performance																																																																																																																													
Patients waiting over 36 weeks for treatment 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 in 2020 that saw an in-month reduction and this trend continued into January and February 2021 however, the number of breaches increased again in March 2021. In March 2021, there was 32,874 patient waiting over 36 weeks which is a 0.5% in-month increase from February 2021. 27,226 of the 32,874 were waiting over 52 weeks in March 2021. Orthopaedics/ Spinal accounted for 23% of the breaches, followed by Ophthalmology with 13%.</p> <p>The number of patients receiving a procedure (and subsequently removed from the waiting list) has significantly reduced since March 2020 which is resulting in the increase in waiting times.</p>																																																																																																																													
	Trend																																																																																																																													
	<div><div><h3>1. Number of patients waiting over 36 weeks- HB total</h3><table border="1"><thead><tr><th>Month</th><th>Patients</th></tr></thead><tbody><tr><td>Mar-20</td><td>~5,000</td></tr><tr><td>Apr-20</td><td>~8,000</td></tr><tr><td>May-20</td><td>~10,000</td></tr><tr><td>Jun-20</td><td>~12,000</td></tr><tr><td>Jul-20</td><td>~18,000</td></tr><tr><td>Aug-20</td><td>~22,000</td></tr><tr><td>Sep-20</td><td>~25,000</td></tr><tr><td>Oct-20</td><td>~30,000</td></tr><tr><td>Nov-20</td><td>~35,000</td></tr><tr><td>Dec-20</td><td>~34,000</td></tr><tr><td>Jan-21</td><td>~33,000</td></tr><tr><td>Feb-21</td><td>~32,000</td></tr><tr><td>Mar-21</td><td>~33,000</td></tr></tbody></table><p>■ >36 wks (SB UHB)</p></div><div><h3>2. Number of patients waiting over 36 weeks- Hospital level</h3><table border="1"><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>PC&CS</th><th>NPTH</th></tr></thead><tbody><tr><td>Mar-20</td><td>~5,000</td><td>~1,000</td><td>~1,000</td><td>~1,000</td></tr><tr><td>Apr-20</td><td>~6,000</td><td>~2,000</td><td>~1,000</td><td>~1,000</td></tr><tr><td>May-20</td><td>~8,000</td><td>~3,000</td><td>~1,000</td><td>~1,000</td></tr><tr><td>Jun-20</td><td>~10,000</td><td>~4,000</td><td>~1,000</td><td>~1,000</td></tr><tr><td>Jul-20</td><td>~12,000</td><td>~5,000</td><td>~1,000</td><td>~1,000</td></tr><tr><td>Aug-20</td><td>~14,000</td><td>~6,000</td><td>~1,000</td><td>~1,000</td></tr><tr><td>Sep-20</td><td>~16,000</td><td>~7,000</td><td>~1,000</td><td>~1,000</td></tr><tr><td>Oct-20</td><td>~18,000</td><td>~8,000</td><td>~1,000</td><td>~1,000</td></tr><tr><td>Nov-20</td><td>~22,000</td><td>~12,000</td><td>~1,000</td><td>~1,000</td></tr><tr><td>Dec-20</td><td>~21,000</td><td>~11,000</td><td>~1,000</td><td>~1,000</td></tr><tr><td>Jan-21</td><td>~20,000</td><td>~11,000</td><td>~1,000</td><td>~1,000</td></tr><tr><td>Feb-21</td><td>~20,000</td><td>~10,000</td><td>~1,000</td><td>~1,000</td></tr><tr><td>Mar-21</td><td>~21,000</td><td>~11,000</td><td>~1,000</td><td>~1,000</td></tr></tbody></table><p>— Morriston — Singleton — PC&CS — NPTH</p></div><div><h3>3. Number of elective admissions</h3><table border="1"><thead><tr><th>Month</th><th>Admitted elective patients</th></tr></thead><tbody><tr><td>Mar-20</td><td>~3,500</td></tr><tr><td>Apr-20</td><td>~2,000</td></tr><tr><td>May-20</td><td>~2,000</td></tr><tr><td>Jun-20</td><td>~2,500</td></tr><tr><td>Jul-20</td><td>~3,000</td></tr><tr><td>Aug-20</td><td>~2,800</td></tr><tr><td>Sep-20</td><td>~3,500</td></tr><tr><td>Oct-20</td><td>~3,500</td></tr><tr><td>Nov-20</td><td>~3,200</td></tr><tr><td>Dec-20</td><td>~3,000</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>~4,200</td></tr></tbody></table><p>— Admitted elective patients</p></div></div>	Month	Patients	Mar-20	~5,000	Apr-20	~8,000	May-20	~10,000	Jun-20	~12,000	Jul-20	~18,000	Aug-20	~22,000	Sep-20	~25,000	Oct-20	~30,000	Nov-20	~35,000	Dec-20	~34,000	Jan-21	~33,000	Feb-21	~32,000	Mar-21	~33,000	Month	Morriston	Singleton	PC&CS	NPTH	Mar-20	~5,000	~1,000	~1,000	~1,000	Apr-20	~6,000	~2,000	~1,000	~1,000	May-20	~8,000	~3,000	~1,000	~1,000	Jun-20	~10,000	~4,000	~1,000	~1,000	Jul-20	~12,000	~5,000	~1,000	~1,000	Aug-20	~14,000	~6,000	~1,000	~1,000	Sep-20	~16,000	~7,000	~1,000	~1,000	Oct-20	~18,000	~8,000	~1,000	~1,000	Nov-20	~22,000	~12,000	~1,000	~1,000	Dec-20	~21,000	~11,000	~1,000	~1,000	Jan-21	~20,000	~11,000	~1,000	~1,000	Feb-21	~20,000	~10,000	~1,000	~1,000	Mar-21	~21,000	~11,000	~1,000	~1,000	Month	Admitted elective patients	Mar-20	~3,500	Apr-20	~2,000	May-20	~2,000	Jun-20	~2,500	Jul-20	~3,000	Aug-20	~2,800	Sep-20	~3,500	Oct-20	~3,500	Nov-20	~3,200	Dec-20	~3,000	Jan-21	~3,500	Feb-21	~3,500	Mar-21
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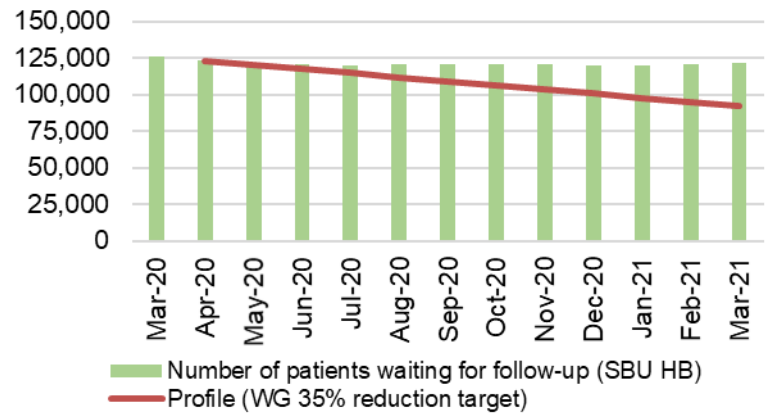
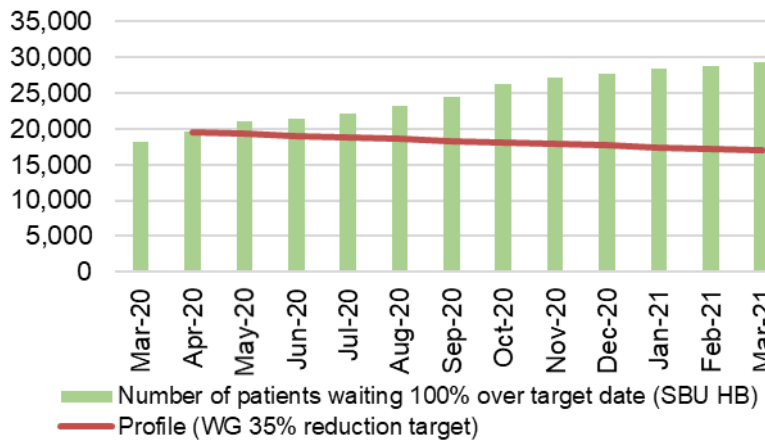
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Description	Current Performance																																																																							
Total waiting times <i>Percentage of patients waiting less than 26 weeks from referral to treatment</i>	<p>Throughout 2019/20 the overall percentage of patients waiting less than 26 weeks from referral to treatment ranged between 80% and 88%.</p> <p>The percentage consistently fell every month between April and September 2020, but has started to increase again. In March 2021, 48.8% of patients were waiting under 26 weeks from referral to treatment. This is an in-month improvement of 0.9% from 47.9% in February 2021 to 48.8% in March 2021.</p>	<p>Percentage of patient waiting less than 26 weeks</p> <table border="1"><caption>Estimated data for Percentage of patient waiting less than 26 weeks</caption><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>PC&CS</th><th>NPTH</th></tr></thead><tbody><tr><td>Mar-20</td><td>75%</td><td>80%</td><td>95%</td><td>98%</td></tr><tr><td>Apr-20</td><td>65%</td><td>70%</td><td>85%</td><td>98%</td></tr><tr><td>May-20</td><td>60%</td><td>65%</td><td>80%</td><td>98%</td></tr><tr><td>Jun-20</td><td>55%</td><td>60%</td><td>75%</td><td>98%</td></tr><tr><td>Jul-20</td><td>50%</td><td>55%</td><td>70%</td><td>95%</td></tr><tr><td>Aug-20</td><td>45%</td><td>50%</td><td>45%</td><td>85%</td></tr><tr><td>Sep-20</td><td>40%</td><td>45%</td><td>30%</td><td>75%</td></tr><tr><td>Oct-20</td><td>45%</td><td>50%</td><td>40%</td><td>85%</td></tr><tr><td>Nov-20</td><td>45%</td><td>50%</td><td>45%</td><td>90%</td></tr><tr><td>Dec-20</td><td>45%</td><td>50%</td><td>45%</td><td>95%</td></tr><tr><td>Jan-21</td><td>45%</td><td>50%</td><td>45%</td><td>95%</td></tr><tr><td>Feb-21</td><td>45%</td><td>50%</td><td>45%</td><td>90%</td></tr><tr><td>Mar-21</td><td>48.8%</td><td>50%</td><td>45%</td><td>95%</td></tr></tbody></table>	Month	Morriston	Singleton	PC&CS	NPTH	Mar-20	75%	80%	95%	98%	Apr-20	65%	70%	85%	98%	May-20	60%	65%	80%	98%	Jun-20	55%	60%	75%	98%	Jul-20	50%	55%	70%	95%	Aug-20	45%	50%	45%	85%	Sep-20	40%	45%	30%	75%	Oct-20	45%	50%	40%	85%	Nov-20	45%	50%	45%	90%	Dec-20	45%	50%	45%	95%	Jan-21	45%	50%	45%	95%	Feb-21	45%	50%	45%	90%	Mar-21	48.8%	50%	45%	95%
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Ophthalmology waiting times <i>Percentage of ophthalmology R1 patients who are waiting within their clinical target date or within 25% in excess of their clinical target date for their care or treatments</i>	<p>In March 2021, 47.% of Ophthalmology R1 patients were waiting within their clinical target date or within 25% of the target date.</p> <p>There was an upward trend in performance in 2019/20 however, there has been a continuous downward trend in performance in 2020/21.</p>	<p>Percentage of ophthalmology R1 patients who are waiting within their clinical target date or within 25% in excess of their clinical target date for their care or treatments</p> <table border="1"><caption>Estimated data for Percentage of ophthalmology R1 patients</caption><thead><tr><th>Month</th><th>% R1 patients seen within target or within 25% of target date</th><th>Target</th></tr></thead><tbody><tr><td>Mar-20</td><td>75%</td><td>95%</td></tr><tr><td>Apr-20</td><td>70%</td><td>95%</td></tr><tr><td>May-20</td><td>65%</td><td>95%</td></tr><tr><td>Jun-20</td><td>65%</td><td>95%</td></tr><tr><td>Jul-20</td><td>55%</td><td>95%</td></tr><tr><td>Aug-20</td><td>50%</td><td>95%</td></tr><tr><td>Sep-20</td><td>48%</td><td>95%</td></tr><tr><td>Oct-20</td><td>45%</td><td>95%</td></tr><tr><td>Nov-20</td><td>48%</td><td>95%</td></tr><tr><td>Dec-20</td><td>48%</td><td>95%</td></tr><tr><td>Jan-21</td><td>48%</td><td>95%</td></tr><tr><td>Feb-21</td><td>48%</td><td>95%</td></tr><tr><td>Mar-21</td><td>47%</td><td>95%</td></tr></tbody></table>	Month	% R1 patients seen within target or within 25% of target date	Target	Mar-20	75%	95%	Apr-20	70%	95%	May-20	65%	95%	Jun-20	65%	95%	Jul-20	55%	95%	Aug-20	50%	95%	Sep-20	48%	95%	Oct-20	45%	95%	Nov-20	48%	95%	Dec-20	48%	95%	Jan-21	48%	95%	Feb-21	48%	95%	Mar-21	47%	95%																												
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PLANNED CARE		
Description	Current Performance	Trend
Diagnostics waiting times <i>The number of patients waiting more than 8 weeks for specified diagnostics</i>	<p>In March 2021, there was a reduction in the number of patients waiting over 8 weeks for specified diagnostics. It reduced 5,087 in February 2021 to 4,554.</p> <p>The following is a breakdown for the 8 week breaches by diagnostic test for March 2021:</p> <ul style="list-style-type: none"> • Endoscopy= 2,037 • Cardiac tests= 1,342 • Neurophysiology= 885 • Radiology= 228 • Fluoroscopy= 25 • Cystoscopy= 20 • Physiological measurement= 17 	<p>Number of patients waiting longer than 8 weeks for diagnostics</p> <p>Legend:</p> <ul style="list-style-type: none"> Cardiac tests Endoscopy Other diagnostics (inc. radiology)
Therapy waiting times <i>The number of patients waiting more than 14 weeks for specified therapies</i>	<p>In March 2021 there were 369 patients waiting over 14 weeks for specified Therapies.</p> <p>The breakdown for the breaches in March 2021 are:</p> <ul style="list-style-type: none"> • Speech & Language Therapy= 162 • Audiology=147 • Dietetics= 60 	<p>Number of patients waiting longer than 14 weeks for therapies</p> <p>Legend:</p> <ul style="list-style-type: none"> Occ Therapy/ LD (MH) Occ Therapy (exc. MH) Audiology Speech & Language Dietetics Phsyio Podiatry

