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Bwrdd Iechyd Prifysgol  
Bae Abertawe  
Swansea Bay University  
Health Board



<b>Meeting Date</b>	<b>25<sup>th</sup> January 2022</b>	<b>Agenda Item</b>	<b>6.1</b>
<b>Report Title</b>	<b>Integrated Performance Report</b>		
<b>Report Author</b>	Meghann Protheroe, Head of Performance		
<b>Report Sponsor</b>	Darren Griffiths, Director of Finance and Performance		
<b>Presented by</b>	Darren Griffiths, Director of Finance and Performance		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	The purpose of this report is to provide an update on the current performance of the Health Board at the end of the most recent reporting window (December 2021) in delivering key local performance measures as well as the national measures outlined in the NHS Wales Delivery Framework.		
<b>Key Issues</b>	<p>The Integrated Performance Report is a routine report that provides an overview of how the Health Board is performing against the National Delivery measures and key local quality and safety measures.</p> <p>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. The updated Delivery Framework measures are reported in the 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>Updated performance trajectories (Urgent Emergency Care (UEC, cancer) have recently been finalised and were agreed in the December 2021 Board meeting.</p> <p><b>Key high level issues to highlight this month are as follows:</b></p> <p><b>2021/22 Delivery Framework</b></p> <p><b>COVID19-</b> The number of new cases of COVID19 has increased in December 2021, with 18,167 new cases being reported in-month. The occupancy rate of confirmed COVID patients in critical care beds remains at a low rate, however figures continue to increase for Covid positive patients utilising general beds.</p> <p><b>Unscheduled Care-</b> Demand for emergency department care within Swansea Bay University (SBU) Health Board increased from January 2021 to June 2021 but has since then been on</p>		

	<p>modest reduction trajectory. Attendances have decreased in December 2021 to 9,082 from 10,138 in November 2021. The Health Board's performance against the 4-hour measure deteriorated from 73.46% in November 2021 to 70.15% in December 2021. The number of patients waiting over 12 hours in Accident and Emergency (A&amp;E) increased slightly from 1,055 in November 2021 to 1,101 in December 2021.</p> <p><b>Planned Care-</b> December 2021 saw a 3% in-month increase in the number of patients waiting over 26 weeks for a new outpatient appointment. Additionally, the number of patients waiting over 36 weeks increased by 1.2% to 37,504. However, December 2021 saw a 17% reduction in the number referrals received by secondary care. Therapy waiting times have increased in December 2021 to 889 from 629 in November 2021.</p> <p><b>Cancer-</b> November 2021 saw 63.4% performance against the Single Cancer Pathway measure of patients receiving definitive treatment within 62 days (measure reported a month in arrears). The backlog of patients waiting over 63 days has increased in January 2021 to 673.</p> <p><b>Mental Health-</b> performance against the Mental Health Measures continues to be maintained. All Welsh Government targets were achieved in November 2021. Psychological therapies within 26 weeks continue to be maintained at 100%.</p> <p><b>Child and Adolescent Mental Health Services (CAMHS)-</b> Access times for crisis performance has been maintained at 97% November 2021. Neurodevelopmental Disorders (NDD) access times within 26 weeks continues to be a challenge, however performance has increased from 34% in October 2021 to 37% in November 2021 against a target of 80%.</p>			
<b>Specific Action Required</b>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>	<b>Approval</b>
	✓		✓	
<b>Recommendations</b>	<p>Members are asked to:</p> <ul style="list-style-type: none"> <li>• <b>NOTE</b> the Health Board performance against key measures and targets.</li> <li>• <b>NOTE</b> the updated performance trajectories produced for recovery in Planned Care, Cancer Services and Unscheduled Emergency care.</li> <li>• <b>NOTE</b> the introduction of new Primary Care contracted service measures following approval at PFC in November 2021.</li> <li>• <b>NOTE</b> the actions being taken forward by Management Board on key matters of performance: - being taken to improve performance: -</li> </ul>			

	<ul style="list-style-type: none"> <li>○ <b>ACTION</b> the production of a detailed action plan to support UEC performance recovery. <b>Service Group Director Morrision and COO – 28<sup>th</sup> January 2022</b></li> <li>○ <b>ACTION</b> produce detailed planned care recovery plan to reduce waits for OP, diagnostics, follow up and treatment. <b>COO through Planned Care Board – immediate</b></li> <li>○ <b>ACTION</b> the production of an updated backlog recovery plan in Cancer Services for active monitoring under the Health Board Performance Management Framework. <b>Service Group Director Neath Port Talbot Singleton and Morrision - immediate</b></li> <li>○ <b>ACTION</b> necessary recovery actions where WHSSC recovery performance is behind planned levels. <b>Actions to be reported and managed through specialist services board. Service Group Directors for Morrision and Neath Port Talbot Singleton - immediate</b></li> </ul>
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# INTEGRATED PERFORMANCE REPORT

## 1. INTRODUCTION

The purpose of this report is to provide an update on current performance of the Health Board at the end of the most recent reporting window in delivering key performance measures outlined in the NHS Wales Delivery Framework and local quality & safety measures.

## 2. BACKGROUND

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

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

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

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

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** the Health Board performance against key measures and targets.
- **NOTE** the updated performance trajectories produced for recovery in Planned Care, Cancer Services and Unscheduled Emergency care.
- **NOTE** the introduction of new Primary Care contracted service measures following approval at PFC in November 2021.
- **NOTE** the actions being taken forward by Management Board on key matters of performance: - being taken to improve performance: -
  - **ACTION** the production of a detailed action plan to support UEC performance recovery. **Service Group Director Morriston and COO – 28<sup>th</sup> January 2022**
  - **ACTION** produce detailed planned care recovery plan to reduce waits for OP, diagnostics, follow up and treatment. **COO through Planned Care Board – immediate**
  - **ACTION** the production of an updated backlog recovery plan in Cancer Services for active monitoring under the Health Board Performance Management Framework. **Service Group Director Neath Port Talbot Singleton and Morriston – immediate**
  - **ACTION** necessary recovery actions where WHSSC recovery performance is behind planned levels. **Actions to be reported and managed through specialist services board. Service Group Directors for Morriston and Neath Port Talbot Singleton - immediate**

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

<b>Report History</b>	The last iteration of the Integrated Performance Report was presented to Performance & Finance Committee in December 2021. This is a routine monthly report.
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<b>Appendices</b>	Appendix 1: Integrated Performance Report
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# Appendix 1- Integrated Performance Report January 2022





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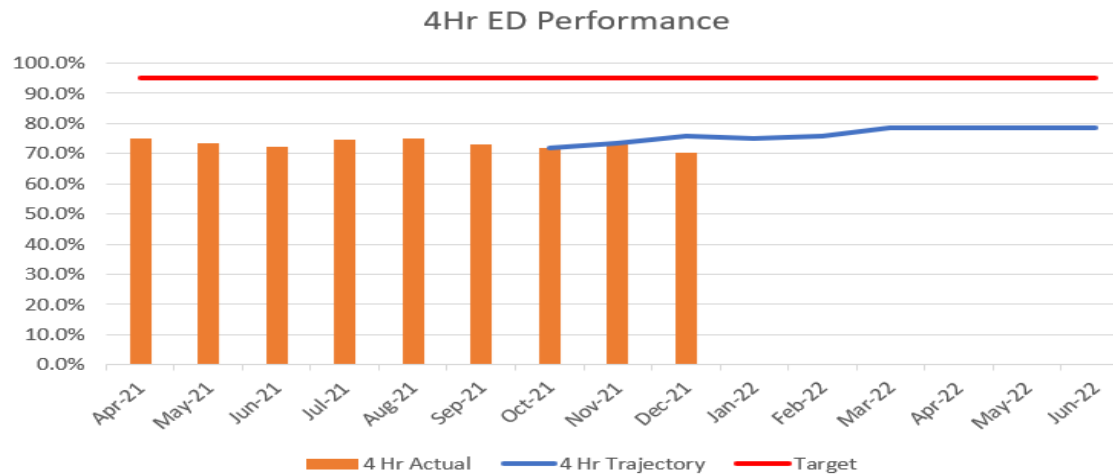
## 1. OVERVIEW

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

Successes	Concerns
<p><b>786,274</b> Total vaccinations undertaken (16.1.22)</p> <p><b>9,336 (17%↓)</b> Total GP referrals</p> <p><b>9,082 (10%↓)</b> A&amp;E attendances</p> <p><b>35 (43%↓)</b> Elective procedures cancelled due to no beds</p> <p><b>27,268 (2%↓)</b> Patients waiting over 52 weeks for treatment</p> <p><b>0</b> Never Events reported</p> <p>↓ Staff sickness levels have seen a reduction</p> <p>↓ There is a continued reduction in inpatient falls</p> <p><b>261 (3%↓)</b> Continued reduction in Clinically Optimised patients</p>	<p><b>25,452 (3%↑)</b> Patients waiting over 26 weeks for a new outpatient appointment</p> <p><b>46.4% (6%↓)</b> Red calls responded to with 8 minutes</p> <p><b>714</b> Podiatry patients waiting &gt; 14 weeks</p> <p><b>673 (15.2%↑)</b> USC backlog over 63 days</p> <p><b>131,403 (1.6%↑)</b> Patients waiting for a follow-up outpatient appointment</p> <p><b>889 (29%↑)</b> Patients waiting over 14 weeks for reportable therapies</p> <p>↑ Variable pay remains high</p> <p><b>62% (5%↓)</b> Theatre utilisation rate</p> <p>↑ Increase number of GP practises reporting high escalation levels</p>

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

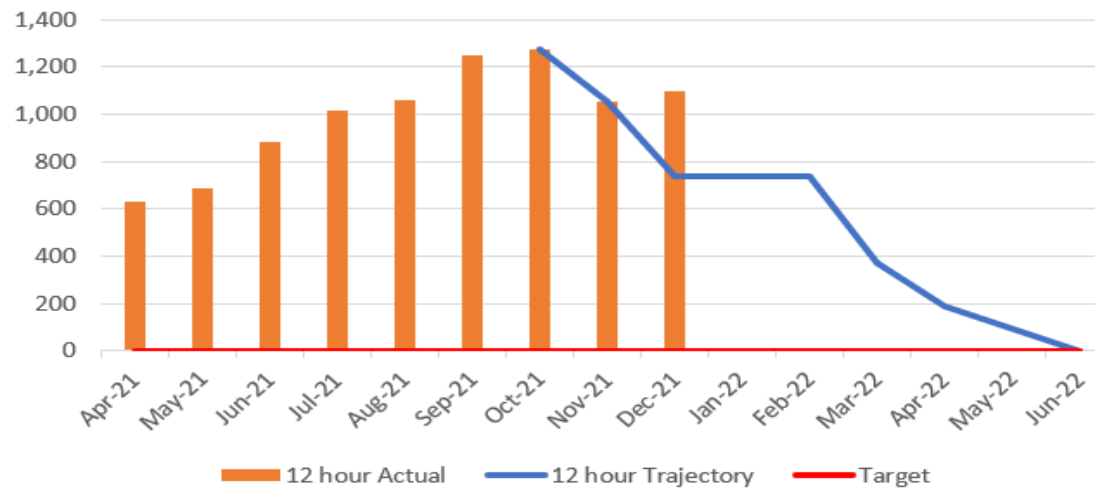
### 1. Submitted recover trajectory for A&E 4hr performance



1. Performance against the 4hr was on target with the updated recovery trajectories, however December 2021 has seen a slight deterioration in performance.

Weekly escalation meetings are currently in place to support performance recovery.

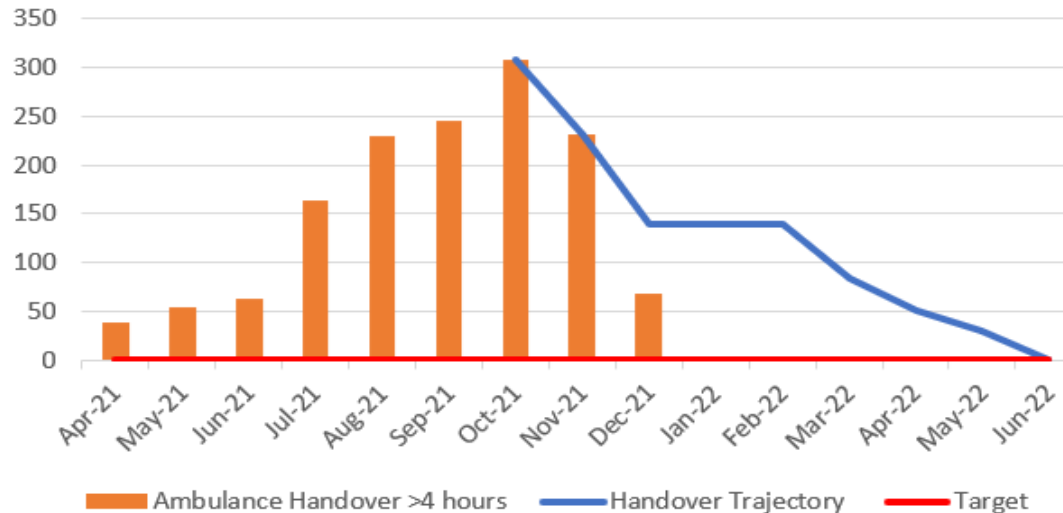
### 2. Submitted recovery trajectory for A&E12-hour performance



2. The 12-hour performance trajectory shows a consistent reduction in patients waiting over 12 hours in ED in recent months. There was a significant reduction in performance against the 12-hour target in December 2021.

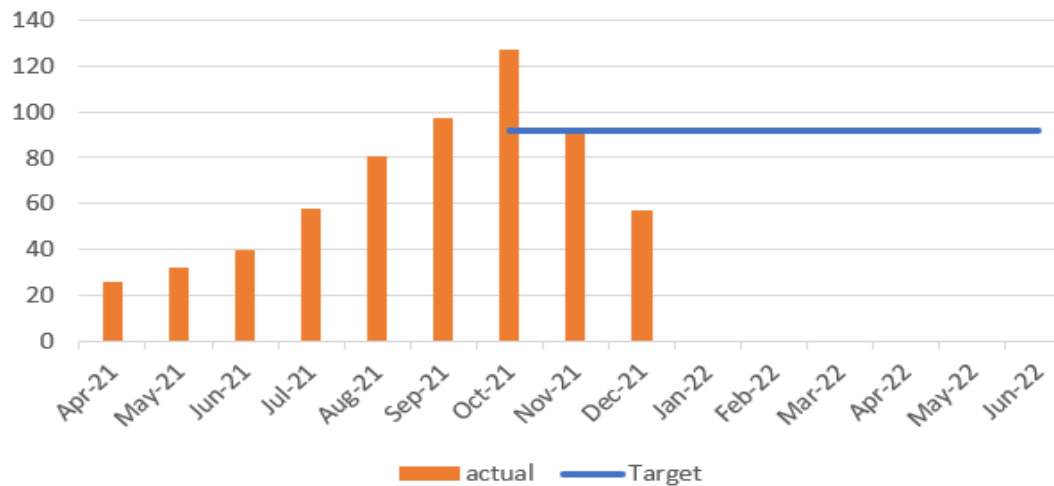
## HARM FROM OVERWHELMED NHS AND SOCIAL CARE SYSTEM UNSCHEDULED CARE – PERFORMANCE ESCALATION UPDATES

### 3. Ambulance Handover over 4 hours



3. The Ambulance handover rate over 4 hours has significantly reduced in December 2021, and is currently exceeding the outlined performance trajectory.

