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Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	23rd November 2021	Agenda Item	4.1
Report Title	Quality & Safety Performance Report		
Report Author	Meghann Protheroe, Head of Performance		
Report Sponsor	Darren Griffiths, Director of Finance and Performance		
Presented by	Darren Griffiths, Director of Finance and Performance		
Freedom of Information	Open		
Purpose of the Report	The purpose of this report is to provide an update on the current performance of the Health Board at the end of the most recent reporting window in delivering key local performance measures as well as the national measures outlined in the 2021/22 NHS Wales Delivery Framework.		
Key Issues	<p>The Quality and Safety 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 ongoing 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>Historically Welsh Government publish a revised NHS Wales Delivery Framework on an annual basis. In 2021/22 a new Single Outcomes Framework for Health and Social Care was due to be published however, development of the framework was delayed due to the COVID19 pandemic. The updated National Delivery Framework 2021/22 was published in October 2021, with the updated framework measures being presented at the November 2021 Management Board meeting. Full updates outlined within the Delivery Framework will be reflected in the December 2021 Integrated Performance Report. The intention of the updated integrated framework measures is to demonstrate how patients and populations are better off through the delivery of services and allowing a different balance across our traditional services.</p> <p>The Health Board continues to refine the organisation's annual plan and monitor performance against agreed trajectories. All current trajectories can be found in this report. In the absence of local profiles, in-month movement will continue to be utilised as the basis of RAGing for the enhanced monitoring measures.</p>		

	<p>Key high level issues to highlight this month are as follows:</p> <p>2021/22 Delivery Framework</p> <p>COVID19- The number of new cases of COVID19 has seen an increase in October 2021, with 10,918 new cases being reported in-month. The occupancy rate of confirmed COVID patients in general medical and critical care beds remains at a low rate, however figures are slowly increasing.</p> <p>Unscheduled Care- Demand for emergency department care within Swansea Bay University (SBU) Health Board has steadily increased since January 2021. Attendances have decreased slightly in October 2021 to 10,737 from 11,157 in September 2021. The Health Board's performance against the 4-hour measure deteriorated from 73.09% in September 2021 to 71.96% in October 2021 and the number of patients waiting over 12 hours in Accident and Emergency (A&E) continues to increase.</p> <p>Planned Care- October 2021 saw a 2% in-month increase in the number of patients waiting over 26 weeks for a new outpatient appointment. In October 2021, there were 36,420 patients waiting over 36 weeks which is a 2% in-month decrease from September 2021. The total waiting list size continues to increase, however November is showing a projected total waiting list reduction. There has been a reduction in the number of referrals received by secondary care in October 2021. Therapy waiting times have increased in October 2021, however some therapy services have maintained a nil breach position (i.e. Occupational Therapy).</p> <p>Cancer- September 2021 saw 62% performance against the Single Cancer Pathway measure of patients receiving definitive treatment within 62 days. The backlog of patients waiting over 63 days has decreased in October 2021, with a further reduction projected for November 2021. October's figures are in the process of being validated at the time of writing this report.</p> <p>Mental Health- performance against the Mental Health Measures continues to be maintained. All Welsh Government targets were achieved in September 2021. Psychological therapies within 26 weeks continue to be maintained at 100%.</p> <p>Child and Adolescent Mental Health Services (CAMHS)-Access times for crisis performance has deteriorated to 95% in September 2021 against the 100% target. Neurodevelopmental Disorders (NDD) access times within 26 weeks continues to be a challenge, with performance decreasing in September 2021 to 34% against a target of 80%.</p>
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	<p>Serious Incidents closures- In October 2021, performance against the 80% target of submitting closure forms within 60 working days was 0%.</p> <p>Patient Experience- A new feedback system was introduced in March 2021, which has resulted in no data being reported for April 2021 as the system, was not fully operational until the end of April 2021. October 2021 data is included in this report.</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 NHS Wales Delivery Framework and local quality & safety measures.

2. BACKGROUND

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

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

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

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

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

Appendix 1 provides an overview of the Health Board's latest performance against the Delivery Framework measures along with key local quality and safety measures. A

number of local COVID-19 specific measures have been included in this iteration of the performance report.

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

3. GOVERNANCE AND RISK ISSUES

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

4. FINANCIAL IMPLICATIONS

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

5. RECOMMENDATION

Members are asked to:

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

Governance and Assurance		
Link to Enabling Objectives (please choose)	Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities	
	Partnerships for Improving Health and Wellbeing	<input checked="" type="checkbox"/>
	Co-Production and Health Literacy	<input checked="" type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input checked="" type="checkbox"/>
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	<input checked="" type="checkbox"/>
	Partnerships for Care	<input checked="" type="checkbox"/>
	Excellent Staff	<input checked="" type="checkbox"/>
	Digitally Enabled Care	<input checked="" type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input checked="" type="checkbox"/>
Health and Care Standards		
(please choose)	Staying Healthy	<input checked="" type="checkbox"/>
	Safe Care	<input checked="" type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input checked="" type="checkbox"/>
	Timely Care	<input checked="" type="checkbox"/>
	Individual Care	<input checked="" type="checkbox"/>
	Staff and Resources	<input checked="" type="checkbox"/>
Quality, Safety and Patient Experience		
<p>The performance report outlines performance over the domains of quality and safety and patient experience, and outlines areas and actions for improvement. Quality, safety and patient experience are central principles underpinning the National Delivery Framework and this report is aligned to the domains within that framework.</p> <p>There are no directly related Equality and Diversity implications as a result of this report.</p>		
Financial Implications		
At this stage in the financial year there are no direct impacts on the Health Board's financial bottom line resulting from the performance reported herein.		
Legal Implications (including equality and diversity assessment)		
A number of indicators monitor progress in relation to legislation, such as the Mental Health Measure.		
Staffing Implications		
A number of indicators monitor progress in relation to Workforce, such as Sickness and Personal Development Review rates. Specific issues relating to staffing are also addressed individually in this report.		

Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)

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

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

Report History

The last iteration of the Quality & Safety Performance Report was presented to Quality & Safety committee in October 2021. This is a routine monthly report.

Appendices

Appendix 1: Quality & Safety performance report



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Appendix 1- Quality & Safety Performance Report

November 2021



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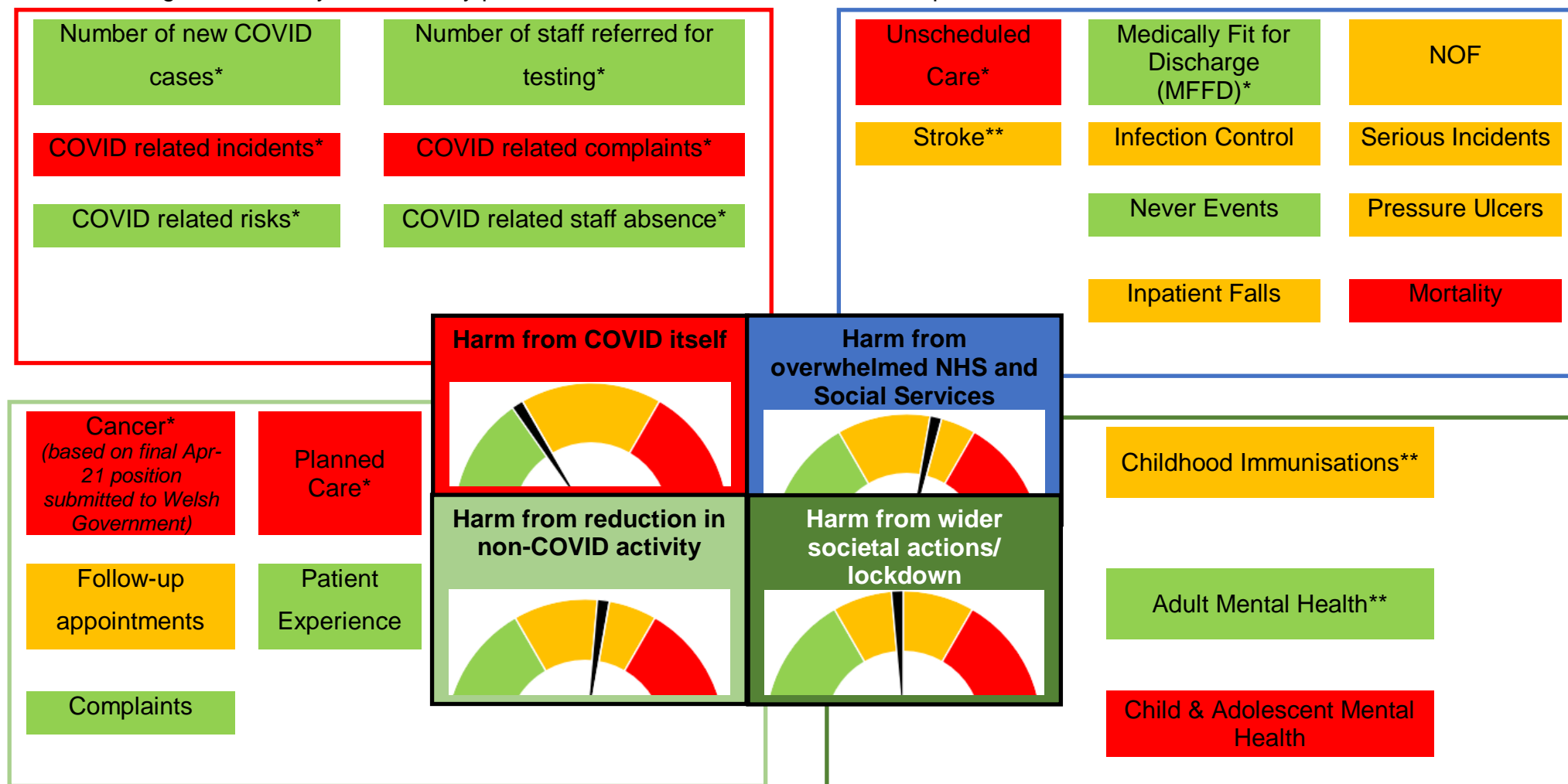
1. OVERVIEW- KEY PERFORMANCE INDICATORS SUMMARY

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

- Q&S report detail is reduced to reflect data capture currently available.
- Performance against the Mental Health Measures continues to be maintained. All Welsh Government targets were achieved in September 2021. Psychological therapies within 26 weeks continue to be maintained at 100%. Access times for routine CAMHS still continue to not meet the required targets, with crisis performance deteriorating to 95%.
- Demand for emergency department care within Swansea Bay University (SBU) Health Board has steadily increased since January 2021. Attendances have decreased slightly in October 2021 to 10,737 from 11,157 in September 2021. The Health Board's performance against the 4-hour measure deteriorated from 73.09% in September 2021 to 71.96% in October 2021 and the number of patients waiting over 12 hours in Accident and Emergency (A&E) continues to increase.
- Planned care system is still challenging and October 2021 saw a 2% in-month increase in the number of patients waiting over 26 weeks for a new outpatient appointment. In October 2021, there were 36,420 patients waiting over 36 weeks which is a 2% in-month decrease from September 2021. The total waiting list size continues to increase, however November is showing a projected total waiting list reduction. There has been a reduction in the number of referrals received by secondary care in October 2021. Therapy waiting times have increased in October 2021, however some therapy services have maintained a nil breach position (i.e. Occupational Therapy).
- September 2021 saw 62% performance against the Single Cancer Pathway measure of patients receiving definitive treatment within 62 days. The backlog of patients waiting over 63 days has decreased in October 2021, with a further reduction projected for November 2021. October's figures are in the process of being validated at the time of writing this report.
- Concern response performance surpassed the national target of 75% in August 2021 and achieved 80% compliance. The number of formal complaints received in August 2021 decreased to 115, compared to the 139 received in July 2021.
- Health Board Friends & Family patient satisfaction level in October 2021 was 92% and 2,733 surveys were completed.
- There were three Serious Incident (SI) reported to Welsh Government in October 2021.
- There were no new Never events reported for October 2021.
- Fractured neck of femur performance in September 2021 continues to be broadly at Welsh National levels (see detail below) and showing an improved position compared with March 2019-2020 for most indicators.

2. QUADRANTS OF HARM SUMMARY

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



NB- RAG status is against national or local target

** Data not available

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

2. HARM QUADRANT- HARM FROM COVID ITSELF

Overview

		Harm quadrant- Harm from Covid itself															
Measure	Locality	National/ Local Target	Internal profile	Trend	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21
Number of new COVID19 cases*	HB Total				4,664	5,525	11,976	3,759	1,208	907	406	189	708	1,946	7,177	12,839	10,918
Number of staff referred for Antigen Testing	HB Total				1,695	1,741	1,864	684	366	568	274	267	281	367	406	673	524
Number of staff awaiting results of COVID19 test*	HB Total				21 (as at 06/11/20)	41 (as at 06/12/20)	99 (as at 05/01/21)	78 (as at 07/02/21)	69 (as at 06/03/21)	2 (as at 11/04/21)	0	0	0	0	0	0	0
Number of COVID19 related incidents*	HB Total				87	141	127	84	63	53	74	67	23	24	36	36	73
Number of COVID19 related serious incidents*	HB Total				1	1	0	0	0	0	0	0	0	0	0	0	0
Number of COVID19 related complaints*	HB Total				37	50	83	106	131	98	38	13	16	4	6	3	4
Number of COVID19 related risks*	HB Total				6	7	10	3	3	3	2	2	1	1	1	0	0
Number of staff self isolated (asymptomatic)*	Medical				17	36	55	7	2	3	2	1	3	7	5	20	13
	Nursing Registered				106	93	152	61	40	32	28	18	21	19	35	67	38
	Nursing Non Registered				95	56	81	57	33	35	25	20	18	24	21	43	28
	Other				111	106	187	93	85	75	29	22	28	21	54	97	41
Number of staff self isolated (symptomatic)*	Medical				17	41	34	16	5	1	1	1	2	3	7	15	10
	Nursing Registered				44	97	145	112	52	44	39	33	23	28	36	57	51
	Nursing Non Registered				25	77	68	88	49	29	24	20	18	18	27	44	34
	Other				46	79	147	100	50	34	23	17	7	18	44	88	85
% sickness*	Medical				3.2%	7.3%	8.3%	2.2%	0.7%	0.4%	0.3%	0.2%	0.5%	0.9%	1.3%	3.6%	2.4%
	Nursing Registered				3.8%	4.7%	7.4%	4.3%	2.3%	1.9%	1.6%	1.2%	1.1%	1.4%	1.8%	3.1%	2.2%
	Nursing Non Registered				6.0%	6.5%	7.3%	7.0%	3.9%	3.1%	2.4%	1.9%	1.8%	1.8%	2.3%	4.3%	3.1%
	Other				2.5%	3.0%	5.4%	3.1%	2.2%	1.7%	0.8%	0.6%	0.6%	0.7%	1.6%	2.9%	2.0%
	All				3.5%	4.4%	6.5%	4.0%	2.4%	1.9%	1.3%	1.0%	0.9%	1.1%	1.7%	3.2%	2.3%

Updates on key measures

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

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

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

4.1 Overview

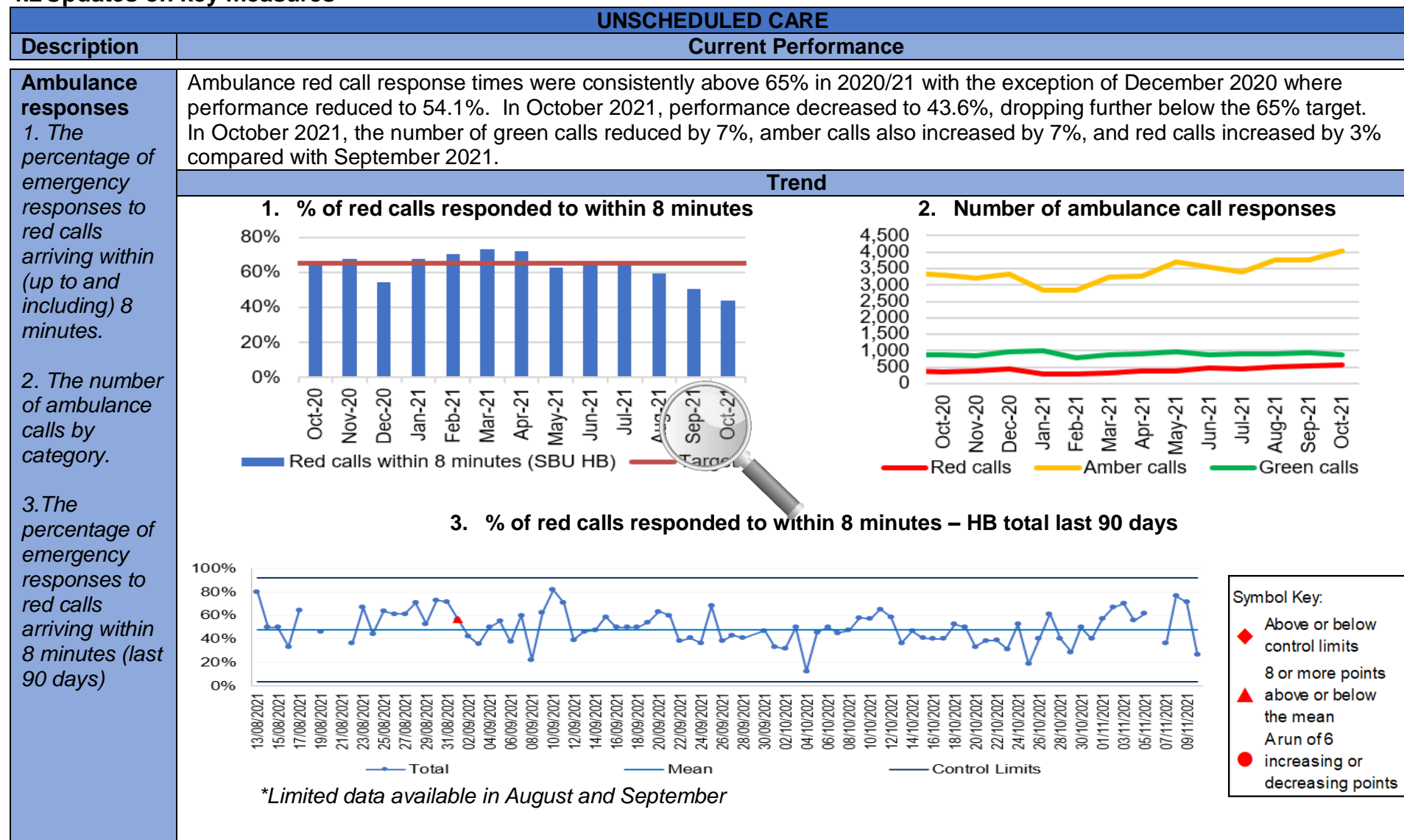
Measure	Locality	National/ Local Target	Internal profile	Trend													
					Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21
		Fractured Neck of Femur (NOF)															
Prompt orthogeriatric assessment- % patients receiving an assessment by a senior geriatrician within 72 hours of presentation	Morrison	75%			84.4%	84.7%	86.0%	86.8%	87.6%	88.3%	89.7%	90.7%	91.0%	90.5%	88.2%	87.3%	
Prompt surgery - % patients undergoing surgery by the day following presentation with hip fracture	Morrison	75%			51.0%	51.8%	54.1%	55.5%	56.3%	56.2%	56.6%	57.2%	60.0%	59.5%	59.4%	58.4%	
NICE compliant surgery - % of operations consistent with the recommendations of NICE CG124	Morrison	75%			70.1%	69.6%	68.5%	70.3%	71.2%	70.5%	70.4%	70.1%	71.0%	71.2%	69.8%	69.4%	
Prompt mobilisation after surgery - % of patients out of bed (standing or hoisted) by the day after operation	Morrison	75%			76.3%	76.0%	74.3%	74.1%	74.1%	74.6%	75.4%	75.9%	76.0%	75.7%	74.4%	72.6%	
Not delirious when tested- % patients (<4 on 4AT test) when tested in the week after operation	Morrison	75%			70.5%	71.1%	73.5%	74.4%	75.2%	75.3%	75.4%	75.9%	76.0%	76.8%	77.7%	76.1%	
Return to original residence- % patients discharged back to original residence, or in that residence at 120 day follow-up	Morrison	75%			76.2%	75.9%	75.6%	73.7%	74.3%	70.7%	70.2%						
30 day mortality - crude and adjusted figures, noting ONS data only correct after around 6 months	Morrison	12 month improvement trend			7.7%	7.6%	8.4%	7.5%									
% of survival within 30 days of emergency admission for a hip fracture	HB Total	12 month improvement trend			90.0%	67.9%	68.0%	65.3%	70.7%								

Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21
Healthcare Acquired Infections																	
Number of E.Coli bacteraemia cases	PCCS Community	12 month reduction trend	12		11	11	7	12	11	19	20	15	23	15	25	12	12
	PCCS Hospital		0		0	0	0	0	0	0	0	1	0	0	0	1	0
	MH&LD		0		0	0	0	0	0	0	0	0	0	0	0	0	0
	Morriston		3		9	2	2	3	3	5	5	8	2	3	4	5	5
	NPTH		2		2	1	0	1	0	1	2	2	1	3	2	2	1
	Singleton		2		3	2	3	2	3	3	5	0	2	2	3	1	1
	Total		19		25	16	12	18	17	28	32	26	28	23	34	21	19
Number of S.aureus bacteraemia cases	PCCS Community	12 month reduction trend	5		6	6	3	4	2	7	9	10	2	4	4	4	7
	PCCS Hospital		0		0	0	0	0	0	0	0	0	0	0	0	0	0
	MH&LD		0		0	0	0	0	0	0	0	0	0	0	0	0	0
	Morriston		2		4	3	1	5	4	2	2	1	3	3	4	8	9
	NPTH		0		0	1	1	0	0	0	0	0	0	0	0	1	0
	Singleton		1		2	3	4	0	3	2	2	4	2	4	4	4	2
	Total		8		12	13	9	9	9	11	13	15	7	11	12	17	18
Number of C.difficile cases	PCCS Community	12 month reduction trend	4		3	2	3	0	2	5	5	5	6	7	2	5	5
	PCCS Hospital		0		0	0	0	0	0	0	0	0	0	1	0	0	0
	MH&LD		0		1	0	0	0	0	0	0	0	0	0	0	0	0
	Morriston		6		6	5	5	0	5	3	10	5	3	7	10	6	7
	NPTH		1		2	1	0	1	2	1	1	1	1	0	1	0	0
	Singleton		2		3	2	1	2	2	3	4	1	2	8	9	3	3
	Total		13		15	10	9	3	11	12	20	12	12	23	22	14	15
Number of Klebsiella cases	PCCS Community	12 month reduction trend	3		2	4	4	5	2	9	5	2	7	1	4	3	5
	PCCS Hospital		0		0	0	0	0	0	0	0	0	0	0	0	0	0
	MH&LD		0		0	0	0	0	0	0	0	0	0	0	0	0	0
	Morriston		2		5	6	4	7	2	0	3	2	1	2	4	6	6
	NPTH		0		1	0	2	0	1	0	1	0	0	0	0	0	0
	Singleton		1		1	1	2	1	1	1	0	1	4	0	0	2	2
	Total		6		9	11	12	13	6	10	9	5	12	3	8	11	13
Number of Aeruginosa cases	PCCS Community	12 month reduction trend	2		1	1	0	1	1	1	1	1	1	1	1	0	0
	PCCS Hospital		0		0	0	0	0	0	0	0	0	0	0	0	0	0
	MH&LD		0		0	0	0	0	0	0	0	0	0	0	0	0	0
	Morriston		1		1	1	1	0	0	0	2	0	1	0	0	2	0
	NPTH		0		0	0	0	0	0	0	0	0	0	0	0	0	0
	Singleton		1		0	0	0	0	0	0	0	0	0	0	1	0	0
	Total		4		2	2	1	1	1	1	3	1	2	1	2	2	0
Compliance with hand hygiene audits	PCCS	95%			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	96.3%	98.3%	96.0%	94.9%	94.9%	96.0%	97.1%
	MH&LD				98.1%	96.1%	96.8%	98.7%	97.4%	96.7%	98.1%	99.6%	98.3%	95.9%	99.4%	98.3%	96.0%
	Morriston				99.3%	98.7%	96.8%	95.0%	92.8%	96.3%	95.8%	99.2%	94.5%	93.8%	93.5%	99.0%	97.9%
	NPTH				100.0%	100.0%	95.7%	100.0%	100.0%	100.0%	100.0%	90.0%	95.0%	93.3%	89.7%	100.0%	100.0%
	Singleton				94.2%	98.7%	96.0%	90.0%	88.5%	95.5%	100.0%	-	100.0%	100.0%	100.0%	100.0%	-
	Total				97.2%	97.3%	96.2%	95.1%	92.8%	97.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%