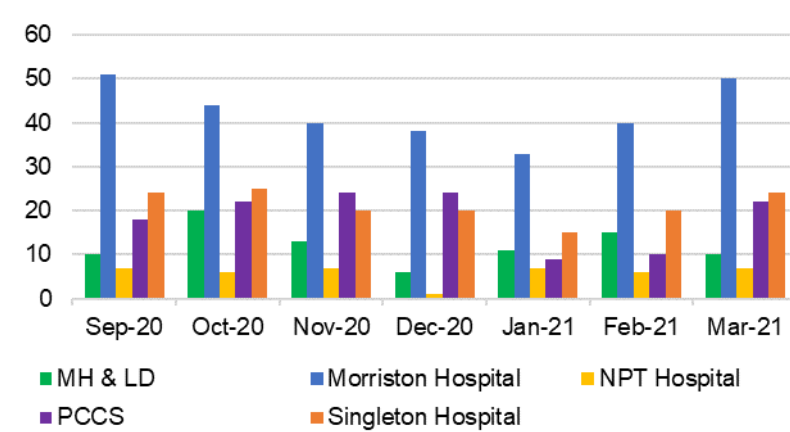
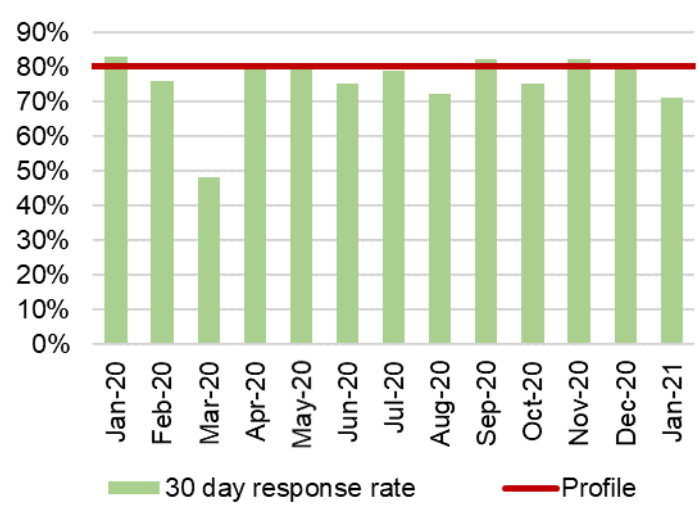




CANCER																																																																																						
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USC First Outpatient Appointments <i>The number of patients at first outpatient appointment stage by days waiting</i>	Week to week through March 2021 the percentage of patients seen within 14 days to first appointment ranged between 12% and 15%.	The number of patients waiting for a first outpatient appointment (by total days waiting) - End of March 2021 <table><tr><th></th><th>≤10</th><th>11-20</th><th>21-30</th><th>>31</th><th>Total</th></tr><tr><td>Breast</td><td>1</td><td>4</td><td>54</td><td>36</td><td>95</td></tr><tr><td>Children Cancer</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Gynaecological</td><td>2</td><td>6</td><td>26</td><td>39</td><td>73</td></tr><tr><td>Haematological</td><td>0</td><td>0</td><td>0</td><td>1</td><td>1</td></tr><tr><td>Head&Neck</td><td>1</td><td>8</td><td>1</td><td>6</td><td>16</td></tr><tr><td>LGI</td><td>1</td><td>4</td><td>0</td><td>14</td><td>19</td></tr><tr><td>Lung</td><td>0</td><td>0</td><td>1</td><td>0</td><td>1</td></tr><tr><td>Other</td><td>0</td><td>7</td><td>0</td><td>1</td><td>8</td></tr><tr><td>Sarcoma</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Skin</td><td>9</td><td>32</td><td>18</td><td>4</td><td>63</td></tr><tr><td>UGI</td><td>2</td><td>1</td><td>1</td><td>1</td><td>5</td></tr><tr><td>Urological</td><td>0</td><td>4</td><td>5</td><td>1</td><td>10</td></tr><tr><td>Total</td><td>19</td><td>66</td><td>106</td><td>103</td><td>291</td></tr></table>		≤10	11-20	21-30	>31	Total	Breast	1	4	54	36	95	Children Cancer	0	0	0	0	0	Gynaecological	2	6	26	39	73	Haematological	0	0	0	1	1	Head&Neck	1	8	1	6	16	LGI	1	4	0	14	19	Lung	0	0	1	0	1	Other	0	7	0	1	8	Sarcoma	0	0	0	0	0	Skin	9	32	18	4	63	UGI	2	1	1	1	5	Urological	0	4	5	1	10	Total	19	66	106	103	291
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Radiotherapy waiting times <i>The percentage of patients receiving radiotherapy treatment</i>	Radiotherapy waiting times are challenging however the provision of emergency radiotherapy within 1 and 2 days has been maintained at 100% throughout the COVID19 outbreak. <table><tr><th>Measure</th><th>Target</th><th>Mar-21</th></tr><tr><td>Scheduled (21 Day Target)</td><td>80%</td><td>42%</td></tr><tr><td>Scheduled (28 Day Target)</td><td>100%</td><td>85%</td></tr><tr><td>Urgent SC (7 Day Target)</td><td>80%</td><td>41%</td></tr><tr><td>Urgent SC (14 Day Target)</td><td>100%</td><td>90%</td></tr><tr><td>Emergency (within 1 day)</td><td>80%</td><td>100%</td></tr><tr><td>Emergency (within 2 days)</td><td>100%</td><td>100%</td></tr><tr><td>Elective Delay (21 Day Target)</td><td>80%</td><td>86%</td></tr><tr><td>Elective Delay (28 Day Target)</td><td>100%</td><td>93%</td></tr></table>	Measure	Target	Mar-21	Scheduled (21 Day Target)	80%	42%	Scheduled (28 Day Target)	100%	85%	Urgent SC (7 Day Target)	80%	41%	Urgent SC (14 Day Target)	100%	90%	Emergency (within 1 day)	80%	100%	Emergency (within 2 days)	100%	100%	Elective Delay (21 Day Target)	80%	86%	Elective Delay (28 Day Target)	100%	93%	Radiotherapy waiting times																																																									
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FOLLOW-UP APPOINTMENTS		
Description	Current Performance	Trend
Follow-up appointments 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 March 2021, the overall size of the follow-up waiting list increased by 521 patients compared with February 2021 (from 120,882 to 121,403).</p> <p>In March 2021, there was a total of 55,944 patients waiting for a follow-up past their target date. This is an in-month reduction of 2.6% (from 57,458 in February 2021 to 55,944 in March 2021).</p> <p>Of the 55,944 delayed follow-ups in March 2021, 8,893 had appointment dates and 47,051 were still waiting for an appointment.</p> <p>In addition, 29,316 patients were waiting 100%+ over target date in March 2021. This is a 1.6% increase when compared with February 2021.</p>	<p>1. Total number of patients waiting for a follow-up</p>  <p>2. Delayed follow-ups: Number of patients waiting 100% over target</p> 