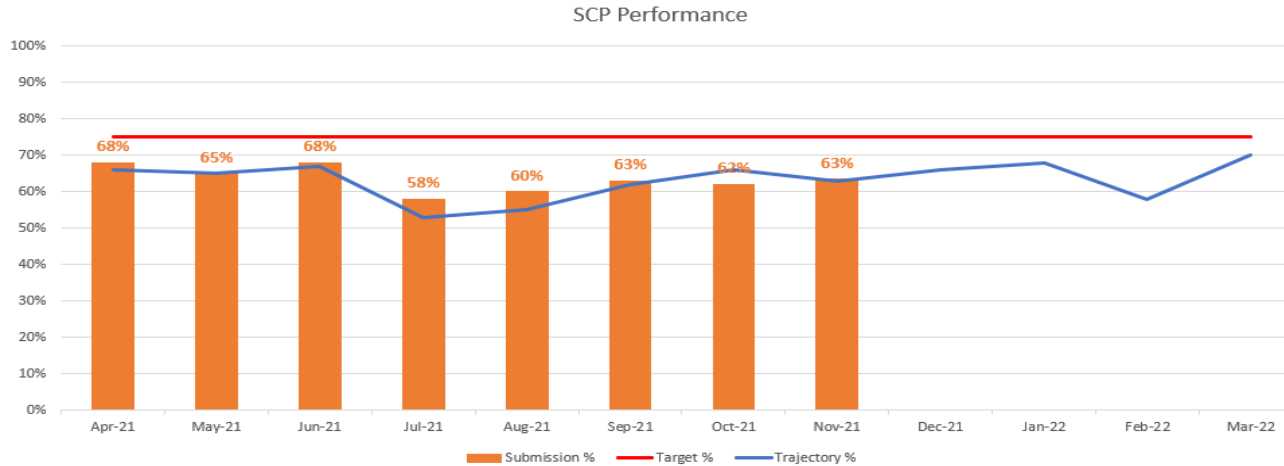
### 4. Average Ambulance Handover



4. The ambulance handover hours lost in October 2021 has been subject to a 25% reduction target. This was met in November and was well within target levels for December 2021.

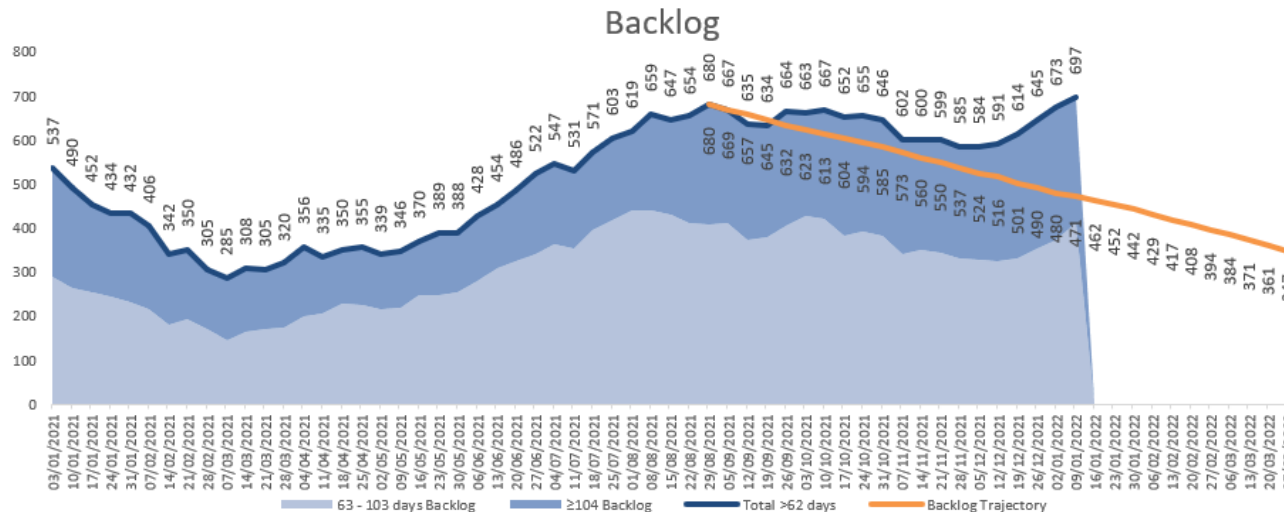
## HARM FROM REDUCTION IN NON-COVID ACTIVITY CANCER SERVICES – PERFORMANCE ESCALATION UPDATES

### 1.SCP performance trajectory



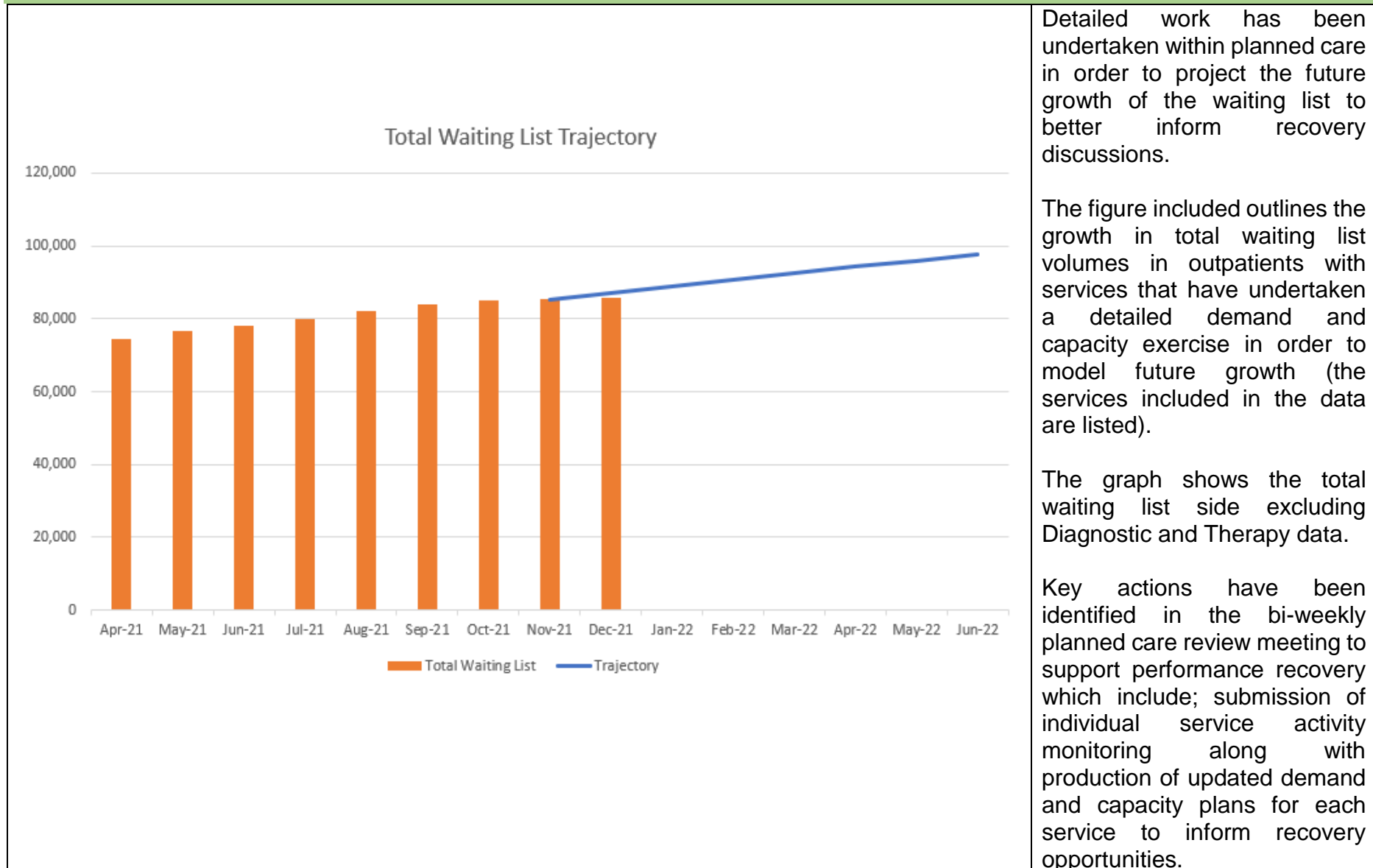
1. SCP performance in November 2021 was reported as 63.4% which is marginally above the outlined trajectory of 63%. December 2021 performance is still in draft format, however current projections suggest performance will be below the recovery trajectory.

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



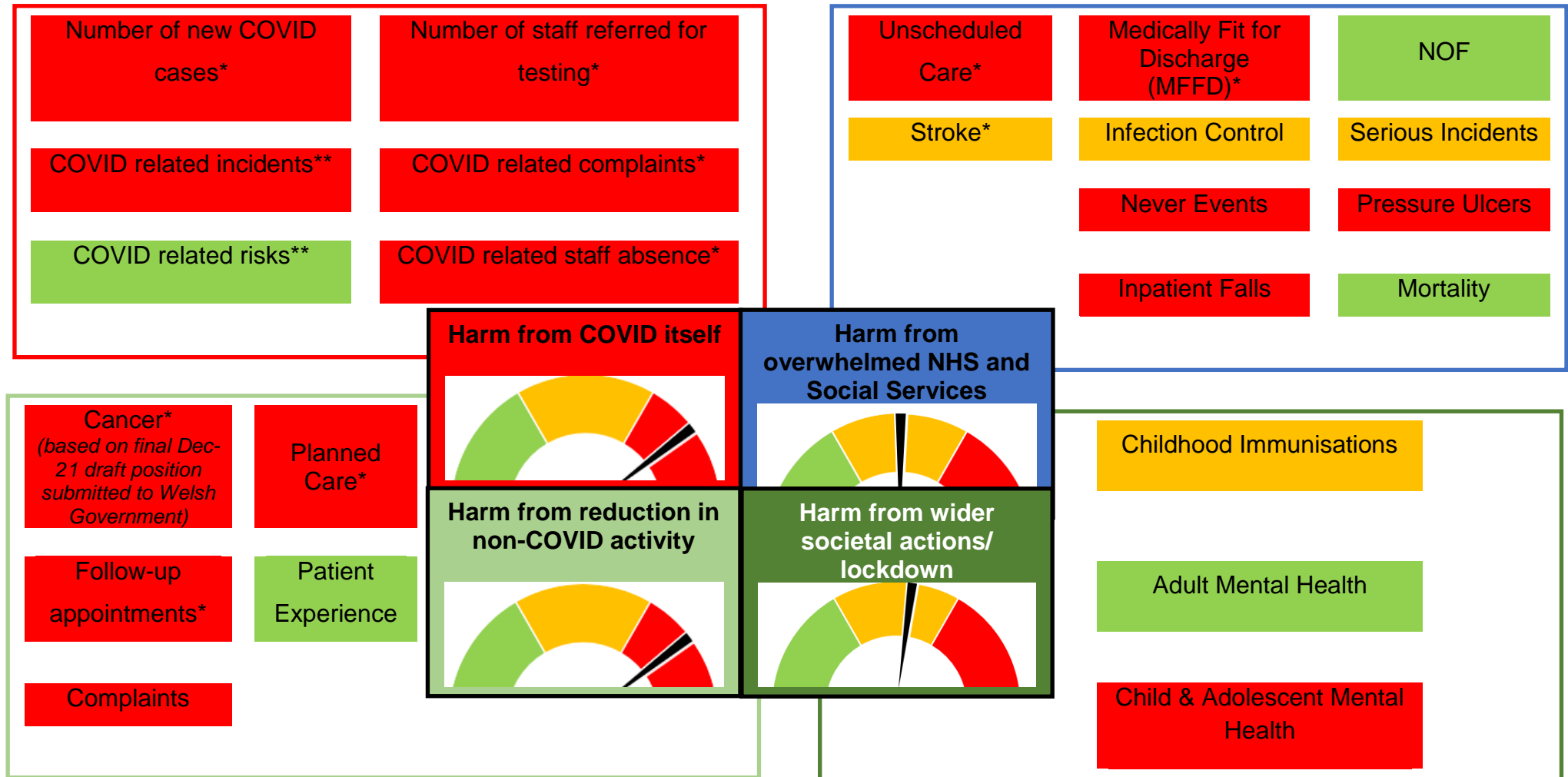
2. Shows the weekly breakdown of the backlog reduction against the proposed trajectories. The backlog has increased in recent weeks and is currently the highest it has been in several months. Actions to support the reduction of the backlog can be found on page 48.

## HARM FROM REDUCTION IN NON-COVID ACTIVITY PLANNED CARE



# 1. QUADRANTS OF HARM SUMMARY

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



NB- RAG status is against national or local target

\*\* Data not available

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



### 3.1 HARM FROM COVID ITSELF

Chart 1 Number of new COVID19 cases

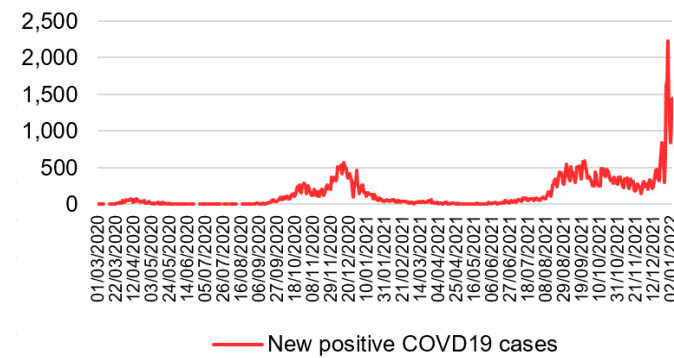


Chart 2: Number of new COVID19 cases (cumulative)