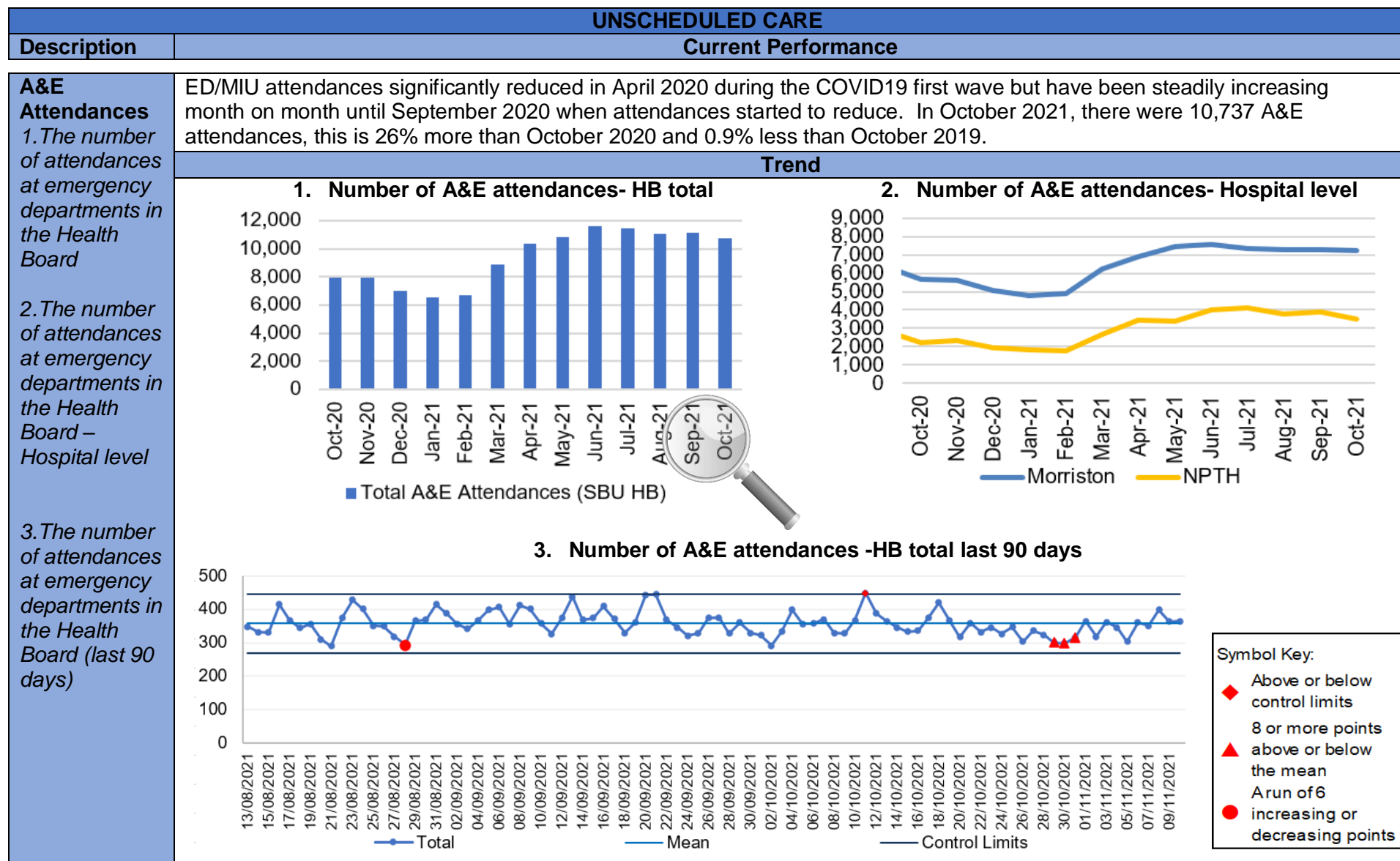
Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21
Serious Incidents & Risks																	
Number of Serious Incidents	PCCS	12 month reduction trend			2	1	0	0	2	1	2	3	1	0	1	0	0
	MH&LD				2	7	7	1	1	1	1	0	2	0	0	0	1
	Morrison				3	5	1	2	1	2	0	2	1	1	0	2	0
	NPTH				1	1	0	0	0	0	0	0	0	0	0	1	1
	Singleton				6	3	4	1	1	0	1	1	2	1	4	2	2
	Total				14	17	12	4	5	4	4	6	6	1	5	5	4
Of the serious incidents due for assurance, the % which were assured within the agreed timescales	Total	90%			0%	0%	4%	0%	10%	0%	0%	0%	0%	0%	0%	0%	0%
Number of Never Events	PCCS	0			0	0	0	0	0	0	0	0	0	0	0	0	0
	MH&LD				0	0	0	0	0	0	0	0	0	0	0	0	0
	Morrison				0	1	0	0	0	0	0	0	1	0	0	0	0
	NPTH				0	0	0	0	0	0	0	0	0	0	0	0	0
	Singleton				1	0	0	0	0	0	0	0	0	0	0	0	0
	Total				1	1	0	0	0	0	0	0	0	1	0	0	0
Pressure Ulcers																	
Total number of Pressure Ulcers	PCCS Community	12 month reduction trend			34	29	26	25	24	26	31	20	21	33	34	39	0
	PCCS Hospital				0	0	0	0	0	0	0	0	0	0	1	0	0
	MH&LD				3	0	0	0	1	0	0	2	0	3	1	1	0
	Morrison				27	27	41	31	26	24	25	30	25	37	32	47	0
	NPTH				4	0	0	1	4	3	3	2	3	2	5	0	0
	Singleton				25	15	20	19	17	9	31	19	25	16	14	17	0
Total number of Grade 3+ Pressure Ulcers	Total		93	71	87	76	72	62	90	73	74	91	87	104	0		
	PCCS Community	12 month reduction trend			11	5	7	5	4	2	10	2	4	2	8	6	0
	PCCS Hospital				0	0	0	0	0	0	0	0	0	0	0	0	
	MH&LD				0	0	0	0	0	0	0	0	0	0	0	1	0
	Morrison				1	1	2	2	2	1	1	0	0	3	1	0	0
	NPTH				0	0	0	0	0	0	1	0	0	0	1	0	0
Singleton				3	3	1	0	1	0	2	1	2	0	0	0	0	
Pressure Ulcer (Hosp) patients per 100,000 admissions	Total	12 month reduction trend			990	877	1,128	928	951	533	896	756	723	853	767	955	0

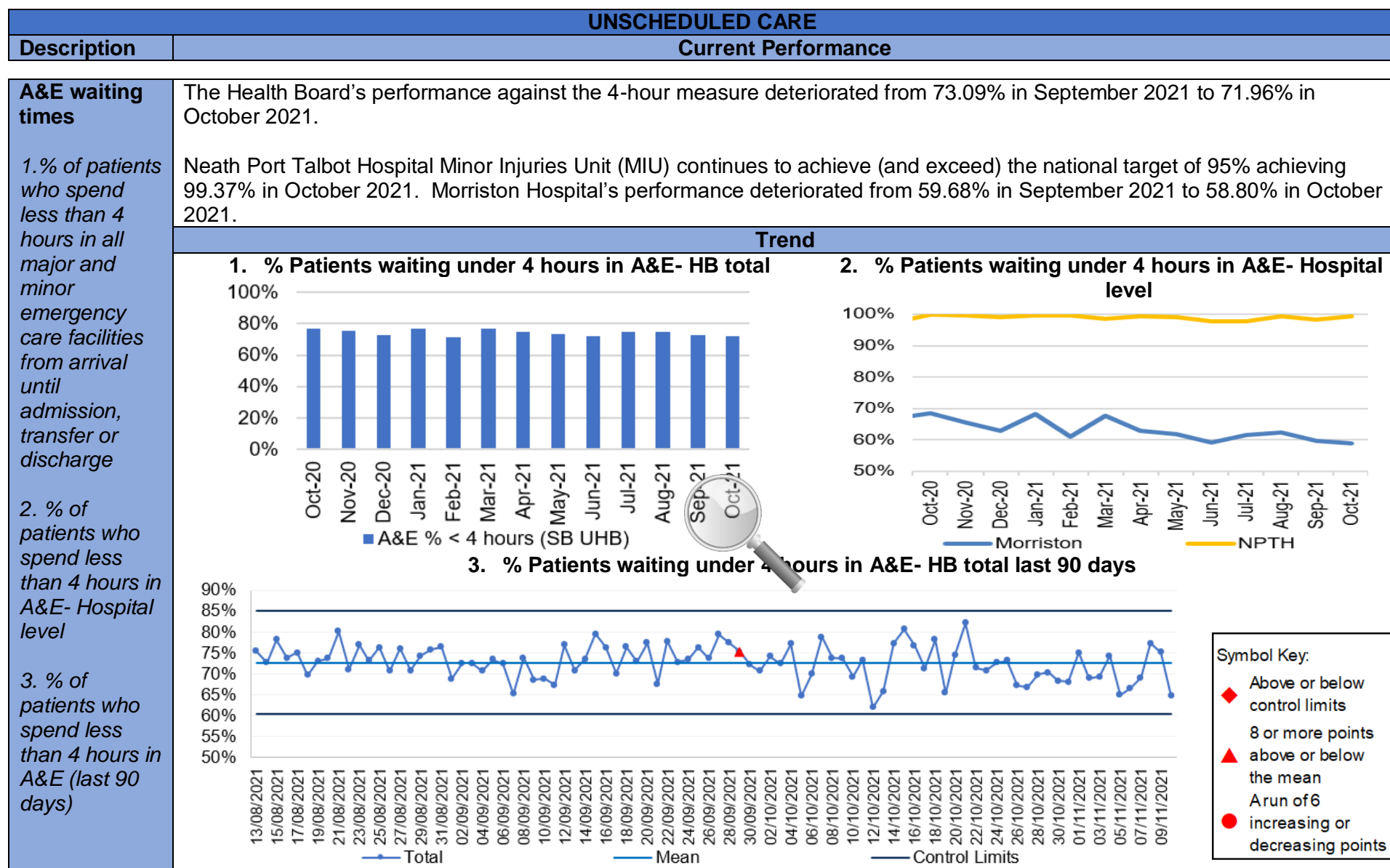
Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21
		Inpatient Falls															
Total number of Inpatient Falls	PCCS	12 month reduction trend			8	9	8	9	10	4	12	5	8	6	6	8	4
	MH&LD				44	31	29	27	27	22	18	42	24	32	40	25	28
	Morrison				77	120	129	92	67	84	81	105	69	66	73	96	114
	NPTH				29	32	30	33	30	28	31	34	32	41	31	25	35
	Singleton				28	47	48	38	42	33	34	42	41	48	48	53	58
	Total				187	247	247	203	177	171	176	228	174	193	198	207	240
Inpatient Falls per 1,000 beddays	HB Total	Between 3.0 & 5.0			5.23	7.26	6.91	5.56	5.40	4.62	4.85	5.94	4.50				
		Mortality															
Universal Mortality reviews undertaken within 28 days (Stage 1 reviews)	Morrison	95%			100%	98%	99%	100%	100%	98%	99%	98%	98%	97%	90%	97%	96%
	Singleton				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
	NPTH				100%	92%	100%	100%	100%	86%	100%	88%	100%	100%	100%	100%	80%
	Total				100%	98%	99%	100%	100%	98%	99%	98%	99%	98%	93%	98%	97%
Stage 2 mortality reviews completed within 60 days	Morrison	95%			38%	25%	80%	43%									
	Singleton				-	-	50%	50%									
	NPTH				0%	100%	-	0%									
	Total				33%	36%	75%	37%									
Crude hospital mortality rate by Delivery Unit (74 years of age or less)	Morrison	12 month reduction trend			1.66%	1.75%	1.86%	1.97%	2.05%	2.04%	1.80%	1.76%	1.71%	1.73%	1.70%	1.72%	0.00%
	Singleton				0.48%	0.50%	0.54%	0.56%	0.57%	0.56%	0.50%	0.52%	0.00%	0.00%	0.00%	0.00%	0.00%
	NPTH				0.22%	0.21%	0.20%	0.24%	0.18%	0.17%	0.15%	0.15%	0.52%	0.52%	0.53%	0.53%	0.00%
	Total (SBU)				0.97%	1.01%	1.08%	1.14%	1.17%	1.17%	1.04%	1.04%	0.13%	0.12%	0.23%	0.11%	0.00%

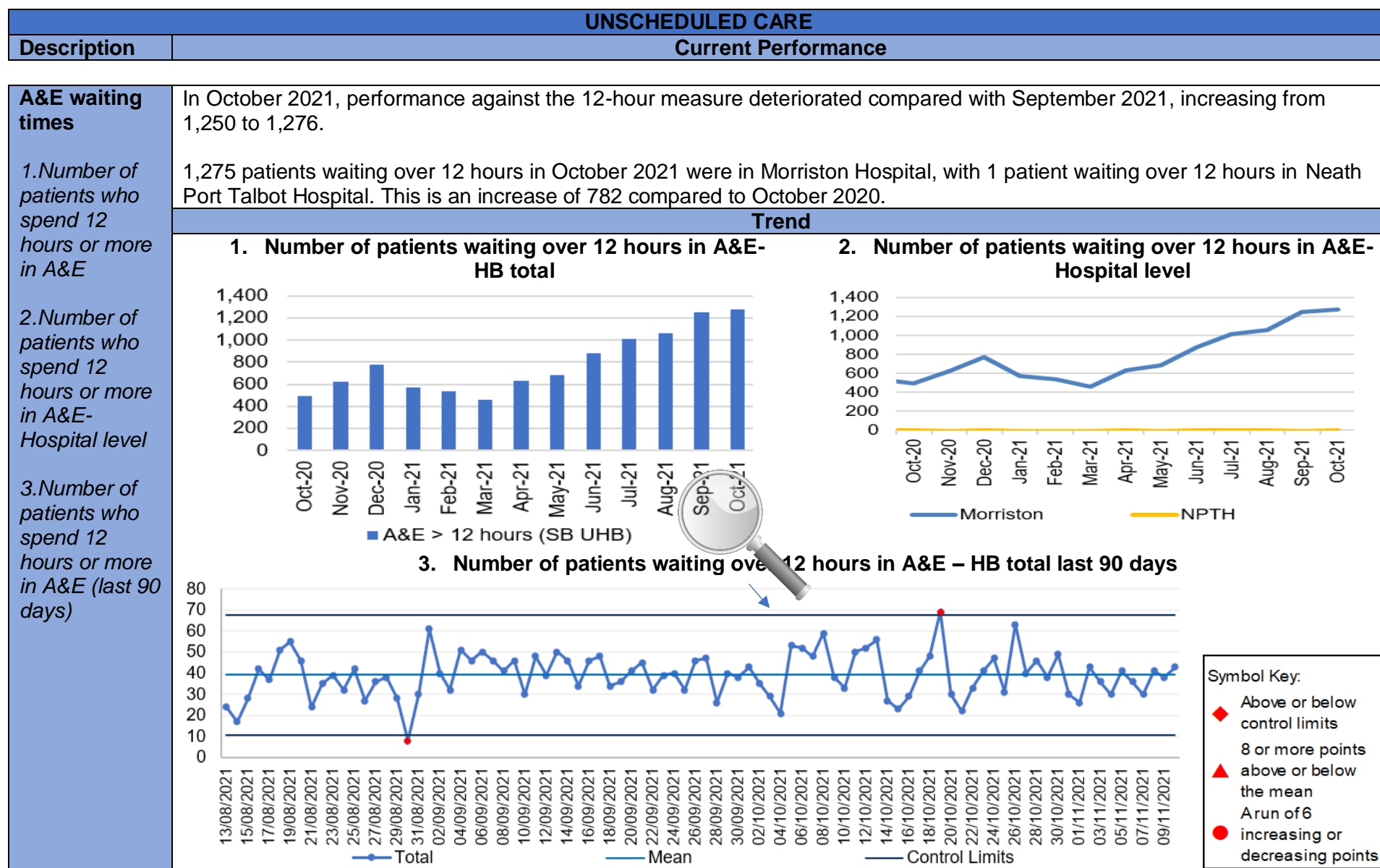
4.2 Updates on key measures

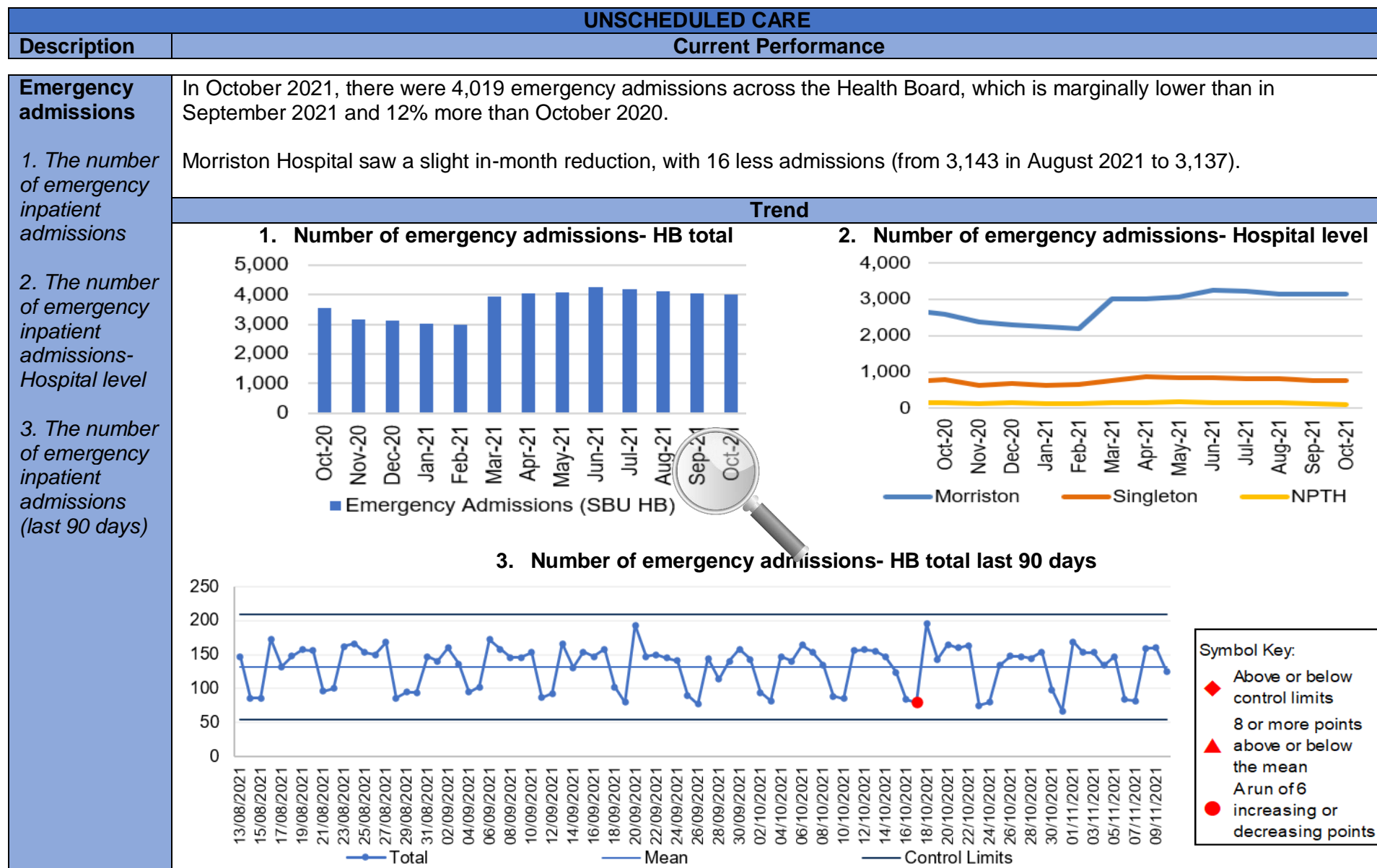


UNSCHEDULED CARE																																																																																																																																																																																																																	
Description	Current Performance																																																																																																																																																																																																																
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 October 2021, there were 648 ambulance to hospital handovers taking over 1 hour; this is a significant deterioration from 355 in October 2020, but is an in-month increase from September 2021. In October 2021, 633 handovers over 1 hour were attributed to Morriston Hospital and 15 were attributed to Singleton Hospital.</p> <p>The number of handover hours lost over 15 minutes significantly increased from 916 in October 2020 to 3,093 in October 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>Number of handovers</th></tr></thead><tbody><tr><td>Oct-20</td><td>916</td></tr><tr><td>Nov-20</td><td>1,450</td></tr><tr><td>Dec-20</td><td>1,750</td></tr><tr><td>Jan-21</td><td>450</td></tr><tr><td>Feb-21</td><td>550</td></tr><tr><td>Mar-21</td><td>550</td></tr><tr><td>Apr-21</td><td>850</td></tr><tr><td>May-21</td><td>1,150</td></tr><tr><td>Jun-21</td><td>1,350</td></tr><tr><td>Jul-21</td><td>1,900</td></tr><tr><td>Aug-21</td><td>2,400</td></tr><tr><td>Sep-21</td><td>2,450</td></tr><tr><td>Oct-21</td><td>3,093</td></tr></tbody></table></div><div><p>2. Number of ambulance handovers over 1 hour- Hospital level</p><table><caption>2. Number of ambulance handovers over 1 hour- Hospital level</caption><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th></tr></thead><tbody><tr><td>Oct-20</td><td>916</td><td>15</td></tr><tr><td>Nov-20</td><td>1,450</td><td>15</td></tr><tr><td>Dec-20</td><td>1,750</td><td>15</td></tr><tr><td>Jan-21</td><td>450</td><td>15</td></tr><tr><td>Feb-21</td><td>550</td><td>15</td></tr><tr><td>Mar-21</td><td>550</td><td>15</td></tr><tr><td>Apr-21</td><td>850</td><td>15</td></tr><tr><td>May-21</td><td>1,150</td><td>15</td></tr><tr><td>Jun-21</td><td>1,350</td><td>15</td></tr><tr><td>Jul-21</td><td>1,900</td><td>15</td></tr><tr><td>Aug-21</td><td>2,400</td><td>15</td></tr><tr><td>Sep-21</td><td>2,450</td><td>15</td></tr><tr><td>Oct-21</td><td>3,093</td><td>15</td></tr></tbody></table></div><div><p>3. Number of ambulance handovers- HB total last 90 days</p><table><caption>3. 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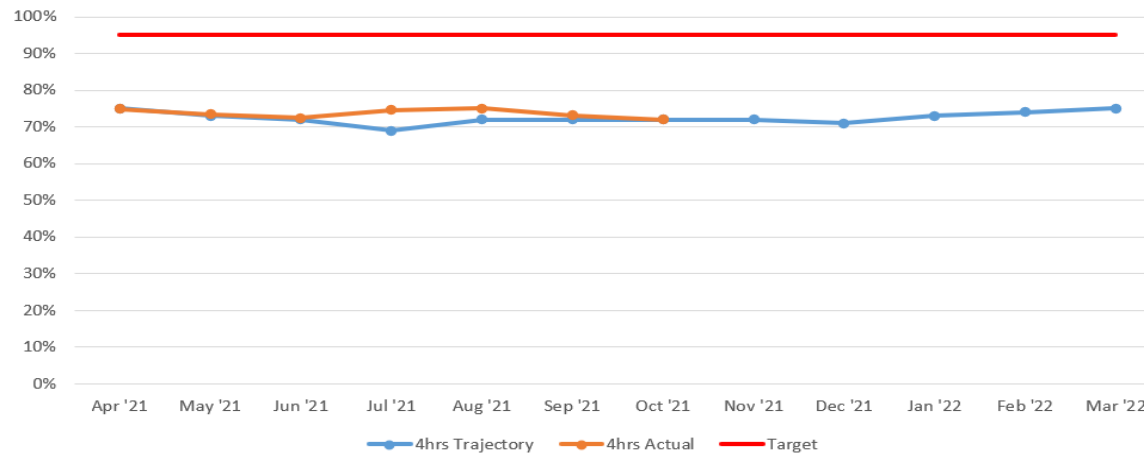