PATIENT EXPERIENCE		
Description	Current Performance	Trend
Patient experience 1. Number of friends and family surveys completed 2. Percentage of patients/ service users who would recommend and highly recommend	<ul style="list-style-type: none"> Health Board Friends & Family patient satisfaction level in March 2021 was 87% and 1,050 surveys were completed: <ul style="list-style-type: none"> Neath Port Talbot Hospital (NPTH) completed 16 surveys in March 2021, with a recommended score of 75%. Singleton Hospital completed 453 surveys for March 2021, with a recommended score of 87%. Morrison Hospital completed 326 surveys in March 2021, with a recommended score of 86%. Mental Health & Learning Disabilities completed 11 surveys for March 2021, with a recommended score of 73%. Primary & Community Care completed 255 surveys for March 2021, with a recommended score of 90%. 	<p>1. Number of friends and family surveys completed</p> <p>2. % of patients/ service users who would recommend and highly recommend</p>












COMPLAINTS																																										
Description	Current Performance	Trend																																								
Patient concerns																																										
<i>1. Number of formal complaints received</i>	<p>1. In March 2021, the Health Board received 117 formal complaints; this is a 27% increase when compared with March 2020 (from 92 to 117).</p> <p>The monthly number of complaints received has been significantly lower since the COVID19 outbreak in March 2020 however, the numbers have gradually increased month on month since April 2020 until December 2020 when numbers started to reduce again. However, the increase in March 2021 saw the monthly position increase back to pre-COVID level.</p>	<p>1. Number of formal complaints received</p>  <table><caption>1. Number of formal complaints received</caption><thead><tr><th>Month</th><th>MH & LD</th><th>Morriston Hospital</th><th>NPT Hospital</th><th>Singleton Hospital</th></tr></thead><tbody><tr><td>Sep-20</td><td>10</td><td>50</td><td>5</td><td>25</td></tr><tr><td>Oct-20</td><td>20</td><td>45</td><td>5</td><td>25</td></tr><tr><td>Nov-20</td><td>15</td><td>40</td><td>5</td><td>20</td></tr><tr><td>Dec-20</td><td>5</td><td>38</td><td>2</td><td>20</td></tr><tr><td>Jan-21</td><td>10</td><td>32</td><td>5</td><td>15</td></tr><tr><td>Feb-21</td><td>15</td><td>40</td><td>5</td><td>20</td></tr><tr><td>Mar-21</td><td>10</td><td>50</td><td>5</td><td>25</td></tr></tbody></table>	Month	MH & LD	Morriston Hospital	NPT Hospital	Singleton Hospital	Sep-20	10	50	5	25	Oct-20	20	45	5	25	Nov-20	15	40	5	20	Dec-20	5	38	2	20	Jan-21	10	32	5	15	Feb-21	15	40	5	20	Mar-21	10	50	5	25
Month	MH & LD	Morriston Hospital	NPT Hospital	Singleton Hospital																																						
Sep-20	10	50	5	25																																						
Oct-20	20	45	5	25																																						
Nov-20	15	40	5	20																																						
Dec-20	5	38	2	20																																						
Jan-21	10	32	5	15																																						
Feb-21	15	40	5	20																																						
Mar-21	10	50	5	25																																						
<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>2. The overall Health Board rate for responding to concerns within 30 working days was 71% in January 2021 against the Welsh Government target of 75% and Health Board target of 80%.</p> <p>Performance in January 2021 ranged from 57% in Neath Port Talbot Hospital to 81% in Morriston Hospital.</p>	<p>2. Response rate for concerns within 30 days</p>  <table><caption>2. Response rate for concerns within 30 days</caption><thead><tr><th>Month</th><th>30 day response rate (%)</th></tr></thead><tbody><tr><td>Jan-20</td><td>82</td></tr><tr><td>Feb-20</td><td>75</td></tr><tr><td>Mar-20</td><td>48</td></tr><tr><td>Apr-20</td><td>80</td></tr><tr><td>May-20</td><td>80</td></tr><tr><td>Jun-20</td><td>75</td></tr><tr><td>Jul-20</td><td>80</td></tr><tr><td>Aug-20</td><td>72</td></tr><tr><td>Sep-20</td><td>82</td></tr><tr><td>Oct-20</td><td>75</td></tr><tr><td>Nov-20</td><td>82</td></tr><tr><td>Dec-20</td><td>80</td></tr><tr><td>Jan-21</td><td>71</td></tr></tbody></table>	Month	30 day response rate (%)	Jan-20	82	Feb-20	75	Mar-20	48	Apr-20	80	May-20	80	Jun-20	75	Jul-20	80	Aug-20	72	Sep-20	82	Oct-20	75	Nov-20	82	Dec-20	80	Jan-21	71												
Month	30 day response rate (%)																																									
Jan-20	82																																									
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Jan-21	71																																									

6 HARM QUADRANT- HARM FROM WIDER SOCIETAL ACTIONS/LOCKDOWN

6.1 Overview

Harm from wider societal actions/lockdown																
Measure	Locality	National/ Local Target	Internal profile	Trend	SBU											
					Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21
Childhood immunisations																
% children who received 3 doses of the hexavalent '6 in 1' vaccine by age 1	NPT	95%	90%	• • •	97.0%	95.9%		97.1%		97.2%						
	Swansea			• • •	95.5%	96.9%		96.2%		96.4%						
	HB Total			• • •	96.1%	96.5%		96.5%		96.7%						
% children who received MenB2 vaccine by age 1	NPT	95%	90%	• • •	97.0%	96.6%		97.1%		97.8%						
	Swansea			• • •	95.3%	96.9%		96.0%		95.8%						
	HB Total			• • •	95.9%	96.8%		96.4%		96.6%						
% children who received PCV2 vaccine by age 1	NPT	95%	90%	• • •	97.3%	95.6%		96.8%		98.1%						
	Swansea			• • •	95.9%	96.9%		95.8%		96.2%						
	HB Total			• • •	96.4%	96.4%		96.2%		96.9%						
% children who received Rotavirus vaccine by age 1	NPT	95%	90%	• • •	96.4%	95.6%		95.5%		95.0%						
	Swansea			• • •	94.2%	97.6%		94.5%		95.1%						
	HB Total			• • •	95.0%	96.9%		94.8%		95.1%						
% children who received MMR1 vaccine by age 2	NPT	95%	90%	• • •	95.3%	92.1%		96.5%		93.6%						
	Swansea			• • •	94.4%	95.6%		94.8%		95.2%						
	HB Total			• • •	94.7%	94.4%		95.4%		94.6%						
% children who received PCV3 vaccine by age 2	NPT	95%	90%	• • •	96.4%	92.4%		96.5%		93.9%						
	Swansea			• • •	93.9%	95.1%		95.0%		95.2%						
	HB Total			• • •	94.8%	94.1%		95.5%		94.7%						
% children who received MenB4 vaccine by age 2	NPT	95%	90%	• • •	96.1%	92.1%		96.5%		93.9%						
	Swansea			• • •	93.0%	94.2%		95.2%		95.2%						
	HB Total			• • •	94.2%	93.5%		95.6%		94.7%						
% children who received Hib/MenC vaccine by age 2	NPT	95%	90%	• • •	95.6%	91.5%		96.8%		93.6%						
	Swansea			• • •	93.0%	94.8%		94.7%		94.8%						
	HB Total			• • •	94.0%	93.6%		95.4%		94.4%						

Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
% children who are up to date in schedule by age 4	NPT	95%	90%	↑ ↓ ↓	91.6%	88.0%			85.9%			86.4%					
	Swansea			↑ ↓ ↓	86.5%	89.2%			87.7%			87.8%					
	HB Total			↑ ↓ ↓	88.4%	88.7%			87.0%			87.2%					
% of children who received 2 doses of the MMR vaccine by age 5	NPT	95%	90%	↑ ↓ ↓	92.0%	91.8%			92.8%			92.0%					
	Swansea			↑ ↓ ↓	91.0%	90.2%			91.0%			92.0%					
	HB Total			↑ ↓ ↓	92.0%	90.8%			91.7%			92.0%					
% children who received 3 in 1 vaccine by age 5	NPT	95%	90%	↑ ↓ ↓	92.6%	92.6%			93.6%			92.5%					
	Swansea			↑ ↓ ↓	92.1%	91.9%			92.4%			93.1%					
	HB Total			↑ ↓ ↓	92.3%	92.2%			92.8%			92.9%					
% children who received MMR vaccination by age 16	NPT	95%	90%	↑ ↓ ↓	95.9%	96.1%			95.6%			96.0%					
	Swansea			↑ ↓ ↓	95.2%	94.5%			94.1%			93.6%					
	HB Total			↑ ↓ ↓	95.5%	95.1%			94.7%			94.5%					
% children who received teenage booster by age 16	NPT	90%	85%	↑ ↓ ↓	89.3%	89.9%			92.4%			92.7%					
	Swansea			↑ ↓ ↓	91.5%	91.5%			91.6%			92.2%					
	HB Total			↑ ↓ ↓	90.7%	90.9%			91.9%			92.4%					
% children who received MenACWY vaccine by age 16	NPT	Improve		↑ ↓ ↓	90.7%	91.8%			93.1%			92.9%					
	Swansea			↑ ↓ ↓	92.2%	91.5%			92.7%			92.3%					
	HB Total			↑ ↓ ↓	91.6%	91.6%			92.8%			92.5%					

Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
Mental Health Services																	
% of urgent assessments undertaken within 48 hours from receipt of referral (Crisis) (< 18 yrs)	< 18 years old (CAMHS)	100%			94%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
% of patients waiting less than 28 days for 1st outpatient appointment (< 18 yrs)	< 18 years old (CAMHS)	80%			67%	44%	78%	100%	100%	100%	98%	90%	88%	61%	53%	66%	
% of routine assessments undertaken within 28 days from receipt of referral (PCAMHS) (< 18 yrs)	< 18 years old (CAMHS)	80%			14%		89%	100%	100%	100%	62%	29%	41%	73%	29%	97%	
% of routine assessments undertaken within 28 days from receipt of referral (SCAMHS) (< 18 yrs)	< 18 years old (CAMHS)	80%			75%	46%	72%	100%	100%	100%	98%	79%	62%	58%	60%	56%	
% 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%			97%	99%	99%	100%	99%	99%	97%	99.5%	98%	99%	96%	98%	
% of therapeutic interventions started within 28 days following assessment by LPMHSS (< 18 yrs)	< 18 years old (CAMHS)	80%			95%		100%	100%	100%	86%	100%	100%	100%	100%	93%	97%	
% of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS (> 18 yrs)	> 18 years old	80%			97%	97%	100%	96%	96%	88%	94%	93%	98%	95%	95%	98%	
% of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health (> 18 yrs)	> 18 years old	95%			99.5%	93%	89%	84%	89%	91%	99%	99.7%	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%			38%	35%	30%	28%	30%	24%	21%	22%	24%	26%	24%	28%	
% 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%			99%	99%	97%	91%	98%	98%	81%	82%	81%	82%	83%	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%	93%	92%	92%	94%	92%	90%	91%	91%	89%	91%	91%	

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 February 2021, 98% of assessments were undertaken within 28 days of referral for patients 18 years and over.</p> <p>2. In February 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. 91% of residents in receipt of secondary care mental health services had a valid Care and Treatment Plan in February 2021.</p> <p>4. In February 2021, 100% of patients waited less than 26 weeks for psychological therapy. This was below the national target of 95%.</p>	<p>1. % Mental Health assessments undertaken within 28 days from receipt of referral</p> <table border="1"> <caption>1. % Mental Health assessments undertaken within 28 days from receipt of referral</caption> <thead> <tr> <th>Month</th> <th>% assessments within 28 days (>18 yrs)</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>Feb-20</td><td>98%</td><td>95%</td></tr> <tr><td>Mar-20</td><td>98%</td><td>95%</td></tr> <tr><td>Apr-20</td><td>98%</td><td>95%</td></tr> <tr><td>May-20</td><td>98%</td><td>95%</td></tr> <tr><td>Jun-20</td><td>98%</td><td>95%</td></tr> <tr><td>Jul-20</td><td>98%</td><td>95%</td></tr> <tr><td>Aug-20</td><td>98%</td><td>95%</td></tr> <tr><td>Sep-20</td><td>98%</td><td>95%</td></tr> <tr><td>Oct-20</td><td>98%</td><td>95%</td></tr> <tr><td>Nov-20</td><td>98%</td><td>95%</td></tr> <tr><td>Dec-20</td><td>98%</td><td>95%</td></tr> <tr><td>Jan-21</td><td>98%</td><td>95%</td></tr> <tr><td>Feb-21</td><td>98%</td><td>95%</td></tr> </tbody> </table> <p>2. % Mental Health therapeutic interventions started within 28 days following LPMHSS assessment</p> <table border="1"> <caption>2. % Mental Health therapeutic interventions started within 28 days following LPMHSS assessment</caption> <thead> <tr> <th>Month</th> <th>% therapeutic interventions started within 28 days (>18 yrs)</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>Feb-20</td><td>98%</td><td>95%</td></tr> <tr><td>Mar-20</td><td>98%</td><td>95%</td></tr> <tr><td>Apr-20</td><td>98%</td><td>95%</td></tr> <tr><td>May-20</td><td>98%</td><td>95%</td></tr> <tr><td>Jun-20</td><td>98%</td><td>95%</td></tr> <tr><td>Jul-20</td><td>98%</td><td>95%</td></tr> <tr><td>Aug-20</td><td>98%</td><td>95%</td></tr> <tr><td>Sep-20</td><td>98%</td><td>95%</td></tr> <tr><td>Oct-20</td><td>98%</td><td>95%</td></tr> <tr><td>Nov-20</td><td>98%</td><td>95%</td></tr> <tr><td>Dec-20</td><td>98%</td><td>95%</td></tr> <tr><td>Jan-21</td><td>98%</td><td>95%</td></tr> <tr><td>Feb-21</td><td>98%</td><td>95%</td></tr> </tbody> </table> <p>3. % residents with a valid Care and Treatment Plan (CTP)</p> <table border="1"> <caption>3. % residents with a valid Care and Treatment Plan (CTP)</caption> <thead> <tr> <th>Month</th> <th>% patients with valid CTP (>18 yrs)</th> <th>Profile</th> </tr> </thead> <tbody> <tr><td>Feb-20</td><td>91%</td><td>91%</td></tr> <tr><td>Mar-20</td><td>91%</td><td>91%</td></tr> <tr><td>Apr-20</td><td>91%</td><td>91%</td></tr> <tr><td>May-20</td><td>91%</td><td>91%</td></tr> <tr><td>Jun-20</td><td>91%</td><td>91%</td></tr> <tr><td>Jul-20</td><td>91%</td><td>91%</td></tr> <tr><td>Aug-20</td><td>91%</td><td>91%</td></tr> <tr><td>Sep-20</td><td>91%</td><td>91%</td></tr> <tr><td>Oct-20</td><td>91%</td><td>91%</td></tr> <tr><td>Nov-20</td><td>91%</td><td>91%</td></tr> <tr><td>Dec-20</td><td>91%</td><td>91%</td></tr> <tr><td>Jan-21</td><td>91%</td><td>91%</td></tr> <tr><td>Feb-21</td><td>91%</td><td>91%</td></tr> </tbody> </table> <p>4. % waiting less than 26 weeks for Psychology Therapy</p> <table border="1"> <caption>4. % waiting less than 26 wks for psychological therapy</caption> <thead> <tr> <th>Month</th> <th>% waiting less than 26 wks for psychological therapy</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>Feb-20</td><td>100%</td><td>95%</td></tr> <tr><td>Mar-20</td><td>100%</td><td>95%</td></tr> <tr><td>Apr-20</td><td>100%</td><td>95%</td></tr> <tr><td>May-20</td><td>100%</td><td>95%</td></tr> <tr><td>Jun-20</td><td>100%</td><td>95%</td></tr> <tr><td>Jul-20</td><td>100%</td><td>95%</td></tr> <tr><td>Aug-20</td><td>100%</td><td>95%</td></tr> <tr><td>Sep-20</td><td>100%</td><td>95%</td></tr> <tr><td>Oct-20</td><td>100%</td><td>95%</td></tr> <tr><td>Nov-20</td><td>100%</td><td>95%</td></tr> <tr><td>Dec-20</td><td>100%</td><td>95%</td></tr> <tr><td>Jan-21</td><td>100%</td><td>95%</td></tr> <tr><td>Feb-21</td><td>100%</td><td>95%</td></tr> </tbody> </table>	Month	% assessments within 28 days (>18 yrs)	Target	Feb-20	98%	95%	Mar-20	98%	95%	Apr-20	98%	95%	May-20	98%	95%	Jun-20	98%	95%	Jul-20	98%	95%	Aug-20	98%	95%	Sep-20	98%	95%	Oct-20	98%	95%	Nov-20	98%	95%	Dec-20	98%	95%	Jan-21	98%	95%	Feb-21	98%	95%	Month	% therapeutic interventions started within 28 days (>18 yrs)	Target	Feb-20	98%	95%	Mar-20	98%	95%	Apr-20	98%	95%	May-20	98%	95%	Jun-20	98%	95%	Jul-20	98%	95%	Aug-20	98%	95%	Sep-20	98%	95%	Oct-20	98%	95%	Nov-20	98%	95%	Dec-20	98%	95%	Jan-21	98%	95%	Feb-21	98%	95%	Month	% patients with valid CTP (>18 yrs)	Profile	Feb-20	91%	91%	Mar-20	91%	91%	Apr-20	91%	91%	May-20	91%	91%	Jun-20	91%	91%	Jul-20	91%	91%	Aug-20	91%	91%	Sep-20	91%	91%	Oct-20	91%	91%	Nov-20	91%	91%	Dec-20	91%	91%	Jan-21	91%	91%	Feb-21	91%	91%	Month	% waiting less than 26 wks for psychological therapy	Target	Feb-20	100%	95%	Mar-20	100%	95%	Apr-20	100%	95%	May-20	100%	95%	Jun-20	100%	95%	Jul-20	100%	95%	Aug-20	100%	95%	Sep-20	100%	95%	Oct-20	100%	95%	Nov-20	100%	95%	Dec-20	100%	95%	Jan-21	100%	95%	Feb-21	100%	95%
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CHILD & ADOLESCENT MENTAL HEALTH (CAMHS)		
Description	Current Performance	Trend
<p>1. Crisis - % Urgent Assessment by CAMHS undertaken within 48 Hours from receipt of referral</p> <p>2. Primary CAMHS (P-CAMHS) - % Routine Assessment by CAMHS undertaken within 28 days from receipt of referral</p> <p>3. Primary CAMHS (P-CAMHS) - % Therapeutic interventions started within 28 days following assessment by LPMHSS</p> <p>4. NDD - % Neurodevelopmental Disorder patients receiving a Diagnostic Assessment within 26 weeks</p> <p>5. Specialist CAMHS (S-CAMHS) - % Routine Assessment by SCAMHS undertaken within 28 days from receipt of referral</p>	<p>1. In February 2021, 100% of CAMHS patients received an assessment within 48 hours.</p> <p>2. 97% of routine assessments were undertaken within 28 days from referral in February 2021 against a target of 80%.</p> <p>3. 97% of therapeutic interventions were started within 28 days following assessment by LPMHSS in February 2021.</p> <p>4. 28% of NDD patients received a diagnostic assessment within 26 weeks in February 2021 against a target of 80%.</p> <p>5. 56% of routine assessments by SCAMHS were undertaken within 28 days in February 2021.</p>	<p>1. Crisis- assessment within 48 hours</p> <p>2. and 3. P-CAMHS % assessments and therapeutic interventions within 28 days</p> <p><i>*Data for April 2020 not available for measures 2 and 3</i></p> <p>4. NDD- assessment within 26 weeks</p> <p>5. S-CAMHS % assessments within 28 days</p>