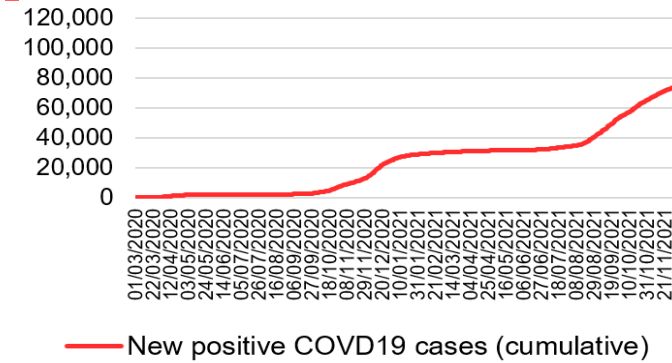


Chart 3: Number of COVID19 tests completed and positivity rate

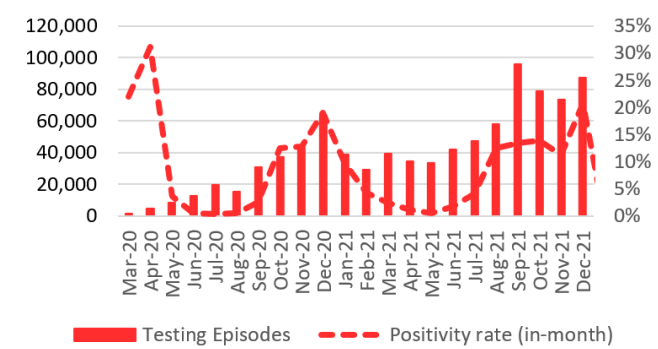


Chart 4: Number of staff referred for Antigen testing

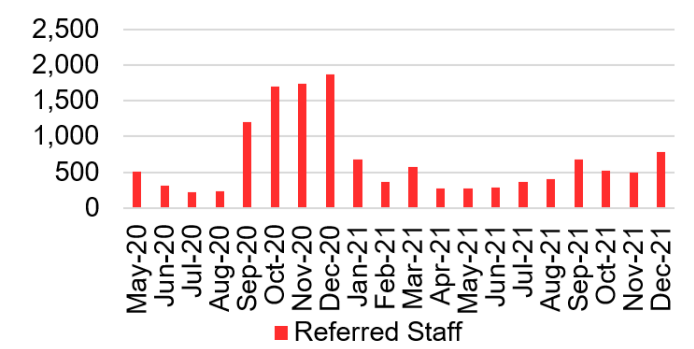


Chart 5: Outcome of staff COVID19/ antigen tests

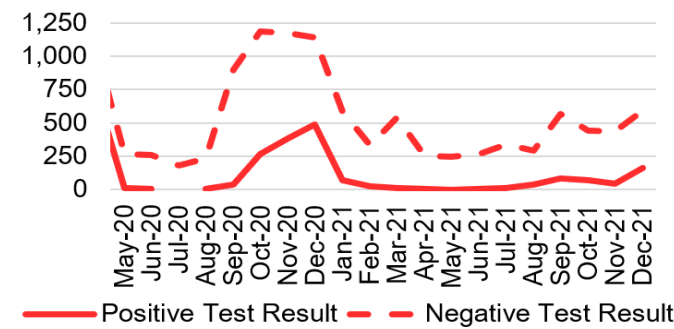


Chart 6: Number of COVID19 related incidents

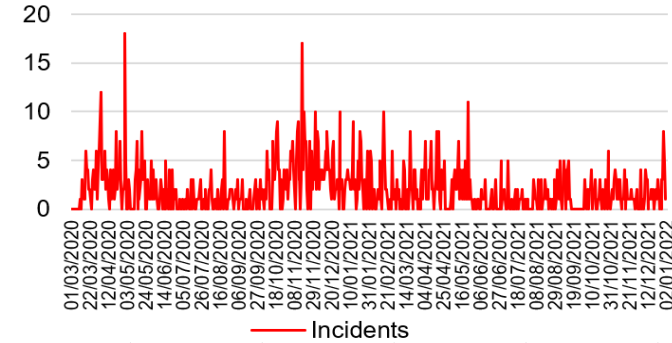


Chart 7: Number of COVID19 related serious incidents

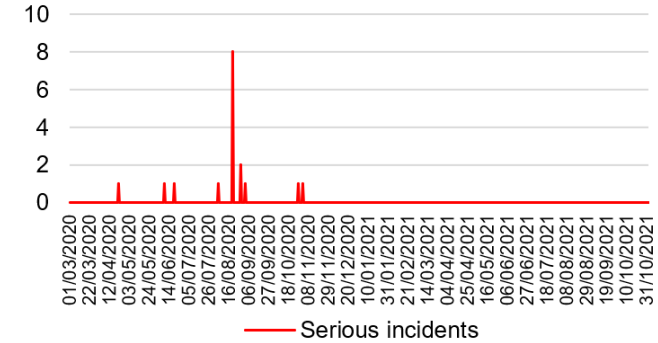


Chart 8: Number of COVID19 related complaints

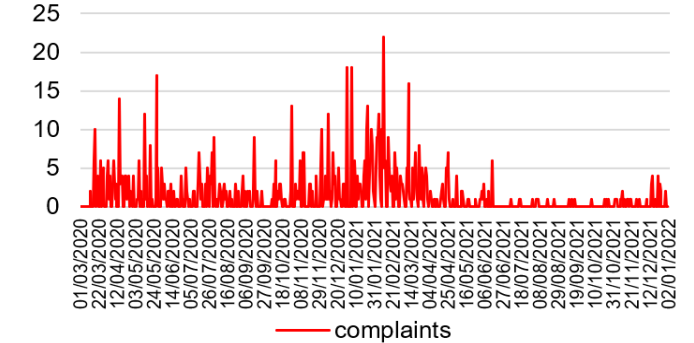


Chart 9: Number of COVID19 related risks

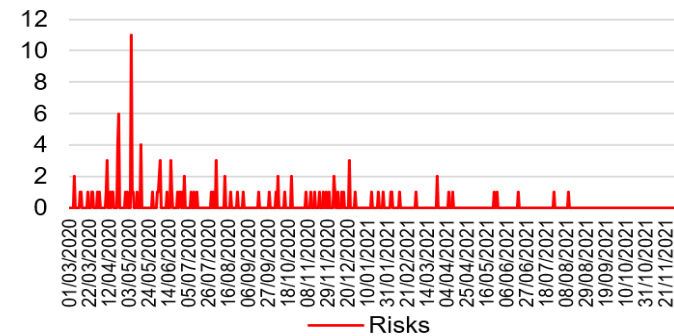


Chart 10: Number of staff self-isolating (asymptomatic)

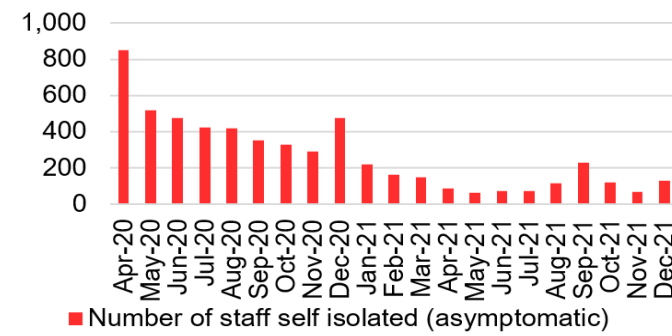


Chart 11: Number of staff self isolating (symptomatic)

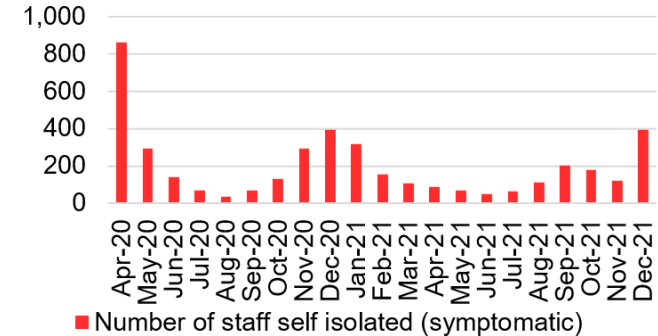


Chart 12: % staff sickness

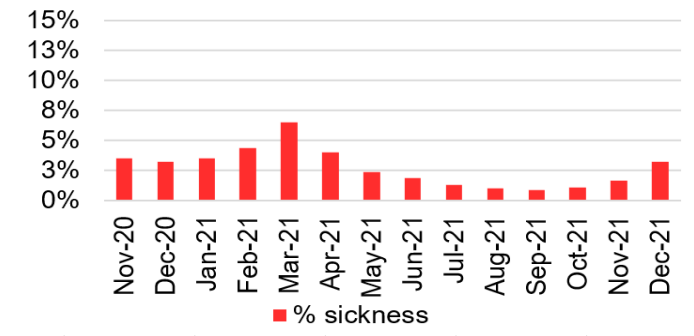


Chart 13: Bed Occupancy for suspected and confirmed COVID19 cases

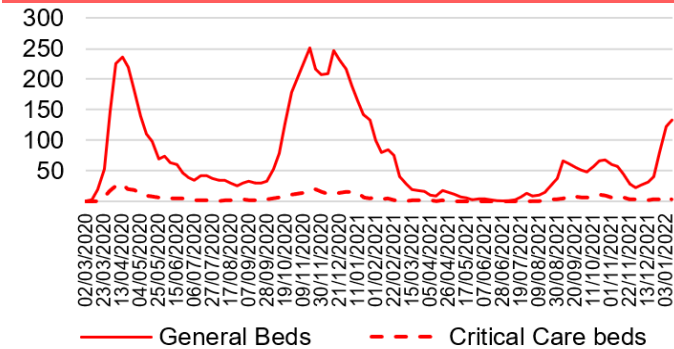


Chart 14: Number of hospital deaths with any mention of COVID19

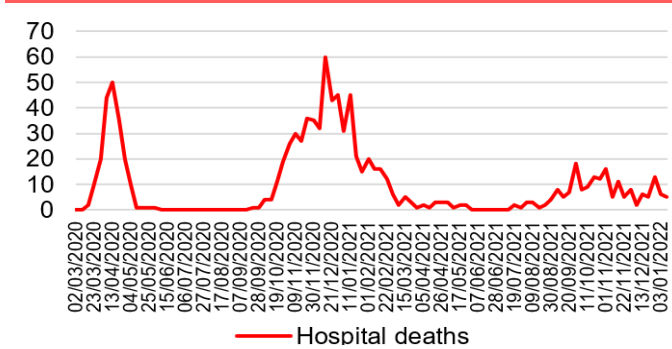


Chart 15: Number of weekly registered deaths with any mention of COVID19 (ONS data)

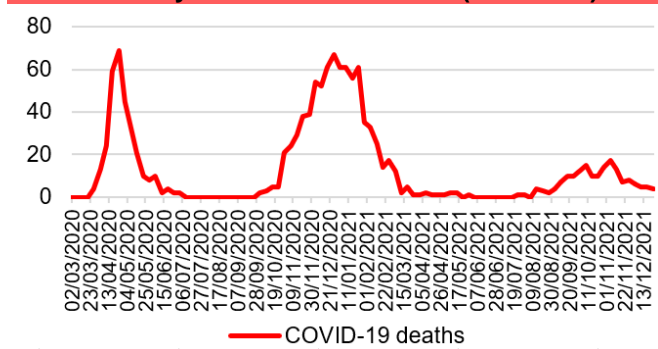
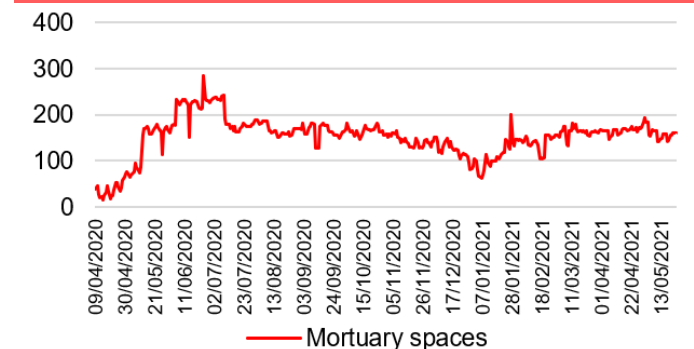
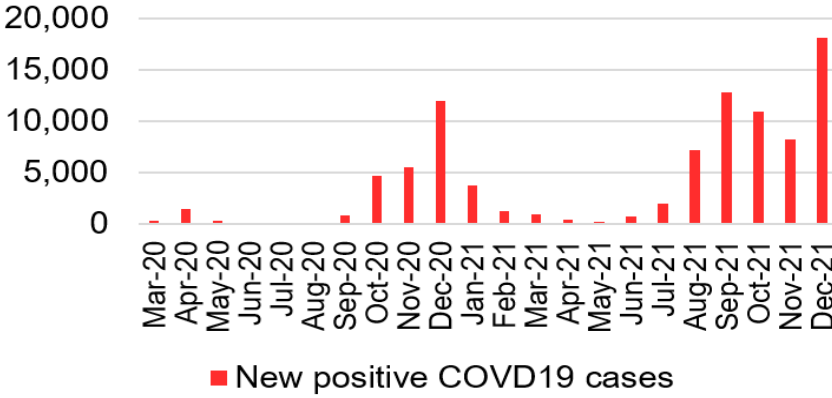
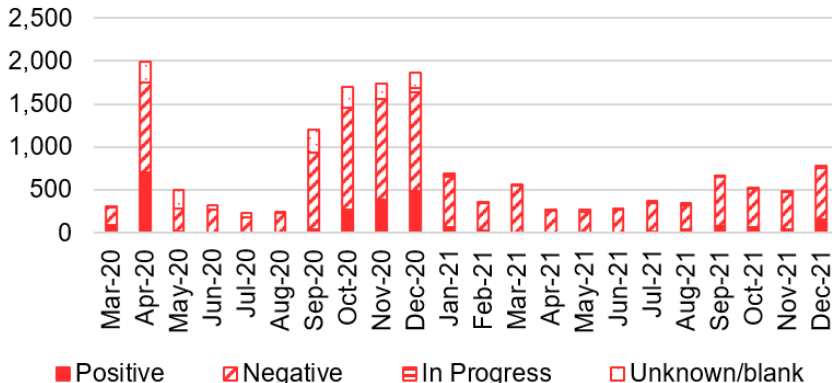
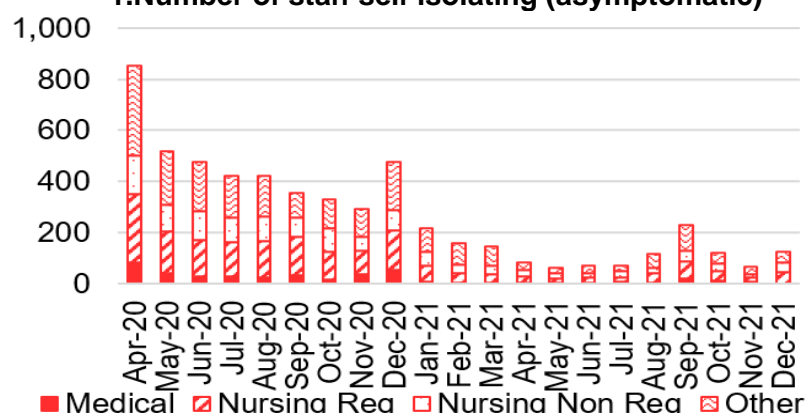
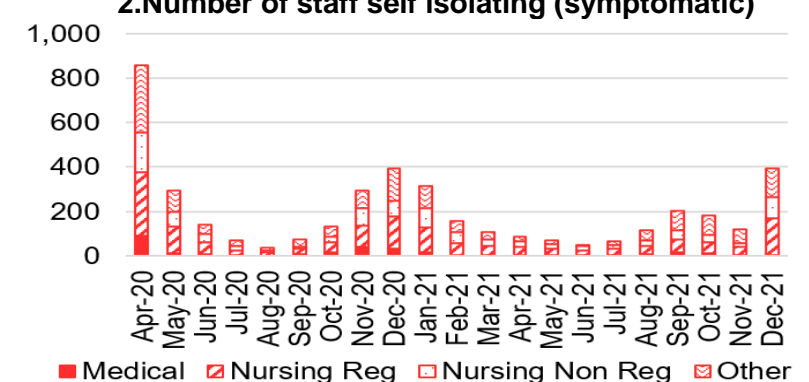


Chart 16: Number of mortuary spaces



### 3.1 Updates on key measures

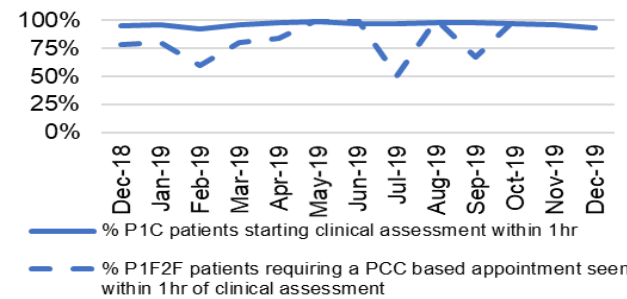
COVID TESTING		
Description	Current Performance	Trend
<p><i>1. Number of new COVID19 cases in Swansea Bay population area</i></p>	<p><b>1. Number of new COVID cases</b> In December 2021, there were an additional 18,167 positive cases recorded bringing the cumulative total to 91,545 in Swansea Bay since March 2020.</p>	<p><b>1.Number of new COVID19 cases for Swansea Bay population</b></p>  <p>■ New positive COVID19 cases</p>
	<p><b>2. Staff referred for Antigen testing</b> The cumulative number of staff referred for COVID testing between March 2020 and December 2021 is 15,756 of which 16% have been positive (Cumulative total).</p>	<p><b>2.Outcome of staff referred for Antigen testing</b></p>  <p>■ Positive    ▨ Negative    ■ In Progress    □ Unknown/blank</p>