UNSCHEDULED CARE – Performance Escalation updates

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

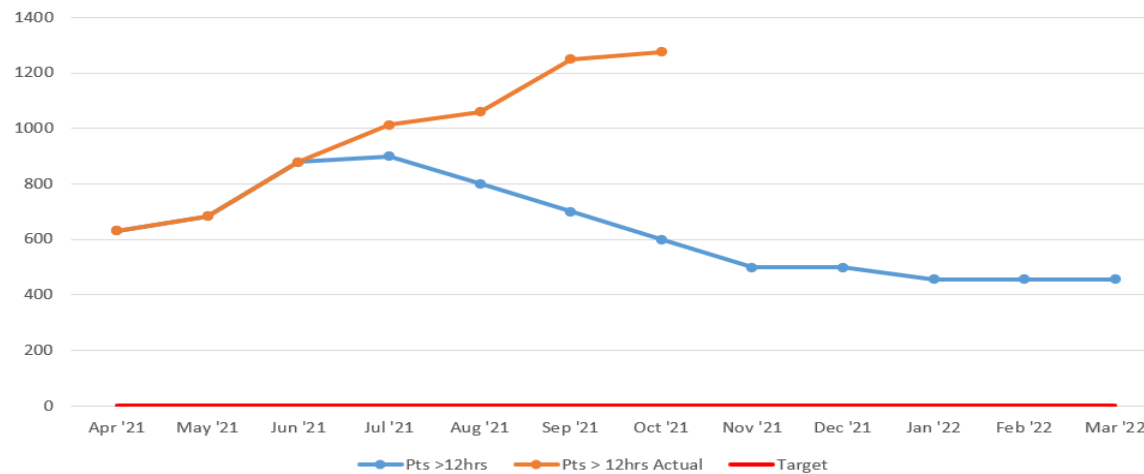
SBUHB 4hr Performance 2021-22



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

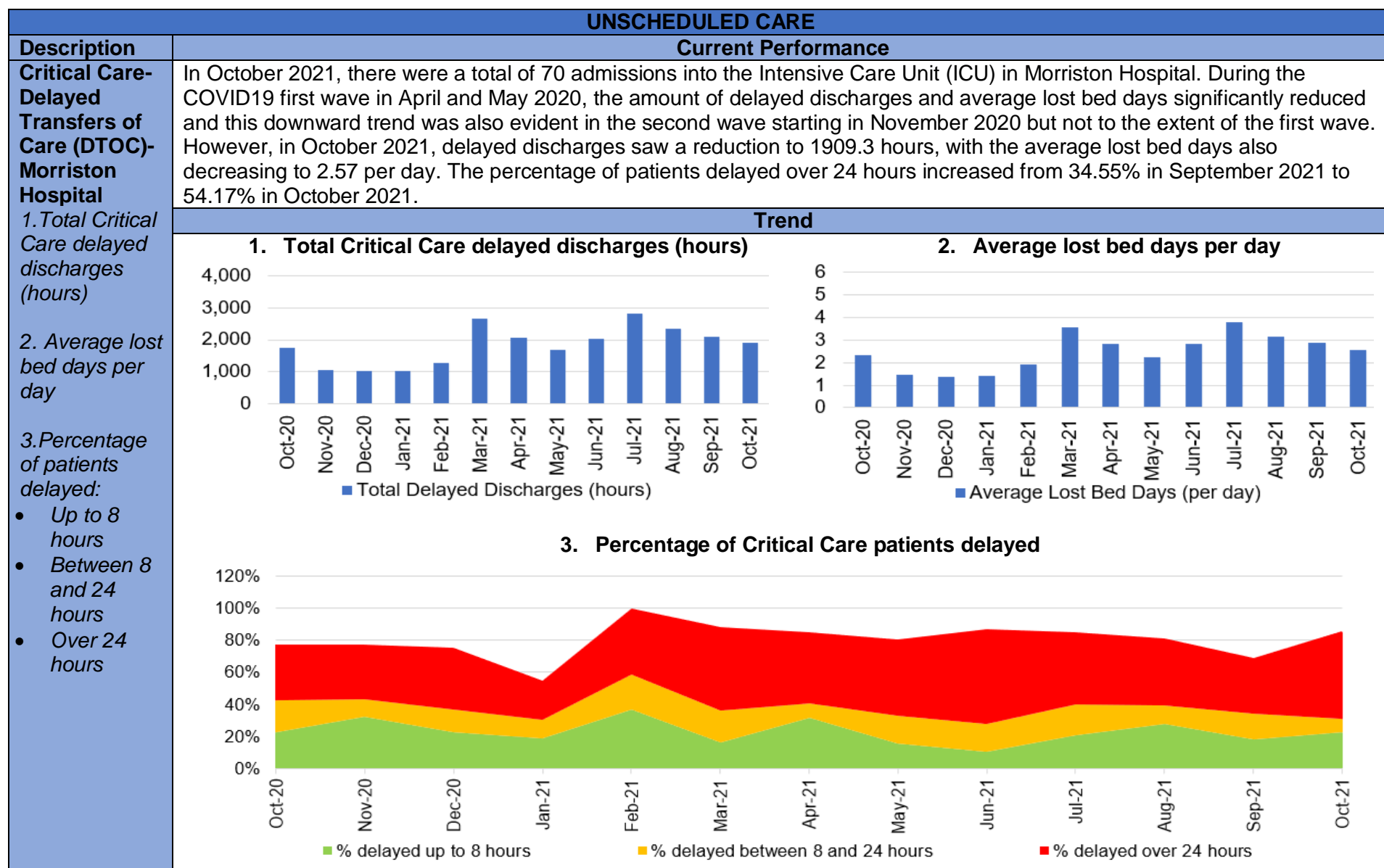
2. Submitted recovery trajectory for A&E 12-hour performance

Patients > 12 hours Performance 2021-22



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

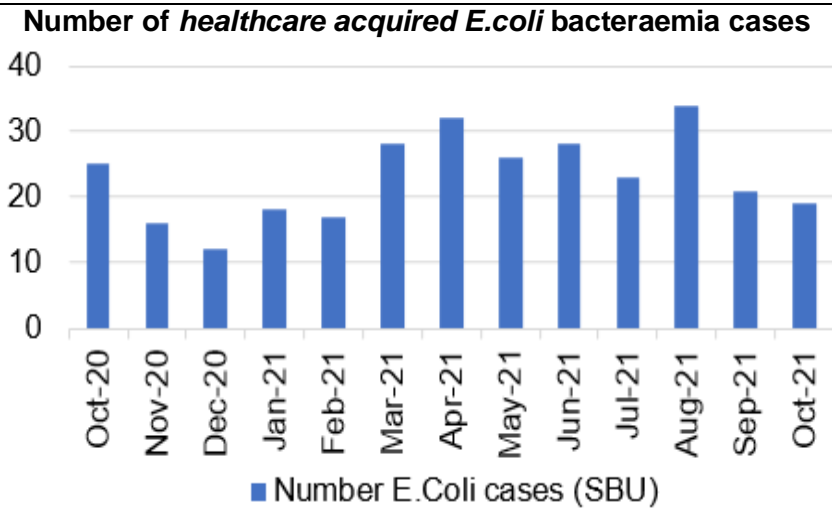
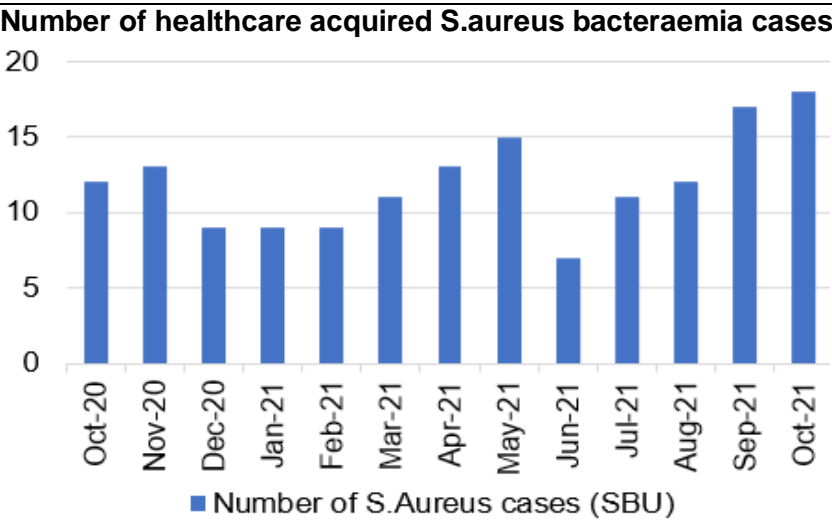
A detailed recovery plan outlining key actions was shared in the September 2021 PFC agenda.



UNSCHEDULED CARE																																																																								
Description	Current Performance	Trend																																																																						
Clinically Optimised <i>The number of patients waiting at each site in the Health Board that are clinically optimised</i>	<p>In October 2021, there were on average 238 patients who were deemed clinically optimised but were still occupying a bed in one of the Health Board's Hospitals.</p> <p>The number of medically/ discharge fit patients returned to the average that was seen in quarter 3 for 2021/21 in March 2021, after a significant increase in February 2021. October 2021 has seen the first decrease in numbers, reducing from 272 in September 2021 to 238.</p> <p>In October 2021, Morriston Hospital had the largest proportion of clinically optimised patients with 90, followed by Neath Port Talbot Hospital with 81.</p>	<p>The number of clinically optimised patients by site</p> <table><caption>Estimated data for Clinically Optimised Patients by Site</caption><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>NPTH</th><th>Gorseinon</th></tr></thead><tbody><tr><td>Oct-20</td><td>50</td><td>45</td><td>25</td><td>10</td></tr><tr><td>Nov-20</td><td>60</td><td>40</td><td>25</td><td>10</td></tr><tr><td>Dec-20</td><td>55</td><td>40</td><td>20</td><td>20</td></tr><tr><td>Jan-21</td><td>55</td><td>40</td><td>25</td><td>10</td></tr><tr><td>Feb-21</td><td>65</td><td>45</td><td>45</td><td>10</td></tr><tr><td>Mar-21</td><td>40</td><td>40</td><td>40</td><td>10</td></tr><tr><td>Apr-21</td><td>65</td><td>35</td><td>70</td><td>10</td></tr><tr><td>May-21</td><td>65</td><td>40</td><td>75</td><td>10</td></tr><tr><td>Jun-21</td><td>75</td><td>50</td><td>75</td><td>10</td></tr><tr><td>Jul-21</td><td>85</td><td>50</td><td>70</td><td>10</td></tr><tr><td>Aug-21</td><td>90</td><td>55</td><td>75</td><td>15</td></tr><tr><td>Sep-21</td><td>105</td><td>70</td><td>85</td><td>15</td></tr><tr><td>Oct-21</td><td>90</td><td>45</td><td>80</td><td>20</td></tr></tbody></table>	Month	Morriston	Singleton	NPTH	Gorseinon	Oct-20	50	45	25	10	Nov-20	60	40	25	10	Dec-20	55	40	20	20	Jan-21	55	40	25	10	Feb-21	65	45	45	10	Mar-21	40	40	40	10	Apr-21	65	35	70	10	May-21	65	40	75	10	Jun-21	75	50	75	10	Jul-21	85	50	70	10	Aug-21	90	55	75	15	Sep-21	105	70	85	15	Oct-21	90	45	80	20
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Elective procedures cancelled due to lack of beds <i>The number of elective procedure cancelled across the hospital where the main cancellation reasons was lack of beds</i>	<p>In October 2021, there were 54 elective procedures cancelled due to lack of beds on the day of surgery. This is 37 more cancellations than in October 2020 and 24 more than September 2021.</p> <p>51 of the cancelled procedures were attributed to Morriston Hospital, with 3 attributed to Neath Port Talbot Hospital.</p>	<p>Total number of elective procedures cancelled due to lack of beds</p> <table><caption>Estimated data for Elective Procedures Cancelled due to Lack of Beds</caption><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>NPTH</th></tr></thead><tbody><tr><td>Oct-20</td><td>10</td><td>1</td><td>1</td></tr><tr><td>Nov-20</td><td>15</td><td>1</td><td>1</td></tr><tr><td>Dec-20</td><td>10</td><td>1</td><td>1</td></tr><tr><td>Jan-21</td><td>2</td><td>1</td><td>1</td></tr><tr><td>Feb-21</td><td>10</td><td>1</td><td>1</td></tr><tr><td>Mar-21</td><td>10</td><td>1</td><td>1</td></tr><tr><td>Apr-21</td><td>5</td><td>1</td><td>1</td></tr><tr><td>May-21</td><td>5</td><td>1</td><td>1</td></tr><tr><td>Jun-21</td><td>5</td><td>1</td><td>1</td></tr><tr><td>Jul-21</td><td>15</td><td>1</td><td>1</td></tr><tr><td>Aug-21</td><td>10</td><td>1</td><td>1</td></tr><tr><td>Sep-21</td><td>25</td><td>1</td><td>1</td></tr><tr><td>Oct-21</td><td>54</td><td>1</td><td>3</td></tr></tbody></table>	Month	Morriston	Singleton	NPTH	Oct-20	10	1	1	Nov-20	15	1	1	Dec-20	10	1	1	Jan-21	2	1	1	Feb-21	10	1	1	Mar-21	10	1	1	Apr-21	5	1	1	May-21	5	1	1	Jun-21	5	1	1	Jul-21	15	1	1	Aug-21	10	1	1	Sep-21	25	1	1	Oct-21	54	1	3														
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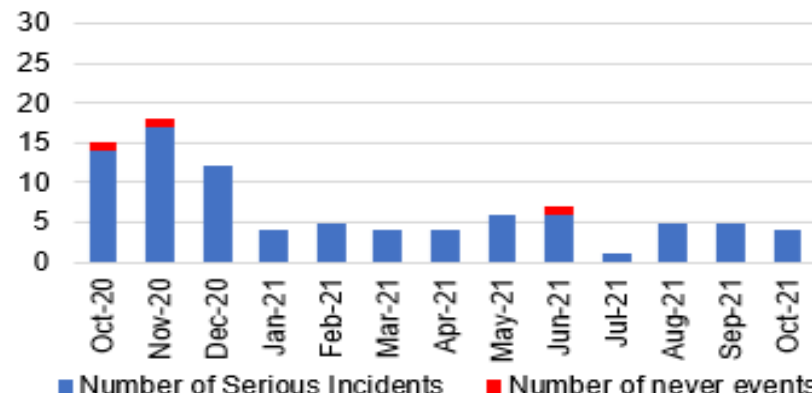
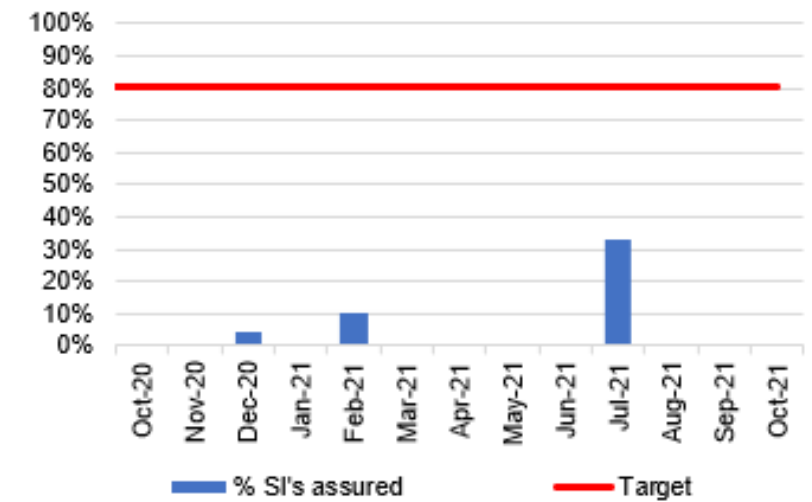
FRACTURED NECK OF FEMUR (#NOF)		
Description	Current Performance	Trend
Fractured Neck of Femur (#NOF) 1. Prompt orthogeriatric assessment- % patients receiving an assessment by a senior geriatrician within 72 hours of presentation 2. Prompt surgery - % patients undergoing surgery the day following presentation 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 September 2021, 87.3% of patients in Morriston hospital received an assessment by a senior geriatrician within 72 hours. This is 2.9% more than in September 2020.</p> <p>2. Prompt surgery- In September 2021, 58.4% of patients had surgery the day following presentation with a hip fracture. This is an improvement from September 2020 which was 51.7%</p> <p>3. NICE compliant surgery- 69.4% of operations were consistent with the NICE recommendations in September 2021. This is 0.8% less than in August 2020. In September 2021, Morriston was below the all-Wales average of 71.9%.</p> <p>4. Prompt mobilisation- In September 2021, 72.6% of patients were out of bed the day after surgery. This is 3% less than in September 2020.</p>	<p>1. Prompt orthogeriatric assessment</p> <p>2. Prompt surgery</p> <p>3. NICE compliant Surgery</p> <p>4. Prompt mobilisation</p>

FRACTURED NECK OF FEMUR (#NOF)																																																										
Description	Current Performance	Trend																																																								
5. <i>Not delirious when tested- % patients (<4 on 4AT test) when tested in the week after operation</i>	5. Not delirious when tested- 76.1% of patients were not delirious in the week after their operation in September 2021. This is an improvement of 7.2% compared with September 2020.	<p>5. Not delirious when tested</p> <table><caption>5. Not delirious when tested (Estimated Data)</caption><thead><tr><th>Month</th><th>Morriston (%)</th><th>All-Wales (%)</th><th>Eng, Wal & N. Ire (%)</th></tr></thead><tbody><tr><td>Sep-20</td><td>70</td><td>55</td><td>60</td></tr><tr><td>Oct-20</td><td>72</td><td>55</td><td>60</td></tr><tr><td>Nov-20</td><td>72</td><td>55</td><td>60</td></tr><tr><td>Dec-20</td><td>72</td><td>55</td><td>60</td></tr><tr><td>Jan-21</td><td>72</td><td>55</td><td>60</td></tr><tr><td>Feb-21</td><td>72</td><td>55</td><td>60</td></tr><tr><td>Mar-21</td><td>72</td><td>55</td><td>60</td></tr><tr><td>Apr-21</td><td>72</td><td>55</td><td>60</td></tr><tr><td>May-21</td><td>72</td><td>55</td><td>60</td></tr><tr><td>Jun-21</td><td>72</td><td>55</td><td>60</td></tr><tr><td>Jul-21</td><td>72</td><td>55</td><td>60</td></tr><tr><td>Aug-21</td><td>72</td><td>55</td><td>60</td></tr><tr><td>Sep-21</td><td>76.1</td><td>55</td><td>60</td></tr></tbody></table>	Month	Morriston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)	Sep-20	70	55	60	Oct-20	72	55	60	Nov-20	72	55	60	Dec-20	72	55	60	Jan-21	72	55	60	Feb-21	72	55	60	Mar-21	72	55	60	Apr-21	72	55	60	May-21	72	55	60	Jun-21	72	55	60	Jul-21	72	55	60	Aug-21	72	55	60	Sep-21	76.1	55	60
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Sep-21	76.1	55	60																																																							
6. <i>Return to original residence- % patients discharged back to original residence, or in that residence at 120 day follow-up</i>	6. Return to original residence- 67.7% of patients in August 2021 were discharged back to their original residence. This is 10.3% less than in August 2020.	<p>6. Return to original residence</p> <table><caption>6. Return to original residence (Estimated Data)</caption><thead><tr><th>Month</th><th>Morriston (%)</th><th>All-Wales (%)</th><th>Eng, Wal & N. Ire (%)</th></tr></thead><tbody><tr><td>Aug-20</td><td>75</td><td>75</td><td>70</td></tr><tr><td>Sep-20</td><td>75</td><td>74</td><td>70</td></tr><tr><td>Oct-20</td><td>75</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>75</td><td>74</td><td>70</td></tr><tr><td>Jan-21</td><td>72</td><td>73</td><td>70</td></tr><tr><td>Feb-21</td><td>72</td><td>73</td><td>70</td></tr><tr><td>Mar-21</td><td>70</td><td>73</td><td>70</td></tr><tr><td>Apr-21</td><td>70</td><td>73</td><td>70</td></tr><tr><td>May-21</td><td>70</td><td>73</td><td>70</td></tr><tr><td>Jun-21</td><td>72</td><td>73</td><td>70</td></tr><tr><td>Jul-21</td><td>68</td><td>73</td><td>70</td></tr><tr><td>Aug-21</td><td>67.7</td><td>72</td><td>70</td></tr></tbody></table>	Month	Morriston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)	Aug-20	75	75	70	Sep-20	75	74	70	Oct-20	75	74	70	Nov-20	75	74	70	Dec-20	75	74	70	Jan-21	72	73	70	Feb-21	72	73	70	Mar-21	70	73	70	Apr-21	70	73	70	May-21	70	73	70	Jun-21	72	73	70	Jul-21	68	73	70	Aug-21	67.7	72	70
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Jul-21	68	73	70																																																							
Aug-21	67.7	72	70																																																							
7. <i>30 day mortality rate</i>	7. 30 day mortality rate- In January 2021 the mortality rate for Morriston Hospital was 7.5% which is 0.5% less than January 2020. The mortality rate in Morriston Hospital in January 2021 is higher than the all-Wales average of 6.9% but lower than the national average of 7.6%. * Updated data is currently not available, but is being reviewed.	<p>7. 30 day mortality rate</p> <table><caption>7. 30 day mortality rate (Estimated Data)</caption><thead><tr><th>Month</th><th>Morriston (%)</th><th>All-Wales (%)</th><th>Eng, Wal & N. Ire (%)</th></tr></thead><tbody><tr><td>Jan-20</td><td>7.5</td><td>7.0</td><td>6.5</td></tr><tr><td>Feb-20</td><td>7.5</td><td>7.0</td><td>6.5</td></tr><tr><td>Mar-20</td><td>7.5</td><td>7.0</td><td>6.5</td></tr><tr><td>Apr-20</td><td>7.5</td><td>7.0</td><td>6.5</td></tr><tr><td>May-20</td><td>7.5</td><td>7.0</td><td>6.5</td></tr><tr><td>Jun-20</td><td>7.5</td><td>7.0</td><td>6.5</td></tr><tr><td>Jul-20</td><td>7.5</td><td>7.0</td><td>6.5</td></tr><tr><td>Aug-20</td><td>7.5</td><td>7.0</td><td>6.5</td></tr><tr><td>Sep-20</td><td>7.5</td><td>7.0</td><td>6.5</td></tr><tr><td>Oct-20</td><td>7.5</td><td>7.0</td><td>6.5</td></tr><tr><td>Nov-20</td><td>7.5</td><td>7.0</td><td>6.5</td></tr><tr><td>Dec-20</td><td>7.5</td><td>7.0</td><td>6.5</td></tr><tr><td>Jan-21</td><td>7.5</td><td>6.9</td><td>7.6</td></tr></tbody></table>	Month	Morriston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)	Jan-20	7.5	7.0	6.5	Feb-20	7.5	7.0	6.5	Mar-20	7.5	7.0	6.5	Apr-20	7.5	7.0	6.5	May-20	7.5	7.0	6.5	Jun-20	7.5	7.0	6.5	Jul-20	7.5	7.0	6.5	Aug-20	7.5	7.0	6.5	Sep-20	7.5	7.0	6.5	Oct-20	7.5	7.0	6.5	Nov-20	7.5	7.0	6.5	Dec-20	7.5	7.0	6.5	Jan-21	7.5	6.9	7.6
Month	Morriston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)																																																							
Jan-20	7.5	7.0	6.5																																																							
Feb-20	7.5	7.0	6.5																																																							
Mar-20	7.5	7.0	6.5																																																							
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Sep-20	7.5	7.0	6.5																																																							
Oct-20	7.5	7.0	6.5																																																							
Nov-20	7.5	7.0	6.5																																																							
Dec-20	7.5	7.0	6.5																																																							
Jan-21	7.5	6.9	7.6																																																							

HEALTHCARE ACQUIRED INFECTIONS																														
Description	Current Performance	Trend																												
Healthcare Acquired Infections (HCAI) - E.coli bacteraemia- <i>Number of laboratory confirmed E.coli bacteraemia cases</i>	<ul style="list-style-type: none">19 cases of <i>E. coli</i> bacteraemia were identified in October 2021, of which 7 were hospital acquired and 12 were community acquired.Cumulative cases from September 2021 to October 2021 are 17.6% lower than the equivalent period in 2020/21. (148 in 2021/22 compared with 174 in 2020/21).	<p>Number of healthcare acquired E.coli bacteraemia cases</p>  <table><caption>Number of healthcare acquired E.coli bacteraemia cases (SBU)</caption><thead><tr><th>Month</th><th>Number of cases</th></tr></thead><tbody><tr><td>Oct-20</td><td>25</td></tr><tr><td>Nov-20</td><td>16</td></tr><tr><td>Dec-20</td><td>12</td></tr><tr><td>Jan-21</td><td>18</td></tr><tr><td>Feb-21</td><td>17</td></tr><tr><td>Mar-21</td><td>28</td></tr><tr><td>Apr-21</td><td>32</td></tr><tr><td>May-21</td><td>26</td></tr><tr><td>Jun-21</td><td>28</td></tr><tr><td>Jul-21</td><td>23</td></tr><tr><td>Aug-21</td><td>34</td></tr><tr><td>Sep-21</td><td>21</td></tr><tr><td>Oct-21</td><td>19</td></tr></tbody></table>	Month	Number of cases	Oct-20	25	Nov-20	16	Dec-20	12	Jan-21	18	Feb-21	17	Mar-21	28	Apr-21	32	May-21	26	Jun-21	28	Jul-21	23	Aug-21	34	Sep-21	21	Oct-21	19
Month	Number of cases																													
Oct-20	25																													
Nov-20	16																													
Dec-20	12																													
Jan-21	18																													
Feb-21	17																													
Mar-21	28																													
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May-21	26																													
Jun-21	28																													
Jul-21	23																													
Aug-21	34																													
Sep-21	21																													
Oct-21	19																													
Healthcare Acquired Infections (HCAI)- S.aureus bacteraemia- <i>Number of laboratory confirmed S.aureus bacteraemias (MRSA & MSSA) cases</i>	<ul style="list-style-type: none">There were 18 cases of Staph. aureus bacteraemia in October 2021, of which 11 were hospital acquired and 7 were community acquired.Cumulative cases from September 2021 to October 2021 are 9% higher than the equivalent period in 2020/21 (66 in 2021/22 compared with 72 in 2020/21).	<p>Number of healthcare acquired S.aureus bacteraemia cases</p>  <table><caption>Number of healthcare acquired S.aureus bacteraemia cases (SBU)</caption><thead><tr><th>Month</th><th>Number of cases</th></tr></thead><tbody><tr><td>Oct-20</td><td>12</td></tr><tr><td>Nov-20</td><td>13</td></tr><tr><td>Dec-20</td><td>9</td></tr><tr><td>Jan-21</td><td>9</td></tr><tr><td>Feb-21</td><td>9</td></tr><tr><td>Mar-21</td><td>11</td></tr><tr><td>Apr-21</td><td>13</td></tr><tr><td>May-21</td><td>15</td></tr><tr><td>Jun-21</td><td>7</td></tr><tr><td>Jul-21</td><td>11</td></tr><tr><td>Aug-21</td><td>12</td></tr><tr><td>Sep-21</td><td>17</td></tr><tr><td>Oct-21</td><td>18</td></tr></tbody></table>	Month	Number of cases	Oct-20	12	Nov-20	13	Dec-20	9	Jan-21	9	Feb-21	9	Mar-21	11	Apr-21	13	May-21	15	Jun-21	7	Jul-21	11	Aug-21	12	Sep-21	17	Oct-21	18
Month	Number of cases																													
Oct-20	12																													
Nov-20	13																													
Dec-20	9																													
Jan-21	9																													
Feb-21	9																													
Mar-21	11																													
Apr-21	13																													
May-21	15																													
Jun-21	7																													
Jul-21	11																													
Aug-21	12																													
Sep-21	17																													
Oct-21	18																													