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	Morrison	NPTH	Singleton	Primary & Community	MH & LD	HB Total
COVID19 related	Number of new COVID19 cases*	Local			Mar-21						907
	Number of staff referred for Antigen Testing*	Local			Mar-21						568
	Number of staff awaiting results of COVID19 test*	Local			Mar-21						2 (as at 11/04/21)
	Number of COVID19 related incidents*	Local			Mar-21						53
	Number of COVID19 related serious incidents*	Local			Mar-21						0
	Number of COVID19 related complaints*	Local			Mar-21						98
	Number of COVID19 related risks*	Local			Mar-21						3
	Number of staff self isolated (asymptomatic)*	Local			Feb-21						160
	Number of staff self isolated (symptomatic)*	Local			Feb-21						156
	% sickness*	Local			Feb-21						2.4%

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

Harm quadrant- Harm from overwhelmed NHS and social care system											
Category	Measure	Target Type	Target	Internal HB Profile	Reporting period	Morriston	NPTH	Singleton	Primary & Community	MH & LD	HB Total
Unscheduled Care	Number of ambulance handovers over one hour*	National	0		Mar-21	225		6			231
	% 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%		Mar-21	67.7%	98.5%				76.9%
	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		Mar-21	457	0				457
Stroke	% of patients who have a direct admission to an acute stroke unit within 4 hours*	National	59.8% (UK SNAP average)		Mar-21	20%					20%
	% of patients who receive a CT scan within 1 hour*	National	54.5% (UK SNAP average)		Mar-21	41%					41%
	% of patients who are assessed by a stroke specialist consultant physician within 24 hours*	National	84.2% (UK SNAP average)		Mar-21	100%					100%
	% of thrombolysed stroke patients with a door to door needle time of less than or equal to 45 minutes*	National	12 month improvement trend		Mar-21	56%					56%
	% of patients receiving the required minutes for speech and language therapy*	National	12 month improvement trend		Mar-21	56%					56%
Healthcare acquired infections	Number of E.Coli bacteraemia cases	National	12 month reduction trend	23	Mar-21	5	1	3	19	0	28
	Number of S.aureus bacteraemia cases	National		6	Mar-21	2	0	2	7	0	11
	Number of C.difficile cases	National		5	Mar-21	3	1	3	5	0	12
	Number of Klebsiella cases	National		5	Mar-21	0	0	1	9	0	10
	Number of Aeruginosa cases	National		1	Mar-21	0	0	0	1	0	1
	Compliance with hand hygiene audits	Local	95%		Mar-21	96%	100%	95%	100%	97%	97%
Fractured Neck of Femur (#NOF)	Prompt orthogeriatric assessment- % patients receiving an assessment by a senior geriatrician within 72 hours of presentation	Local	75%		Jan-21	86.8%					86.8%
	Prompt surgery - % patients undergoing surgery by the day following presentation with hip fracture	Local	75%		Jan-21	55.5%					55.5%
	NICE compliant surgery - % of operations consistent with the recommendations of NICE CG124	Local	75%		Jan-21	70.3%					70.3%
	Prompt mobilisation after surgery - % of patients out of bed (standing or hoisted) by the day after operation	Local	75%		Jan-21	74.1%					74.1%
	Not delirious when tested- % patients (<4 on 4AT test) when tested in the week after operation	Local	75%		Jan-21	74.4%					74.4%
	Return to original residence- % patients discharged back to original residence, or in that residence at 120 day follow-up	Local	75%		Jan-21	73.7%					73.7%
	30 day mortality - crude and adjusted figures, noting ONS data only correct after around 6 months	Local	12 month improvement trend		Dec-20	8.4%					8.4%
	% of survival within 30 days of emergency admission for a hip fracture	Local	12 month improvement trend		Dec-20	68.0%					68.0%
Serious incidents	Number of Serious Incidents	Local	12 month reduction trend		Mar-21	2	0	0	1	1	4
	Of the serious incidents due for assurance, the % which were assured within the agreed timescales	Local	90%		Mar-21						0%
	Number of Never Events	Local	0		Mar-21	0	0	0	0	0	0
Pressure Ulcers	Total number of Pressure Ulcers	Local	12 month reduction trend		Feb-21	26	4	17	24	1	72
	Total number of Grade 3+ Pressure Ulcers	Local	12 month reduction trend		Feb-21	2	0	1	4	0	7
	Pressure Ulcer (Hosp) patients per 100,000 admissions	Local	12 month reduction trend		Feb-21						951
Inpatient Falls	Total number of Inpatient Falls	Local	12 month reduction trend		Mar-21	84	28	33	4	22	171
	Inpatient Falls per 1,000 beddays	Local	Between 3.0 & 5.0		Mar-21						6.91
Mortality	Universal Mortality reviews undertaken within 28 days (Stage 1 reviews)	Local	95%		Feb-21	100%	100%	100%			100%
	Stage 2 mortality reviews completed within 60 days	Local	95%		Dec-20	80%	-	50%			75%
	Crude hospital mortality rate by Delivery Unit (74 years of age or less)	National	12 month reduction trend		Feb-21	2.05%	0.18%	0.57%			1.24%

Harm quadrant- Harm from reduction in non-Covid activity											
Category	Measure	Target Type	Target	Internal HB Profile	Reporting period	Morriston	NPTH	Singleton	Primary & Community	MH & LD	HB Total
Cancer	Single Cancer Pathway- % of patients started treatment within 62 days (with suspensions)*	National	12 month improvement trend		Feb-21						56%
Planned Care	Number of patients waiting > 26 weeks for outpatient appointment	National	0		Mar-21	12,870	73	8,575	232		21,750
	Number of patients waiting > 36 weeks for treatment (inc. Diagnostics > 36 wks)	National	0		Mar-21	21,228	45	10,942	196		32,411
	Number of patients waiting > 8 weeks for a specified diagnostics	National	0		Mar-21	2,517		2,037			4,554
	Number of patients waiting > 14 weeks for a specified therapy	National	0		Mar-21		60		309	0	369
	Total number of patients waiting for a follow-up outpatient appointment	National	97,902		Mar-21						121,403
	Number of patients delayed by over 100% past their target date	National	16,952		Mar-21						29,316
	Number of patients delayed past their agreed target date (booked and not booked)	Local	44,140		Mar-21						55,944
	Number of Ophthalmology patients without an allocated health risk factor	Local	0		Feb-21						281
	Number of patients without a documented clinical review date	Local	0		Mar-21						14
Patient Experience/ Feedback	Number of friends and family surveys completed	Local	12 month improvement trend		Mar-21	326	16	453	255	11	1,050
	% of patients who would recommend and highly recommend	Local	90%	80%	Mar-21	86%	75%	87%	90%	73%	87%
	% of all-Wales surveys scoring 9 or 10 on overall satisfaction	Local	90%	80%	Mar-21	90%	100%	92%	100%	50%	93%
	Number of new complaints received	Local	12 month reduction trend		Mar-21	50	7	24	22	10	117
	% 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%	Jan-21	81%	57%	57%	63%	73%	71%

* 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	Morrison	NPTH	Singleton	Primary & Community	MH & LD	HB Total
Childhood immunisations	% children who received 3 doses of the hexavalent '6 in 1' vaccine by age 1	National	95%	90%	Q3 2020/21						96.7%
	% children who received MenB2 vaccine by age 1	Local	95%	90%	Q3 2020/21						96.6%
	% children who received PCV2 vaccine by age 1		95%	90%	Q3 2020/21						96.9%
	% children who received Rotavirus vaccine by age 1		95%	90%	Q3 2020/21						95.1%
	% children who received MMR1 vaccine by age 2		95%	90%	Q3 2020/21						94.6%
	% children who received PCVf3 vaccine by age 2		95%	90%	Q3 2020/21						94.7%
	% children who received MenB4 vaccine by age 2		95%	90%	Q3 2020/21						94.7%
	% children who received Hib/MenC vaccine by age 2		95%	90%	Q3 2020/21						94.4%
	% children who are up to date in schedule by age 4		95%	90%	Q3 2020/21						87.2%
	% of children who received 2 doses of the MMR vaccine by age 5	National	95%	90%	Q3 2020/21						92.0%
	% children who received 3 in 1 vaccine by age 5	Local	95%	90%	Q3 2020/21						92.9%
	% children who received MMR vaccination by age 16		95%	90%	Q3 2020/21						94.5%
	% children who received Teenage booster by age 16		90%	85%	Q3 2020/21						92.4%
	% children who received MenACWY vaccine by age 16		Improve		Q3 2020/21						92.5%
Mental Health (Adult and Children)	% of urgent assessments undertaken within 48 hours from receipt of referral (Crisis) (< 18 yrs)	Local	100%		Feb-21						100%
	% of patients waiting less than 28 days for 1st outpatient appointment (< 18 yrs)	National	80%		Feb-21						66%
	% of routine assessments undertaken within 28 days from receipt of referral (PCAMHS) (< 18 yrs)	National	80%		Feb-21						97%
	% of routine assessments undertaken within 28 days from receipt of referral (SCAMHS) (< 18 yrs)	Local	80%		Feb-21						56%
	% of mental health assessments undertaken within (up to and including) 28 days from the date of receipt of referral (> 18 yrs)	National	80%		Feb-21					98%	98%
	% of therapeutic interventions started within 28 days following assessment by LPMHSS (< 18 yrs)	National	80%		Feb-21						97%
	% of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS (> 18 yrs)	National	80%		Feb-21					98%	98%
	% of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health (> 18 yrs)	National	95%		Feb-21					100%	100%
	% of patients with NDD receiving diagnostic assessment and intervention within 26 weeks (< 18 yrs)	National	80%		Feb-21						28%
	% residents in receipt of secondary mental health services (all ages) who have a valid care and treatment plan (CTP) (< 18 yrs)	National	90%		Feb-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%		Feb-21					91%	91%