COVID RELATED STAFF ABSENCE																																																																																																																						
Description		Current Performance					Trend																																																																																																															
Staff absence due to COVID19		The following data is based on the mid-month position and broken down into the categories requested by Welsh Government.																																																																																																																				
	1.Number of staff self-isolating (asymptomatic)	1. & 2. Number of staff self-isolating (asymptomatic and symptomatic) Between November and December 2021, the number of staff self-isolating (asymptomatic) increased from 65 to 126 and the number of staff self-isolating (symptomatic) increased from 120 to 393. In December 2021, Registered Nursing staff had the largest number of self-isolating staff who are asymptomatic and symptomatic.																																																																																																																				
	2.Number of staff self isolating (symptomatic)																																																																																																																					
	3.% staff sickness	3. % Staff sickness The percentage of staff sickness absence due to COVID19 has decreased from 1.4% in November 2021 to 3.9% in December 2021.																																																																																																																				
		<div>1.Number of staff self isolating (asymptomatic)</div>  <div>2.Number of staff self isolating (symptomatic)</div>  <div>3.% staff sickness</div> <table><tr><th></th><th>Sep-20</th><th>Oct-20</th><th>Nov-20</th><th>Dec-20</th><th>Jan-21</th><th>Feb-21</th><th>Mar-21</th><th>Apr-21</th><th>May-21</th><th>Jun-21</th><th>Jul-21</th><th>Aug-21</th><th>Sep-21</th><th>Oct-21</th><th>Nov-21</th><th>Dec-21</th></tr><tr><td>Medical</td><td>4.0%</td><td>3.2%</td><td>7.3%</td><td>8.3%</td><td>2.2%</td><td>0.7%</td><td>0.4%</td><td>0.3%</td><td>0.2%</td><td>0.5%</td><td>0.9%</td><td>1.3%</td><td>3.6%</td><td>2.4%</td><td>1.2%</td><td>0.3%</td></tr><tr><td>Nursing Reg</td><td>4.4%</td><td>3.8%</td><td>4.7%</td><td>7.4%</td><td>4.3%</td><td>2.3%</td><td>1.9%</td><td>1.6%</td><td>1.2%</td><td>1.1%</td><td>1.4%</td><td>1.8%</td><td>3.1%</td><td>2.2%</td><td>1.3%</td><td>5.3%</td></tr><tr><td>Nursing Non Reg</td><td>4.2%</td><td>6.0%</td><td>6.5%</td><td>7.3%</td><td>7.0%</td><td>3.9%</td><td>3.1%</td><td>2.4%</td><td>1.9%</td><td>1.8%</td><td>1.8%</td><td>2.3%</td><td>4.3%</td><td>3.1%</td><td>1.6%</td><td>6.5%</td></tr><tr><td>Other</td><td>2.0%</td><td>2.5%</td><td>3.0%</td><td>5.4%</td><td>3.1%</td><td>2.2%</td><td>1.7%</td><td>0.8%</td><td>0.6%</td><td>0.6%</td><td>0.7%</td><td>1.6%</td><td>2.9%</td><td>2.0%</td><td>1.4%</td><td>2.7%</td></tr><tr><td>All</td><td>3.2%</td><td>3.5%</td><td>4.4%</td><td>6.5%</td><td>4.0%</td><td>2.4%</td><td>1.9%</td><td>1.3%</td><td>1.0%</td><td>0.9%</td><td>1.1%</td><td>1.7%</td><td>3.2%</td><td>2.3%</td><td>1.4%</td><td>3.9%</td></tr></table>																Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Medical	4.0%	3.2%	7.3%	8.3%	2.2%	0.7%	0.4%	0.3%	0.2%	0.5%	0.9%	1.3%	3.6%	2.4%	1.2%	0.3%	Nursing Reg	4.4%	3.8%	4.7%	7.4%	4.3%	2.3%	1.9%	1.6%	1.2%	1.1%	1.4%	1.8%	3.1%	2.2%	1.3%	5.3%	Nursing Non Reg	4.2%	6.0%	6.5%	7.3%	7.0%	3.9%	3.1%	2.4%	1.9%	1.8%	1.8%	2.3%	4.3%	3.1%	1.6%	6.5%	Other	2.0%	2.5%	3.0%	5.4%	3.1%	2.2%	1.7%	0.8%	0.6%	0.6%	0.7%	1.6%	2.9%	2.0%	1.4%	2.7%	All	3.2%	3.5%	4.4%	6.5%	4.0%	2.4%	1.9%	1.3%	1.0%	0.9%	1.1%	1.7%	3.2%	2.3%	1.4%	3.9%
	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21																																																																																																						
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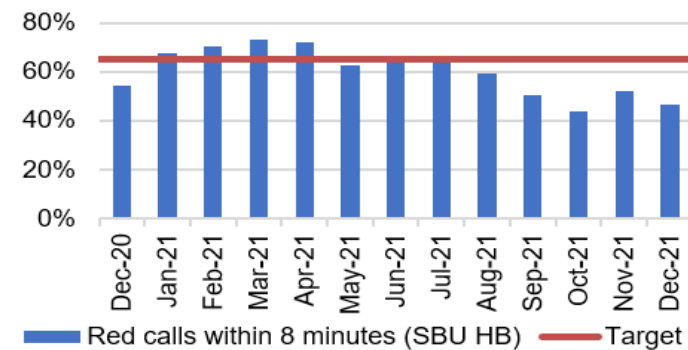
## HARM FROM OVERWHELMED NHS AND SOCIAL CARE SYSTEM

### 4.1 Unscheduled Care- Overview

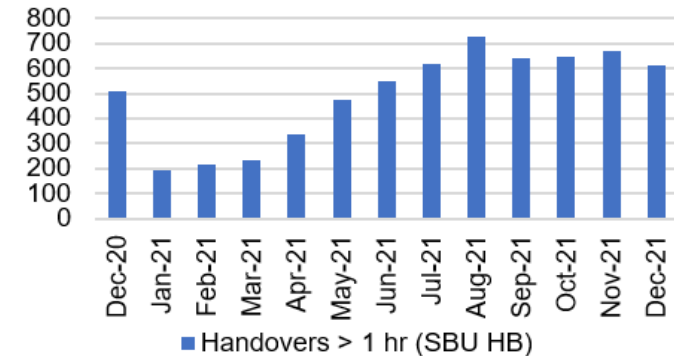
**Chart 1: GP Out of Hours/ 111**



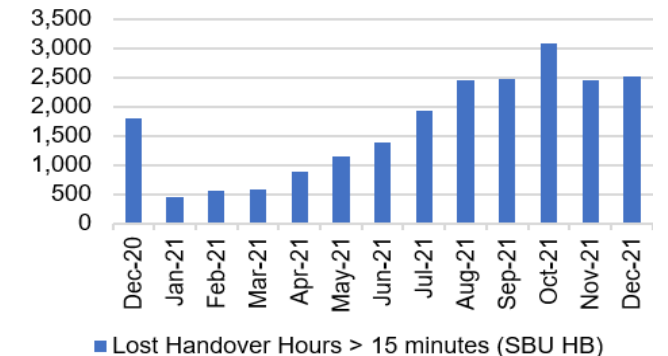
**Chart 2: % red calls responded to within 8 minutes**



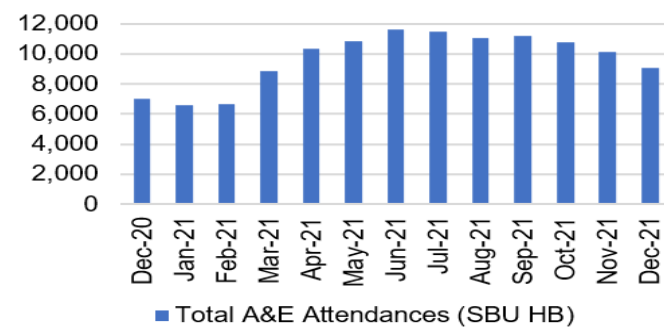
**Chart 3: Number of ambulance handovers over 1 hour**



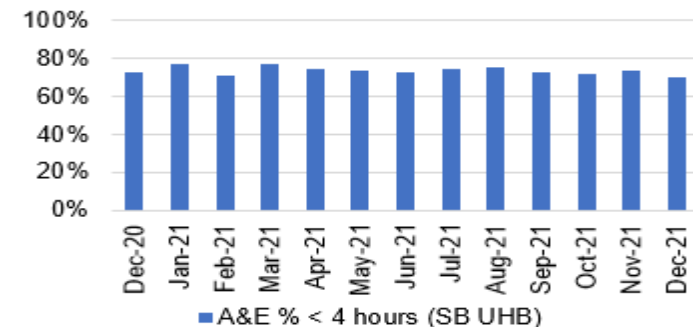
**Chart 4: Lost hours- notification to ambulance handover over 15 minutes**



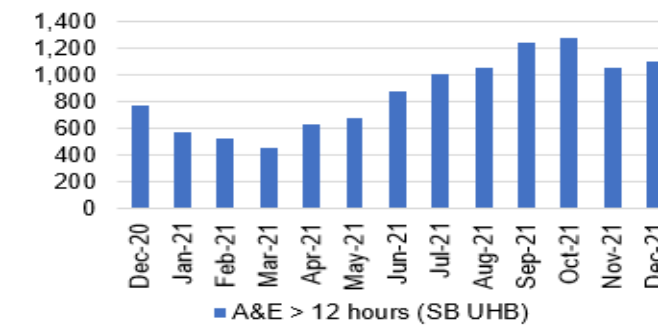
**Chart 5: A&E Attendances**



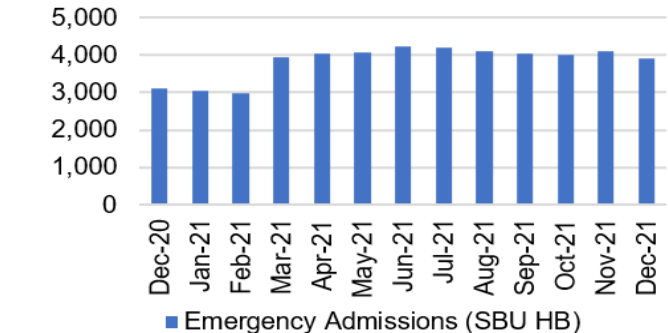
**Chart 6: % patients who spend less than 4 hours in A&E**



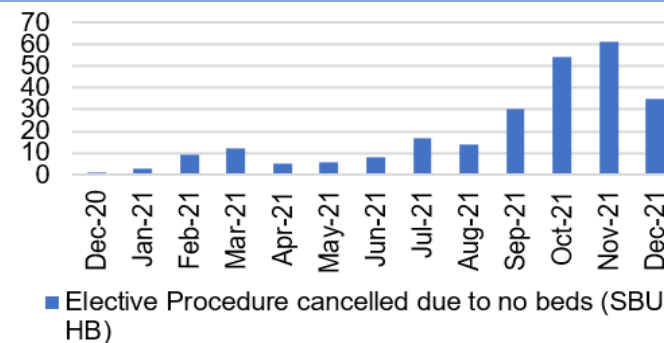
**Chart 7: Number of patients waiting over 12 hours in A&E**



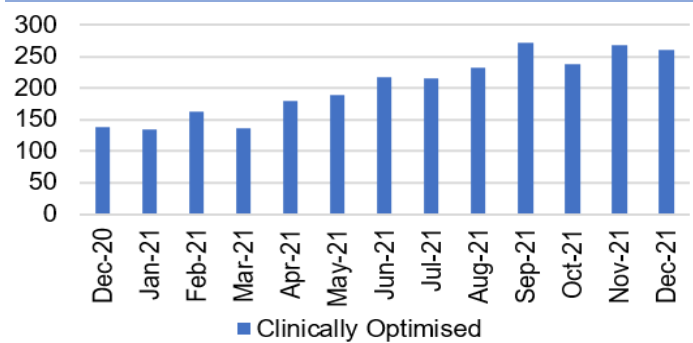
**Chart 8: Number of emergency admissions**



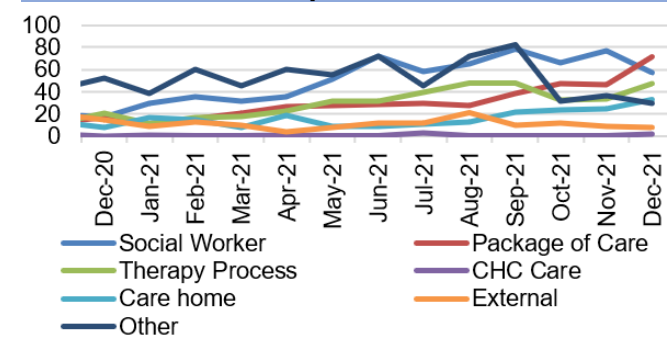
**Chart 9: Elective procedures cancelled due to lack of beds**



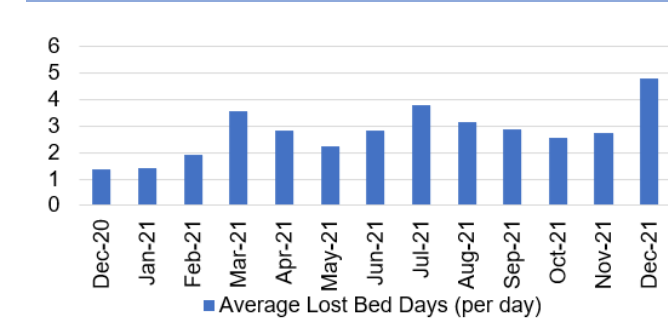
**Chart 10: Number of clinically optimised patients**



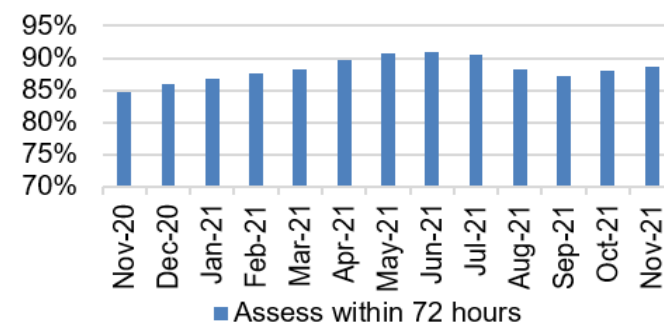
**Chart 11: Delay reason for clinically optimised patients**



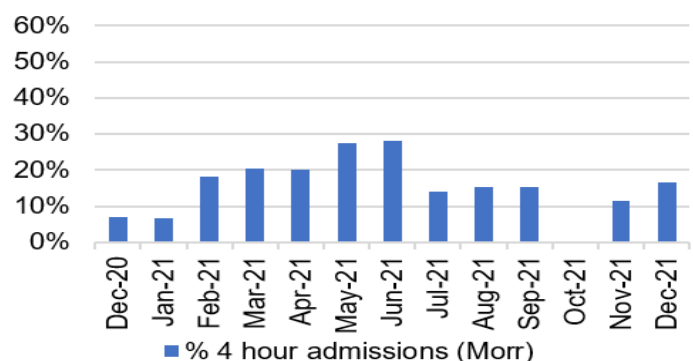
**Chart 12: Average lost bed days (per day)**



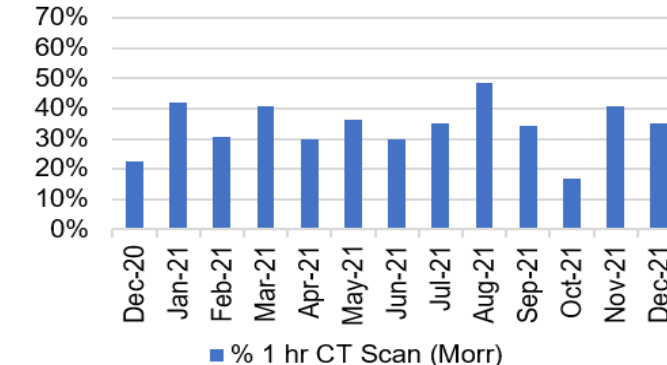
**Chart 13: % of patients (> 60 years) who presented with a hip fracture that received an orthogeriatrician assessment within 72 hours**



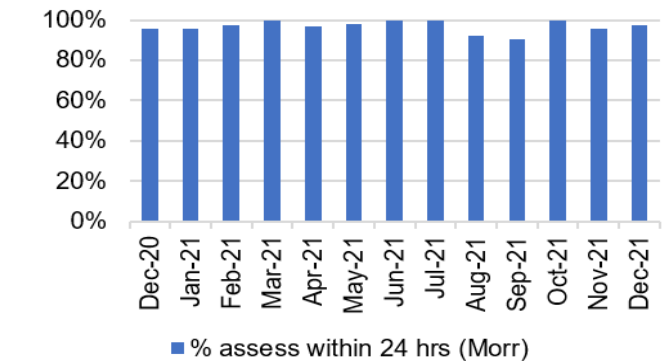
**Chart 14: Direct admission to Acute Stroke Unit within 4 hours**