HEALTHCARE ACQUIRED INFECTIONS																														
Description	Current Performance	Trend																												
Healthcare Acquired Infections (HCAI)- C.difficile- <i>Number of laboratory confirmed C.difficile cases</i>	<ul style="list-style-type: none">There were 15 <i>Clostridium difficile</i> toxin positive cases in October 2021, of which 10 were hospital acquired and 5 were community acquired.Cumulative cases from September 2021 to October 2021 are 18.1% more than the equivalent period of 2020/21 (83 in 2021/22 compared with 68 in 2020/21).	<p>Number of healthcare acquired C.difficile cases</p> <table><caption>Number of healthcare acquired C.difficile cases (SBU)</caption><thead><tr><th>Month</th><th>Number of cases</th></tr></thead><tbody><tr><td>Oct-20</td><td>15</td></tr><tr><td>Nov-20</td><td>10</td></tr><tr><td>Dec-20</td><td>9</td></tr><tr><td>Jan-21</td><td>3</td></tr><tr><td>Feb-21</td><td>11</td></tr><tr><td>Mar-21</td><td>12</td></tr><tr><td>Apr-21</td><td>20</td></tr><tr><td>May-21</td><td>12</td></tr><tr><td>Jun-21</td><td>12</td></tr><tr><td>Jul-21</td><td>23</td></tr><tr><td>Aug-21</td><td>22</td></tr><tr><td>Sep-21</td><td>14</td></tr><tr><td>Oct-21</td><td>15</td></tr></tbody></table> <p>■ Number of C.diff cases (SBU)</p>	Month	Number of cases	Oct-20	15	Nov-20	10	Dec-20	9	Jan-21	3	Feb-21	11	Mar-21	12	Apr-21	20	May-21	12	Jun-21	12	Jul-21	23	Aug-21	22	Sep-21	14	Oct-21	15
Month	Number of cases																													
Oct-20	15																													
Nov-20	10																													
Dec-20	9																													
Jan-21	3																													
Feb-21	11																													
Mar-21	12																													
Apr-21	20																													
May-21	12																													
Jun-21	12																													
Jul-21	23																													
Aug-21	22																													
Sep-21	14																													
Oct-21	15																													
Healthcare Acquired Infections (HCAI)- Klebsiella sp- <i>Number of laboratory confirmed Klebsiella sp cases</i>	<ul style="list-style-type: none">There were 13 cases of Klebsiella sp in October 2021, of which 8 were hospital acquired and 5 were community acquired.Cumulative cases from September 2021 to October 2021 are 2% higher than the equivalent period in 2020/21 (51 in 2021/22 compared with 50 in 2020/21).	<p>Number of healthcare acquired Klebsiella cases</p> <table><caption>Number of healthcare acquired Klebsiella cases (SBU)</caption><thead><tr><th>Month</th><th>Number of cases</th></tr></thead><tbody><tr><td>Oct-20</td><td>9</td></tr><tr><td>Nov-20</td><td>11</td></tr><tr><td>Dec-20</td><td>12</td></tr><tr><td>Jan-21</td><td>13</td></tr><tr><td>Feb-21</td><td>6</td></tr><tr><td>Mar-21</td><td>10</td></tr><tr><td>Apr-21</td><td>9</td></tr><tr><td>May-21</td><td>5</td></tr><tr><td>Jun-21</td><td>12</td></tr><tr><td>Jul-21</td><td>3</td></tr><tr><td>Aug-21</td><td>8</td></tr><tr><td>Sep-21</td><td>11</td></tr><tr><td>Oct-21</td><td>13</td></tr></tbody></table> <p>■ Number of Klebsiella cases (SBU)</p>	Month	Number of cases	Oct-20	9	Nov-20	11	Dec-20	12	Jan-21	13	Feb-21	6	Mar-21	10	Apr-21	9	May-21	5	Jun-21	12	Jul-21	3	Aug-21	8	Sep-21	11	Oct-21	13
Month	Number of cases																													
Oct-20	9																													
Nov-20	11																													
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Feb-21	6																													
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May-21	5																													
Jun-21	12																													
Jul-21	3																													
Aug-21	8																													
Sep-21	11																													
Oct-21	13																													

HEALTHCARE ACQUIRED INFECTIONS		
Description	Current Performance	Trend
Healthcare Acquired Infections (HCAI)- Aeruginosa- <i>Number of laboratory confirmed Aeruginosa cases</i>	<ul style="list-style-type: none"> There were no cases of <i>P.Aeruginosa</i> bacteraemia reported in October 2021. Cumulative cases from September 2021 to October 2021 are 58% less than the equivalent period in 2020/21. 	<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 <i>1. Total number of pressure ulcers developed in hospital and in the community</i> <i>2. Rate of pressure ulcers per 100,000 admissions</i>	<ul style="list-style-type: none"> In September 2021 there were 104 cases of healthcare acquired pressure ulcers, 39 of which were community acquired and 65 were hospital acquired. There were 7 grade 3+ pressure ulcers in September 2021, of which 6 were community acquired and 1 was hospital acquired. The rate per 100,000 admissions decreased from 853 in July 2021 to 767 in August 2021. 	<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)</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>	1. The Health Board reported 3 Serious Incidents for the month of October 2021 to Welsh Government. The breakdown of incidents in October 2021 are set out below: - Neath port Talbot – 1 - Singleton - 2	1. and 2. Number of serious incidents and never events  <table><caption>Number of Serious Incidents and Never Events</caption><thead><tr><th>Month</th><th>Number of Serious Incidents</th><th>Number of never events</th></tr></thead><tbody><tr><td>Oct-20</td><td>14</td><td>1</td></tr><tr><td>Nov-20</td><td>18</td><td>1</td></tr><tr><td>Dec-20</td><td>12</td><td>0</td></tr><tr><td>Jan-21</td><td>4</td><td>0</td></tr><tr><td>Feb-21</td><td>5</td><td>0</td></tr><tr><td>Mar-21</td><td>4</td><td>0</td></tr><tr><td>Apr-21</td><td>4</td><td>0</td></tr><tr><td>May-21</td><td>6</td><td>0</td></tr><tr><td>Jun-21</td><td>7</td><td>0</td></tr><tr><td>Jul-21</td><td>1</td><td>0</td></tr><tr><td>Aug-21</td><td>5</td><td>0</td></tr><tr><td>Sep-21</td><td>5</td><td>0</td></tr><tr><td>Oct-21</td><td>4</td><td>0</td></tr></tbody></table>	Month	Number of Serious Incidents	Number of never events	Oct-20	14	1	Nov-20	18	1	Dec-20	12	0	Jan-21	4	0	Feb-21	5	0	Mar-21	4	0	Apr-21	4	0	May-21	6	0	Jun-21	7	0	Jul-21	1	0	Aug-21	5	0	Sep-21	5	0	Oct-21	4	0
	Month	Number of Serious Incidents	Number of never events																																									
	Oct-20	14	1																																									
Nov-20	18	1																																										
Dec-20	12	0																																										
Jan-21	4	0																																										
Feb-21	5	0																																										
Mar-21	4	0																																										
Apr-21	4	0																																										
May-21	6	0																																										
Jun-21	7	0																																										
Jul-21	1	0																																										
Aug-21	5	0																																										
Sep-21	5	0																																										
Oct-21	4	0																																										
2. There were no new Never Event's reported in October 2021.																																												
3. In October 2021, performance against the 80% target of submitting closure forms within 60 working days was 0%.	3. % of serious incidents closed within 60 days  <table><caption>% of serious incidents closed within 60 days</caption><thead><tr><th>Month</th><th>% SI's assured</th><th>Target</th></tr></thead><tbody><tr><td>Oct-20</td><td>0%</td><td>80%</td></tr><tr><td>Nov-20</td><td>0%</td><td>80%</td></tr><tr><td>Dec-20</td><td>5%</td><td>80%</td></tr><tr><td>Jan-21</td><td>0%</td><td>80%</td></tr><tr><td>Feb-21</td><td>10%</td><td>80%</td></tr><tr><td>Mar-21</td><td>0%</td><td>80%</td></tr><tr><td>Apr-21</td><td>0%</td><td>80%</td></tr><tr><td>May-21</td><td>0%</td><td>80%</td></tr><tr><td>Jun-21</td><td>0%</td><td>80%</td></tr><tr><td>Jul-21</td><td>35%</td><td>80%</td></tr><tr><td>Aug-21</td><td>0%</td><td>80%</td></tr><tr><td>Sep-21</td><td>0%</td><td>80%</td></tr><tr><td>Oct-21</td><td>0%</td><td>80%</td></tr></tbody></table> <p><i>* 0% compliance in June, July, October and November 2020 and January, March, April, May and June 2021</i></p>	Month	% SI's assured	Target	Oct-20	0%	80%	Nov-20	0%	80%	Dec-20	5%	80%	Jan-21	0%	80%	Feb-21	10%	80%	Mar-21	0%	80%	Apr-21	0%	80%	May-21	0%	80%	Jun-21	0%	80%	Jul-21	35%	80%	Aug-21	0%	80%	Sep-21	0%	80%	Oct-21	0%	80%	
Month	% SI's assured	Target																																										
Oct-20	0%	80%																																										
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Oct-21	0%	80%																																										



















INPATIENT FALLS																														
Description	Current Performance	Trend																												
Inpatient Falls <i>The total number of inpatient falls</i>	<ul style="list-style-type: none">The number of Falls reported via Datix web for Swansea Bay UHB was 207 in September 2021. This is 5.8% less than September 2020 where 219 falls were recorded.	<p>Number of inpatient Falls</p> <table><caption>Number of inpatient Falls (Estimated Data)</caption><thead><tr><th>Month</th><th>Number of Falls</th></tr></thead><tbody><tr><td>Sep-20</td><td>219</td></tr><tr><td>Oct-20</td><td>190</td></tr><tr><td>Nov-20</td><td>245</td></tr><tr><td>Dec-20</td><td>245</td></tr><tr><td>Jan-21</td><td>205</td></tr><tr><td>Feb-21</td><td>180</td></tr><tr><td>Mar-21</td><td>170</td></tr><tr><td>Apr-21</td><td>175</td></tr><tr><td>May-21</td><td>225</td></tr><tr><td>Jun-21</td><td>175</td></tr><tr><td>Jul-21</td><td>195</td></tr><tr><td>Aug-21</td><td>200</td></tr><tr><td>Sep-21</td><td>207</td></tr></tbody></table> <p>■ Inpatient falls</p>	Month	Number of Falls	Sep-20	219	Oct-20	190	Nov-20	245	Dec-20	245	Jan-21	205	Feb-21	180	Mar-21	170	Apr-21	175	May-21	225	Jun-21	175	Jul-21	195	Aug-21	200	Sep-21	207
Month	Number of Falls																													
Sep-20	219																													
Oct-20	190																													
Nov-20	245																													
Dec-20	245																													
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


















DISCHARGE SUMMARIES																														
Description	Current Performance	Trend																												
Discharge Summaries <i>Percentage of discharge summaries approved and sent to patients' doctor following discharge</i>	The latest data shows that in October 2021, the percentage of completed discharge summaries was 61%.	<div><p>% discharge summaries approved and sent</p><table><thead><tr><th>Month</th><th>% of completed discharge summaries</th></tr></thead><tbody><tr><td>Oct-20</td><td>68%</td></tr><tr><td>Nov-20</td><td>65%</td></tr><tr><td>Dec-20</td><td>58%</td></tr><tr><td>Jan-21</td><td>66%</td></tr><tr><td>Feb-21</td><td>62%</td></tr><tr><td>Mar-21</td><td>63%</td></tr><tr><td>Apr-21</td><td>62%</td></tr><tr><td>May-21</td><td>66%</td></tr><tr><td>Jun-21</td><td>68%</td></tr><tr><td>Jul-21</td><td>61%</td></tr><tr><td>Aug-21</td><td>61%</td></tr><tr><td>Sep-21</td><td>67%</td></tr><tr><td>Oct-21</td><td>60%</td></tr></tbody></table><p>■ % of completed discharge summaries</p></div>	Month	% of completed discharge summaries	Oct-20	68%	Nov-20	65%	Dec-20	58%	Jan-21	66%	Feb-21	62%	Mar-21	63%	Apr-21	62%	May-21	66%	Jun-21	68%	Jul-21	61%	Aug-21	61%	Sep-21	67%	Oct-21	60%
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	In October 2021, compliance ranged from 56% in Singleton Hospital to 67% in Mental Health & Learning Disabilities.																													

CRUDE MORTALITY																																																																								
Description	Current Performance	Trend																																																																						
Crude Mortality Rate	September 2021 reports the crude mortality rate for the Health Board at 1.03% compared with 1.02% in August 2021.	Crude hospital mortality rate by Hospital (74 years of age or less) <table><caption>Crude hospital mortality rate by Hospital (74 years of age or less)</caption><thead><tr><th>Month</th><th>Morrison Hospital</th><th>Singleton Hospital</th><th>NPT Hospital</th><th>HB Total</th></tr></thead><tbody><tr><td>Sep-20</td><td>1.5%</td><td>0.4%</td><td>0.2%</td><td>0.8%</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>0.6%</td><td>0.2%</td><td>1.1%</td></tr><tr><td>Feb-21</td><td>2.0%</td><td>0.6%</td><td>0.1%</td><td>1.1%</td></tr><tr><td>Mar-21</td><td>1.8%</td><td>0.5%</td><td>0.1%</td><td>1.0%</td></tr><tr><td>Apr-21</td><td>1.7%</td><td>0.5%</td><td>0.1%</td><td>1.0%</td></tr><tr><td>May-21</td><td>1.7%</td><td>0.5%</td><td>0.1%</td><td>1.0%</td></tr><tr><td>Jun-21</td><td>1.7%</td><td>0.5%</td><td>0.1%</td><td>1.0%</td></tr><tr><td>Jul-21</td><td>1.7%</td><td>0.5%</td><td>0.1%</td><td>1.0%</td></tr><tr><td>Aug-21</td><td>1.7%</td><td>0.5%</td><td>0.1%</td><td>1.0%</td></tr><tr><td>Sep-21</td><td>1.7%</td><td>0.5%</td><td>0.1%</td><td>1.0%</td></tr></tbody></table>	Month	Morrison Hospital	Singleton Hospital	NPT Hospital	HB Total	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%	0.6%	0.2%	1.1%	Feb-21	2.0%	0.6%	0.1%	1.1%	Mar-21	1.8%	0.5%	0.1%	1.0%	Apr-21	1.7%	0.5%	0.1%	1.0%	May-21	1.7%	0.5%	0.1%	1.0%	Jun-21	1.7%	0.5%	0.1%	1.0%	Jul-21	1.7%	0.5%	0.1%	1.0%	Aug-21	1.7%	0.5%	0.1%	1.0%	Sep-21	1.7%	0.5%	0.1%	1.0%
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	A breakdown by Hospital for September 2021: <ul style="list-style-type: none">Morrison – 1.72%Singleton – 0.53%NPT – 0.11%																																																																							

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												
					Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21
		Cancer															
Single Cancer Pathway- % of patients started treatment within 62 days (without suspensions)	Total	12 month improvement trend			65.9%	55.4%	61.0%	67.9%	56.4%	71.6%	65.7%	60.0%	66.8%	55.0%	58.4%	62.2%	50.0%
		Planned Care															
Number of patients waiting > 26 weeks for outpatient appointment*	Morriston	0			12,617	12,306	12,543	12,487	12,479	12,870	13,398	14,047	13,867	14,080	14,661	15,092	15,906
	NPTH				129	75	49	61	111	73	92	157	228	271	335	407	378
	Singleton				9,073	8,394	8,336	8,427	8,414	8,575	9,027	9,327	9,053	8,769	8,383	8,447	8,162
	PC&CS				231	230	251	233	221	232	235	169	131	105	65	51	37
	Total				22,050	21,005	21,179	21,208	21,225	21,750	22,752	23,700	23,279	23,225	23,444	23,997	24,483
Number of patients waiting > 36 weeks for treatment*	Morriston	0			20,035	22,298	22,391	21,695	21,199	21,228	21,579	22,095	22,414	22,968	23,364	23,214	23,874
	NPTH				33	48	42	41	43	45	46	45	57	98	167	189	191
	Singleton				10,514	11,865	11,629	11,385	10,788	10,942	11,134	11,727	12,022	11,980	11,920	11,764	11,841
	PC&CS				153	220	247	219	204	196	181	115	119	82	53	43	35
	Total (inc. diagnostics > 36 wks)				31,508	35,387	35,126	33,991	32,719	32,874	33,395	34,447	35,040	35,583	35,999	35,711	36,420
Number of patients waiting > 8 weeks for a specified diagnostics*	Morriston	0			4,564	4,559	4,361	3,938	2,978	2,517	2,757	2,739	3,162	3,390	3,573	3,528	3,320
	Singleton				2,081	2,051	2,218	2,301	2,109	2,037	2,047	2,103	2,068	2,035	1,950	2,204	2,619
	Total				6,645	6,610	6,579	6,239	5,087	4,554	4,804	4,842	5,230	5,425	5,523	5,732	5,939
Number of patients waiting > 14 weeks for a specified therapy*	MH&LD	0			0	0	0	0	0	0	0	1	0	0	0	0	0
	NPTH				110	99	93	127	129	60	18	8	15	0	0	0	0
	PC&CS				1,025	718	615	457	362	309	183	157	156	0	0	0	0
	Total				1,135	817	708	584	491	369	201	166	171	0	0	0	0

Measure	Locality	National/ Local Target	Internal profile	Trend	SBU													
					Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	
		Planned Care																
Total number of patients waiting for a follow-up outpatient appointment *	Total	HB Target TBC			120,968	120,874	119,963	119,999	120,882	121,403	122,303	123,088	127,444	130,208	127,391	130,963	131,554	
Number of patients delayed by over 100% past their target date *	Total				26,217	27,156	27,641	28,419	28,862	29,316	29,334	30,062	30,550	31,316	29,770	32,574	33,121	
Number of patients delayed past their agreed target date (booked and not booked) *	Total				57,380	56,647	56,210	57,297	57,458	55,944	55,086	54,664	55,254	60,618	54,993	60,340	60,447	
Number of Ophthalmology patients without an allocated health risk factor	Total	0			780	464	326	212	281	294	614	326	486	539	628	702	413	
Number of patients without a documented clinical review date	Total	0			43	55	90	32	25	14	9	5	6	5	6	7	3	
		Patient Experience/ Feedback																
Number of friends and family surveys completed	PCCS	12 month improvement trend			208	231	84	144	97	255		159	532	79	245	213	89	
	MH&LD				48	82	56	22	8	11		3	0	0	59	18	10	
	Morrison				269	155	152	168	211	326		1,330	934	699	642	995	941	
	NPTH				40	24	18	43	31	16			0	0	0	0	0	
	Singleton				530	377	330	323	459	453		3,098	1,808	1,029	1,106	1,452	1,118	
	Total				1,047	787	584	678	798	1,050		4,590	3,297	1,912	2,075	2,025	2,733	
% of patients who would recommend and highly recommend	PCCS	90%	80%		65%	80%	62%	76%	77%	90%		100%	100%	89%	94%	90%	90%	
	MH&LD				19%	41%	21%	36%	88%	73%		100%	0%	0%	93%	94%	90%	
	Morrison				82%	86%	70%	76%	82%	86%		96%	97%	93%	92%	93%	92%	
	NPTH				90%	75%	67%	58%	32%	75%			0%	0%	0%	0%	0%	
	Singleton				88%	87%	85%	85%	92%	87%		97%	97%	91%	92%	90%	92%	
	Total				82%	84%	77%	79%	85%	87%		96%	97%	92%	92%	92%	92%	
% of all-Wales surveys scoring 9 or 10 on overall satisfaction	PCCS	90%	80%		100%	80%	67%	90%	100%	100%		100%	-		95%	92%	94%	
	MH&LD				100%	-	-	-	-	50%		0%	0%		0%	0%	0%	
	Morrison				58%	100%	33%	80%	71%	90%		93%	97%		96%	96%	94%	
	NPTH				100%	-	67%	67%	100%	100%			0%		0%	0%	0%	
	Singleton				90%	86%	80%	77%	95%	92%		93%	97%		95%	96%	95%	
	Total				79%	85%	65%	81%	94%	93%		92%	96%		92%	96%	93%	
Number of new complaints received	PCCS	12 month reduction rend			22	24	24	9	10	22	8	16	16	18	8	0	0	
	MH&LD				20	13	6	11	15	10	26	15	19	24	13	0	0	
	Morrison				44	40	38	33	40	50	23	53	69	51	50	0	0	
	NPTH				6	7	1	7	6	7	4	3	10	6	6	0	0	
	Singleton				25	20	20	15	20	24	24	23	31	28	32	0	0	
	Total				121	103	83	78	94	117	100	115	159	139	115	0	0	
% of complaints that have received a final reply (under Regulation 24) or an interim reply (under Regulation 26) up to and including 30 working days from the date the complaint was first received by the organisation	PCCS	75%	80%		67%	76%	77%	63%	67%	67%								
	MH&LD				70%	92%	75%	73%	64%	67%								
	Morrison				86%	89%	91%	81%	95%	92%								
	NPTH				67%	86%	0%	57%	67%	100%								
	Singleton				64%	70%	70%	57%	68%	67%								
	Total				75%	82%	80%	71%	80%	81%								

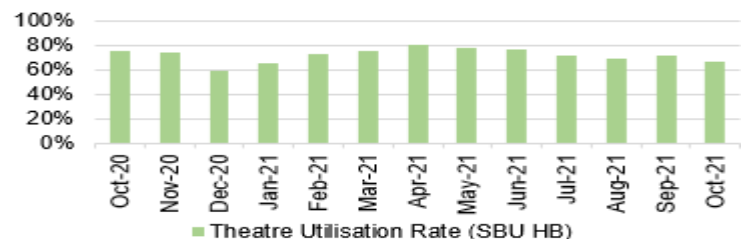
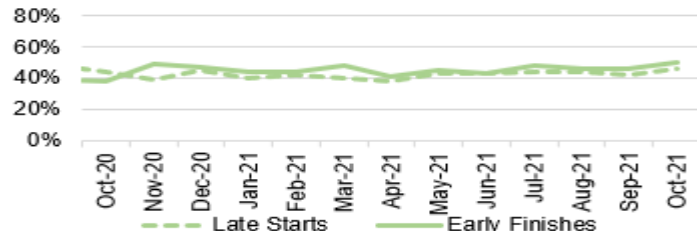
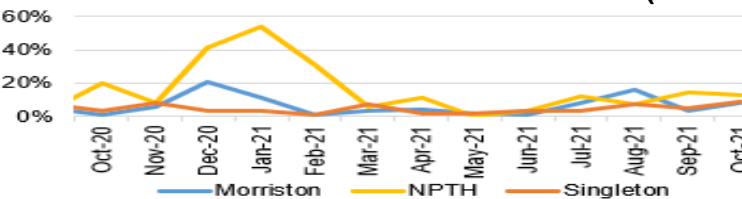
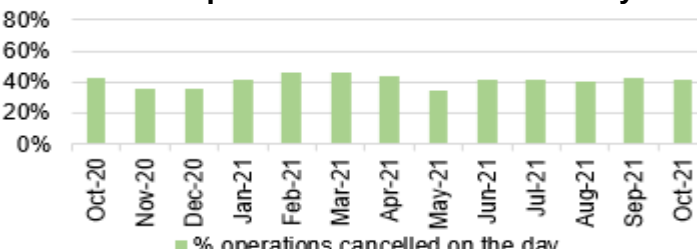
5.2 Updates on key measures

PLANNED CARE	
Description	Current Performance
Referrals and shape of the waiting list 1. GP Referrals <i>The number of Stage 1 additions per week</i> 2. Stage 1 additions <i>The number of new patients that have been added to the outpatient waiting list</i> 3. Size of the waiting list <i>Total number of patients on the waiting list by stage as at December 2019</i> 4. Size of the waiting list <i>Total number of patients on the waiting list by stage as at October 2021</i>	<p>The number of GP referrals and additions to the outpatient waiting list has increased each month since May 2020, this is reflected in the reduction in the size of the waiting list in April 2020 and subsequent increase every month since May 2020. October 2021 has seen a decrease in referral figures. Since September 2020 the number of referrals and additions appeared to stabilise but then started to increase again from January 2021. Chart 4 shows the shape of the current waiting list, there are currently 8,200 patients waiting over 104 weeks at all stages. Chart 3 shows the waiting list as at December 2019 as this reflects a typical monthly snapshot of the waiting list prior to the COVID19 pandemic.</p> <p>Trend</p> <div> <div> 1. Number of GP referrals received by SBU Health Board </div> <div> 2. Number of stage 1 additions per week </div> <div> 3. Total size of the waiting list and movement (December 2019) </div> <div> 4. Total size of the waiting list and movement </div> </div>