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

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

APPENDIX 3: INTEGRATED PERFORMANCE DASHBOARD

Harm from Covid itself																							
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
COVID19 related measures	Number of new COVID19 cases	Local	Mar-21	907		Reduce						1,381	303	57	53	66	787	4,664	5,525	11,976	3,759	1,208	907
	Number of staff referred for Antigen Testing	Local	Mar-21	11,683		Reduce						2,281	2,785	3,102	3,329	3,564	4,765	6,460	8,201	10,065	10,749	11,115	11,683
	Number of staff awaiting results of COVID19 test	Local	Mar-21	2		Reduce						0	19	16	1	0	38 (as at 10/10/20)	21 (as at 06/11/20)	41 (as at 06/12/20)	99 (as at 05/01/21)	78 (as at 07/02/21)	69 (as at 06/03/21)	2 (as at 11/04/21)
	Number of COVID19 related incidents	Local	Mar-21	2		Reduce						119	67	40	26	39	30	87	141	127	84	63	53
	Number of COVID19 related serious incidents	Local	Mar-21	2		Reduce						1	0	2	0	11	1	1	0	0	0	0	0
	Number of COVID19 related complaints	Local	Mar-21	2		Reduce						77	61	39	58	27	30	37	50	83	106	131	98
	Number of COVID19 related risks	Local	Mar-21	2		Reduce						19	20	19	5	8	2	6	7	10	3	3	3
	Number of staff self isolated (asymptomatic)	Local	Feb-21	160		Reduce						851	516	474	422	420	353	329	291	475	218	160	
	Number of staff self isolated (symptomatic)	Local	Feb-21	156		Reduce						860	292	141	70	36	72	132	294	394	316	156	
	% sickness	Local	Feb-21	2.4%		Reduce						13.2%	6.0%	4.5%	3.6%	3.5%	3.2%	3.5%	4.4%	6.5%	4.0%	2.4%	

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	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	
Unscheduled Care	% of emergency responses to red calls arriving within (up to and including) 8 minutes	National	Mar-21	73%	65%	65%	✔	64.4% (Feb-21)	2nd (Feb-21)		69%	70%	75%	76%	74%	72%	69%	66%	67%	54%	67%	70%	73%	
	Number of ambulance handovers over one hour	National	Mar-21	231	0			2,374 (Feb-21)	3rd (Feb-21)		462	61	20	47	120	163	410	355	500	510	195	219	231	
	Handover hours lost over 15 minutes	Local	Mar-21	583							1,623	209	125	178	315	418	1,100	916	1,474	1,804	455	550	583	
	% 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	Mar-21	77%	95%			76.8% (Feb-21)	5th (Feb-21)		72.8%	78.4%	83.5%	87.7%	80.1%	80.6%	76.4%	77.2%	75.4%	72.6%	77%	71%	77%	
	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	Mar-21	457	0			5,462 (Feb-21)	3rd (Feb-21)		557	131	97	81	223	286	537	494	626	776	570	534	457	
NOF	% of survival within 30 days of emergency admission for a hip fracture	National	Dec-20	68.0%	12 month ↑			80.1% (Dec-20)	5th (Dec-20)		75.0%	78.9%	77.1%	95.5%	93.5%	93.9%	89.4%	90.0%	67.9%	68.0%				
	% of patients (age 60 years and over) who presented with a hip fracture that received an orthogeriatrician assessment within 72 hours	National	Dec-20	86.0%	12 month ↑			60% (Jan-21)	2nd (Jan-21)		79.0%	79.0%	80.0%	82.0%	83.0%	83.0%	84.0%	84.0%	85.0%	86.0%	87.0%			
Stroke	Direct admission to Acute Stroke Unit (<4 hrs)	National	Mar-21	20%	54.0%			20.3% (Jan-21)	5th out of 6 organisations (Jan-21)		47.4%	Data not available			52.7%	57.4%	51.4%	50.0%	29.8%	23.7%	7.1%	6.8%	18.2%	20.4%
	CT Scan (<1 hrs) (local)	Local	Mar-21	41%							42.5%				49.1%	48.2%	52.8%	62.5%	42.1%	22.7%	42.2%	30.6%	40.8%	
	Assessed by a Stroke Specialist Consultant Physician (< 24 hrs)	National	Mar-21	100%	85.3%			82.7% (Jan-21)	3rd (Jan-21)		97.5%				100.0%	94.6%	97.2%	97.5%	98.2%	96.7%	95.5%	95.6%	97.2%	100.0%
	Thrombolysis door to needle <= 45 mins	Local	Mar-21	56%	12 month ↑						0.0%				30.0%	25.0%	0.0%	12.5%	11.1%	28.6%	0.0%	12.5%	0.0%	55.6%
	% compliance against the therapy target of an average of 16.1 minutes if speech and language therapist input per stroke patient	National	Mar-21	56%	12 month ↑			42.4% (Jan-21)	1st (Jan-21)		32.8%				30.7%	44.3%	61.7%	80.1%	86.5%	65.1%	63.4%	65.7%	61.2%	55.9%
	% of stroke patients who receive a 6 month follow-up assessment	National	Q3 19/20	49.6%	Qtr on qtr ↑			62.2% (Q3 19/20)	5th out of 6 organisations (Q3 19/20)															
DTCOs	Number of mental health HB DToCs	National	Mar-20	13	12 month ↓	27	✔				13	DTOC reporting temporarily suspended												
	Number of non-mental health HB DToCs	National	Mar-20	60	12 month ↓	50	✘				60	DTOC reporting temporarily suspended												
	% critical care bed days lost to delayed transfer of care	National	Q1 20/21	26.2%	Quarter on quarter ↓			5.3% (Q1 20/21)	2nd (Q1 20/21)		26.2%			2.5%										

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	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21		
Infection control	Cumulative cases of E.coli bacteraemias per 100k pop	National	Mar-21	61.9	<67		✓	59.19 (Feb-21)	3rd (Feb21)		81.4	43.8	43.0	46.4	53.8	62.5	64.0	65.7	63.8	60.7	60.0	59.8	61.9		
	Number of E.Coli bacteraemia cases (Hospital)			9							8	6	6	3	8	8	7	14	5	5	6	6	9		
	Number of E.Coli bacteraemia cases (Community)			19								15	8	8	14	17	24	16	11	11	7	12	11	19	
	Total number of E.Coli bacteraemia cases			28								23	14	14	17	25	32	23	25	16	12	18	17	28	
	Cumulative cases of S.aureus bacteraemias per 100k pop		Mar-21	31.6	<20		✗	24.79 (Feb-21)	6th (Feb-21)		34.2	31.5	24.7	28.8	26.1	28.2	30.7	31.5	32.7	31.7	31.6	31.4	31.6		
	Number of S.aureus bacteraemias cases (Hospital)		Mar-21	4								4	4	2	4	3	5	7	6	7	6	5	7	4	
	Number of S.aureus bacteraemias cases (Community)			7								5	6	4	8	3	7	7	6	6	3	4	2	7	
	Total number of S.aureus bacteraemias cases			11								9	10	6	12	6	12	14	12	13	9	9	9	11	
	Cumulative cases of C.difficile per 100k pop		Mar-21	41.1	<26		✗	41.54 (Feb-21)	6th (Feb-21)		35.4	34.4	42.9	49.5	45.3	50.2	51.2	50.4	48.4	45.7	42.0	41.5	41.1		
	Number of C.difficile cases (Hospital)		Mar-21	7								5	9	6	14	7	9	12	12	8	6	3	9	7	
	Number of C.difficile cases (Community)			5								3	2	10	6	4	14	6	3	2	3	0	2	5	
	Total number of C.difficile cases			12								8	11	16	20	11	23	18	15	10	9	3	11	12	
	Cumulative cases of Klebsiella per 100k pop		Mar-21	26.2									21.1	18.8	18.4	21.6	20.0	22.1	21.0	21.9	23.4	24.9	26.4	25.8	26.2
	Number of Klebsiella cases (Hospital)		Mar-21	1									4	1	4	4	3	6	3	7	7	8	8	4	1
	Number of Klebsiella cases (Community)			9									3	5	2	5	2	4	2	2	4	4	5	2	9
	Total number of Klebsiella cases			10					41 (Feb-21)	3rd (Feb-21)		7	6	6	9	5	10	5	9	11	12	13	6	10	
	Cumulative cases of Aeruginosa per 100k pop		Mar-21	4.9									7.2	6.3	10.7	7.2	6.2	6.7	5.6	5.7	5.8	5.5	5.2	5.1	4.9
	Number of Aeruginosa cases (Hospital)		Mar-21	0									1	2	3	0	0	0	1	1	1	0	0	0	
	Number of Aeruginosa cases (Community)			1									0	0	2	0	1	3	0	1	1	0	1	1	1
	Total number of Aeruginosa cases			1					7 (Feb-21)	Joint 1st (Feb-21)		1	2	5	0	1	3	0	2	2	1	1	1	1	
Hand Hygiene Audits - compliance with WHO 5 moments	Local	Mar-21	97%		95%	✗					99%	98%	99%	98%	98%	94%	96%	97%	97%	96%	95%	93%	97%		
Serious Incidents and risks	Of the serious incidents due for assurance, the % which were assured within the agreed timescales	National	Mar-21	0%	90%	80%	✗				30%	7%	29%	0%	0%	50%	20%	0%	0%	4%	0%	10%	0%		
	Number of new Never Events	National	Mar-21	0	0	0	✓				0	0	0	1	0	0	0	1	1	0	0	0	0		
	Number of risks with a score greater than 20	Local	Mar-21	142		12 month ↓	✗				108	109	101	110	115	121	117	130	138	146	148	140	142		
	Number of risks with a score greater than 16	Local	Mar-21	230		12 month ↓	✗				198	202	193	204	204	210	206	224	224	238	242	233	230		
Pressure Ulcers	Number of pressure ulcers acquired in hospital	Local	Feb-21	48		12 month ↓	✗				31	25	29	18	19	37	44	59	42	61	51	48			
	Number of pressure ulcers developed in the community		Feb-21	24		12 month ↓	✓				39	34	33	34	28	25	21	34	29	26	25	24			
	Total number of pressure ulcers		Feb-21	72		12 month ↓	✗				70	59	62	52	47	62	65	93	71	87	76	72			
	Number of grade 3+ pressure ulcers acquired in hospital		Feb-21	3		12 month ↓	✗				1	2	0	1	0	4	0	4	4	3	2	3			
	Number of grade 3+ pressure ulcers acquired in community		Feb-21	4		12 month ↓	✓				8	4	6	9	4	5	5	11	5	7	5	4			
	Total number of grade 3+ pressure ulcers		Feb-21	7		12 month ↓	✗				9	6	6	10	4	9	5	15	9	10	7	7			
Inpatient Falls	Number of Inpatient Falls	Local	Mar-21	171		12 month ↓	✓				210	193	209	196	208	227	219	187	247	247	203	177	171		
Mortality	% of universal mortality reviews (UMRs) undertaken within 28 days of a death	Local	Feb-21	100%	95%	95%	✓				95.7%	95.6%	99.3%	100.0%	95.5%	96.6%	99.2%	100.0%	98.1%	99.0%	100.0%	100.0%			
	Stage 2 mortality reviews required	Local	Feb-21	6							9	10	11	10	10	10	11	9	17	12	19	6			
	% stage 2 mortality reviews completed	Local	Dec-20	75.00%		100%	✗				0.0%	30.0%	27.3%	50.0%	90.0%	50.0%	54.5%	33.3%	35.7%	75.0%					
	Crude hospital mortality rate (74 years of age or less)	National	Feb-21	1.24%	12 month ↓			1.52% (Jan-21)	4th (Jan-21)		0.75%	0.80%	0.88%	0.89%	0.92%	0.90%	0.93%	0.97%	1.01%	1.08%	1.14%	1.24%			
	% of deaths scrutinised by a medical examiner	National				Qtr on qtr ↑						New measure for 2020/21- awaiting data													
NEWS	% patients with completed NEWS scores & appropriate responses actioned	Local	Mar-21	94%		98%	✓				91.9%	92.0%	93.9%	91.6%	96.6%	92.4%	93.6%	93.9%	94.6%	98.5%	95.0%	96.3%	93.5%		
HAT	Number of potentially preventable hospital acquired thromboses (HAT)	National	Q2 20/21	3	4 quarter ↓			6			2				3				3						
Coding	% of episodes clinically coded within 1 month of discharge	Local	Feb-21	96%	95%	95%	✓				94%	94%	97%	97%	96%	96%	96%	95%	93%	93%	95%	96%			
	% of clinical coding accuracy attained in the NWIS national clinical coding accuracy audit programme	National	2019/20	91%	Annual ↑			93.9% (2019/20)	7th (2019/20)		19/20= 91%														
E-TOC	% of completed discharge summaries (total signed and sent)	Local	Mar-21	64%		100%	✗				68%	61%	63%	67%	63%	66%	70%	68%	66%	59%	67%	63%	64%		
Workforce	Agency spend as a % of the total paybill	National	Aug-20	3.62%	12 month ↓			4.2% (Aug-20)	5th out of 10 organisations (Aug-20)		4.46%	4.04%	3.21%	4.32%	2.81%	3.62%									
	Overall staff engagement score – scale score method	National	2018	3.81	Improvement			3.82 (2018)	7th out of 10 organisations (2018)		2018= 3.81														
	% of headcount by organisation who have had a PADR/medical appraisal in the previous 12 months (excluding doctors and dentists in training)	National	Mar-21	53%	85%	85%	✗	61.9% (Aug-20)	9th out of 10 organisations (Aug-20)		72%	68%	63%	60%	59%	58%	58%	58%	56%	54%	52%	51%	53%		
	% staff who undertook a performance appraisal who agreed it helped them improve how they do their job	National	2018	55%	Improvement			54% (2018)	2nd (2018)		2018= 55%														
	% compliance for all completed Level 1 competency with the Core Skills and Training Framework	National	Mar-21	80%	85%	85%	✗	80.2% (Aug-20)	7th out of 10 organisations (Aug-20)		83%	82%	79%	79%	80%	80%	80%	80%	80%	80%	80%	80%	80%		
	% workforce sickness absence (12 month rolling)	National	Feb-21	7.56%	12 month ↓			5.92% (Aug-20)	10th out of 10 organisations (Aug-20)		6.31%	6.65%	6.88%	6.98%	7.03%	7.03%	7.03%	7.07%	7.23%	7.48%	7.57%	7.56%			
	% staff who would be happy with the standards of care provided by their organisation if a friend or relative needed treatment	National	2018	72%	Improvement			73% (2018)	7th out of 10 organisations (2018)		2018= 72%														