**Chart 15: % of stroke patients receiving CT scan with 1 hour**



**Chart 16: % stroke patients receiving consultant assessment within 24 hours**



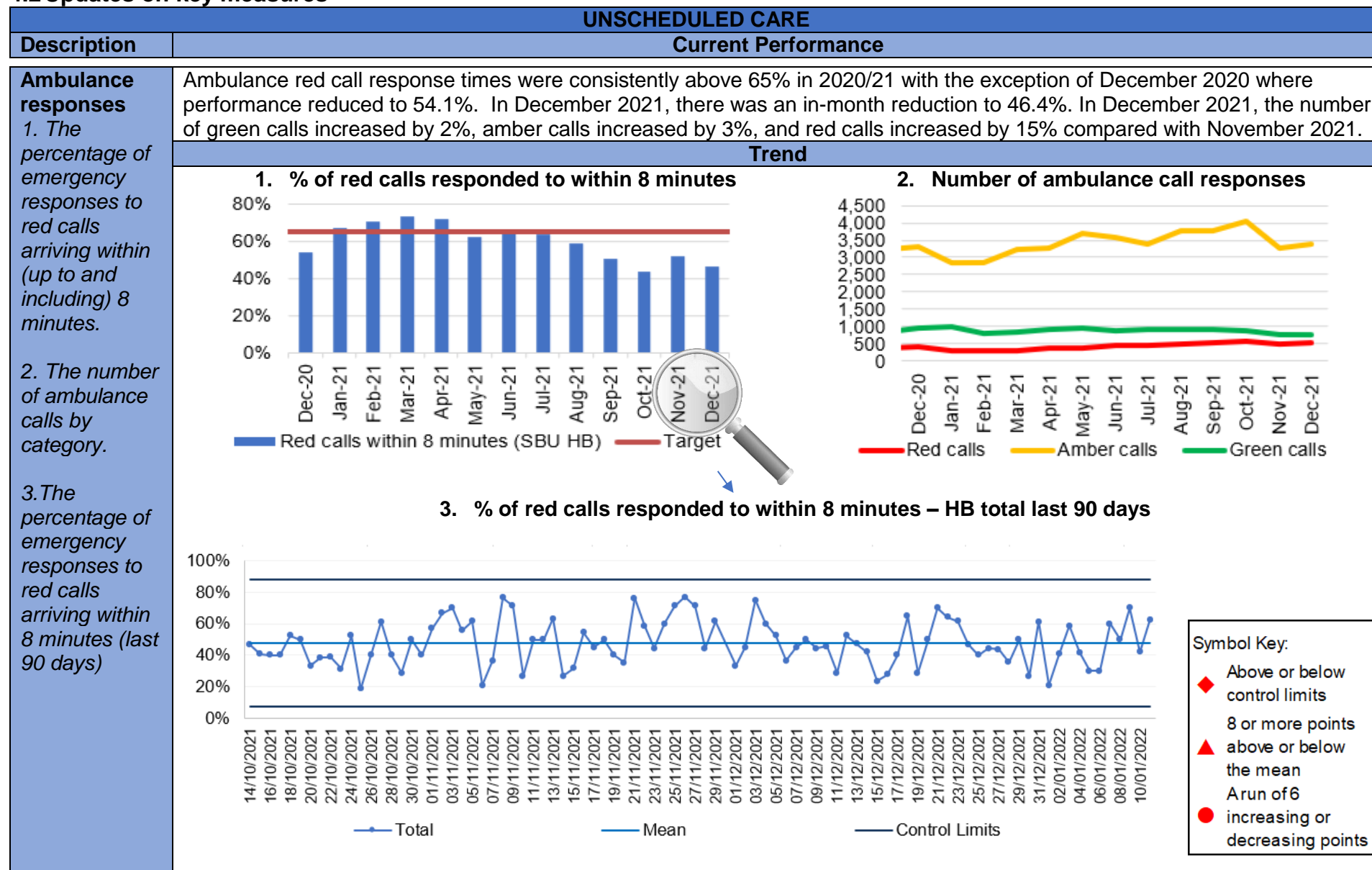


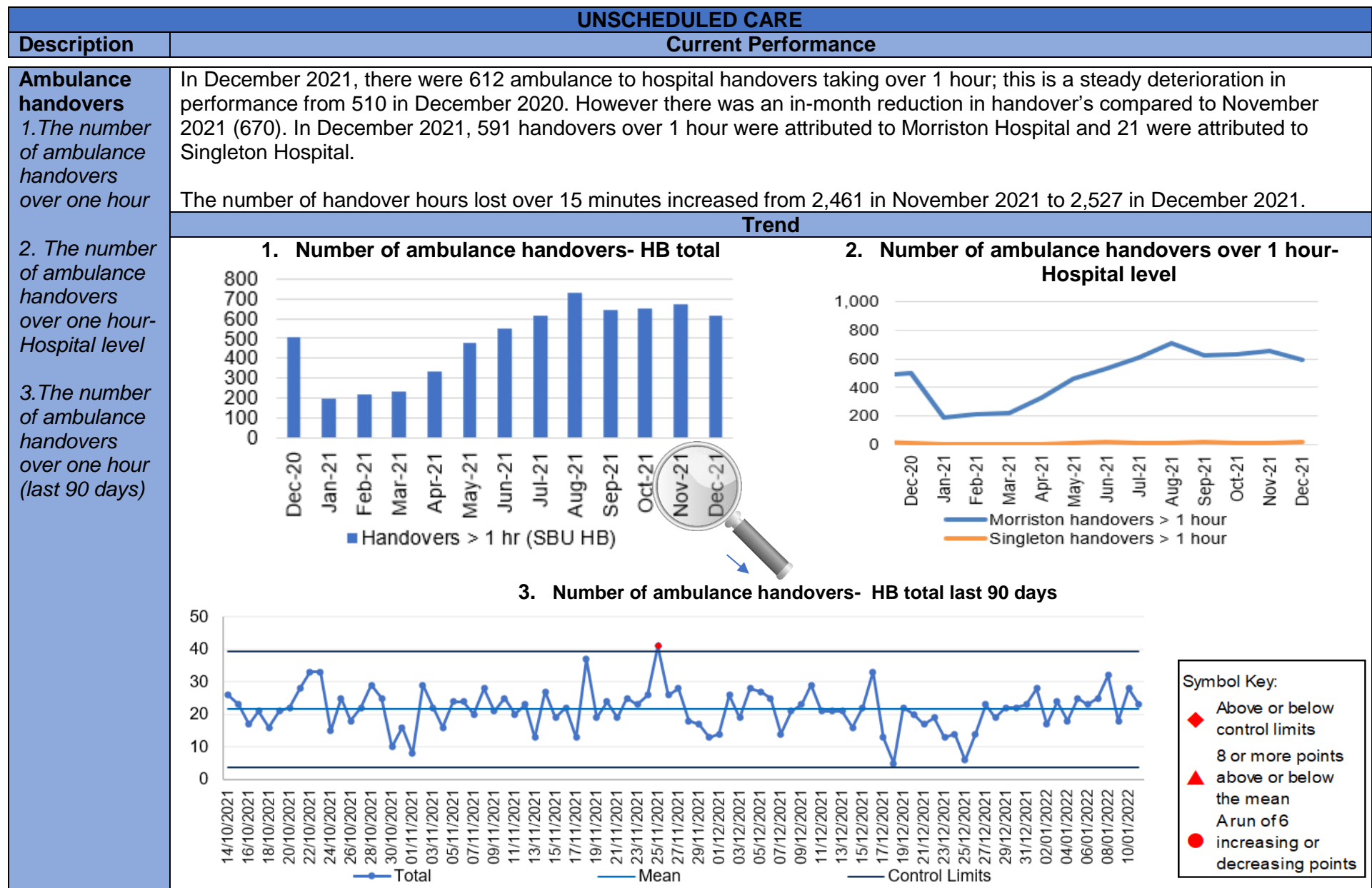
## Unscheduled Care Overview (December 2021)

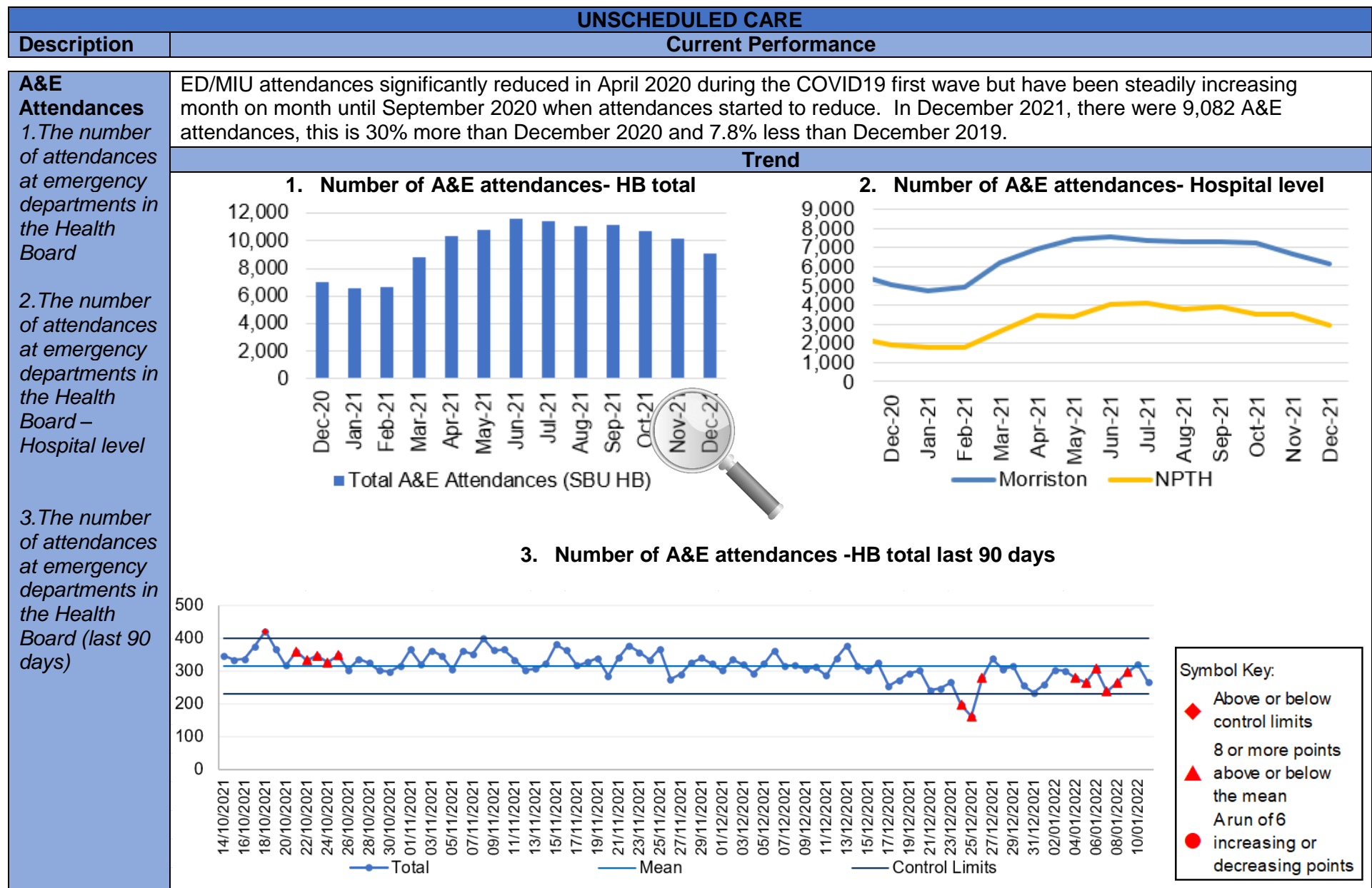
Primary Care Access		Ambulance	Emergency Department	
<b>97% (→)</b> GP practices open during daily core hours	<b>88% (→)</b> GP practices offering appointments between 5pm-6:30pm	<b>46.4% (6%↓)</b> Red calls responded to within 8 minutes	<b>9,082 (10%↓)</b> A&E attendances	<b>70.15% (3.3%↓)</b> Waits in A&E under 4 hours
<b>93% (3%↓)</b> % of Out of Hours (OoH)/111 patients prioritised as P1CH that started their definitive clinical assessment within 1 hour of their initial call being answered ( <i>July-19</i> )	<b>100% (33%↑)</b> % of Out of Hours (OOH)/111 patients prioritised as P1F2F requiring a Primary Care Centre (PCC) based appointment seen within 1 hour following completion of their definitive clinical assessment ( <i>Oct-19</i> )	<b>612 (9%↓)</b> Ambulance handovers over 1 hour	<b>1,101 (4%↑)</b> Waits in A&E over 12 hours	<b>6,821 (33%↓)</b> Patients admitted from A&E
		<b>3,375 (3%↑)</b> Amber calls		
		<b>544 (14%↑)</b> Red calls		
Emergency Activity		Patient Flow		
<b>3,904 (5%↓)</b> Emergency Inpatient Admissions	<b>309 (-14%↓) (Jun-21)</b> Emergency Theatre Cases	<b>13 (19%↓) (Mar-20)</b> Mental Health DTOCs * Data collection temporarily suspended	<b>60 (13%↓) (Mar-20)</b> Non-Mental Health DTOCs * Data collection temporarily suspended	
<b>368 (15%↑) (Jun-21)</b> Trauma theatre cases	<b>35 (43%↓)</b> Elective procedures cancelled due to no beds		<b>261 (3%↓)</b> Clinically Optimised patients	