PLANNED CARE	
Description	Current Performance
Outpatient waiting times 1. Number of patients waiting more than 26 weeks for an outpatient appointment (stage 1)- Health Board Total 2. Number of patients waiting more than 26 weeks for an outpatient appointment (stage 1)- Hospital Level 3. Patients waiting over 26 weeks for an outpatient appointment by specialty 4. Outpatient activity undertaken	<p>The number of patients waiting over 26 weeks for a first outpatient appointment is still a challenge. October 2021 saw an in-month increase in the number of patients waiting over 26 weeks for an outpatient appointment. The number of breaches increased from 23,997 in September 2021 to 24,483 in October 2021. Ophthalmology has the largest proportion of patients waiting over 26 weeks for an outpatient appointment closely followed by Orthopaedics and ENT. The number of outpatient attendances has significantly reduced since February 2020 due to COVID19. Chart 4 shows that the number of attendances started to increase from April 2021 and is now remaining steady.</p> <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 — PCT — NPTH</p> </div> <div> <p>3. Patients waiting over 26 weeks for an outpatient appointment by specialty as at September 2021</p> </div> <div> <p>4. Outpatient activity undertaken</p> <p>— New outpatient attendances -- Follow-up attendances</p> </div> </div> <p>**Please note – reporting measures changed from June 2021 – Using power BI platform</p>

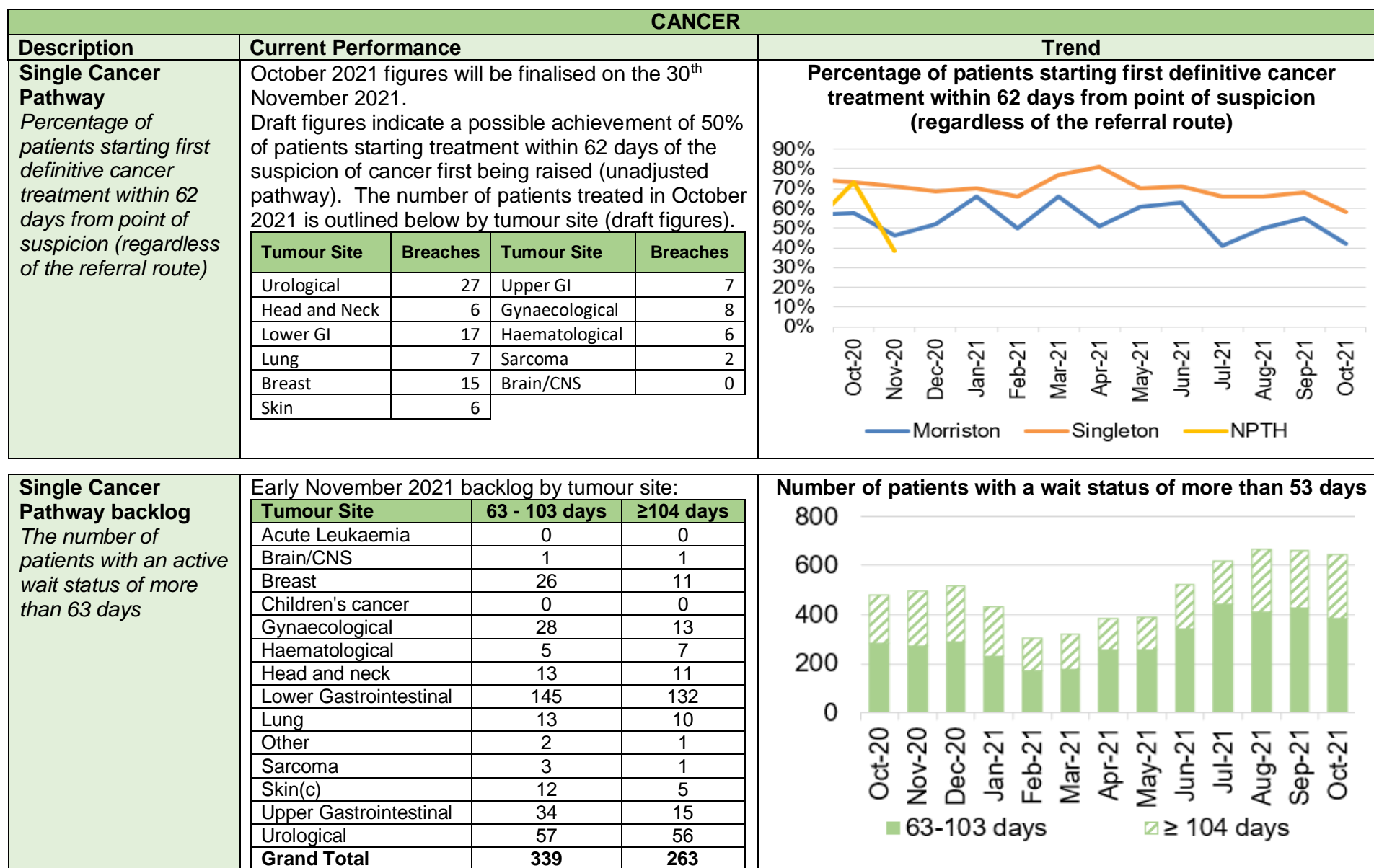
PLANNED CARE																																																																																																																														
Description	Current Performance																																																																																																																													
Patients waiting over 36 weeks for treatment 1. Number of patients waiting more than 36 weeks for treatment and the number of elective patients admitted for treatment- Health Board Total 2. Number of patients waiting more than 36 weeks for treatment and the number of elective patients admitted for treatment- Hospital level 3. Number of elective admissions	<p>The number of patients waiting longer than 36 weeks from referral to treatment has increased every month since the first wave of COVID19 in March 2020. December 2020 was the first month in 2020 that saw an in-month reduction and this trend continued into January and February 2021 however, the number of breaches increased again from March 2021. In October 2021, there was 36,420 patients waiting over 36 weeks which is a 2% in-month increase from September 2021. 27,495 of the 36,420 were waiting over 52 weeks in October 2021.</p>																																																																																																																													
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	<div><div><h3>1. Number of patients waiting over 36 weeks- HB total</h3><table><thead><tr><th>Month</th><th>Patients</th></tr></thead><tbody><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>32,000</td></tr><tr><td>Apr-21</td><td>33,000</td></tr><tr><td>May-21</td><td>33,000</td></tr><tr><td>Jun-21</td><td>34,000</td></tr><tr><td>Jul-21</td><td>34,000</td></tr><tr><td>Aug-21</td><td>35,000</td></tr><tr><td>Sep-21</td><td>35,000</td></tr><tr><td>Oct-21</td><td>36,420</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><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>PCT</th><th>NPTH</th></tr></thead><tbody><tr><td>Oct-20</td><td>18,000</td><td>10,000</td><td>2,000</td><td>1,000</td></tr><tr><td>Nov-20</td><td>22,000</td><td>12,000</td><td>2,000</td><td>1,000</td></tr><tr><td>Dec-20</td><td>22,000</td><td>11,000</td><td>2,000</td><td>1,000</td></tr><tr><td>Jan-21</td><td>21,000</td><td>11,000</td><td>2,000</td><td>1,000</td></tr><tr><td>Feb-21</td><td>21,000</td><td>11,000</td><td>2,000</td><td>1,000</td></tr><tr><td>Mar-21</td><td>21,000</td><td>11,000</td><td>2,000</td><td>1,000</td></tr><tr><td>Apr-21</td><td>22,000</td><td>12,000</td><td>2,000</td><td>1,000</td></tr><tr><td>May-21</td><td>22,000</td><td>12,000</td><td>2,000</td><td>1,000</td></tr><tr><td>Jun-21</td><td>23,000</td><td>12,000</td><td>2,000</td><td>1,000</td></tr><tr><td>Jul-21</td><td>23,000</td><td>12,000</td><td>2,000</td><td>1,000</td></tr><tr><td>Aug-21</td><td>23,000</td><td>12,000</td><td>2,000</td><td>1,000</td></tr><tr><td>Sep-21</td><td>23,000</td><td>12,000</td><td>2,000</td><td>1,000</td></tr><tr><td>Oct-21</td><td>24,000</td><td>12,000</td><td>2,000</td><td>1,000</td></tr></tbody></table><p>— Morriston — Singleton — PCT — NPTH</p></div><div><h3>3. Number of elective admissions</h3><table><thead><tr><th>Month</th><th>Admitted elective patients</th></tr></thead><tbody><tr><td>Oct-20</td><td>3,500</td></tr><tr><td>Nov-20</td><td>3,200</td></tr><tr><td>Dec-20</td><td>3,100</td></tr><tr><td>Jan-21</td><td>3,500</td></tr><tr><td>Feb-21</td><td>3,500</td></tr><tr><td>Mar-21</td><td>4,200</td></tr><tr><td>Apr-21</td><td>3,800</td></tr><tr><td>May-21</td><td>4,200</td></tr><tr><td>Jun-21</td><td>5,500</td></tr><tr><td>Jul-21</td><td>5,200</td></tr><tr><td>Aug-21</td><td>4,200</td></tr><tr><td>Sep-21</td><td>4,000</td></tr><tr><td>Oct-21</td><td>3,800</td></tr></tbody></table><p>— Admitted elective patients</p></div></div>	Month	Patients	Oct-20	30,000	Nov-20	35,000	Dec-20	34,000	Jan-21	33,000	Feb-21	32,000	Mar-21	32,000	Apr-21	33,000	May-21	33,000	Jun-21	34,000	Jul-21	34,000	Aug-21	35,000	Sep-21	35,000	Oct-21	36,420	Month	Morriston	Singleton	PCT	NPTH	Oct-20	18,000	10,000	2,000	1,000	Nov-20	22,000	12,000	2,000	1,000	Dec-20	22,000	11,000	2,000	1,000	Jan-21	21,000	11,000	2,000	1,000	Feb-21	21,000	11,000	2,000	1,000	Mar-21	21,000	11,000	2,000	1,000	Apr-21	22,000	12,000	2,000	1,000	May-21	22,000	12,000	2,000	1,000	Jun-21	23,000	12,000	2,000	1,000	Jul-21	23,000	12,000	2,000	1,000	Aug-21	23,000	12,000	2,000	1,000	Sep-21	23,000	12,000	2,000	1,000	Oct-21	24,000	12,000	2,000	1,000	Month	Admitted elective patients	Oct-20	3,500	Nov-20	3,200	Dec-20	3,100	Jan-21	3,500	Feb-21	3,500	Mar-21	4,200	Apr-21	3,800	May-21	4,200	Jun-21	5,500	Jul-21	5,200	Aug-21	4,200	Sep-21	4,000	Oct-21
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Total waiting times <i>Percentage of patients waiting less than 26 weeks from referral to treatment</i>	<p>Throughout 2019/20 the overall percentage of patients waiting less than 26 weeks from referral to treatment ranged between 80% and 88%. Whereas, throughout the Covid19 pandemic in 2020/21 the percentage ranged between 41% and 72%.</p> <p>In October 2021, 47.4% of patients were waiting under 26 weeks from referral to treatment, which is a reduction from September 2021.</p>	<p>Percentage of patient waiting less than 26 weeks</p> <table><caption>Estimated data for Percentage of patient waiting less than 26 weeks</caption><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>PCT</th><th>NPTH</th></tr></thead><tbody><tr><td>Oct-20</td><td>35%</td><td>45%</td><td>30%</td><td>80%</td></tr><tr><td>Nov-20</td><td>40%</td><td>48%</td><td>40%</td><td>90%</td></tr><tr><td>Dec-20</td><td>40%</td><td>48%</td><td>40%</td><td>90%</td></tr><tr><td>Jan-21</td><td>40%</td><td>48%</td><td>40%</td><td>88%</td></tr><tr><td>Feb-21</td><td>40%</td><td>48%</td><td>40%</td><td>85%</td></tr><tr><td>Mar-21</td><td>40%</td><td>48%</td><td>40%</td><td>88%</td></tr><tr><td>Apr-21</td><td>40%</td><td>48%</td><td>40%</td><td>88%</td></tr><tr><td>May-21</td><td>40%</td><td>48%</td><td>40%</td><td>85%</td></tr><tr><td>Jun-21</td><td>40%</td><td>48%</td><td>40%</td><td>82%</td></tr><tr><td>Jul-21</td><td>40%</td><td>48%</td><td>40%</td><td>80%</td></tr><tr><td>Aug-21</td><td>40%</td><td>48%</td><td>40%</td><td>78%</td></tr><tr><td>Sep-21</td><td>40%</td><td>48%</td><td>40%</td><td>75%</td></tr><tr><td>Oct-21</td><td>40%</td><td>48%</td><td>40%</td><td>75%</td></tr></tbody></table>	Month	Morriston	Singleton	PCT	NPTH	Oct-20	35%	45%	30%	80%	Nov-20	40%	48%	40%	90%	Dec-20	40%	48%	40%	90%	Jan-21	40%	48%	40%	88%	Feb-21	40%	48%	40%	85%	Mar-21	40%	48%	40%	88%	Apr-21	40%	48%	40%	88%	May-21	40%	48%	40%	85%	Jun-21	40%	48%	40%	82%	Jul-21	40%	48%	40%	80%	Aug-21	40%	48%	40%	78%	Sep-21	40%	48%	40%	75%	Oct-21	40%	48%	40%	75%
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Ophthalmology waiting times <i>Percentage of ophthalmology R1 patients who are waiting within their clinical target date or within 25% in excess of their clinical target date for their care or treatments</i>	<p>In October 2021, 48.6% of Ophthalmology R1 patients were waiting within their clinical target date or within 25% of the target date.</p> <p>There was an upward trend in performance in 2019/20 however, there was a continuous downward trend in performance in 2020/21, however performance seems to be improving slightly in 2021/22.</p>	<p>Percentage of ophthalmology R1 patients who are waiting within their clinical target date or within 25% in excess of their clinical target date for their care or treatments</p> <table><caption>Estimated data for Percentage of ophthalmology R1 patients waiting within target date or within 25% in excess of their clinical target date</caption><thead><tr><th>Month</th><th>% of R1 ophthalmology patient pathways waiting within target date or within 25% beyond target date for an outpatient appointment</th><th>Target</th></tr></thead><tbody><tr><td>Oct-20</td><td>45%</td><td>100%</td></tr><tr><td>Nov-20</td><td>48%</td><td>100%</td></tr><tr><td>Dec-20</td><td>48%</td><td>100%</td></tr><tr><td>Jan-21</td><td>48%</td><td>100%</td></tr><tr><td>Feb-21</td><td>48%</td><td>100%</td></tr><tr><td>Mar-21</td><td>48%</td><td>100%</td></tr><tr><td>Apr-21</td><td>48%</td><td>100%</td></tr><tr><td>May-21</td><td>48%</td><td>100%</td></tr><tr><td>Jun-21</td><td>48%</td><td>100%</td></tr><tr><td>Jul-21</td><td>48%</td><td>100%</td></tr><tr><td>Aug-21</td><td>48%</td><td>100%</td></tr><tr><td>Sep-21</td><td>48%</td><td>100%</td></tr><tr><td>Oct-21</td><td>48.6%</td><td>100%</td></tr></tbody></table>	Month	% of R1 ophthalmology patient pathways waiting within target date or within 25% beyond target date for an outpatient appointment	Target	Oct-20	45%	100%	Nov-20	48%	100%	Dec-20	48%	100%	Jan-21	48%	100%	Feb-21	48%	100%	Mar-21	48%	100%	Apr-21	48%	100%	May-21	48%	100%	Jun-21	48%	100%	Jul-21	48%	100%	Aug-21	48%	100%	Sep-21	48%	100%	Oct-21	48.6%	100%																												
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Theatre Efficiency <i>1. Theatre Utilisation Rates</i> <i>2. % of theatre sessions starting late</i> <i>3. % of theatre sessions finishing early</i> <i>4. % of theatre sessions cancelled at short notice (<28 days)</i> <i>5. % of operations cancelled on the day</i>	<p>In October 2021 the Theatre Utilisation rate was 66%. This is an in-month reduction of 6% and a 9% decrease compared to October 2020.</p>	<p>1. Theatre Utilisation Rates</p>  <table><caption>Theatre Utilisation Rate (SBU HB)</caption><thead><tr><th>Month</th><th>Utilisation Rate (%)</th></tr></thead><tbody><tr><td>Oct-20</td><td>75</td></tr><tr><td>Nov-20</td><td>75</td></tr><tr><td>Dec-20</td><td>60</td></tr><tr><td>Jan-21</td><td>65</td></tr><tr><td>Feb-21</td><td>70</td></tr><tr><td>Mar-21</td><td>75</td></tr><tr><td>Apr-21</td><td>80</td></tr><tr><td>May-21</td><td>78</td></tr><tr><td>Jun-21</td><td>75</td></tr><tr><td>Jul-21</td><td>70</td></tr><tr><td>Aug-21</td><td>68</td></tr><tr><td>Sep-21</td><td>70</td></tr><tr><td>Oct-21</td><td>66</td></tr></tbody></table>	Month	Utilisation Rate (%)	Oct-20	75	Nov-20	75	Dec-20	60	Jan-21	65	Feb-21	70	Mar-21	75	Apr-21	80	May-21	78	Jun-21	75	Jul-21	70	Aug-21	68	Sep-21	70	Oct-21	66																											
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<p>In October 2021, 50% of theatre sessions finished early. This is 4% higher than figures seen in September 2021 but is 12% more than in October 2020.</p>	<p>4. % theatre sessions cancelled at short notice (<28 days)</p>  <table><caption>% theatre sessions cancelled at short notice (<28 days)</caption><thead><tr><th>Month</th><th>Morriston (%)</th><th>NPTH (%)</th><th>Singleton (%)</th></tr></thead><tbody><tr><td>Oct-20</td><td>10</td><td>15</td><td>5</td></tr><tr><td>Nov-20</td><td>10</td><td>10</td><td>5</td></tr><tr><td>Dec-20</td><td>20</td><td>40</td><td>5</td></tr><tr><td>Jan-21</td><td>10</td><td>55</td><td>5</td></tr><tr><td>Feb-21</td><td>10</td><td>10</td><td>5</td></tr><tr><td>Mar-21</td><td>10</td><td>10</td><td>5</td></tr><tr><td>Apr-21</td><td>10</td><td>10</td><td>5</td></tr><tr><td>May-21</td><td>10</td><td>10</td><td>5</td></tr><tr><td>Jun-21</td><td>10</td><td>10</td><td>5</td></tr><tr><td>Jul-21</td><td>10</td><td>10</td><td>5</td></tr><tr><td>Aug-21</td><td>10</td><td>10</td><td>5</td></tr><tr><td>Sep-21</td><td>10</td><td>10</td><td>5</td></tr><tr><td>Oct-21</td><td>10</td><td>10</td><td>5</td></tr></tbody></table>	Month	Morriston (%)	NPTH (%)	Singleton (%)	Oct-20	10	15	5	Nov-20	10	10	5	Dec-20	20	40	5	Jan-21	10	55	5	Feb-21	10	10	5	Mar-21	10	10	5	Apr-21	10	10	5	May-21	10	10	5	Jun-21	10	10	5	Jul-21	10	10	5	Aug-21	10	10	5	Sep-21	10	10	5	Oct-21	10	10	5
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<p>9% of theatre sessions were cancelled at short notice in October 2021. This is an increase of 3% from September 2021 and is 5% more than in September 2020.</p>	<p>5. % of operations cancelled on the day</p>  <table><caption>% of operations cancelled on the day</caption><thead><tr><th>Month</th><th>% operations cancelled on the day (%)</th></tr></thead><tbody><tr><td>Oct-20</td><td>40</td></tr><tr><td>Nov-20</td><td>35</td></tr><tr><td>Dec-20</td><td>35</td></tr><tr><td>Jan-21</td><td>40</td></tr><tr><td>Feb-21</td><td>45</td></tr><tr><td>Mar-21</td><td>45</td></tr><tr><td>Apr-21</td><td>45</td></tr><tr><td>May-21</td><td>35</td></tr><tr><td>Jun-21</td><td>40</td></tr><tr><td>Jul-21</td><td>40</td></tr><tr><td>Aug-21</td><td>40</td></tr><tr><td>Sep-21</td><td>40</td></tr><tr><td>Oct-21</td><td>40</td></tr></tbody></table>	Month	% operations cancelled on the day (%)	Oct-20	40	Nov-20	35	Dec-20	35	Jan-21	40	Feb-21	45	Mar-21	45	Apr-21	45	May-21	35	Jun-21	40	Jul-21	40	Aug-21	40	Sep-21	40	Oct-21	40																												
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<p>Of the operations cancelled in October 2021, 42% of them were cancelled on the day. This is a reduction from 43% in September 2021 and a 1% reduction from October 2020.</p>																																																									