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	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
Primary Care	% of GP practices offering daily appointments between 17:00 and 18:30 hours	Local	Jan-21	88%	Annual ↑	95%	✗				88%	88%	88%	88%	88%	88%	88%	88%	88%	88%	88%	88%	88%
	% of GP practices open during daily core hours or within 1 hour of daily core hours	Local	Jan-21	97%	Annual ↑	95%	✓				97%	97%	97%	97%	97%	97%	97%	97%	97%	97%	97%	97%	97%
	% of GP practices that have achieved all standards set out in the National Access Standards for in-hours GMS	National	2019/20	38.80%	100%			59.7% (2019/20)	7th (2019.20)		2019/20=38.8%												
	% of children regularly accessing NHS primary dental care within 24 months	National	Q2 20/21	72.6%	4 quarter ↑			63.8% (Q2 20/21)	1st (Q2 20/21)		78.7%			75.9%			72.6%						
	% adult dental patients in the health board population re-attending NHS primary dental care between 6 and 9 months	National	Feb-21	6.6%	4 quarter ↓			21.8% (Q3 20/21)	1st (Q3 20/21)		29.4%	19.2%	16.8%	14.7%	18.6%	24.7%	23.8%	27.2%	17.2%	12.0%	5.9%	6.6%	
Cancer	% of patients starting definitive treatment within 62 days from point of suspicion (without adjustments)	National	Mar-21 (draft)	64.0%	12 month ↑			61.2% (Jan-21)	1st out of 6 organisations (Jan-21)		58.0%	54.7%	61.8%	59.9%	68.2%	67.4%	62.4%	65.9%	55.4%	61.0%	67.9%	56.4%	64.0%
Radiotherapy waiting times	Scheduled (21 Day Target)	Local	Mar-21	42%	80%		✗				56%	49%	46%	57%	71%	63%	60%	75%	58%	71%	45%	35%	42%
	Scheduled (28 Day Target)	Local	Mar-21	85%	100%		✗				77%	86%	84%	93%	97%	92%	86%	90%	85%	88%	82%	80%	85%
	Urgent SC (7 Day Target)	Local	Mar-21	41%	80%		✗				48%	45%	33%	65%	57%	57%	54%	43%	31%	50%	50%	23%	41%
	Urgent SC (14 Day Target)	Local	Mar-21	90%	100%		✗				89%	91%	83%	90%	97%	91%	92%	86%	100%	85%	94%	91%	90%
	Emergency (within 1 day)	Local	Mar-21	100%	80%		✓				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
	Emergency (within 2 days)	Local	Mar-21	100%	100%		✓				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
	Elective Delay (21 Day Target)	Local	Mar-21	86%	80%		✗				84%	76%	83%	92%	52%	46%	58%	58%	56%	71%	69%	61%	86%
	Elective Delay (28 Day Target)	Local	Mar-21	93%	100%		✗				94%	88%	100%	100%	97%	75%	60%	75%	73%	88%	89%	75%	93%
Planned Care	Number of patients waiting > 8 weeks for a specified diagnostics	National	Mar-21	4,554	0			56,619 (Jan-21)	3rd (Jan-21)		1,407	5,788	8,346	8,033	7,510	8,070	7,666	6,645	6,610	6,579	6,239	5,087	4,554
	Number of patients waiting > 14 weeks for a specified therapy	National	Mar-21	369	0			4,094 (Jan-21)	5th (Jan-21)		51	387	982	1,646	1,554	1,518	1,350	1,135	817	708	584	491	369
	% of patients waiting < 26 weeks for treatment	National	Mar-21	48.8%	95%			51.6% (Jan-21)	7th (Jan-21)		80.2%	72.3%	64.0%	59.4%	52.5%	43.7%	41.0%	44.8%	47.6%	48.0%	47.0%	47.9%	48.8%
	Number of patients waiting > 26 weeks for outpatient appointment	Local	Mar-21	21,750	0						2,055	5,499	9,300	11,964	15,721	20,497	23,069	22,050	21,005	21,179	21,208	21,225	21,750
	Number of patients waiting > 36 weeks for treatment	National	Mar-21	32,874	0			221,849 (Jan-21)	3rd (Jan-21)		6,509	8,355	10,247	13,419	18,078	22,494	26,046	31,508	35,387	35,126	33,991	32,719	32,874
	The number of patients waiting for a follow-up outpatient appointment	National	Mar-21	121,403	35% reduction by March 2021	92,307	✗	754,816 (Jan-21)	5th (Jan-21)		125,708	123,082	121,434	120,468	120,062	120,969	120,962	120,968	120,874	119,963	119,999	120,882	121,403
	The number of patients waiting for a follow-up outpatients appointment who are delayed over 100%	National	Mar-21	29,316		16,952	✗	202,329 (Jan-21)	5th (Jan-21)		18,258	19,538	21,026	21,448	22,101	23,209	24,472	26,217	27,156	27,641	28,419	28,862	29,316
	% of R1 ophthalmology patient pathways waiting within target date or within 25% beyond target date for an outpatient appointment	National	Mar-21	47.7%	95%			42.7% (Jan-21)	3rd (Jan-21)		76.2%	69.9%	64.1%	63.4%	55.5%	50.9%	47.7%	45.2%	48.4%	47.3%	46.7%	47.4%	47.7%
Hepatitis C	Number of patients with Hepatitis C who have successfully completed their course of treatment in the reporting year	National			HB target TBC							New measure for 2020/21- awaiting data											
DNAs	% of patients who did not attend a new outpatient appointment	Local	Mar-21	5.6%	12 month ↓						5.6%	4.7%	3.1%	4.4%	3.9%	4.7%	6.4%	6.0%	6.6%	7.7%	7.1%	6.2%	5.6%
	% of patients who did not attend a follow-up outpatient appointment	Local	Mar-21	6.7%	12 month ↓						6.5%	5.7%	3.5%	4.7%	5.2%	6.0%	6.9%	6.5%	7.2%	8.2%	7.1%	6.2%	6.7%
Theatre Efficiencies	Theatre Utilisation rates	Local	Mar-21	75.0%		90%	✗				35%	6%	11%	16%	42%	90%	75%	75%	74%	59%	65%	73%	75%
	% of theatre sessions starting late	Local	Mar-21	40.4%		<25%	✗				38%	45%	43%	46%	51%	46%	49%	44%	39%	45%	40%	42%	40%
	% of theatre sessions finishing early	Local	Mar-21	48.0%		<20%	✗				40%	43%	45%	36%	37%	28%	39%	38%	50%	47%	44%	44%	48%
Postponed operations	Number of procedures postponed either on the day or the day before for specified non-clinical reasons	National	Dec-20	1,509	> 5% annual ↓			5,398 (Jan-21)	6th (Jan-21)		3,232	3,091	2,869	2,659	2,391	2,281	2,090	1,888	1,677	1,509	1,200		
Treatment Fund	All new medicines must be made available no later than 2 months after NICE and AWMMSG appraisals	National	Q2 20/21	98.8%	100%	100%	✗	98.3% (Q2 20/21)	3rd out of 6 organisations (Q2 20/21)		98.7%			98.7%			98.8%						