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

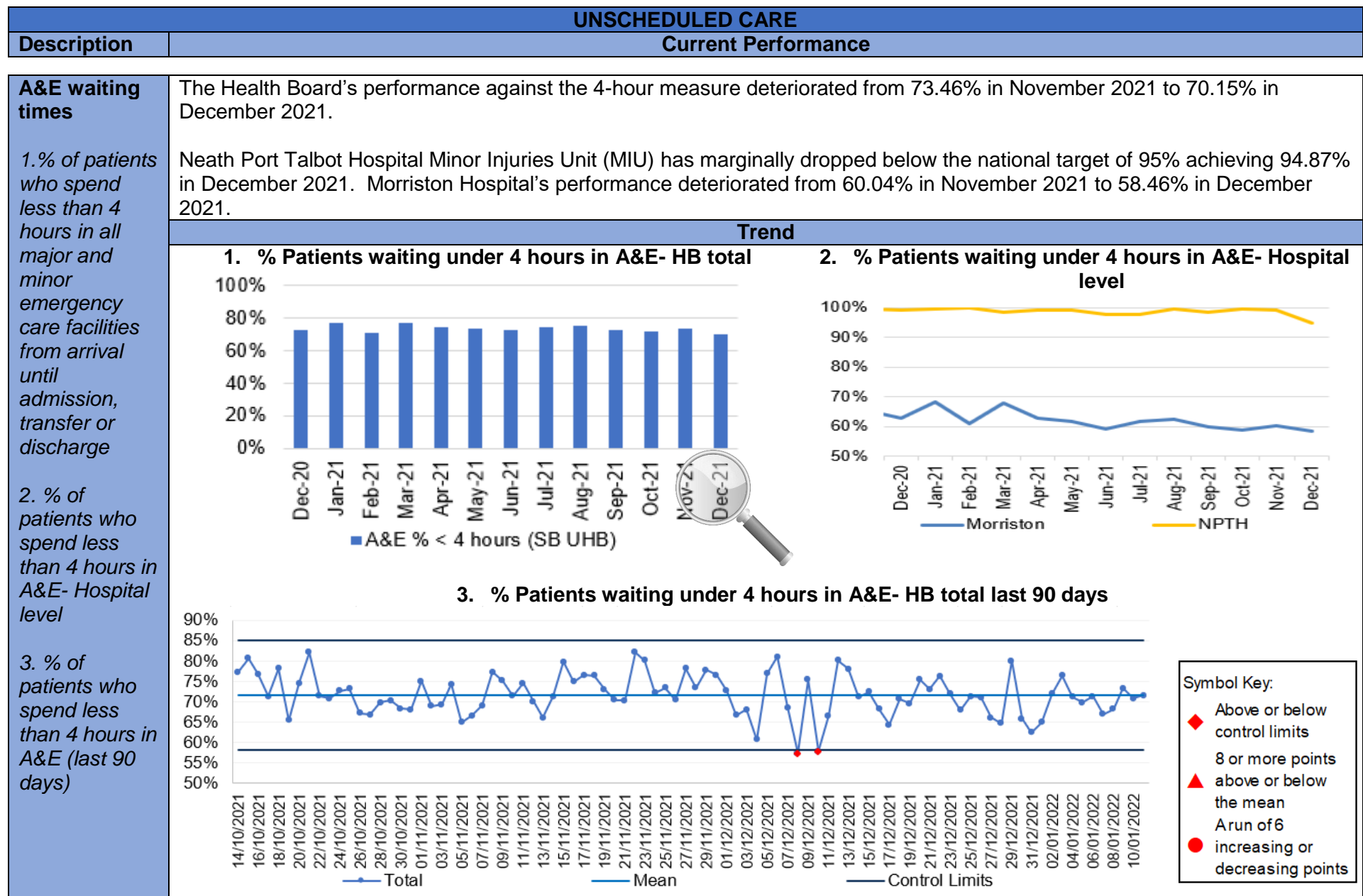
## 4.2 Updates on key measures

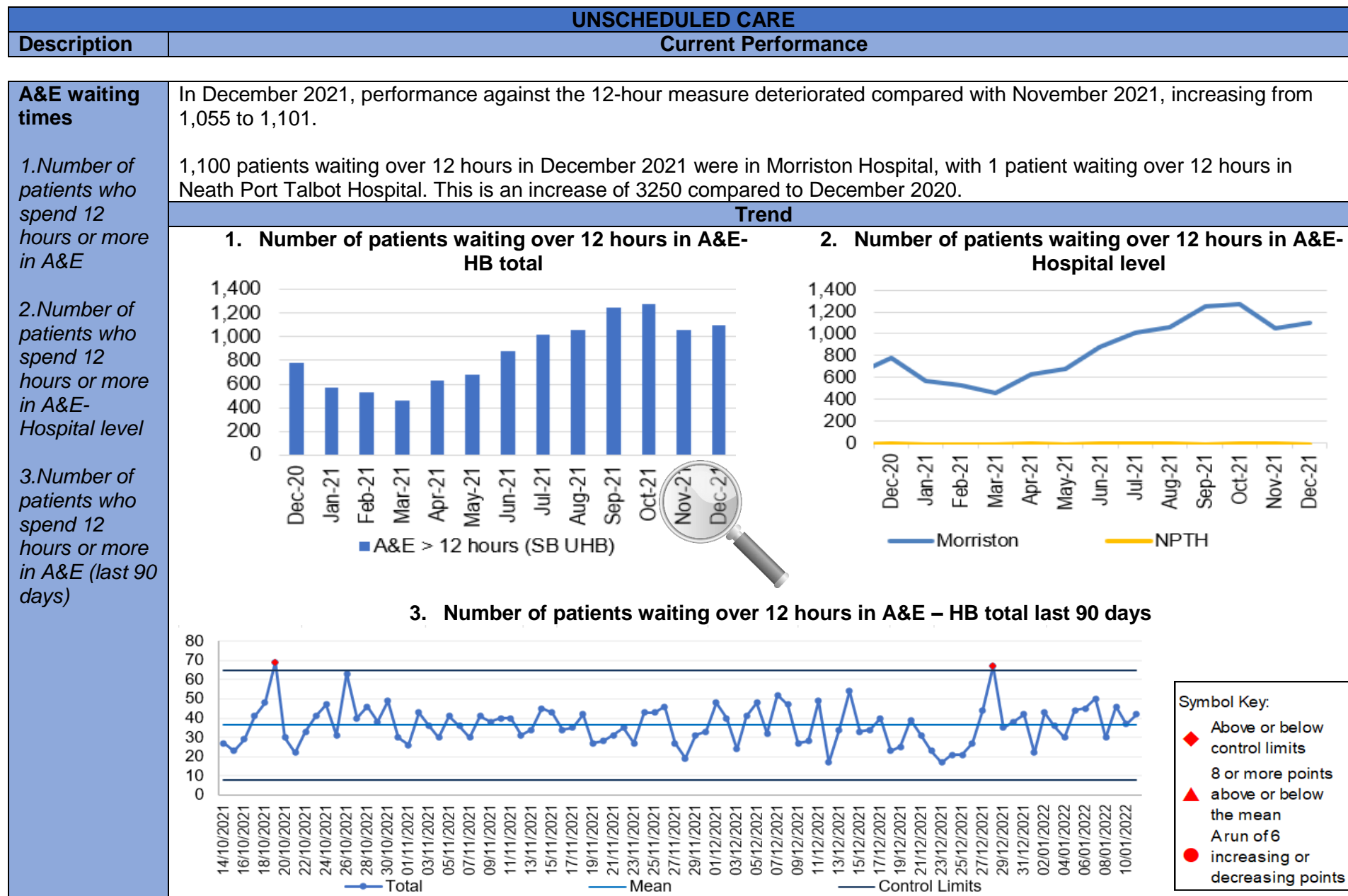


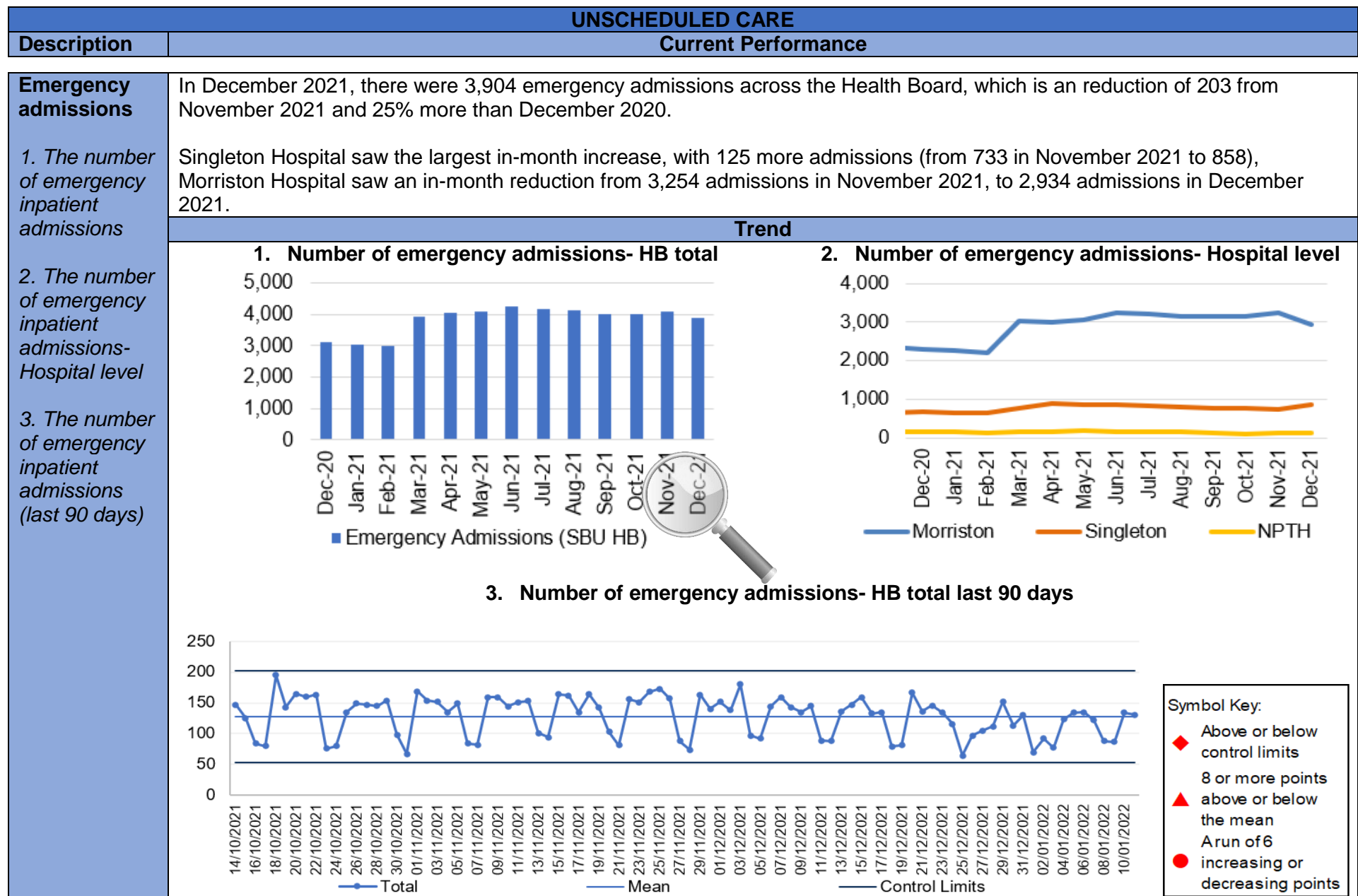


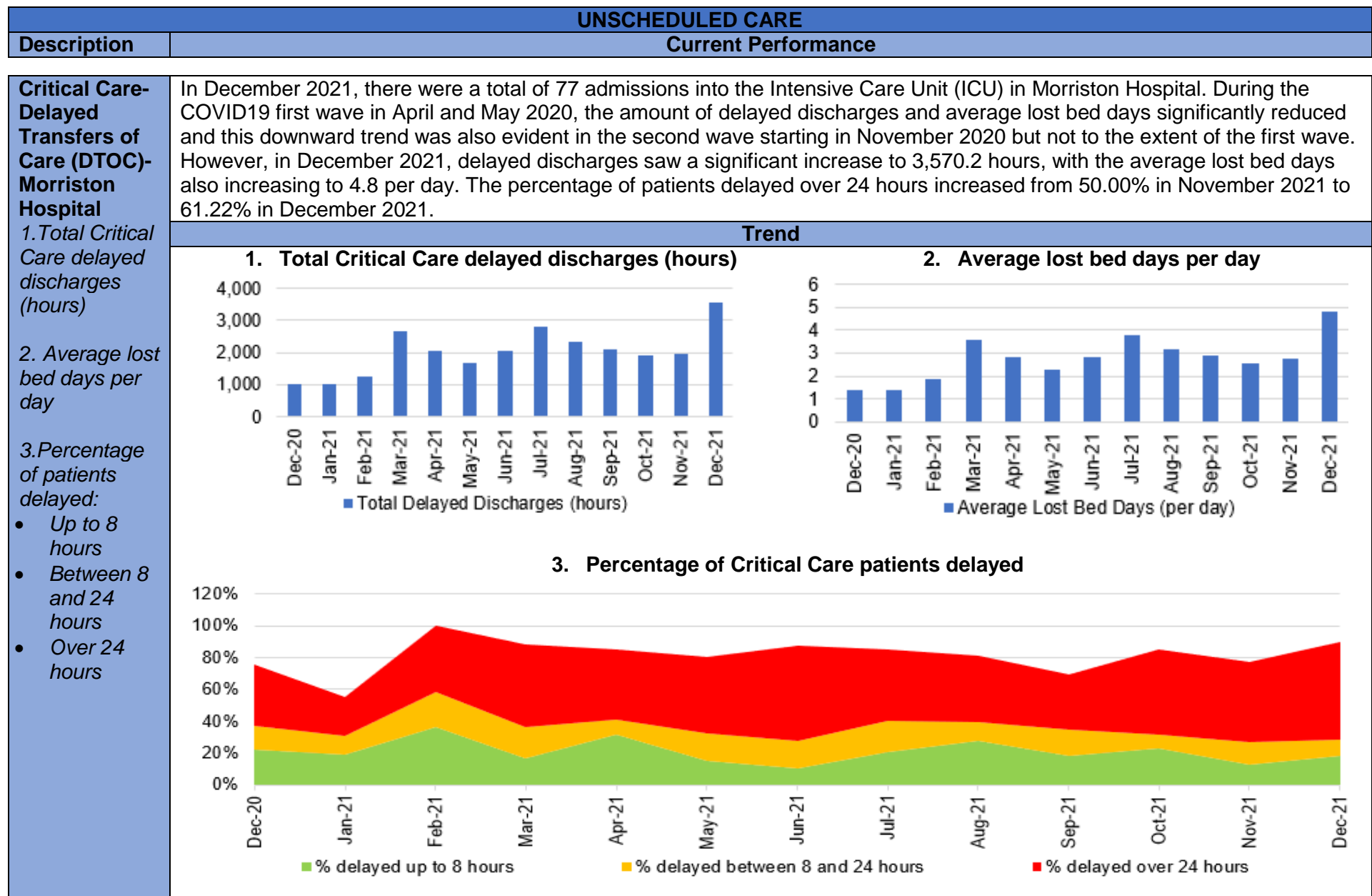











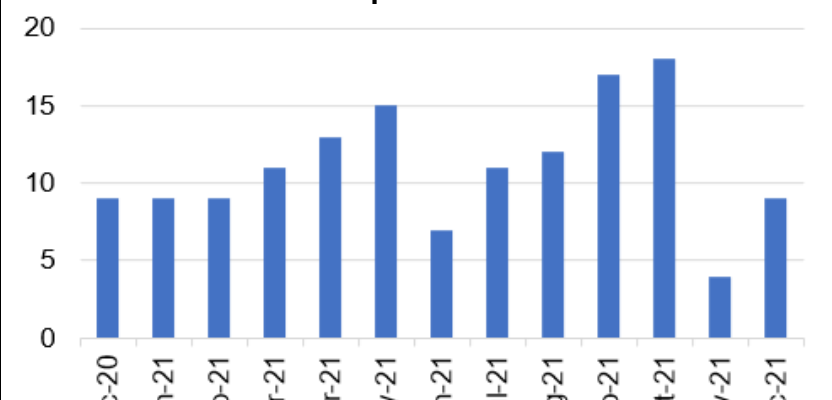


UNSCHEDULED CARE																																																																								
Description	Current Performance	Trend																																																																						
<b>Clinically Optimised</b> <i>The number of patients waiting at each site in the Health Board that are clinically optimised</i>	<p>In December 2021, there were on average 261 patients who were deemed clinically optimised but were still occupying a bed in one of the Health Board's Hospitals.</p> <p>The number of medically/ discharge fit patients returned to the average that was seen in quarter 3 for 2021/21 in March 2021, after a significant increase in February 2021. October 2021 saw the first decrease in numbers, but there has been an increase to 261 in December 2021 from 238 in October 2021.</p> <p>In December 2021, Morriston Hospital had the largest proportion of clinically optimised patients with 107, followed by Neath Port Talbot Hospital with 79.</p>	<p><b>The number of clinically optimised patients by site</b></p> <table><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>NPTH</th><th>Gorseinon</th></tr></thead><tbody><tr><td>Dec-20</td><td>55</td><td>40</td><td>25</td><td>15</td></tr><tr><td>Jan-21</td><td>55</td><td>40</td><td>25</td><td>10</td></tr><tr><td>Feb-21</td><td>65</td><td>45</td><td>45</td><td>5</td></tr><tr><td>Mar-21</td><td>45</td><td>35</td><td>65</td><td>10</td></tr><tr><td>Apr-21</td><td>65</td><td>35</td><td>65</td><td>5</td></tr><tr><td>May-21</td><td>65</td><td>40</td><td>75</td><td>5</td></tr><tr><td>Jun-21</td><td>75</td><td>50</td><td>75</td><td>10</td></tr><tr><td>Jul-21</td><td>85</td><td>50</td><td>65</td><td>5</td></tr><tr><td>Aug-21</td><td>90</td><td>55</td><td>65</td><td>15</td></tr><tr><td>Sep-21</td><td>105</td><td>70</td><td>85</td><td>10</td></tr><tr><td>Oct-21</td><td>90</td><td>50</td><td>80</td><td>15</td></tr><tr><td>Nov-21</td><td>110</td><td>60</td><td>80</td><td>10</td></tr><tr><td>Dec-21</td><td>107</td><td>55</td><td>79</td><td>15</td></tr></tbody></table>	Month	Morriston	Singleton	NPTH	Gorseinon	Dec-20	55	40	25	15	Jan-21	55	40	25	10	Feb-21	65	45	45	5	Mar-21	45	35	65	10	Apr-21	65	35	65	5	May-21	65	40	75	5	Jun-21	75	50	75	10	Jul-21	85	50	65	5	Aug-21	90	55	65	15	Sep-21	105	70	85	10	Oct-21	90	50	80	15	Nov-21	110	60	80	10	Dec-21	107	55	79	15
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<b>Elective procedures cancelled due to lack of beds</b> <i>The number of elective procedure cancelled across the hospital where the main cancellation reasons was lack of beds</i>	<p>In December 2021, there were 35 elective procedures cancelled due to lack of beds on the day of surgery. This is 34 less cancellations than in November 2020 and 26 less than November 2021.</p> <p>33 of the cancelled procedures were attributed to Morriston Hospital, with 1 attributed to Singleton Hospital and 1 attributed to Neath Port Talbot Hospital.</p>	<p><b>Total number of elective procedures cancelled due to lack of beds</b></p> <table><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>NPTH</th></tr></thead><tbody><tr><td>Dec-20</td><td>5</td><td>0</td><td>0</td></tr><tr><td>Jan-21</td><td>2</td><td>0</td><td>0</td></tr><tr><td>Feb-21</td><td>10</td><td>0</td><td>0</td></tr><tr><td>Mar-21</td><td>10</td><td>0</td><td>0</td></tr><tr><td>Apr-21</td><td>5</td><td>0</td><td>0</td></tr><tr><td>May-21</td><td>5</td><td>0</td><td>0</td></tr><tr><td>Jun-21</td><td>5</td><td>0</td><td>0</td></tr><tr><td>Jul-21</td><td>15</td><td>0</td><td>0</td></tr><tr><td>Aug-21</td><td>10</td><td>0</td><td>0</td></tr><tr><td>Sep-21</td><td>30</td><td>0</td><td>0</td></tr><tr><td>Oct-21</td><td>50</td><td>0</td><td>0</td></tr><tr><td>Nov-21</td><td>60</td><td>0</td><td>0</td></tr><tr><td>Dec-21</td><td>35</td><td>1</td><td>1</td></tr></tbody></table>	Month	Morriston	Singleton	NPTH	Dec-20	5	0	0	Jan-21	2	0	0	Feb-21	10	0	0	Mar-21	10	0	0	Apr-21	5	0	0	May-21	5	0	0	Jun-21	5	0	0	Jul-21	15	0	0	Aug-21	10	0	0	Sep-21	30	0	0	Oct-21	50	0	0	Nov-21	60	0	0	Dec-21	35	1	1														
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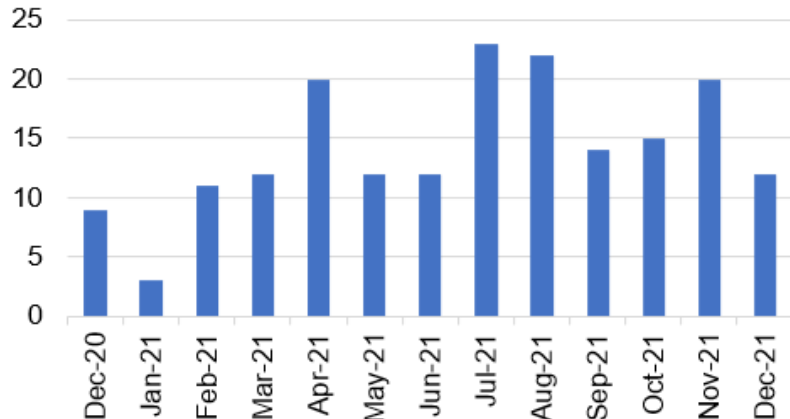
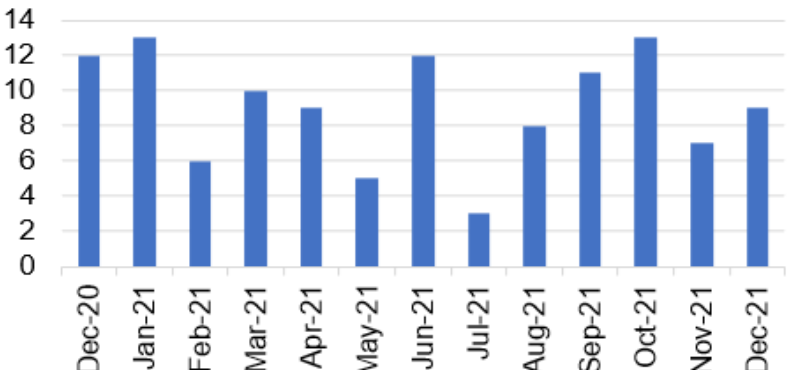
FRACTURED NECK OF FEMUR (#NOF)		
Description	Current Performance	Trend
<b>Fractured Neck of Femur (#NOF)</b> 1. Prompt orthogeriatric assessment- % patients receiving an assessment by a senior geriatrician within 72 hours of presentation  2. Prompt surgery - % patients undergoing surgery the day following presentation with hip fracture  3. NICE compliant surgery - % of operations consistent with the recommendations of NICE CG124  4. Prompt mobilisation after surgery - % patients out of bed (standing or hoisted) by the day after operation	<p><b>1. Prompt orthogeriatric assessment-</b> In November 2021, 88.7% of patients in Morriston hospital received an assessment by a senior geriatrician within 72 hours. This is 4% more than in November 2020.</p> <p><b>2. Prompt surgery-</b> In November 2021, 57.1% of patients had surgery the day following presentation with a hip fracture. This is an improvement from November 2020 which was 51.8%</p> <p><b>3. NICE compliant surgery-</b> 70.3% of operations were consistent with the NICE recommendations in November 2021. This is 0.7% more than in November 2020. In November 2021, Morriston was above the all-Wales average of 70.2%.</p> <p><b>4. Prompt mobilisation-</b> In November 2021, 71.2% of patients were out of bed the day after surgery. This is 4.8% less than in November 2020.</p>	<p><b>1. Prompt orthogeriatric assessment</b></p> <p><b>2. Prompt surgery</b></p> <p><b>3. NICE compliant Surgery</b></p> <p><b>4. Prompt mobilisation</b></p>



FRACTURED NECK OF FEMUR (#NOF)																																																										
Description	Current Performance	Trend																																																								
5. <i>Not delirious when tested- % patients (&lt;4 on 4AT test) when tested in the week after operation</i>	5. <b>Not delirious when tested-</b> 77% of patients were not delirious in the week after their operation in November 2021. This is an improvement of 5.9% compared with November 2020.	<p><b>5. Not delirious when tested</b></p> <table><caption>5. Not delirious when tested (Estimated Data)</caption><thead><tr><th>Month</th><th>Morriston (%)</th><th>All-Wales (%)</th><th>Eng, Wal &amp; N. Ire (%)</th></tr></thead><tbody><tr><td>Nov-20</td><td>75</td><td>55</td><td>60</td></tr><tr><td>Dec-20</td><td>75</td><td>55</td><td>60</td></tr><tr><td>Jan-21</td><td>75</td><td>55</td><td>60</td></tr><tr><td>Feb-21</td><td>75</td><td>55</td><td>60</td></tr><tr><td>Mar-21</td><td>75</td><td>55</td><td>60</td></tr><tr><td>Apr-21</td><td>75</td><td>55</td><td>60</td></tr><tr><td>May-21</td><td>75</td><td>55</td><td>60</td></tr><tr><td>Jun-21</td><td>75</td><td>55</td><td>60</td></tr><tr><td>Jul-21</td><td>75</td><td>55</td><td>60</td></tr><tr><td>Aug-21</td><td>75</td><td>55</td><td>60</td></tr><tr><td>Sep-21</td><td>75</td><td>55</td><td>60</td></tr><tr><td>Oct-21</td><td>75</td><td>55</td><td>60</td></tr><tr><td>Nov-21</td><td>77</td><td>55</td><td>60</td></tr></tbody></table>	Month	Morriston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)	Nov-20	75	55	60	Dec-20	75	55	60	Jan-21	75	55	60	Feb-21	75	55	60	Mar-21	75	55	60	Apr-21	75	55	60	May-21	75	55	60	Jun-21	75	55	60	Jul-21	75	55	60	Aug-21	75	55	60	Sep-21	75	55	60	Oct-21	75	55	60	Nov-21	77	55	60