PLANNED CARE																																																																																																																		
Description	Current Performance	Trend																																																																																																																
Diagnostics waiting times <i>The number of patients waiting more than 8 weeks for specified diagnostics</i>	<p>In October 2021, there was an increase in the number of patients waiting over 8 weeks for specified diagnostics. It increased from 5,732 in September 2021 to 5,939 in October 2021.</p> <p>The following is a breakdown for the 8-week breaches by diagnostic test for October 2021:</p> <ul style="list-style-type: none">• Endoscopy= 2,635• Cardiac tests= 1,744• Cystoscopy= 16	<p>Number of patients waiting longer than 8 weeks for diagnostics</p> <table><caption>Approximate data for 8-week breaches (from chart)</caption><thead><tr><th>Month</th><th>Cardiac tests</th><th>Endoscopy</th><th>Other diagnostics (inc. radiology)</th></tr></thead><tbody><tr><td>Oct-20</td><td>1,800</td><td>2,100</td><td>3,100</td></tr><tr><td>Nov-20</td><td>1,800</td><td>2,100</td><td>3,100</td></tr><tr><td>Dec-20</td><td>1,800</td><td>2,200</td><td>2,800</td></tr><tr><td>Jan-21</td><td>1,500</td><td>2,300</td><td>2,500</td></tr><tr><td>Feb-21</td><td>1,500</td><td>2,200</td><td>1,500</td></tr><tr><td>Mar-21</td><td>1,300</td><td>2,100</td><td>1,200</td></tr><tr><td>Apr-21</td><td>1,500</td><td>2,100</td><td>1,300</td></tr><tr><td>May-21</td><td>1,600</td><td>2,200</td><td>1,200</td></tr><tr><td>Jun-21</td><td>1,800</td><td>2,100</td><td>1,400</td></tr><tr><td>Jul-21</td><td>2,000</td><td>2,000</td><td>1,400</td></tr><tr><td>Aug-21</td><td>1,900</td><td>1,900</td><td>1,600</td></tr><tr><td>Sep-21</td><td>2,000</td><td>2,100</td><td>1,500</td></tr><tr><td>Oct-21</td><td>1,744</td><td>2,635</td><td>1,600</td></tr></tbody></table>	Month	Cardiac tests	Endoscopy	Other diagnostics (inc. radiology)	Oct-20	1,800	2,100	3,100	Nov-20	1,800	2,100	3,100	Dec-20	1,800	2,200	2,800	Jan-21	1,500	2,300	2,500	Feb-21	1,500	2,200	1,500	Mar-21	1,300	2,100	1,200	Apr-21	1,500	2,100	1,300	May-21	1,600	2,200	1,200	Jun-21	1,800	2,100	1,400	Jul-21	2,000	2,000	1,400	Aug-21	1,900	1,900	1,600	Sep-21	2,000	2,100	1,500	Oct-21	1,744	2,635	1,600																																																								
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Therapy waiting times <i>The number of patients waiting more than 14 weeks for specified therapies</i>	<p>In October 2021 there were 414 patients waiting over 14 weeks for specified Therapies.</p> <p>The breakdown for the breaches in October 2021 are:</p> <ul style="list-style-type: none">• Speech & Language Therapy= 229• Podiatry = 156• Dietetics = 25	<p>Number of patients waiting longer than 14 weeks for therapies</p> <table><caption>Approximate data for 14-week breaches (from chart)</caption><thead><tr><th>Month</th><th>Speech & Language</th><th>Podiatry</th><th>Dietetics</th><th>Phsyio</th><th>Audiology</th><th>Occ Therapy/ LD (MH)</th><th>Occ Therapy (exc. MH)</th></tr></thead><tbody><tr><td>Oct-20</td><td>100</td><td>100</td><td>20</td><td>0</td><td>100</td><td>100</td><td>0</td></tr><tr><td>Nov-20</td><td>80</td><td>80</td><td>20</td><td>0</td><td>80</td><td>80</td><td>0</td></tr><tr><td>Dec-20</td><td>70</td><td>70</td><td>20</td><td>0</td><td>70</td><td>70</td><td>0</td></tr><tr><td>Jan-21</td><td>60</td><td>60</td><td>20</td><td>0</td><td>60</td><td>60</td><td>0</td></tr><tr><td>Feb-21</td><td>50</td><td>50</td><td>20</td><td>0</td><td>50</td><td>50</td><td>0</td></tr><tr><td>Mar-21</td><td>40</td><td>40</td><td>20</td><td>0</td><td>40</td><td>40</td><td>0</td></tr><tr><td>Apr-21</td><td>30</td><td>30</td><td>20</td><td>0</td><td>30</td><td>30</td><td>0</td></tr><tr><td>May-21</td><td>20</td><td>20</td><td>20</td><td>0</td><td>20</td><td>20</td><td>0</td></tr><tr><td>Jun-21</td><td>20</td><td>20</td><td>20</td><td>0</td><td>20</td><td>20</td><td>0</td></tr><tr><td>Jul-21</td><td>20</td><td>20</td><td>20</td><td>0</td><td>20</td><td>20</td><td>0</td></tr><tr><td>Aug-21</td><td>20</td><td>20</td><td>20</td><td>0</td><td>20</td><td>20</td><td>0</td></tr><tr><td>Sep-21</td><td>20</td><td>20</td><td>20</td><td>0</td><td>20</td><td>20</td><td>0</td></tr><tr><td>Oct-21</td><td>229</td><td>156</td><td>25</td><td>0</td><td>20</td><td>20</td><td>0</td></tr></tbody></table>	Month	Speech & Language	Podiatry	Dietetics	Phsyio	Audiology	Occ Therapy/ LD (MH)	Occ Therapy (exc. MH)	Oct-20	100	100	20	0	100	100	0	Nov-20	80	80	20	0	80	80	0	Dec-20	70	70	20	0	70	70	0	Jan-21	60	60	20	0	60	60	0	Feb-21	50	50	20	0	50	50	0	Mar-21	40	40	20	0	40	40	0	Apr-21	30	30	20	0	30	30	0	May-21	20	20	20	0	20	20	0	Jun-21	20	20	20	0	20	20	0	Jul-21	20	20	20	0	20	20	0	Aug-21	20	20	20	0	20	20	0	Sep-21	20	20	20	0	20	20	0	Oct-21	229	156	25	0	20	20	0
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Cancer demand and shape of the waiting list 1. Number of Urgent Suspected Cancer (USC) referrals received	<p>The number of Urgent Suspected Cancer (USC) referrals significantly reduced between March and April 2020, however there has been an upward trend since May 2020.</p> <p>The shape of the waiting list shows that there is a significant “wave” of patients that are likely to breach in the near future, there is also an increased number of referrals being received in comparison with previous years.</p>	<p>1. Number of USC referrals</p> <table border="1"><thead><tr><th>Month</th><th>Referrals</th></tr></thead><tbody><tr><td>Dec-20</td><td>1340</td></tr><tr><td>Jan-21</td><td>1475</td></tr><tr><td>Feb-21</td><td>1594</td></tr><tr><td>Mar-21</td><td>1932</td></tr><tr><td>Apr-21</td><td>1880</td></tr><tr><td>May-21</td><td>1869</td></tr><tr><td>Jun-21</td><td>2013</td></tr><tr><td>Jul-21</td><td>2062</td></tr><tr><td>Aug-21</td><td>1719</td></tr><tr><td>Sep-21</td><td>1980</td></tr><tr><td>Oct-21</td><td>1721</td></tr></tbody></table>	Month	Referrals	Dec-20	1340	Jan-21	1475	Feb-21	1594	Mar-21	1932	Apr-21	1880	May-21	1869	Jun-21	2013	Jul-21	2062	Aug-21	1719	Sep-21	1980	Oct-21	1721																																																																																																																																																																																																																																																																																																																												
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2. Source of suspicion for patients on Single Cancer Pathway (SCP)	<p>Gastroenterology referrals are assigned to the tumour site ‘Other’ on receipt of referral, where possible this is refined to Upper or Lower GI as investigations are initiated and the suspected tumour site becomes clearer to trackers.</p>	<p>2. Source of suspicion for patients starting cancer treatment</p> <table border="1"><thead><tr><th>Month</th><th>Other healthcare professional</th><th>Consultant Internal</th><th>Other screening</th><th>Screening - Bowel Screening Wales</th><th>A&E/Med Assess/ Emerg Admission</th><th>Eye care services</th><th>Ref. after diagnostic - Imaging</th><th>Out patient upgrade</th><th>Consultant External</th><th>Ward</th><th>Screening - Cervical Screening Service</th><th>Screening - Breast Test Wales</th><th>Dentist</th><th>Ref. after diagnostic - Other</th><th>Ref. after diagnostic - Endoscopy</th><th>GP referral</th></tr></thead><tbody><tr><td>Apr-20</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>May-20</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Jun-20</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Jul-20</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Aug-20</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Sep-20</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Oct-20</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Nov-20</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Dec-20</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Jan-21</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Feb-21</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Mar-21</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Apr-21</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>May-21</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Jun-21</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Jul-21</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Aug-21</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Sep-21</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Oct-21</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></tbody></table>	Month	Other healthcare professional	Consultant Internal	Other screening	Screening - Bowel Screening Wales	A&E/Med Assess/ Emerg Admission	Eye care services	Ref. after diagnostic - Imaging	Out patient upgrade	Consultant External	Ward	Screening - Cervical Screening Service	Screening - Breast Test Wales	Dentist	Ref. after diagnostic - Other	Ref. after diagnostic - Endoscopy	GP referral	Apr-20																	May-20																	Jun-20																	Jul-20																	Aug-20																	Sep-20																	Oct-20																	Nov-20																	Dec-20																	Jan-21																	Feb-21																	Mar-21																	Apr-21																	May-21																	Jun-21																	Jul-21																	Aug-21																	Sep-21																	Oct-21																
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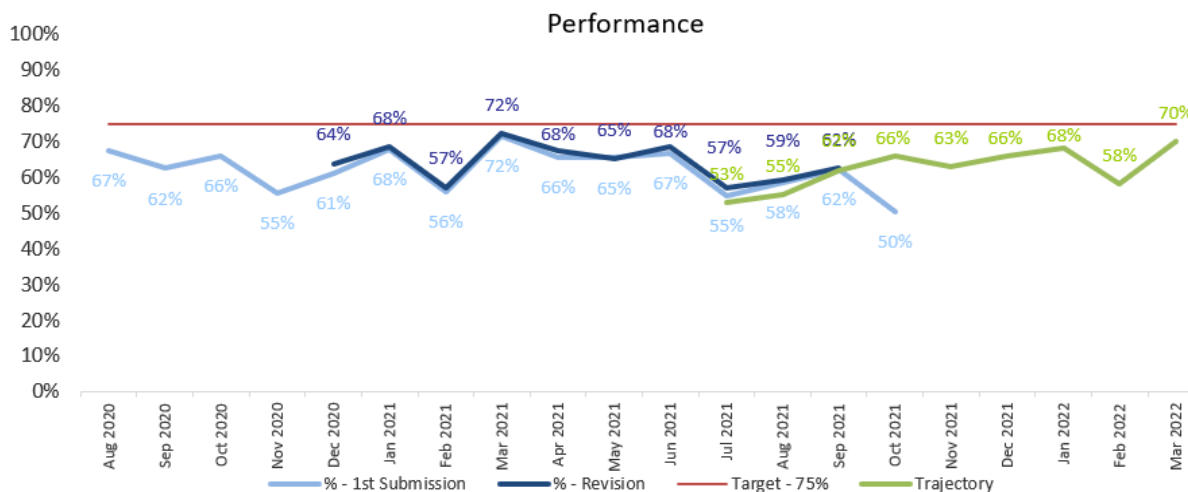


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USC First Outpatient Appointments <i>The number of patients at first outpatient appointment stage by days waiting</i>	To date, early November 2021 figures show total wait volumes have decreased by 16%, which can be attributed to a change in the data recording following the introduction of a new category of patients who are first reviewed in a 'diagnostic one stop' outpatient appointment.	The number of patients waiting for a first outpatient appointment (by total days waiting) – Early November 2021																																																																	
		<table><tr><th>FIRST OPA</th><th>31-Oct</th><th>07-Nov</th><th>% change</th></tr><tr><td>Acute Leukaemia</td><td>0</td><td>0</td><td>0%</td></tr><tr><td>Brain/CNS</td><td>0</td><td>1</td><td>0%</td></tr><tr><td>Breast</td><td>5</td><td>1</td><td>-80%</td></tr><tr><td>Children's Cancer</td><td>1</td><td>2</td><td>100%</td></tr><tr><td>Gynaecological</td><td>49</td><td>56</td><td>14%</td></tr><tr><td>Haematological</td><td>1</td><td>4</td><td>300%</td></tr><tr><td>Head and Neck</td><td>58</td><td>41</td><td>-29%</td></tr><tr><td>Lower GI</td><td>185</td><td>154</td><td>-17%</td></tr><tr><td>Lung</td><td>12</td><td>12</td><td>0%</td></tr><tr><td>Other</td><td>61</td><td>32</td><td>-48%</td></tr><tr><td>Sarcoma</td><td>13</td><td>16</td><td>23%</td></tr><tr><td>Skin</td><td>150</td><td>117</td><td>-22%</td></tr><tr><td>Upper GI</td><td>75</td><td>67</td><td>-11%</td></tr><tr><td>Urological</td><td>31</td><td>35</td><td>13%</td></tr><tr><td></td><td>641</td><td>538</td><td>-16%</td></tr></table>	FIRST OPA	31-Oct	07-Nov	% change	Acute Leukaemia	0	0	0%	Brain/CNS	0	1	0%	Breast	5	1	-80%	Children's Cancer	1	2	100%	Gynaecological	49	56	14%	Haematological	1	4	300%	Head and Neck	58	41	-29%	Lower GI	185	154	-17%	Lung	12	12	0%	Other	61	32	-48%	Sarcoma	13	16	23%	Skin	150	117	-22%	Upper GI	75	67	-11%	Urological	31	35	13%		641	538	-16%	
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Radiotherapy waiting times <i>The percentage of patients receiving radiotherapy treatment</i>	Radiotherapy waiting times are challenging however the provision of emergency radiotherapy within 1 and 2 days has been maintained at 100% throughout the COVID19 outbreak.	<table><tr><th>Measure</th><th>Target</th><th>Oct-21</th></tr><tr><td>Scheduled (21 Day Target)</td><td>80%</td><td>37%</td></tr><tr><td>Scheduled (28 Day Target)</td><td>100%</td><td>84%</td></tr><tr><td>Urgent SC (7 Day Target)</td><td>80%</td><td>30%</td></tr><tr><td>Urgent SC (14 Day Target)</td><td>100%</td><td>90%</td></tr><tr><td>Emergency (within 1 day)</td><td>80%</td><td>100%</td></tr><tr><td>Emergency (within 2 days)</td><td>100%</td><td>100%</td></tr><tr><td>Elective Delay (21 Day Target)</td><td>80%</td><td>89%</td></tr><tr><td>Elective Delay (28 Day Target)</td><td>100%</td><td>94%</td></tr></table>	Measure	Target	Oct-21	Scheduled (21 Day Target)	80%	37%	Scheduled (28 Day Target)	100%	84%	Urgent SC (7 Day Target)	80%	30%	Urgent SC (14 Day Target)	100%	90%	Emergency (within 1 day)	80%	100%	Emergency (within 2 days)	100%	100%	Elective Delay (21 Day Target)	80%	89%	Elective Delay (28 Day Target)	100%	94%	<table><caption>Radiotherapy waiting times (Estimated Data)</caption><thead><tr><th>Month</th><th>Scheduled (21 Day Target)</th><th>Scheduled (28 Day Target)</th><th>Urgent SC (7 Day Target)</th><th>Urgent SC (14 Day Target)</th><th>Emergency (within 1 day)</th><th>Emergency (within 2 days)</th><th>Elective Delay (21 Day Target)</th><th>Elective Delay (28 Day Target)</th></tr></thead><tbody><tr><td>Oct-20</td><td>85%</td><td>85%</td><td>50%</td><td>85%</td><td>100%</td><td>100%</td><td>60%</td><td>70%</td></tr><tr><td>Nov-20</td><td>80%</td><td>85%</td><td>30%</td><td>95%</td><td>100%</td><td>100%</td><td>60%</td><td>75%</td></tr><tr><td>Dec-20</td><td>85%</td><td>85%</td><td>50%</td><td>90%</td><td>100%</td><td>100%</td><td>70%</td><td>85%</td></tr><tr><td>Jan-21</td><td>80%</td><td>85%</td><td>50%</td><td>95%</td><td>100%</td><td>100%</td><td>70%</td><td>85%</td></tr><tr><td>Feb-21</td><td>35%</td><td>80%</td><td>25%</td><td>90%</td><td>100%</td><td>100%</td><td>60%</td><td>75%</td></tr><tr><td>Mar-21</td><td>35%</td><td>80%</td><td>35%</td><td>90%</td><td>100%</td><td>100%</td><td>65%</td><td>80%</td></tr><tr><td>Apr-21</td><td>40%</td><td>85%</td><td>40%</td><td>85%</td><td>100%</td><td>100%</td><td>80%</td><td>90%</td></tr><tr><td>May-21</td><td>40%</td><td>85%</td><td>50%</td><td>80%</td><td>100%</td><td>100%</td><td>85%</td><td>95%</td></tr><tr><td>Jun-21</td><td>55%</td><td>85%</td><td>45%</td><td>85%</td><td>100%</td><td>100%</td><td>90%</td><td>95%</td></tr><tr><td>Jul-21</td><td>60%</td><td>90%</td><td>55%</td><td>80%</td><td>100%</td><td>100%</td><td>95%</td><td>95%</td></tr><tr><td>Aug-21</td><td>60%</td><td>90%</td><td>55%</td><td>95%</td><td>100%</td><td>100%</td><td>95%</td><td>95%</td></tr><tr><td>Sep-21</td><td>60%</td><td>85%</td><td>25%</td><td>80%</td><td>100%</td><td>100%</td><td>85%</td><td>95%</td></tr><tr><td>Oct-21</td><td>37%</td><td>84%</td><td>30%</td><td>90%</td><td>100%</td><td>100%</td><td>89%</td><td>94%</td></tr></tbody></table>	Month	Scheduled (21 Day Target)	Scheduled (28 Day Target)	Urgent SC (7 Day Target)	Urgent SC (14 Day Target)	Emergency (within 1 day)	Emergency (within 2 days)	Elective Delay (21 Day Target)	Elective Delay (28 Day Target)	Oct-20	85%	85%	50%	85%	100%	100%	60%	70%	Nov-20	80%	85%	30%	95%	100%	100%	60%	75%	Dec-20	85%	85%	50%	90%	100%	100%	70%	85%	Jan-21	80%	85%	50%	95%	100%	100%	70%	85%	Feb-21	35%	80%	25%	90%	100%	100%	60%	75%	Mar-21	35%	80%	35%	90%	100%	100%	65%	80%	Apr-21	40%	85%	40%	85%	100%	100%	80%	90%	May-21	40%	85%	50%	80%	100%	100%	85%	95%	Jun-21	55%	85%	45%	85%	100%	100%	90%	95%	Jul-21	60%	90%	55%	80%	100%	100%	95%	95%	Aug-21	60%	90%	55%	95%	100%	100%	95%	95%	Sep-21	60%	85%	25%	80%	100%	100%	85%	95%	Oct-21	37%	84%	30%	90%	100%	100%	89%	94%
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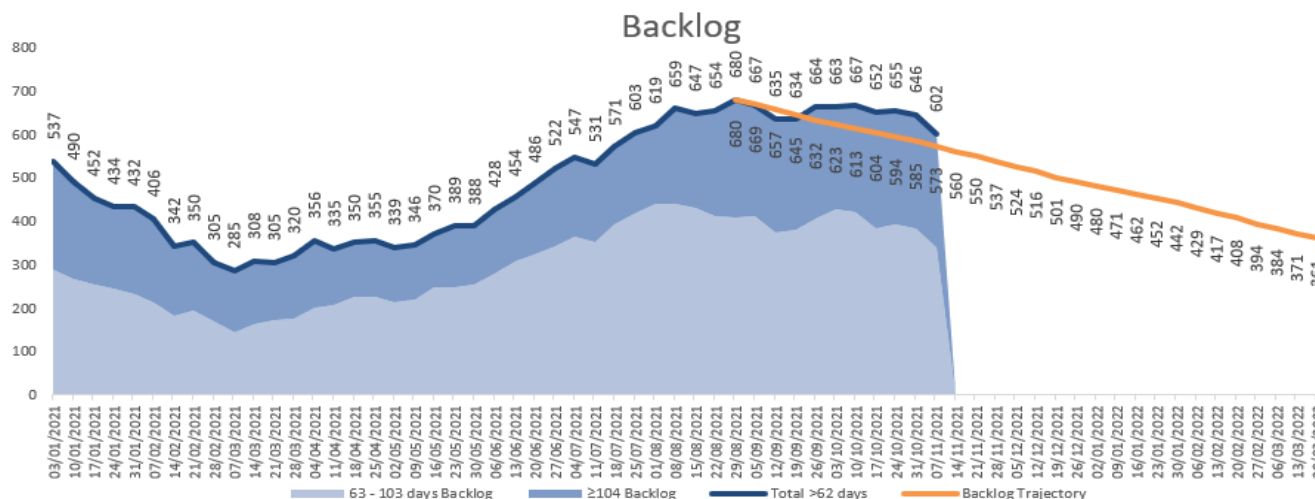
Cancer Services – Performance Escalation Updates

1.SCP performance trajectory

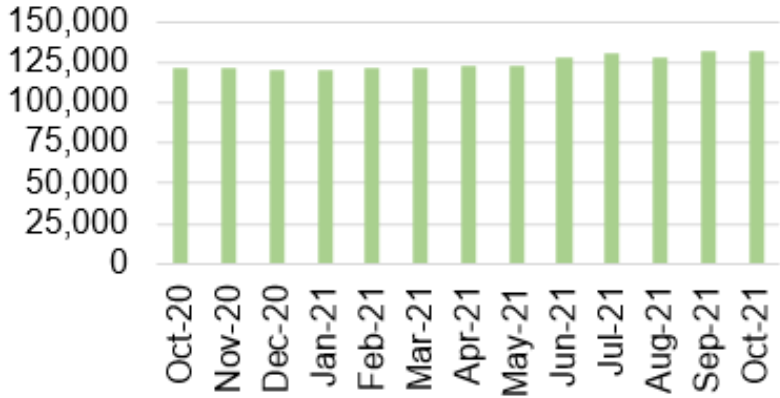
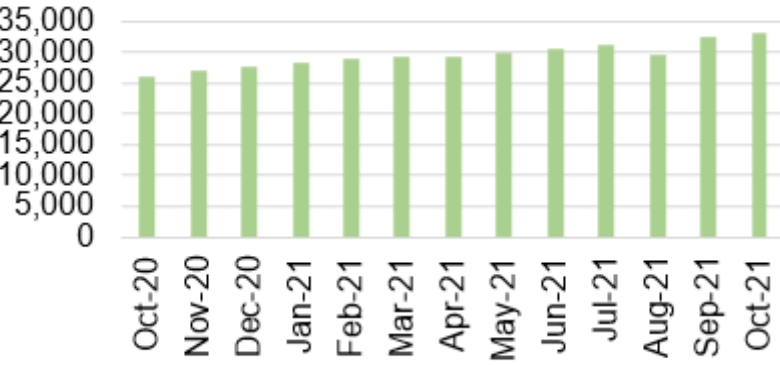


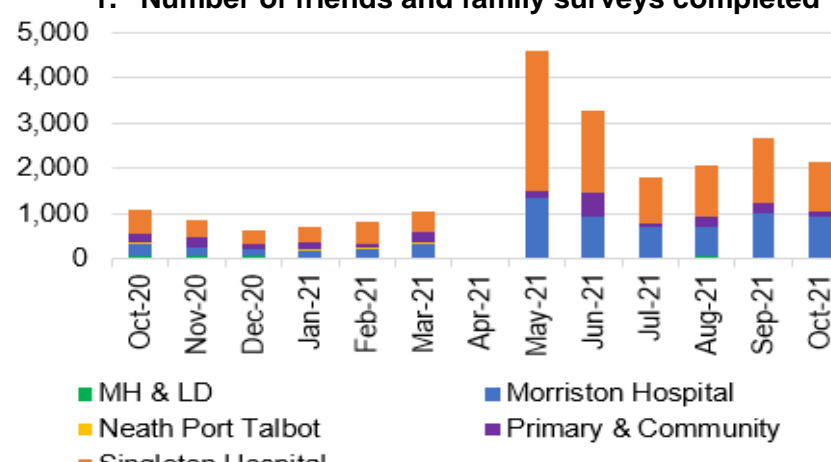
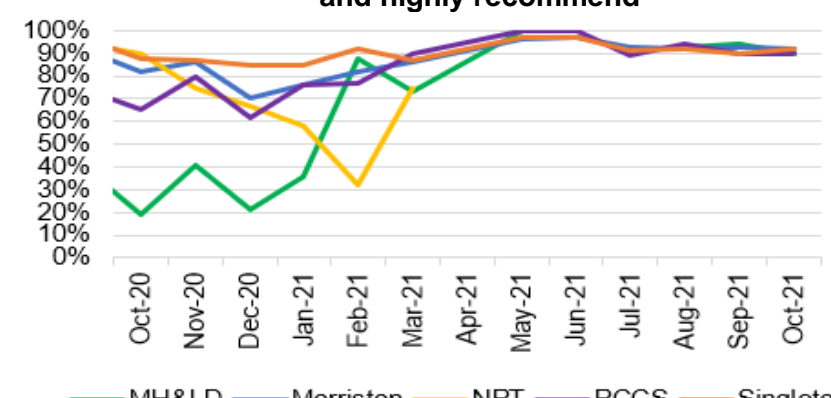
1. SCP performance in September 2021 was in line with the trajectory at 62%. October 2021 performance is still in draft format and takes 30 days to validate from the month end.