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	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
Prescribing	Total antibacterial items per 1,000 STAR-PUs	National	Q2 20/21	249.9	4 quarter ↓			230.6 (Q2 20/21)	6th (Q2 20/21)		323.9			243.8			249.9						
	Patients aged 65 years or over prescribed an antipsychotic	National	Q2 20/21	1,511	Quarter on quarter ↓			10,205 (Q2 20/21)	5th (Q2 20/21)		1,476			1,464			1,511						
	Number of women of child bearing age prescribed valproate as a % of all women of child bearing age	National	Q2 20/21	0.23%	Quarter on quarter ↓			0.16% (Q2 20/21)	7th (Q2 20/21)					0.23%			0.23%						
	Opioid average daily quantities per 1,000 patients	National	Q2 20/21	4,369	4 quarter ↓			4,390.4 (Q2 20/21)	3rd (Q2 20/21)		4,329			4,308			4,369						
	Biosimilar medicines prescribed as % of total 'reference' product plus biosimilar	National	Q2 20/21	78.6%	Quarter on quarter ↑			82.6% (Q2 20/21)	4th (Q2 20/21)		80.7%			80.2%			78.6%						
Patient experience	Average rating given by the public (age 16+) for the overall satisfaction with health services in Wales	National	2018/19	6.4	Annual ↑			6.31 (2018/19)	2nd (2018/19)		2018/19= 6.4												
	% of adults (age 16+) who reported that they were very satisfied or fairly satisfied about the care that they received at their GP/family doctor	National	2019/20	88.7%	Annual ↑			88.6% (2019/20)	3rd (2019/20)		2019/20= 88.7%												
	% of adults (age 16+) who reported that they were very satisfied or fairly satisfied about the care that they received at an NHS hospital (Local)	Local	2018/19	92.9%	Annual ↑						2018/19= 92.9%												
	Number of friends and family surveys completed	Local	Mar-21	1,050		12 month ↑					1,720	150	247	393	502	625	2,804	1,047	787	584	678	798	1,050
	% of who would recommend and highly recommend	Local	Mar-21	87%		90%					95%	90%	92%	87%	91%	83%	93%	82%	84%	77%	79%	85%	87%
	% of all-Wales surveys scoring 9 out 10 on overall satisfaction	Local	Mar-21	93%		90%					90%	95%	100%	79%	91%	83%	84%	79%	85%	65%	81%	94%	93%
Complaints	Number of new formal complaints received	Local	Mar-21	117		12 month trend ↓					92	37	52	73	77	74	107	121	103	83	78	94	117
	% concerns that had final reply (Reg 24)/interim reply (Reg 26) within 30 working days of concern received	National	Jan-21	71%	75%	80%		71.9% (Q3 20/21)	2nd (Q3 20/21)		48%	81%	81%	75%	79%	72%	82%	75%	82%	80%	71%		
	% of acknowledgements sent within 2 working days	Local	Mar-21	100%		100%					100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Research	Number of patients recruited in Health and Care Research Wales clinical research portfolio studies	National	Q1-Q2 20/21	376	10% annual ↑	1,651		6,378 (Q1-2 20/21)	5th out of 10 organisations (Q1-2 20/21)		1,505			210			166						
	Number of patients recruited in Health and Care Research Wales commercially sponsored studies		Q1-Q2 20/21	21	5% annual ↑	215		73 (Q1-2 20/21)	2nd out of 10 organisations (Q1-2 20/21)		205			2			19						

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	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	
Early years measures	% of babies who are exclusively breastfed at 10 days old	National	2019/20	34.2%	Annual ↑			35.3% (2019/20)	5th (2019/20)		2019/20= 34.2%													
	% children who received 3 doses of the hexavalent '6 in 1' vaccine by age 1	National	Q3 20/21	96.7%	95%			95.3% (Q3 20/21)	1st (Q3 20/21)		96%				96.5%			96.5%			96.7%			
	% of children who received 2 doses of the MMR vaccine by age 5	National	Q3 20/21	92.0%	95%			92.1% (Q3 20/21)	3rdh (Q3 20/21)		92%				90.8%			91.7%			92.0%			
Smoking cessation	% of adult smokers who make a quit attempt via smoking cessation services	National	Q1-Q2 20/21	1.66%	5% annual target			1.65% (Q1-2 20/21)	4th (Q1-2 20/21)		2.87%						1.66%							
Alcohol	European age standardised rate of alcohol attributed hospital admissions for individuals resident in Wales	National	Q2 20/21	331.7	4 quarter ↓			364.3 (Q2 20/21)	2nd (Q2 20/21)		390.5				279.6			331.7						
	% of people who have been referred to health board services who have completed treatment for alcohol abuse	National	Q3 20/21	39.5%	4 quarter ↑			64% (Q3 20/21)	6th (Q2 20/21)		42.3%				32.8%			23.2%			39.5%			
Influenza	% uptake of influenza among 65 year olds and over	National	Mar-21	75.5%	75%			76.5% (Mar-21)	4th (Mar-21)		68.1%	Data collection restarts October 2020							65.6%	72.4%	74.8%	75.2%	75.4%	75.5%
	% uptake of influenza among under 65s in risk groups	National	Mar-21	49.4%	55%			51.07% (Mar-21)	5th (Mar-21)		44.0%								34.4%	42.8%	47.2%	48.7%	49.4%	49.4%
	% uptake of influenza among pregnant women	National	2019/20	86.1%	75%			78.5% (2019/20)	5th out of 10 organisations (2019/20)		78.2%								Data not available					
	% uptake of influenza among children 2 to 3 years old	Local	Mar-21	53.4%	50%			56.3% (Mar-21)	5th (Mar-21)		50.3%								35.7%	48.8%	52.5%	53.2%	53.4%	53.4%
	% uptake of influenza among healthcare workers	National	Mar-21	63.4%	60%			58.7% (2019/20)	7th out of 10 organisations (2019/20)		58.7%								56.2%	62.9%	63.0%	63.4%	63.4%	63.4%
Screening services	Uptake of screening for bowel cancer	National	2018/19	57.0%	60%			57.3% (2018/19)	4th (2018/19)		2018/19= 57.0%													
	Uptake of screening for breast cancer	National	2018/19	73.6%	70%			72.8% (2018/19)	2nd (2018/19)		2018/19= 73.6%													
	Uptake of screening for cervical cancer	National	2018/19	72.1%	80%			73.2% (2018/19)	5th (2018/19)		2018/19= 72.1%													
CAMHS	% of urgent assessments undertaken within 48 hours from receipt of referral (Crisis)	Local	Feb-21	100%		100%	✔				94%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		
	% Patients with Neurodevelopmental Disorders (NDD) receiving a Diagnostic Assessment within 26 weeks	National	Feb-21	28%	80%	80%	✘	27.8% (Jan-21)	5th (Jan-21)		38%	35%	30%	28%	30%	24%	21%	22%	24%	26%	24%	28%		
	% Patients waiting less than 28 days for a first outpatient appointment for CAMHS	National	Feb-21	66%	80%	80%	✘	47.1% (Jan-21)	5th (Jan-21)		67%	44%	78%	100%	100%	100%	98%	90%	88%	61%	53%	66%		
	P-CAMHS - % of Routine Assessment by CAMHS undertaken within 28 days from receipt of referral	National	Feb-21	97%		80%	✔	56.6% (Jan-21)	5th (Jan-21)		14%	11%	89%	100%	100%	100%	62%	29%	41%	73%	29%	97%		
	P-CAMHS - % of therapeutic interventions started within 28 days following assessment by LPMHSS	National	Feb-21	97%		80%	✔	77.6% (Jan-21)	3rd (Jan-21)		94%	85%	100%	100%	100%	86%	100%	100%	100%	100%	93%	97%		
	S-CAMHS - % of Routine Assessment by SCAMHS undertaken within 28 days from receipt of referral	Local	Feb-21	56%		80%	✘				75%	46%	72%	100%	100%	100%	98%	79%	62%	58%	60%	56%		
	% residents in receipt of CAMHS to have a valid Care and Treatment Plan (CTP)	National	Feb-21	84%		90%	✘	83.3% (Jan-21)	5th (Jan-21)		99%	99%	97%	91%	98%	98%	81%	82%	81%	82%	83%	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	Feb-21	98%	80%	80%	✔	72.9% (Jan-21)	3rd (Jan-21)		97%	99%	99%	100%	99%	99%	97%	99.5%	98%	99%	96%	98%		
	% of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS (over 18 years of age)	National	Feb-21	98%	80%	80%	✔	73.8% (Jan-21)	2nd (Jan-21)		97%	97%	100%	96%	96%	88%	94%	93%	98%	95%	98%			
	% patients waiting < 26 weeks to start a psychological therapy in Specialist Adult Mental Health	National	Feb-21	100%	95%	95%	✔	58.0% (Jan-21)	1st (Jan-21)		100%	93%	89%	84%	89%	91%	99%	99.7%	100%	100%	100%			
	% residents in receipt of secondary MH services (all ages) who have a valid care and treatment plan (CTP)	National	Feb-21	91%	90%	90%	✔	86.2% (Jan-21)	3rd (Jan-21)		91%	93%	92%	92%	94%	92%	90%	91%	91%	89%	91%	91%		
Self harm	Rate of hospital admissions with any mention of intentional self-harm of children and young people (aged 10-24 years)	National	2019/20	3.29	Annual ↓			3.97 (2019/20)	4th (2019/20)		2019/20= 3.29													
Dementia	% of people with dementia in Wales age 65 years or over who are diagnosed (registered on a GP QOF register)	National	2018/19	59.4%	Annual ↑			53.1% (2019/20)	2nd (2019/20)		2019/20= 56.3%													