Month	Morriston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)																																																							
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Sep-21	75	55	60																																																							
Oct-21	75	55	60																																																							
Nov-21	77	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. <b>Return to original residence-</b> 70.4% of patients in October 2021 were discharged back to their original residence. This is 5.8% less than in October 2020.	<p><b>6. Return to original residence</b></p> <table><caption>6. Return to original residence (Estimated Data)</caption><thead><tr><th>Month</th><th>Morriston (%)</th><th>All-Wales (%)</th><th>Eng, Wal &amp; N. Ire (%)</th></tr></thead><tbody><tr><td>Oct-20</td><td>75</td><td>75</td><td>70</td></tr><tr><td>Nov-20</td><td>75</td><td>75</td><td>70</td></tr><tr><td>Dec-20</td><td>75</td><td>75</td><td>70</td></tr><tr><td>Jan-21</td><td>70</td><td>75</td><td>70</td></tr><tr><td>Feb-21</td><td>70</td><td>75</td><td>70</td></tr><tr><td>Mar-21</td><td>70</td><td>75</td><td>70</td></tr><tr><td>Apr-21</td><td>70</td><td>75</td><td>70</td></tr><tr><td>May-21</td><td>70</td><td>75</td><td>70</td></tr><tr><td>Jun-21</td><td>70</td><td>75</td><td>70</td></tr><tr><td>Jul-21</td><td>65</td><td>75</td><td>70</td></tr><tr><td>Aug-21</td><td>65</td><td>75</td><td>70</td></tr><tr><td>Sep-21</td><td>65</td><td>75</td><td>70</td></tr><tr><td>Oct-21</td><td>70.4</td><td>75</td><td>70</td></tr></tbody></table>	Month	Morriston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)	Oct-20	75	75	70	Nov-20	75	75	70	Dec-20	75	75	70	Jan-21	70	75	70	Feb-21	70	75	70	Mar-21	70	75	70	Apr-21	70	75	70	May-21	70	75	70	Jun-21	70	75	70	Jul-21	65	75	70	Aug-21	65	75	70	Sep-21	65	75	70	Oct-21	70.4	75	70
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Oct-21	70.4	75	70																																																							
7. <i>30 day mortality rate</i>	7. <b>30 day mortality rate-</b> In January 2021 the mortality rate for Morriston Hospital was 7.5% which is 0.5% less than January 2020. The mortality rate in Morriston Hospital in January 2021 is higher than the all-Wales average of 6.9% but lower than the national average of 7.6%.  * Updated data is currently not available, but is being reviewed.	<p><b>7. 30 day mortality rate</b></p> <table><caption>7. 30 day mortality rate (Estimated Data)</caption><thead><tr><th>Month</th><th>Morriston (%)</th><th>All-Wales (%)</th><th>Eng, Wal &amp; N. Ire (%)</th></tr></thead><tbody><tr><td>Jan-20</td><td>8.0</td><td>7.0</td><td>7.5</td></tr><tr><td>Feb-20</td><td>8.5</td><td>7.0</td><td>7.5</td></tr><tr><td>Mar-20</td><td>8.5</td><td>7.0</td><td>7.5</td></tr><tr><td>Apr-20</td><td>8.0</td><td>7.0</td><td>7.5</td></tr><tr><td>May-20</td><td>8.0</td><td>7.0</td><td>7.5</td></tr><tr><td>Jun-20</td><td>8.0</td><td>7.0</td><td>7.5</td></tr><tr><td>Jul-20</td><td>8.0</td><td>7.0</td><td>7.5</td></tr><tr><td>Aug-20</td><td>7.5</td><td>7.0</td><td>7.5</td></tr><tr><td>Sep-20</td><td>7.0</td><td>7.0</td><td>7.5</td></tr><tr><td>Oct-20</td><td>7.5</td><td>7.0</td><td>7.5</td></tr><tr><td>Nov-20</td><td>7.5</td><td>7.0</td><td>7.5</td></tr><tr><td>Dec-20</td><td>8.0</td><td>7.0</td><td>7.5</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	8.0	7.0	7.5	Feb-20	8.5	7.0	7.5	Mar-20	8.5	7.0	7.5	Apr-20	8.0	7.0	7.5	May-20	8.0	7.0	7.5	Jun-20	8.0	7.0	7.5	Jul-20	8.0	7.0	7.5	Aug-20	7.5	7.0	7.5	Sep-20	7.0	7.0	7.5	Oct-20	7.5	7.0	7.5	Nov-20	7.5	7.0	7.5	Dec-20	8.0	7.0	7.5	Jan-21	7.5	6.9	7.6
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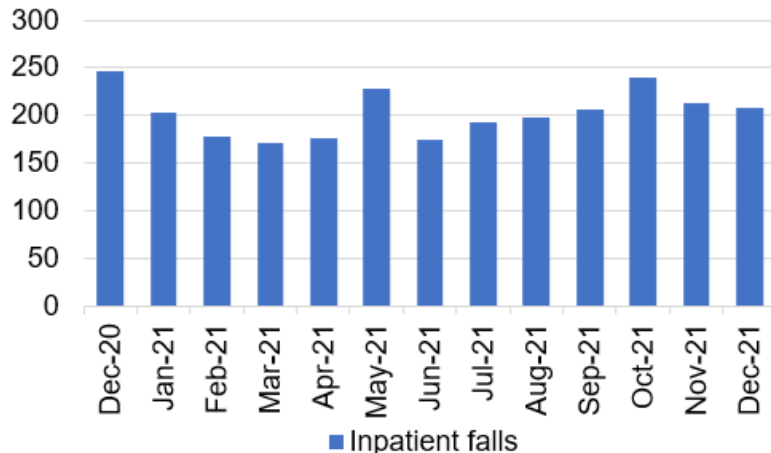
HEALTHCARE ACQUIRED INFECTIONS																														
Description	Current Performance	Trend																												
<b>Healthcare Acquired Infections (HCAI) - E.coli bacteraemia-</b> <i>Number of laboratory confirmed E.coli bacteraemia cases</i>	<ul style="list-style-type: none"><li>17 cases of <i>E. coli</i> bacteraemia were identified in December 2021, of which 5 were hospital acquired and 12 were community acquired.</li><li>Cumulative cases from April 2021 to December 2021 are 19.8% higher than the equivalent period in 2020/21. (222 in 2021/22 compared with 178 in 2020/21).</li></ul>	<p><b>Number of healthcare acquired E.coli bacteraemia cases</b></p>  <table><caption>Number of healthcare acquired E.coli bacteraemia cases (SBU)</caption><thead><tr><th>Month</th><th>Number of cases</th></tr></thead><tbody><tr><td>Dec-20</td><td>12</td></tr><tr><td>Jan-21</td><td>18</td></tr><tr><td>Feb-21</td><td>17</td></tr><tr><td>Mar-21</td><td>28</td></tr><tr><td>Apr-21</td><td>32</td></tr><tr><td>May-21</td><td>26</td></tr><tr><td>Jun-21</td><td>28</td></tr><tr><td>Jul-21</td><td>23</td></tr><tr><td>Aug-21</td><td>34</td></tr><tr><td>Sep-21</td><td>21</td></tr><tr><td>Oct-21</td><td>19</td></tr><tr><td>Nov-21</td><td>22</td></tr><tr><td>Dec-21</td><td>17</td></tr></tbody></table> <p>■ Number E.Coli cases (SBU)</p>	Month	Number of cases	Dec-20	12	Jan-21	18	Feb-21	17	Mar-21	28	Apr-21	32	May-21	26	Jun-21	28	Jul-21	23	Aug-21	34	Sep-21	21	Oct-21	19	Nov-21	22	Dec-21	17
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Nov-21	22																													
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<b>Healthcare Acquired Infections (HCAI)- S.aureus bacteraemia-</b> <i>Number of laboratory confirmed S.aureus bacteraemias (MRSA &amp; MSSA) cases</i>	<ul style="list-style-type: none"><li>There were 9 cases of Staph. aureus bacteraemia in December 2021, of which 5 were hospital acquired and 4 were community acquired.</li><li>Cumulative cases from April 2021 to December 2021 are 10.4% higher than the equivalent period in 2020/21 (106 in 2021/22 compared with 94 in 2020/21).</li></ul>	<p><b>Number of healthcare acquired S.aureus bacteraemia cases</b></p>  <table><caption>Number of healthcare acquired S.aureus bacteraemia cases (SBU)</caption><thead><tr><th>Month</th><th>Number of cases</th></tr></thead><tbody><tr><td>Dec-20</td><td>9</td></tr><tr><td>Jan-21</td><td>9</td></tr><tr><td>Feb-21</td><td>9</td></tr><tr><td>Mar-21</td><td>11</td></tr><tr><td>Apr-21</td><td>13</td></tr><tr><td>May-21</td><td>15</td></tr><tr><td>Jun-21</td><td>7</td></tr><tr><td>Jul-21</td><td>11</td></tr><tr><td>Aug-21</td><td>12</td></tr><tr><td>Sep-21</td><td>17</td></tr><tr><td>Oct-21</td><td>18</td></tr><tr><td>Nov-21</td><td>4</td></tr><tr><td>Dec-21</td><td>9</td></tr></tbody></table> <p>■ Number of S.Aureus cases (SBU)</p>	Month	Number of cases	Dec-20	9	Jan-21	9	Feb-21	9	Mar-21	11	Apr-21	13	May-21	15	Jun-21	7	Jul-21	11	Aug-21	12	Sep-21	17	Oct-21	18	Nov-21	4	Dec-21	9
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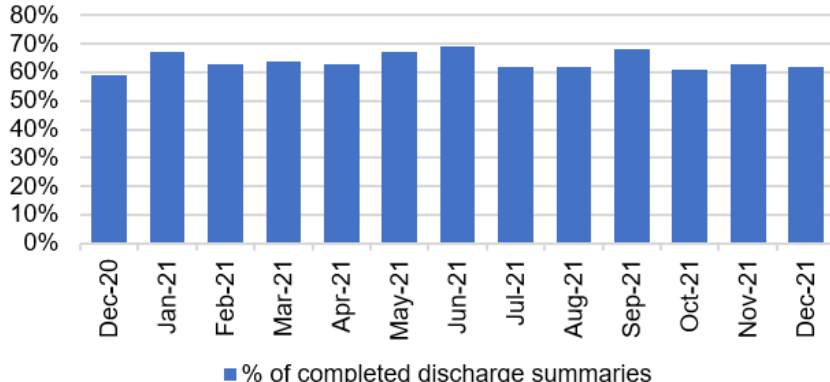