1. Proposed backlog improvements to support SCP performance



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

FOLLOW-UP APPOINTMENTS																																																										
Description	Current Performance	Trend																																																								
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 October 2021, the overall size of the follow-up waiting list increased by 591 patients compared with September 2021 (from 130,963 to 131,554).</p>	1. Total number of patients waiting for a follow-up  <table border="1"><caption>1. Total number of patients waiting for a follow-up (SBU HB)</caption><thead><tr><th>Month</th><th>Number of patients</th></tr></thead><tbody><tr><td>Oct-20</td><td>125,000</td></tr><tr><td>Nov-20</td><td>125,000</td></tr><tr><td>Dec-20</td><td>125,000</td></tr><tr><td>Jan-21</td><td>125,000</td></tr><tr><td>Feb-21</td><td>125,000</td></tr><tr><td>Mar-21</td><td>125,000</td></tr><tr><td>Apr-21</td><td>125,000</td></tr><tr><td>May-21</td><td>125,000</td></tr><tr><td>Jun-21</td><td>125,000</td></tr><tr><td>Jul-21</td><td>125,000</td></tr><tr><td>Aug-21</td><td>125,000</td></tr><tr><td>Sep-21</td><td>125,000</td></tr><tr><td>Oct-21</td><td>125,000</td></tr></tbody></table> <p>■ Number of patients waiting for follow-up (SBU HB)</p> 2. Delayed follow-ups: Number of patients waiting 100% over target  <table border="1"><caption>2. Delayed follow-ups: Number of patients waiting 100% over target date (SBU HB)</caption><thead><tr><th>Month</th><th>Number of patients</th></tr></thead><tbody><tr><td>Oct-20</td><td>25,000</td></tr><tr><td>Nov-20</td><td>25,000</td></tr><tr><td>Dec-20</td><td>25,000</td></tr><tr><td>Jan-21</td><td>25,000</td></tr><tr><td>Feb-21</td><td>25,000</td></tr><tr><td>Mar-21</td><td>25,000</td></tr><tr><td>Apr-21</td><td>25,000</td></tr><tr><td>May-21</td><td>25,000</td></tr><tr><td>Jun-21</td><td>25,000</td></tr><tr><td>Jul-21</td><td>25,000</td></tr><tr><td>Aug-21</td><td>25,000</td></tr><tr><td>Sep-21</td><td>25,000</td></tr><tr><td>Oct-21</td><td>25,000</td></tr></tbody></table> <p>■ Number of patients waiting 100% over target date (SBU HB)</p>	Month	Number of patients	Oct-20	125,000	Nov-20	125,000	Dec-20	125,000	Jan-21	125,000	Feb-21	125,000	Mar-21	125,000	Apr-21	125,000	May-21	125,000	Jun-21	125,000	Jul-21	125,000	Aug-21	125,000	Sep-21	125,000	Oct-21	125,000	Month	Number of patients	Oct-20	25,000	Nov-20	25,000	Dec-20	25,000	Jan-21	25,000	Feb-21	25,000	Mar-21	25,000	Apr-21	25,000	May-21	25,000	Jun-21	25,000	Jul-21	25,000	Aug-21	25,000	Sep-21	25,000	Oct-21	25,000
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<p>In October 2021, there was a total of 60,447 patients waiting for a follow-up past their target date. This is an in-month increase of 0.2% (from 60,340 in September 2021 to 60,447).</p>																																																										
<p>Of the 60,447 delayed follow-ups in October 2021, 12,538 had appointment dates and 47,909 were still waiting for an appointment.</p>																																																										
<p>In addition, 33,121 patients were waiting 100%+ over target date in October 2021. This is a 1.7% increase when compared with September 2021.</p>																																																										

PATIENT EXPERIENCE		
Description	Current Performance	Trend
<p>Patient experience</p> <p>1. Number of friends and family surveys completed</p> <p>2. Percentage of patients/ service users who would recommend and highly recommend</p>	<ul style="list-style-type: none"> Health Board Friends & Family patient satisfaction level in October 2021 was 92% and 2,733 surveys were completed. <ul style="list-style-type: none"> Singleton/ Neath Port Talbot Hospitals Service Group completed 1,118 surveys in October 2021, with a recommended score of 92%. Morrison Hospital completed 941 surveys in October 2021, with a recommended score of 92%. Primary & Community Care completed 89 surveys for October 2021, with a recommended score of 90%. The Mental Health Service Group completed 10 surveys for October 2021, with a recommended score of 90%. 	<p>1. Number of friends and family surveys completed</p>  <p>2. % of patients/ service users who would recommend and highly recommend</p>  <p>* Data not available for April 2021. Neath Port Talbot included in Singleton's figures from May 2021</p>

COMPLAINTS																																																								
Description	Current Performance	Trend																																																						
Patient concerns <i>1. Number of formal complaints received</i> <i>2. Percentage of concerns that have received a final reply or an interim reply up to and including 30 working days from the date the concern was first received by the organisation</i>	<p>1. In August 2021, the Health Board received 115 formal complaints; this is lower than the number seen in July 2021 (139).</p> <p>Since the COVID19 outbreak began in March 2020, the monthly number of complaints received has been significantly low. The numbers have gradually increased each month and numbers are now consistent with those seen pre-Covid</p>	<p>1. Number of formal complaints received</p> <table border="1"><caption>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>PCCS</th><th>Singleton Hospital</th></tr></thead><tbody><tr><td>Jan-21</td><td>10</td><td>32</td><td>5</td><td>8</td><td>15</td></tr><tr><td>Feb-21</td><td>15</td><td>40</td><td>5</td><td>10</td><td>20</td></tr><tr><td>Mar-21</td><td>10</td><td>50</td><td>5</td><td>22</td><td>25</td></tr><tr><td>Apr-21</td><td>25</td><td>22</td><td>5</td><td>8</td><td>22</td></tr><tr><td>May-21</td><td>15</td><td>52</td><td>5</td><td>18</td><td>22</td></tr><tr><td>Jun-21</td><td>20</td><td>68</td><td>10</td><td>15</td><td>30</td></tr><tr><td>Jul-21</td><td>22</td><td>50</td><td>5</td><td>18</td><td>28</td></tr><tr><td>Aug-21</td><td>15</td><td>50</td><td>5</td><td>8</td><td>30</td></tr></tbody></table> <p>■ MH & LD ■ Morriston Hospital ■ NPT Hospital ■ PCCS ■ Singleton Hospital</p>	Month	MH & LD	Morriston Hospital	NPT Hospital	PCCS	Singleton Hospital	Jan-21	10	32	5	8	15	Feb-21	15	40	5	10	20	Mar-21	10	50	5	22	25	Apr-21	25	22	5	8	22	May-21	15	52	5	18	22	Jun-21	20	68	10	15	30	Jul-21	22	50	5	18	28	Aug-21	15	50	5	8	30
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<p>2. The overall Health Board rate for responding to concerns within 30 working days was 83% in August 2021, against the Welsh Government target of 75% and Health Board target of 80%.</p> <p>Below is a breakdown of performance against the 30-day response target:</p> <table border="1"><thead><tr><th></th><th>30 day response rate</th></tr></thead><tbody><tr><td>Neath Port Talbot Hospital</td><td>67%</td></tr><tr><td>Morriston Hospital</td><td>94%</td></tr><tr><td>Mental Health & Learning Disabilities</td><td>62%</td></tr><tr><td>Primary, Community and Therapies</td><td>75%</td></tr><tr><td>Singleton Hospital</td><td>81%</td></tr></tbody></table>		30 day response rate	Neath Port Talbot Hospital	67%	Morriston Hospital	94%	Mental Health & Learning Disabilities	62%	Primary, Community and Therapies	75%	Singleton Hospital	81%	<p>2. Response rate for concerns within 30 days</p> <table border="1"><caption>2. Response rate for concerns within 30 days</caption><thead><tr><th>Month</th><th>Health Board Total</th></tr></thead><tbody><tr><td>Aug-20</td><td>72%</td></tr><tr><td>Sep-20</td><td>82%</td></tr><tr><td>Oct-20</td><td>75%</td></tr><tr><td>Nov-20</td><td>82%</td></tr><tr><td>Dec-20</td><td>80%</td></tr><tr><td>Jan-21</td><td>70%</td></tr><tr><td>Feb-21</td><td>80%</td></tr><tr><td>Mar-21</td><td>80%</td></tr><tr><td>Apr-21</td><td>78%</td></tr><tr><td>May-21</td><td>78%</td></tr><tr><td>Jun-21</td><td>68%</td></tr><tr><td>Jul-21</td><td>68%</td></tr><tr><td>Aug-21</td><td>83%</td></tr></tbody></table> <p>■ Health Board Total — HB Profile</p>	Month	Health Board Total	Aug-20	72%	Sep-20	82%	Oct-20	75%	Nov-20	82%	Dec-20	80%	Jan-21	70%	Feb-21	80%	Mar-21	80%	Apr-21	78%	May-21	78%	Jun-21	68%	Jul-21	68%	Aug-21	83%															
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6.1 Updates on key measures

		Harm from wider societal actions/lockdown															
Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21
Childhood immunisations																	
% children who received 3 doses of the hexavalent '6 in 1' vaccine by age 1	NPT	95%	90%	+	97.2%				94.1%								
	Swansea			+	96.4%		96.3%										
	HB Total			+	96.7%		95.4%										
% children who received MenB2 vaccine by age 1	NPT	95%	90%	+	97.8%				93.8%								
	Swansea			+	95.8%		96.1%										
	HB Total			+	96.6%		95.2%										
% children who received PCV2 vaccine by age 1	NPT	95%	90%	+	98.1%				96.6%								
	Swansea			+	96.2%		97.2%										
	HB Total			+	96.9%		96.9%										
% children who received Rotavirus vaccine by age 1	NPT	95%	90%	+	95.0%				93.8%								
	Swansea			+	95.1%		94.1%										
	HB Total			+	95.1%		94.0%										
% children who received MMR1 vaccine by age 2	NPT	95%	90%	+	93.6%				95.5%								
	Swansea			+	95.2%		93.1%										
	HB Total			+	94.6%		94.0%										
% children who received PCV3 vaccine by age 2	NPT	95%	90%	+	93.9%				96.1%								
	Swansea			+	95.2%		93.3%										
	HB Total			+	94.7%		94.3%										
% children who received MenB4 vaccine by age 2	NPT	95%	90%	+	93.9%				95.5%								
	Swansea			+	95.2%		93.3%										
	HB Total			+	94.7%		94.1%										
% children who received Hib/MenC vaccine by age 2	NPT	95%	90%	+	93.6%				95.2%								
	Swansea			+	94.8%		92.7%										
	HB Total			+	94.4%		96.3%										
Measure	Locality	National/ Local Target	Internal profile	Trend	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21
% children who are up to date in schedule by age 4	NPT	95%	90%	+	86.4%				86.6%								
	Swansea			+	87.8%		86.2%										
	HB Total			+	87.2%		86.3%										
% of children who received 2 doses of the MMR vaccine by age 5	NPT	95%	90%	+	92.0%				93.9%								
	Swansea			+	92.0%		91.4%										
	HB Total			+	92.0%		92.4%										
% children who received 4 in 1 vaccine by age 5	NPT	95%	90%	+	92.5%				93.7%								
	Swansea			+	93.1%		90.5%										
	HB Total			+	92.9%		91.7%										
% children who received MMR vaccination by age 16	NPT	95%	90%	+	96.0%				90.5%								
	Swansea			+	93.6%		87.8%										
	HB Total			+	94.5%		88.9%										
% children who received teenage booster by age 16	NPT	90%	85%	+	92.7%				91.3%								
	Swansea			+	92.2%		90.0%										
	HB Total			+	92.4%		90.5%										
% children who received MenACWY vaccine by age 16	NPT	Improve		+	92.9%				92.1%								
	Swansea			+	92.3%		90.8%										
	HB Total			+	92.5%		91.3%										

Measure	Locality	National/ Local Target	Internal profile	Trend	SBU													
					Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	
		Mental Health Services																
% of urgent assessments undertaken within 48 hours from receipt of referral (Crisis) (< 18 yrs)	< 18 years old (CAMHS)	100%			100%	100%	100%	100%	100%	100%	100%	100%	93%	94%	79%	100%	95%	
% of patients waiting less than 28 days for 1st outpatient appointment (< 18 yrs)	< 18 years old (CAMHS)	80%			90%	88%	61%	53%	66%	63%	60%	61%	58%	41%	48%	40%		
% of routine assessments undertaken within 28 days from receipt of referral (PCAMHS) (< 18 yrs)	< 18 years old (CAMHS)	80%			29%	41%	73%	29%	97%	46%	0%	0%	0%	29%	37%	89%		
% of routine assessments undertaken within 28 days from receipt of referral (SCAMHS) (< 18 yrs)	< 18 years old (CAMHS)	80%			79%	62%	58%	60%	56%	53%	48%	53%	44%	29%	32%	41%		
% of mental health assessments undertaken within (up to and including) 28 days from the date of receipt of referral (> 18 yrs)	> 18 years old	80%			99.5%	98%	99%	96%	98%	97%	97%	98%	99%	98%	100%	96%		
% of therapeutic interventions started within 28 days following assessment by LPMHSS (< 18 yrs)	< 18 years old (CAMHS)	80%			100%	100%	100%	93%	97%	91%	49%	67%	1%	100%	82%	35%		
% of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS (> 18 yrs)	> 18 years old	80%			93%	98%	95%	95%	98%	97%	92%	96%	99%	97%	100%	90%		
% of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health (> 18 yrs)	> 18 years old	95%			99.7%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%		
% of patients with NDD receiving diagnostic assessment and intervention within 26 weeks (< 18 yrs)	< 18 years old (CAMHS)	80%			22%	24%	26%	24%	28%	30%	30%	33%	32%	34%	27%	34%		
% residents in receipt of secondary mental health services (all ages) who have a valid care and treatment plan (CTP) (< 18 yrs)	< 18 years old (CAMHS)	90%			82%	81%	82%	83%	84%	82%	82%	83%	81%	81%	65%	84%		
% residents in receipt of secondary mental health services (all ages) who have a valid care and treatment plan (CTP) (> 18 yrs)	> 18 years old	90%			91%	91%	89%	91%	91%	91%	91%	92%	88%	88%	84%	84%		

6.2 Updates on key measures

ADULT MENTAL HEALTH																																																																																																																																																																										
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<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 September 2021, 96% of assessments were undertaken within 28 days of referral for patients 18 years and over.</p> <p>2. In September 2021, the percentage of therapeutic interventions started within 28 days following an assessment by the Local Primary Mental Health Support Service (LPMHSS) was 90%.</p> <p>3. 84% of residents in receipt of secondary care mental health services had a valid Care and Treatment Plan in September 2021.</p> <p>4. In September 2021, 100% of patients waited less than 26 weeks for psychological therapy. This was above 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>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> <tr><td>Mar-21</td><td>98%</td><td>95%</td></tr> <tr><td>Apr-21</td><td>98%</td><td>95%</td></tr> <tr><td>May-21</td><td>98%</td><td>95%</td></tr> <tr><td>Jun-21</td><td>98%</td><td>95%</td></tr> <tr><td>Jul-21</td><td>98%</td><td>95%</td></tr> <tr><td>Aug-21</td><td>98%</td><td>95%</td></tr> <tr><td>Sep-21</td><td>96%</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>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> <tr><td>Mar-21</td><td>98%</td><td>95%</td></tr> <tr><td>Apr-21</td><td>98%</td><td>95%</td></tr> <tr><td>May-21</td><td>98%</td><td>95%</td></tr> <tr><td>Jun-21</td><td>98%</td><td>95%</td></tr> <tr><td>Jul-21</td><td>98%</td><td>95%</td></tr> <tr><td>Aug-21</td><td>98%</td><td>95%</td></tr> <tr><td>Sep-21</td><td>90%</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>Target</th> </tr> </thead> <tbody> <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> <tr><td>Mar-21</td><td>98%</td><td>95%</td></tr> <tr><td>Apr-21</td><td>98%</td><td>95%</td></tr> <tr><td>May-21</td><td>98%</td><td>95%</td></tr> <tr><td>Jun-21</td><td>98%</td><td>95%</td></tr> <tr><td>Jul-21</td><td>98%</td><td>95%</td></tr> <tr><td>Aug-21</td><td>84%</td><td>95%</td></tr> <tr><td>Sep-21</td><td>84%</td><td>95%</td></tr> </tbody> </table> <p>4. % waiting less than 26 weeks for Psychology Therapy</p> <table border="1"> <caption>4. % waiting less than 26 weeks for Psychology Therapy</caption> <thead> <tr> <th>Month</th> <th>% waiting less than 26 wks for psychological therapy</th> <th>Target</th> </tr> </thead> <tbody> <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> <tr><td>Mar-21</td><td>100%</td><td>95%</td></tr> <tr><td>Apr-21</td><td>100%</td><td>95%</td></tr> <tr><td>May-21</td><td>100%</td><td>95%</td></tr> <tr><td>Jun-21</td><td>100%</td><td>95%</td></tr> <tr><td>Jul-21</td><td>100%</td><td>95%</td></tr> <tr><td>Aug-21</td><td>100%</td><td>95%</td></tr> <tr><td>Sep-21</td><td>100%</td><td>95%</td></tr> </tbody> </table>	Month	% assessments within 28 days (>18 yrs)	Target	Sep-20	98%	95%	Oct-20	98%	95%	Nov-20	98%	95%	Dec-20	98%	95%	Jan-21	98%	95%	Feb-21	98%	95%	Mar-21	98%	95%	Apr-21	98%	95%	May-21	98%	95%	Jun-21	98%	95%	Jul-21	98%	95%	Aug-21	98%	95%	Sep-21	96%	95%	Month	% therapeutic interventions started within 28 days (>18 yrs)	Target	Sep-20	98%	95%	Oct-20	98%	95%	Nov-20	98%	95%	Dec-20	98%	95%	Jan-21	98%	95%	Feb-21	98%	95%	Mar-21	98%	95%	Apr-21	98%	95%	May-21	98%	95%	Jun-21	98%	95%	Jul-21	98%	95%	Aug-21	98%	95%	Sep-21	90%	95%	Month	% patients with valid CTP (>18 yrs)	Target	Sep-20	98%	95%	Oct-20	98%	95%	Nov-20	98%	95%	Dec-20	98%	95%	Jan-21	98%	95%	Feb-21	98%	95%	Mar-21	98%	95%	Apr-21	98%	95%	May-21	98%	95%	Jun-21	98%	95%	Jul-21	98%	95%	Aug-21	84%	95%	Sep-21	84%	95%	Month	% waiting less than 26 wks for psychological therapy	Target	Sep-20	100%	95%	Oct-20	100%	95%	Nov-20	100%	95%	Dec-20	100%	95%	Jan-21	100%	95%	Feb-21	100%	95%	Mar-21	100%	95%	Apr-21	100%	95%	May-21	100%	95%	Jun-21	100%	95%	Jul-21	100%	95%	Aug-21	100%	95%	Sep-21	100%	95%
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CHILD & ADOLESCENT MENTAL HEALTH (CAMHS)		
Description	Current Performance	Trend
1. Crisis - % Urgent Assessment by CAMHS undertaken within 48 Hours from receipt of referral	1. In September 2021, 95% of CAMHS patients received an assessment within 48 hours.	1. Crisis- assessment within 48 hours
2. Primary CAMHS (P-CAMHS) - % Routine Assessment by CAMHS undertaken within 28 days from receipt of referral	2. 89% of routine assessments were undertaken within 28 days from referral in September 2021 against a target of 80%.	2. and 3. P-CAMHS % assessments and therapeutic interventions within 28 days
3. Primary CAMHS (P-CAMHS) - % Therapeutic interventions started within 28 days following assessment by LPMHSS	3. 35% of therapeutic interventions were started within 28 days following assessment by LPMHSS in September 2021.	
4. NDD - % Neurodevelopmental Disorder patients receiving a Diagnostic Assessment within 26 weeks	4. 34% of NDD patients received a diagnostic assessment within 26 weeks in September 2021 against a target of 80%.	4. NDD- assessment within 26 weeks
5. Specialist CAMHS (S-CAMHS) - % Routine Assessment by SCAMHS undertaken within 28 days from receipt of referral	5. 41% of routine assessments by SCAMHS were undertaken within 28 days in September 2021.	5. S-CAMHS % assessments within 28 days

APPENDIX 2: Summary

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

Harm quadrant- Harm from Covid itself						
Category	Measure	Target Type	Target	Internal HB Profile	Reporting period	HB Total
COVID19 relat	Number of new COVID19 cases*	Local			Oct-21	10,918
	Number of staff referred for Antigen Testing*	Local			Oct-21	524
	Number of staff awaiting results of COVID19 test*	Local			Oct-21	0
	Number of COVID19 related incidents*	Local			Oct-21	73
	Number of COVID19 related serious incidents*	Local			Oct-21	0
	Number of COVID19 related complaints*	Local			Oct-21	4
	Number of COVID19 related risks*	Local			Oct-21	0
	Number of staff self isolated (asymptomatic)*	Local			Oct-21	120
	Number of staff self isolated (symptomatic)*	Local			Oct-21	180
	% sickness*	Local			Oct-21	2.3%

* 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	HB Total
Unscheduled Care	Number of ambulance handovers over one hour*	National	0		Oct-21	648
	% of patients who spend less than 4 hours in all major and minor emergency care (i.e. A&E) facilities from arrival until admission, transfer or discharge*	National	95%		Oct-21	72%
	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		Oct-21	1,276
Stroke	% of patients who have a direct admission to an acute stroke unit within 4 hours*	National	59.8% (UK SNAP average)		Oct-21	0%
	% of patients who receive a CT scan within 1 hour*	National	54.5% (UK SNAP average)		Oct-21	17%
	% of patients who are assessed by a stroke specialist consultant physician within 24 hours*	National	84.2% (UK SNAP average)		Oct-21	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		Oct-21	0%
	% of patients receiving the required minutes for speech and language therapy*	National	12 month improvement trend		Oct-21	65%
Healthcare acquired infections	Number of E.Coli bacteraemia cases	National	12 month reduction trend	19	Oct-21	19
	Number of S.aureus bacteraemia cases	National		8	Oct-21	18
	Number of C.difficile cases	National		13	Oct-21	15
	Number of Klebsiella cases	National		6	Oct-21	13
	Number of Aeruginosa cases	National		4	Oct-21	0
	Compliance with hand hygiene audits	Local	95%		Oct-21	97%
Serious incidents	Number of Serious Incidents	Local	12 month reduction trend		Oct-21	4
	Of the serious incidents due for assurance, the % which were assured within the agreed timescales	Local	90%		Oct-21	0%
	Number of Never Events	Local	0		Oct-21	0

* 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	HB Total
Fractured Neck of Femur (#NOF)	Prompt orthogeriatric assessment- % patients receiving an assessment by a senior geriatrician within 72 hours of presentation	Local	75%		Sep-21	87.3%
	Prompt surgery - % patients undergoing surgery by the day following presentation with hip fracture	Local	75%		Sep-21	58.4%
	NICE compliant surgery - % of operations consistent with the recommendations of NICE CG124	Local	75%		Sep-21	69.4%
	Prompt mobilisation after surgery - % of patients out of bed (standing or hoisted) by the day after operation	Local	75%		Sep-21	72.6%
	Not delirious when tested- % patients (<4 on 4AT test) when tested in the week after operation	Local	75%		Sep-21	76.1%
	Return to original residence- % patients discharged back to original residence, or in that residence at 120 day follow-up	Local	75%		Apr-21	70.2%
	30 day mortality - crude and adjusted figures, noting ONS data only correct after around 6 months	Local	12 month improvement trend		Jan-21	7.5%
	% of survival within 30 days of emergency admission for a hip fracture	Local	12 month improvement trend		Feb-21	70.7%
Pressure Ulcers	Total number of Pressure Ulcers	Local	12 month reduction trend		Sep-21	104
	Total number of Grade 3+ Pressure Ulcers	Local	12 month reduction trend		Sep-21	7
	Pressure Ulcer (Hosp) patients per 100,000 admissions	Local	12 month reduction trend		Sep-21	767
Inpatient Falls	Total number of Inpatient Falls	Local	12 month reduction trend		Oct-21	240
	Inpatient Falls per 1,000 beddays	Local	Between 3.0 & 5.0		Jun-21	4.50
Mortality	Universal Mortality reviews undertaken within 28 days	Local	95%		Sep-21	97%
	Stage 2 mortality reviews completed within 60 days	Local	95%		Jan-21	37%
	Crude hospital mortality rate by Delivery Unit (74 years and over)	National	12 month reduction trend		Sep-21	1.03%

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

Harm quadrant- Harm from reduction in non-Covid activity						
Category	Measure	Target Type	Target	Internal HB Profile	Reporting period	HB Total
Cancer	Single Cancer Pathway- % of patients started treatment within 62 days (with suspensions)*	National	12 month improvement trend		Oct-21 (Draft)	50%
Planned Care	Number of patients waiting > 26 weeks for outpatient appointment	National	0		Oct-21	24,483
	Number of patients waiting > 36 weeks for treatment (inc. Diagnostics > 36 wks)	National	0		Oct-21	36,420
	Number of patients waiting > 8 weeks for a specified diagnostics	National	0		Oct-21	5,939
	Number of patients waiting > 14 weeks for a specified therapy	National	0		Oct-21	0
	Total number of patients waiting for a follow-up outpatient appointment	National	0		Oct-21	131,554
	Number of patients delayed by over 100% past their target date	National	0		Oct-21	32,121
	Number of patients delayed past their agreed target date (booked and not booked)	Local	0		Oct-21	60,447
	Number of Ophthalmology patients without an allocated health risk factor	Local	0		Oct-21	413
	Number of patients without a documented clinical review date	Local	0		Oct-21	3
Patient Experience/ Feedback	Number of friends and family surveys completed	Local	12 month improvement trend		Oct-21	2,733
	% of patients who would recommend and highly recommend	Local	90%	80%	Oct-21	92%
	% of all-Wales surveys scoring 9 or 10 on overall satisfaction	Local	90%	80%	Oct-21	93%
	Number of new complaints received	Local	12 month reduction trend		Jul-21	139
	% 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%	Mar-21	81%

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

Harm Quadrant- Harm from wider societal actions/lockdown						
Category	Measure	Target Type	Target	Internal HB Profile	Reporting period	HB Total
Childhood immunisations	% children who received 3 doses of the hexavalent '6 in 1' vaccine by age 1	National	95%	90%	Q4 2020/21	95.4%
	% children who received MenB2 vaccine by age 1	Local	95%	90%	Q4 2020/21	95.2%
	% children who received PCV2 vaccine by age 1		95%	90%	Q4 2020/21	96.9%
	% children who received Rotavirus vaccine by age 1		95%	90%	Q4 2020/21	94.0%
	% children who received MMR1 vaccine by age 2		95%	90%	Q4 2020/21	94.0%
	% children who received PCVf3 vaccine by age 2		95%	90%	Q4 2020/21	94.3%
	% children who received MenB4 vaccine by age 2		95%	90%	Q4 2020/21	94.1%
	% children who received Hib/MenC vaccine by age 2		95%	90%	Q4 2020/21	96.3%
	% children who are up to date in schedule by age 4		95%	90%	Q4 2020/21	86.3%
	% of children who received 2 doses of the MMR vaccine by age 5	National	95%	90%	Q4 2020/21	92.4%
	% children who received 4 in 1 vaccine by age 5	Local	95%	90%	Q4 2020/21	91.7%
	% children who received MMR vaccination by age 16		95%	90%	Q4 2020/21	88.9%
	% children who received teenage booster by age 16		90%	85%	Q4 2020/21	90.5%
	% children who received MenACWY vaccine by age 16		Improve		Q4 2020/21	91.3%
Mental Health (Adult and Children)	% of urgent assessments undertaken within 48 hours from receipt of referral (Crisis) (< 18 yrs)	Local	100%		Sep-21	95%
	% of patients waiting less than 28 days for 1st outpatient appointment (< 18 yrs)	National	80%		Sep-21	40%
	% of routine assessments undertaken within 28 days from receipt of referral (PCAMHS) (< 18 yrs)	National	80%		Sep-21	89%
	% of routine assessments undertaken within 28 days from receipt of referral (SCAMHS) (< 18 yrs)	Local	80%		Sep-21	41%
	% of mental health assessments undertaken within (up to and including) 28 days from the date of receipt of referral (> 18 yrs)	National	80%		Sep-21	96%
	% of therapeutic interventions started within 28 days following assessment by LPMHSS (< 18 yrs)	National	80%		Sep-21	35%
	% of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS (> 18 yrs)	National	80%		Sep-21	90%
	% of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health (> 18 yrs)	National	95%		Sep-21	100.0%
	% of patients with NDD receiving diagnostic assessment and intervention within 26 weeks (< 18 yrs)	National	80%		Sep-21	34%
	% residents in receipt of secondary mental health services (all ages) who have a valid care and treatment plan (CTP) (< 18 yrs)	National	90%		Sep-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%		Sep-21	84%

	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	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	
COVID19 related measures	Number of new COVID19 cases	Local	Oct-21	10,918		Reduce					4,664	5,525	11,976	3,759	1,208	907	406	189	708	1,946	7,177	12,839	10,918	
	Number of staff referred for Antigen Testing	Local	Oct-21	14,475		Reduce					6,460	8,201	10,065	10,749	11,115	11,683	11,957	12,224	12,505	12,872	13,278	13,951	14,475	
	Number of staff awaiting results of COVID19 test	Local	Oct-21	0		Reduce					21 (as at 06/11/20)	41 (as at 06/12/20)	99 (as at 05/01/21)	78 (as at 07/02/21)	69 (as at 06/03/21)	2 (as at 11/04/21)	0	0	0	0	0	0	0	
	Number of COVID19 related incidents	Local	Oct-21	73		Reduce					87	141	127	84	63	53	74	67	23	24	36	36	73	
	Number of COVID19 related serious incidents	Local	Oct-21	0		Reduce					1	1	0	0	0	0	0	0	0	0	0	0	0	
	Number of COVID19 related complaints	Local	Oct-21	4		Reduce					37	50	83	106	131	98	38	13	16	4	6	3	4	
	Number of COVID19 related risks	Local	Oct-21	0		Reduce					6	7	10	3	3	3	2	2	1	1	1	0	0	
	Number of staff self isolated (asymptomatic)	Local	Oct-21	120		Reduce					329	291	475	218	160	145	84	71	70	71	115	227	120	
	Number of staff self isolated (symptomatic)	Local	Oct-21	180		Reduce					132	294	394	316	156	108	87	71	50	67	114	204	180	
% sickness	Local	Oct-21	0		Reduce						3.5%	4.4%	6.5%	4.0%	2.4%	1.9%	1.9%	1.9%	0.9%	1.9%	1.9%	1.9%		
		Harm from overwhelmed NHS and social care system																						
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	
Unscheduled Care	% of emergency responses to red calls arriving within (up to and including) 8 minutes	National	Oct-21	44%	65%	65%	✖	61% (Apr-21)	1st (Apr-21)		66%	67%	54%	67%	70%	73%	72%	62%	67%	64%	59%	50%	44%	
	Number of ambulance handovers over one hour	National	Oct-21	648	0			3,124 (Apr-21)	4th (Apr-21)		355	500	510	195	219	231	337	477	547	616	726	642	648	
	Handover hours lost over 15 minutes	Local	Oct-21	3093							916	1,474	1,804	455	550	583	877	1,154	1,386	1,937	2,443	2,467	3,093	
	% 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	Oct-21	72%	95%			75.7% (Mar-21)	4th (Mar-21)		77.2%	75.4%	72.6%	77%	71%	77%	75%	73%	72%	75%	75%	73%	72%	
	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	Oct-21	1276	0			4,317 (Mar-21)	3rd (Mar-21)		494	626	776	570	534	457	631	684	880	1,014	1,060	1,250	1,276	
NOF	% of survival within 30 days of emergency admission for a hip fracture	National	Feb-21	70.7%	12 month ↑			82.0% (Feb-21)	5th (Feb-21)		90.0%	67.9%	68.0%	65.3%	70.7%									
	% of patients (age 60 years and over) who presented with a hip fracture that received an orthogeriatrician assessment within 72 hours	National	Feb-21	88.0%	12 month ↑			60% (Feb-21)	2nd (Feb-21)		84.0%	85.0%	86.0%	87.0%	88.0%									
Stroke	Direct admission to Acute Stroke Unit (<4 hrs)	National	Oct-21	0%	54.0%			22.6% (Mar-21)	4th out of 6 organisations (Mar-21)		29.8%	23.7%	7.1%	6.8%	18.2%	20.4%	20.3%	27.5%	28.3%	13.5%	15.4%	15.4%	0.0%	
	CT Scan (<1 hrs) (local)	Local	Oct-21	17%							42.1%	31.7%	22.7%	42.2%	30.6%	40.8%	29.7%	36.5%	29.6%	34.6%	48.7%	34.1%	16.7%	
	Assessed by a Stroke Specialist Consultant Physician (< 24 hrs)	National	Oct-21	100%	85.3%			87.6% (Mar-21)	1st (Mar-21)		98.2%	96.7%	95.5%	95.6%	97.2%	100.0%	96.9%	98.1%	100.0%	100.0%	92.3%	90.2%	100.0%	
	Thrombolysis door to needle <= 45 mins	Local	Oct-21	0%	12 month ↑						11.1%	28.6%	0.0%	12.5%	0.0%	55.6%	25.0%	0.0%	33.3%	28.6%	20.0%	0.0%	0.0%	
	% compliance against the therapy target of an average of 16.1 minutes if speech and language therapist input per stroke patient	National	Oct-21	65%	12 month ↑			46.8% (Mar-21)	3rd (Mar-21)		86.5%	65.1%	63.4%	65.7%	61.2%	55.9%	47.1%	39.7%	41.9%	45.4%	58.9%	58.6%	64.6%	

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	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21
Infection control	Cumulative cases of E.coli bacteraemias per 100k pop	National	Oct-21	82.2	<67		✗	77.95 (Apr-21)	5th (Apr-21)		65.7	63.8	60.7	60.0	59.8	61.9	99.8	88.9	89.4	89.4	90.5	86.4	82.2
	Number of E.Coli bacteraemia cases (Hospital)		Oct-21	7							14	5	5	6	6	9	12	11	5	8	9	9	7
	Number of E.Coli bacteraemia cases (Community)		Oct-21	12.0							11	11	7	12	11	19	20	15	23	15	25	12	12
	Total number of E.Coli bacteraemia cases		Oct-21	19.0							25	16	12	18	17	28	32	26	28	23	34	21	19
	Cumulative cases of S.aureus bacteraemias per 100k pop		Oct-21	41	<20		✗	27.01 (Apr-21)	6th (Apr-21)		31.5	32.7	31.7	31.6	31.4	31.6	40.5	44.5	37.0	36.0	35.5	38.3	40.6
	Number of S.aureus bacteraemias cases (Hospital)		Oct-21	11.0							6	7	6	5	7	4	4	5	5	7	8	17	11
	Number of S.aureus bacteraemias cases (Community)		Oct-21	7.0							6	6	3	4	2	7	9	10	2	4	4	4	7
	Total number of S.aureus bacteraemias cases		Oct-21	18							12	13	9	9	9	11	13	15	7	11	12	17	18
	Cumulative cases of C.difficile per 100k pop		Oct-21	52.9	<26		✗	28.94 (Apr-21)	6th (Apr-21)		50.4	48.4	45.7	42.0	41.5	41.1	62.3	49.1	46.2	52.0	55.0	53.2	52.9
	Number of C.difficile cases (Hospital)		Oct-21	10.0							12	8	6	3	9	7	15	7	6	16	20	9	10
	Number of C.difficile cases (Community)		Oct-21	5							3	2	3	0	2	5	5	5	6	7	2	5	5
	Total number of C.difficile cases		Oct-21	15.0							15	10	9	3	11	12	20	12	12	23	22	14	15
	Cumulative cases of Klebsiella per 100k pop		Oct-21	27.1							21.9	23.4	24.9	26.4	25.8	26.2	28.1	21.5	26.7	0.0	22.6	24.5	27.1
	Number of Klebsiella cases (Hospital)		Oct-21	8							7	7	8	8	4	1	4	3	5	2	4	8	8
	Number of Klebsiella cases (Community)		Oct-21	5.0							2	4	4	5	2	9	5	2	7	1	4	3	5
	Total number of Klebsiella cases		Oct-21	13.0				38 (Apr-21)	6th (Apr-21)		9	11	12	13	6	10	9	5	12	3	8	11	13
	Cumulative cases of Aeruginosa per 100k pop		Oct-21	5							5.7	5.8	5.5	5.2	5.1	4.9	9.4	6.1	6.2	0.0	5.5	5.6	4.8
	Number of Aeruginosa cases (Hospital)		Oct-21	0.0							1	1	1	0	0	0	2	0	1	0	1	2	0
	Number of Aeruginosa cases (Community)		Oct-21	0.0							1	1	0	1	1	1	1	1	1	1	1	0	0
	Total number of Aeruginosa cases		Oct-21	0				21 (Apr-21)	Joint 3rd (Apr-21)		2	2	1	1	1	1	3	1	2	1	2	2	0
Serious Incidents and risks	Hand Hygiene Audits: compliance with WHO 5 moments	Local	Oct-21	97.1%		95%	✓				97%	97%	96%	95%	93%	97%	96%	98%	96%	95%	95%	96%	97%
	Of the serious incidents due for assurance, the % which were assured within the agreed timescales	National	Oct-21	0.0%	90%	80%	✗				0%	0%	4%	0%	10%	0%	0%	0%	0%	0%	0%	0%	0%
	Number of new Never Events	National	Oct-21	0.00	0	0	✓				1	1	0	0	0	0	0	0	1	0	0	0	0
	Number of risks with a score greater than 20	Local	Oct-21	32.00		12 month ↓	✗				130	138	146	148	140	142	40	41	32	30	31	33	32
	Number of risks with a score greater than 16	Local	Oct-21	56.00		12 month ↓	✗				224	224	238	242	233	230	54	58	50	50	52	56	56
Pressure Ulcers	Number of pressure ulcers acquired in hospital	Local	Sep-21	65.00		12 month ↓	✗				59	42	61	51	48	36	59	53	53	58	53	65	0
	Number of pressure ulcers developed in the community		Sep-21	39.00		12 month ↓	✓				34	29	26	25	24	26	31	20	21	33	34	39	0
	Total number of pressure ulcers		Sep-21	104.00		12 month ↓	✗				93	71	87	76	72	62	90	73	74	91	87	104	0
	Number of grade 3+ pressure ulcers acquired in hospital		Sep-21	1.00		12 month ↓	✗				4	4	3	2	3	1	4	1	2	3	2	1	0
	Number of grade 3+ pressure ulcers acquired in community		Sep-21	6.00		12 month ↓	✓				11	5	7	5	4	2	10	2	4	2	8	6	0
Inpatient Falls	Number of Inpatient Falls	Local	Sep-21	207		12 month ↓	✓				187	247	247	203	177	171	176	228	174	193	198	207	240
Mortality	% of universal mortality reviews (UMRs) undertaken within 28 days of a death	Local	Oct-21	97%	95%	95%	✓				100.0%	98.1%	99.0%	100.0%	100.0%	97.6%	99.3%	98.0%	98.6%	97.6%	93.0%	98.0%	96.8%
	Stage 2 mortality reviews required	Local	Oct-21	16							9	17	12	19	6	11	5	18	12	7	17	10	16
	% stage 2 mortality reviews completed	Local	Aug-21	0.00%		100%	✗				33.3%	35.7%	75.0%	36.8%					25.0%	42.9%	0.0%		0.0%
	Crude hospital mortality rate (74 years of age or less)	National	Sep-21	1.03%	12 month ↓			1.56% (Mar-21)	4th (Mar-21)		0.97%	1.01%	1.08%	1.14%	1.17%	1.17%	1.04%		1.01%	1.03%	1.02%	1.03%	0.00%
	% 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	Oct-21	94%		98%	✓				93.9%	94.6%	98.5%	95.0%	96.3%	93.5%	97.4%	98.9%	95.0%	89.7%	91.7%	91.6%	93.8%
Coding	% of episodes clinically coded within 1 month of discharge	Local	Sep-21	94%	95%	95%	✓				95%	93%	93%	95%	96%	96%	96%	96%	89%	90%	94%	90%	0%
E-TOC	% of completed discharge summaries (total signed and	Local	Oct-21	61%		100%	✗				68%	66%	59%	67%	63%	64%	63%	67%	69%	62%	62%	68%	61%
Workforce	% of headcount by organisation who have had a PADRI/medical appraisal in the previous 12 months (excluding doctors and dentists in training)	National	Oct-21	85%	85%	85%	✗	61.0% (Oct-20)	7th out of 10 organisations (Aug-20)		58%	56%	54%	52%	51%	53%	57%	60%	65%	60%	85%	85%	85%
	% compliance for all completed Level 1 competency with the Core Skills and Training Framework	National	Oct-21	80%	85%	85%	✗	79.4% (Oct-20)	5th out of 10 organisations (Aug-20)		80%	80%	80%	80%	80%	80%	80%	80%	81%	81%	81%	80%	80%
	% workforce sickness absence (12 month rolling)	National	Aug-21	7.11%	12 month ↓			5.87% (Oct-20)	10th out of 10 organisations (Oct-20)		7.07%	7.23%	7.48%	7.57%	7.56%	7.44%	7.12%	6.93%	6.91%	6.99%	7.11%		

		Harm from reduction in non-Covid activity																						
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	
Cancer	% of patients starting definitive treatment within 62 days from point of suspicion (without adjustments)	National	Oct-21(draft)	50.0%	12 month ↑			67.1% (Mar-21)	2nd out of 6 organisations (Mar-21)		65.9%	55.4%	61.0%	67.9%	56.4%	71.6%	65.7%	65.4%	66.8%	55.0%	58.4%	62.2%	50.0%	
Radiotherapy waiting times	Scheduled (21 Day Target)	Local	Oct-21	37%	80%		✗				75%	58%	71%	45%	35%	42%	37%	40%	31%	60%	57%	58%	37%	
	Scheduled (28 Day Target)	Local	Oct-21	84%	100%		✗				90%	85%	88%	82%	80%	85%	77%	87%	70%	84%	91%	89%	84%	
	Urgent SC (7 Day Target)	Local	Oct-21	30.0%	80%		✗				43%	31%	50%	50%	23%	41%	38%	50%	45%	46%	55%	22%	30%	
	Urgent SC (14 Day Target)	Local	Oct-21	90%	100%		✗				86%	100%	85%	94%	91%	90%	83%	86%	87%	77%	95%	76%	90%	
	Emergency (within 1 day)	Local	Oct-21	100%	80%		✓				100%	100%	100%	100%	100%	100%	91%	100%	100%	100%	100%	100%	100%	
	Emergency (within 2 days)	Local	Oct-21	100.0%	100%		✓				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
	Elective Delay (21 Day Target)	Local	Oct-21	89%	80%		✓				58%	56%	71%	69%	61%	86%	82%	81%	91%	90%	94%	81%	89%	
	Elective Delay (28 Day Target)	Local	Oct-21	94%	100%		✗				75%	73%	88%	89%	75%	93%	92%	84%	95%	97%	97%	97%	94%	
Planned Care	Number of patients waiting > 8 weeks for a specified diagnostics	National	Oct-21	5939	0			41,693 (Mar-21)	2nd (Mar-21)		6,645	6,610	6,579	6,239	5,087	4,554	4,804	4,842	5,230	5,425	5,523	5,732	5,939	
	Number of patients waiting > 14 weeks for a specified therapy	National	Oct-21	414	0			4,066 (Mar-21)	2nd (Mar-21)		1,135	817	708	584	491	369	201	166	171	151	186	320	414	
	% of patients waiting < 26 weeks for treatment	National	Oct-21	47%	95%			52.5% (Mar-21)	6th (Mar-21)		44.8%	47.6%	48.0%	47.0%	47.9%	48.8%	49.1%	49.1%	50.7%	47.8%	48.3%	48.1%	47.4%	
	Number of patients waiting > 26 weeks for outpatient appointment	Local	Oct-21	24483	0						22,050	21,005	21,179	21,208	21,225	21,750	22,752	23,700	23,279	23,225	23,444	23,997	24,483	
	Number of patients waiting > 36 weeks for treatment	National	Oct-21	36420	0			216,418 (Mar-21)	3rd (Mar-21)		31,508	35,387	35,126	33,991	32,719	32,874	33,395	34,447	35,040	35,583	35,999	35,711	36,420	
	The number of patients waiting for a follow-up outpatient appointment	National	Oct-21	131554	HB target TBC			747,782 (Mar-21)	5th (Mar-21)		120,968	120,874	119,963	119,999	120,882	121,403	122,303	123,088	127,444	130,208	127,391	130,963	131,554	
	The number of patients waiting for a follow-up outpatients appointment who are delayed over 100%	National	Oct-21	33121				194,689 (Mar-21)	5th (Mar-21)		26,217	27,156	27,641	28,419	28,862	29,316	29,334	30,062	30,550	31,316	29,770	32,574	33,121	
	% of R1 ophthalmology patient pathways waiting within target date or within 25% beyond target date for an outpatient appointment	National	Oct-21	49%	95%			44.8% (Mar-21)	3rd (Mar-21)		45.2%	48.4%	47.3%	46.7%	47.4%	47.7%	47.2%		46.7%	46.3%	46.1%	47.9%	48.6%	
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	Oct-21	7.7%	12 month ↓						6.0%	6.6%	7.7%	7.1%	6.2%	5.6%	5.3%	5.7%	6.5%	6.5%	6.4%	7.2%	7.7%	
	% of patients who did not attend a follow-up outpatient appointment	Local	Oct-21	7.8%	12 month ↓						6.5%	7.2%	8.2%	7.1%	6.2%	6.7%	6.1%	6.9%	5.5%	7.5%	7.5%	7.6%	7.8%	
Theatre Efficiencies	Theatre Utilisation rates	Local	Oct-21	66.0%		90%	✗				75%	74%	59%	65%	73%	75%	80%	78%	77%	72%	69%	72%	66%	
	% of theatre sessions starting late	Local	Oct-21	46.0%		<25%	✗				44%	39%	45%	40%	42%	40%	38%	43%	43%	44%	44%	42%	46%	
	% of theatre sessions finishing early	Local	Oct-21	50.0%		<20%	✗				38%	50%	47%	44%	44%	48%	41%	45%	43%	48%	46%	46%	50%	
Postponed operations	Number of procedures postponed either on the day or the day before for specified non-clinical reasons	National	Jan-21	1,200	> 5% annual ↓			5,398 (Jan-21)	6th (Jan-21)		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 A/WMSG appraisals	National	Q2 20/21	98.8%	100%	100%	✗	98.3% (Q2 20/21)	3rd out of 6 organisations (Q2 20/21)															
Prescribing	Total antibacterial items per 1,000 STAR-PUs	National	Q3 20/21	258.8	4 quarter ↓			241.96 (Q3 20/21)	6th (Q3 20/21)				258.8											
	Patients aged 65 years or over prescribed an antipsychotic	National	Q2 20/21	1,511	Quarter on quarter ↓			10,205 (Q2 20/21)	5th (Q2 20/21)															
	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)															
	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)															
	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)															
Patient experience	Number of friends and family surveys completed	Local	Oct-21	2,733	12 month ↑		✓				1,047	787	584	678	798	1,050		4,590	3,297	1,912	2,075	2,025	2,733	
	% of who would recommend and highly recommend	Local	Oct-21	92%	90%		✗				82%	84%	77%	79%	85%	87%		96%	97%	92%	92%	92%	92%	
	% of all-Wales surveys scoring 9 out of 10 on overall satisfaction	Local	Oct-21	1	90%		✓				79%	85%	65%	81%	94%	93%		92%	96%	95%	92%	96%	93%	
Complaints	Number of new formal complaints received	Local	Jul-21	139	12 month trend		✗				121	103	83	78	94	117	100	115	159	139	115	0	0	
	% concerns that had final reply (Reg 24)/interim reply (Reg 26) within 30 working days of concern received	National	Jun-21	0	75%	80%	✓	71.9% (Q3 20/21)	2nd (Q3 20/21)		75%	82%	80%	71%	80%	81%								
	% of acknowledgements sent within 2 working days	Local	Oct-21	100%	100%	100%	✓				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

		Harm from wider societal actions/lockdown																								
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21			
Early years measures	% of babies who are exclusively breastfed at 10 days old	National	2019/20	34.2%	Annual ↑			35.3% (2019/20)	5th (2019/20)																	
	% children who received 3 doses of the hexavalent '6 in 1' vaccine by age 1	National	Q4 20/21	95.4%	95%			95.3% (Q3 20/21)	1st (Q3 20/21)				96.7%			95.4%										
	% of children who received 2 doses of the MMR vaccine by age 5	National	Q4 20/21	92.4%	95%			92.1% (Q3 20/21)	3rdh (Q3 20/21)				92.0%			92.4%										
Smoking cessation	% of adult smokers who make a quit attempt via smoking cessation services	National	Q1-Q3 20/21	2.25%	5% annual target			2.39% (Q1-3 20/21)	4th (Q1-3 20/21)				2.25%													
Alcohol	European age standardised rate of alcohol attributed hospital admissions for individuals resident in Wales	National	Q3 20/21	308.8	4 quarter ↓			349.6 (Q3 20/21)	2nd (Q3 20/21)				308.8													
	% of people who have been referred to health board services who have completed treatment for alcohol abuse	National	Q4 20/21	45.5%	4 quarter ↑			67.2% (Q4 20/21)	6th (Q4 20/21)				39.5%			45.5%										
Influenza	% uptake of influenza among 65 year olds and over	National	Mar-21	75.5%	75%			76.5% (Mar-21)	4th (Mar-21)		65.6%	72.4%	74.8%	75.2%	75.4%	75.5%	Data collection restarts October 2021									
	% uptake of influenza among under 65s in risk groups	National	Mar-21	49.4%	55%			51.07% (Mar-21)	5th (Mar-21)		34.4%	42.8%	47.2%	48.7%	49.4%	49.4%										
	% uptake of influenza among pregnant women	National	2019/20	78.2%	75%			78.5% (2019/20)	5th out of 10 organisations (2019/20)		Data not available															
	% uptake of influenza among children 2 to 3 years old	Local	Mar-21	53.4%	50%			56.3% (Mar-21)	5th (Mar-21)		35.7%	48.8%	52.5%	53.2%	53.4%	53.4%										
	% uptake of influenza among healthcare workers	National	Mar-21	63.4%	60%			58.7% (2019/20)	7th out of 10 organisations (2019/20)		56.2%	62.9%	63.0%	63.4%	63.4%	63.4%										
Screening services	Uptake of screening for bowel cancer	National	2018/19	57.0%	60%			57.3% (2018/19)	4th (2018/19)																	
	Uptake of screening for breast cancer	National	2018/19	73.6%	70%			72.8% (2018/19)	2nd (2018/19)																	
	Uptake of screening for cervical cancer	National	2018/19	72.1%	80%			73.2% (2018/19)	5th (2018/19)																	
CAMHS	% of urgent assessments undertaken within 48 hours from receipt of referral (Crisis)	Local	Sep-21	95%		100%	✓				100%	100%	100%	100%	100%	100%	100%		94%	79%	100%	95%				
	% Patients with Neurodevelopmental Disorders (NDD) receiving a Diagnostic Assessment within 26 weeks	National	Sep-21	34%	80%	80%	✗	32.2% (Mar-21)	5th (Mar-21)		22%	24%	26%	24%	28%	30%	30%		32%	34%	27%	34%				
	% Patients waiting less than 28 days for a first outpatient appointment for CAMHS	National	Sep-21	40%	80%	80%	✗	75.8% (Mar-21)	3rd (Mar-21)		90%	88%	61%	53%	66%	63%	60%		58%	41%	48%	40%				
	P-CAMHS - % of Routine Assessment by CAMHS undertaken within 28 days from receipt of referral	National	Sep-21	89%		80%	✗	62.3% (Mar-21)	4th (Mar-21)		29%	41%	73%	29%	97%	46%	0%		0%	29%	37%	89%				
	P-CAMHS - % of therapeutic interventions started within 28 days following assessment by LPMHSS	National	Sep-21	35%		80%	✗	80.5% (Mar-21)	3rd (Mar-21)		100%	100%	100%	93%	97%	91%	49%		1%	100%	82%	35%				
	S-CAMHS - % of Routine Assessment by SCAMHS undertaken within 28 days from receipt of referral	Local	Sep-21	41%		80%	✗				79%	62%	58%	60%	56%	53%	48%		44%	29%	32%	41%				
	% residents in receipt of CAMHS to have a valid Care and Treatment Plan (CTP)	National	Sep-21	84%		90%	✗	84.6% (Mar-21)	5th (Mar-21)		82%	81%	82%	83%	84%	82%	82%		81%	81%	65%	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	Sep-21	96%	80%	80%	✓	73.9% (Mar-21)	1st (Mar-21)		99.5%	98%	99%	96%	98%	97%	97%		99%	98%	100%	96%				
	% of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS (over 18 years of age)	National	Sep-21	90%	80%	80%	✓	81.0% (Mar-21)	2nd (Mar-21)		93%	98%	95%	95%	98%	97%	92%		99%	97%	100%	90%				
	% patients waiting < 26 weeks to start a psychological therapy in Specialist Adult Mental Health	National	Sep-21	100%	95%	95%	✓	61.3% (Mar-21)	1st (Mar-21)		99.7%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%				
	% residents in receipt of secondary MH services (all ages) who have a valid care and treatment plan (CTP)	National	Sep-21	84%	90%	90%	✓	85.3% (Mar-21)	2nd (Mar-21)		91%	91%	89%	91%	91%	91%	91%		88%	88%	84%	84%				
Self harm	Rate of hospital admissions with any mention of intentional self-harm of children and young people (aged 10-24 years)	National	2019/20	3.29	Annual ↓			3.97 (2019/20)	4th (2019/20)																	
Dementia	% of people with dementia in Wales age 65 years or over who are diagnosed (registered on a GP QOF register)	National	2019/20	56.3%	Annual ↑			53.1% (2019/20)	2nd (2019/20)																	