HEALTHCARE ACQUIRED INFECTIONS																														
Description	Current Performance	Trend																												
<b>Healthcare Acquired Infections (HCAI)- C.difficile-</b> <i>Number of laboratory confirmed C.difficile cases</i>	<ul style="list-style-type: none"><li>There were 12 <i>Clostridium difficile</i> toxin positive cases in December 2021, of which 11 were hospital acquired and 1 was community acquired.</li><li>Cumulative cases from April 2021 to December 2021 are 11.3% higher than the equivalent period of 2020/21 (150 in 2021/22 compared with 133 in 2020/21).</li></ul>	<p><b>Number of healthcare acquired C.difficile cases</b></p>  <table><caption>Number of healthcare acquired C.difficile cases (SBU)</caption><thead><tr><th>Month</th><th>Number of C.diff cases (SBU)</th></tr></thead><tbody><tr><td>Dec-20</td><td>9</td></tr><tr><td>Jan-21</td><td>3</td></tr><tr><td>Feb-21</td><td>11</td></tr><tr><td>Mar-21</td><td>12</td></tr><tr><td>Apr-21</td><td>20</td></tr><tr><td>May-21</td><td>12</td></tr><tr><td>Jun-21</td><td>12</td></tr><tr><td>Jul-21</td><td>23</td></tr><tr><td>Aug-21</td><td>22</td></tr><tr><td>Sep-21</td><td>14</td></tr><tr><td>Oct-21</td><td>15</td></tr><tr><td>Nov-21</td><td>20</td></tr><tr><td>Dec-21</td><td>12</td></tr></tbody></table>	Month	Number of C.diff cases (SBU)	Dec-20	9	Jan-21	3	Feb-21	11	Mar-21	12	Apr-21	20	May-21	12	Jun-21	12	Jul-21	23	Aug-21	22	Sep-21	14	Oct-21	15	Nov-21	20	Dec-21	12
Month	Number of C.diff cases (SBU)																													
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<b>Healthcare Acquired Infections (HCAI)- Klebsiella sp-</b> <i>Number of laboratory confirmed Klebsiella sp cases</i>	<ul style="list-style-type: none"><li>There were 9 cases of Klebsiella sp in December 2021, of which 6 were hospital acquired and 3 were community acquired.</li><li>Cumulative cases from April 2021 to December 2021 are 5.2% higher than the equivalent period in 2020/21 (77 in 2021/22 compared with 73 in 2020/21).</li></ul>	<p><b>Number of healthcare acquired Klebsiella cases</b></p>  <table><caption>Number of healthcare acquired Klebsiella cases (SBU)</caption><thead><tr><th>Month</th><th>Number of Klebsiella cases (SBU)</th></tr></thead><tbody><tr><td>Dec-20</td><td>12</td></tr><tr><td>Jan-21</td><td>13</td></tr><tr><td>Feb-21</td><td>6</td></tr><tr><td>Mar-21</td><td>10</td></tr><tr><td>Apr-21</td><td>9</td></tr><tr><td>May-21</td><td>5</td></tr><tr><td>Jun-21</td><td>12</td></tr><tr><td>Jul-21</td><td>3</td></tr><tr><td>Aug-21</td><td>8</td></tr><tr><td>Sep-21</td><td>11</td></tr><tr><td>Oct-21</td><td>13</td></tr><tr><td>Nov-21</td><td>7</td></tr><tr><td>Dec-21</td><td>9</td></tr></tbody></table>	Month	Number of Klebsiella cases (SBU)	Dec-20	12	Jan-21	13	Feb-21	6	Mar-21	10	Apr-21	9	May-21	5	Jun-21	12	Jul-21	3	Aug-21	8	Sep-21	11	Oct-21	13	Nov-21	7	Dec-21	9
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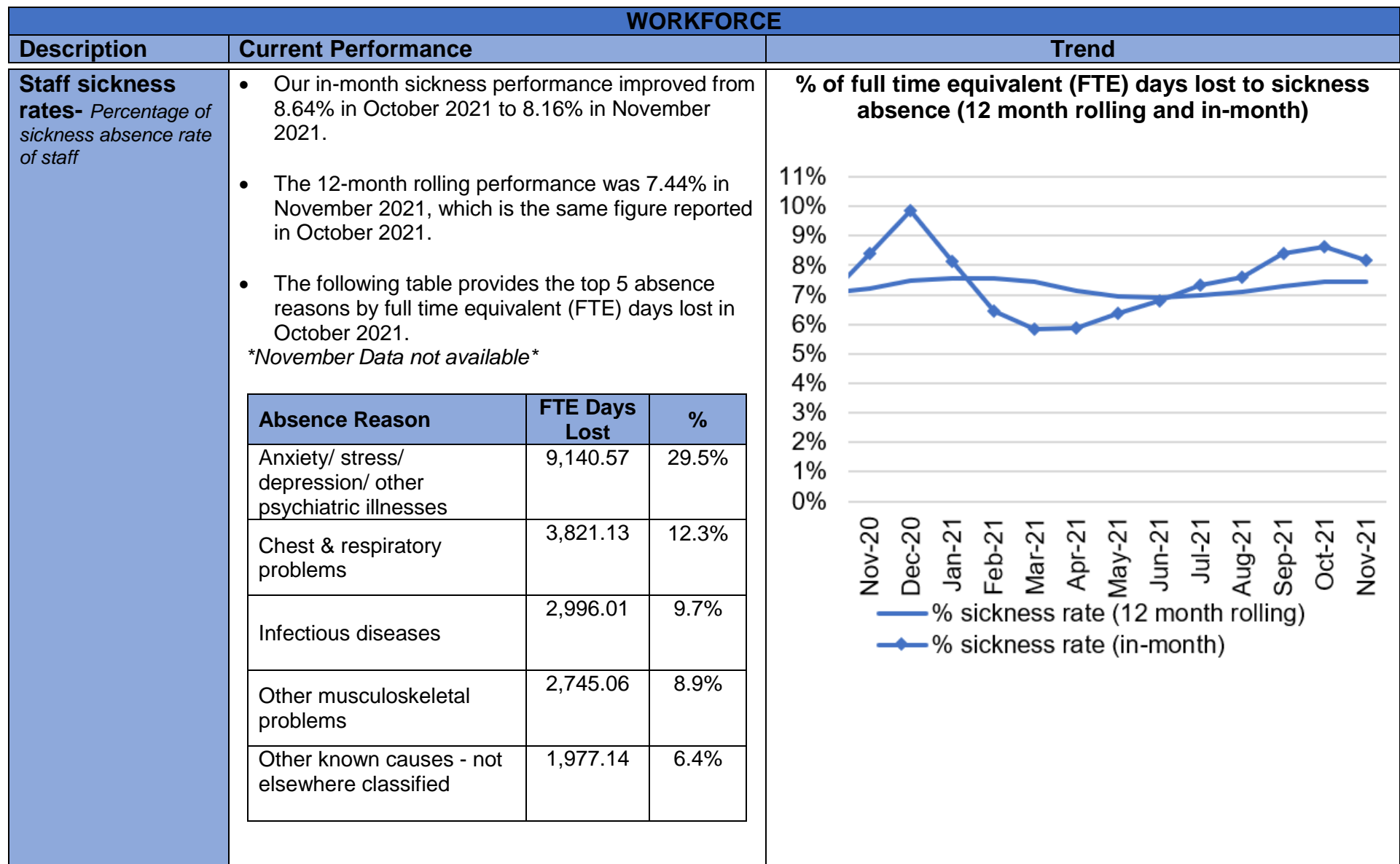
HEALTHCARE ACQUIRED INFECTIONS		
Description	Current Performance	Trend
<b>Healthcare Acquired Infections (HCAI)- Aeruginosa-</b> <i>Number of laboratory confirmed Aeruginosa cases</i>	<ul style="list-style-type: none"> <li>There were 4 cases of <i>P.Aeruginosa</i> in December 2021, of which 3 were hospital acquired and 1 was community acquired.</li> <li>Cumulative cases from April 2021 to December 2021 are 11% more than the equivalent period in 2020/21.</li> </ul>	<p><b>Number of healthcare acquired Pseudomonas cases</b></p> <p>■ Number of Pseudomonas cases (SBU)</p>
PRESSURE ULCERS		
Description	Current Performance	Trend
<b>Number of pressure ulcers</b> 1. <i>Total number of pressure ulcers developed in hospital and in the community</i>  2. <i>Rate of pressure ulcers per 100,000 admissions</i>	<ol style="list-style-type: none"> <li>In November 2021 there were 74 cases of healthcare acquired pressure ulcers, 31 of which were community acquired and 43 were hospital acquired.  There were 10 grade 3+ pressure ulcers in November 2021, of which 8 were community acquired and 2 were hospital acquired.</li> <li>The rate per 100,000 admissions decreased from 955 in September 2021 to 613 in October 2021.</li> </ol>	<p><b>Total number of hospital and community acquired Pressure Ulcers (PU) and rate per 100,000 admissions</b></p> <p>■ Pressure Ulcers (Community) ■ Pressure Ulcers (Hospital) — Rate per 100,00 admissions</p>

SERIOUS INCIDENTS																																												
Description	Current Performance	Trend																																										
<b>Serious Incidents-</b> <i>1. The number of serious incidents</i>  <i>2. The number of Never Events</i>  <i>3. Of the serious incidents due for assurance, the percentage which were assured within the agreed timescales</i>	1. The Health Board reported 2 Serious Incidents for the month of December 2021 to Welsh Government. The breakdown of incidents in December 2021 are set out below: - Singleton – 2	<b>1. and 2. Number of serious incidents and never events</b> <table><thead><tr><th>Month</th><th>Number of Serious Incidents</th><th>Number of never events</th></tr></thead><tbody><tr><td>Dec-20</td><td>12</td><td>0</td></tr><tr><td>Jan-21</td><td>4</td><td>0</td></tr><tr><td>Feb-21</td><td>5</td><td>0</td></tr><tr><td>Mar-21</td><td>4</td><td>0</td></tr><tr><td>Apr-21</td><td>4</td><td>0</td></tr><tr><td>May-21</td><td>6</td><td>0</td></tr><tr><td>Jun-21</td><td>7</td><td>0</td></tr><tr><td>Jul-21</td><td>1</td><td>0</td></tr><tr><td>Aug-21</td><td>5</td><td>0</td></tr><tr><td>Sep-21</td><td>5</td><td>0</td></tr><tr><td>Oct-21</td><td>4</td><td>0</td></tr><tr><td>Nov-21</td><td>9</td><td>0</td></tr><tr><td>Dec-21</td><td>2</td><td>0</td></tr></tbody></table>	Month	Number of Serious Incidents	Number of never events	Dec-20	12	0	Jan-21	4	0	Feb-21	5	0	Mar-21	4	0	Apr-21	4	0	May-21	6	0	Jun-21	7	0	Jul-21	1	0	Aug-21	5	0	Sep-21	5	0	Oct-21	4	0	Nov-21	9	0	Dec-21	2	0
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Sep-21	5	0																																										
Oct-21	4	0																																										
Nov-21	9	0																																										
Dec-21	2	0																																										
2. There were no new Never Event reported in December 2021.																																												
3. In November 2021, performance against the 80% target of submitting closure forms within 60 working days was 0% as the one closure form in Morriston due to be submitted to Welsh Government, was not submitted on time.	<b>3. % of serious incidents closed within 60 days</b> <table><thead><tr><th>Month</th><th>% SI's assured</th><th>Target</th></tr></thead><tbody><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>32%</td><td>80%</td></tr><tr><td>Aug-21</td><td>0%</td><td>80%</td></tr><tr><td>Sep-21</td><td>0%</td><td>80%</td></tr><tr><td>Oct-21</td><td>0%</td><td>80%</td></tr><tr><td>Nov-21</td><td>0%</td><td>80%</td></tr><tr><td>Dec-21</td><td>0%</td><td>80%</td></tr></tbody></table> <p>* 0% compliance in November 2020 and January, March, April, May, June, August, October and November 2021</p>	Month	% SI's assured	Target	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	32%	80%	Aug-21	0%	80%	Sep-21	0%	80%	Oct-21	0%	80%	Nov-21	0%	80%	Dec-21	0%	80%	
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Dec-21	0%	80%																																										

INPATIENT FALLS																														
Description	Current Performance	Trend																												
<b>Inpatient Falls</b> <i>The total number of inpatient falls</i>	<ul style="list-style-type: none"><li>The number of Falls reported via Datix web for Swansea Bay UHB was 208 in December 2021. This is 16% less than December 2020 where 247 falls were recorded.</li></ul>	<p><b>Number of inpatient Falls</b></p>  <table><caption>Number of inpatient Falls (Estimated Data)</caption><thead><tr><th>Month</th><th>Inpatient falls</th></tr></thead><tbody><tr><td>Dec-20</td><td>247</td></tr><tr><td>Jan-21</td><td>200</td></tr><tr><td>Feb-21</td><td>175</td></tr><tr><td>Mar-21</td><td>170</td></tr><tr><td>Apr-21</td><td>175</td></tr><tr><td>May-21</td><td>225</td></tr><tr><td>Jun-21</td><td>175</td></tr><tr><td>Jul-21</td><td>190</td></tr><tr><td>Aug-21</td><td>195</td></tr><tr><td>Sep-21</td><td>205</td></tr><tr><td>Oct-21</td><td>235</td></tr><tr><td>Nov-21</td><td>210</td></tr><tr><td>Dec-21</td><td>208</td></tr></tbody></table> <p>■ Inpatient falls</p>	Month	Inpatient falls	Dec-20	247	Jan-21	200	Feb-21	175	Mar-21	170	Apr-21	175	May-21	225	Jun-21	175	Jul-21	190	Aug-21	195	Sep-21	205	Oct-21	235	Nov-21	210	Dec-21	208
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DISCHARGE SUMMARIES																														
Description	Current Performance	Trend																												
<b>Discharge Summaries</b> <i>Percentage of discharge summaries approved and sent to patients' doctor following discharge</i>	<p>The latest data shows that in December 2021, the percentage of completed discharge summaries was 62%.</p> <p>In December 2021, compliance ranged from 53% in Singleton Hospital to 82% in Mental Health &amp; Learning Disabilities.</p>	<p><b>% discharge summaries approved and sent</b></p>  <table><caption>% discharge summaries approved and sent (Estimated Data)</caption><thead><tr><th>Month</th><th>% of completed discharge summaries</th></tr></thead><tbody><tr><td>Dec-20</td><td>58%</td></tr><tr><td>Jan-21</td><td>68%</td></tr><tr><td>Feb-21</td><td>63%</td></tr><tr><td>Mar-21</td><td>64%</td></tr><tr><td>Apr-21</td><td>63%</td></tr><tr><td>May-21</td><td>67%</td></tr><tr><td>Jun-21</td><td>69%</td></tr><tr><td>Jul-21</td><td>62%</td></tr><tr><td>Aug-21</td><td>62%</td></tr><tr><td>Sep-21</td><td>68%</td></tr><tr><td>Oct-21</td><td>61%</td></tr><tr><td>Nov-21</td><td>63%</td></tr><tr><td>Dec-21</td><td>62%</td></tr></tbody></table> <p>■ % of completed discharge summaries</p>	Month	% of completed discharge summaries	Dec-20	58%	Jan-21	68%	Feb-21	63%	Mar-21	64%	Apr-21	63%	May-21	67%	Jun-21	69%	Jul-21	62%	Aug-21	62%	Sep-21	68%	Oct-21	61%	Nov-21	63%	Dec-21	62%
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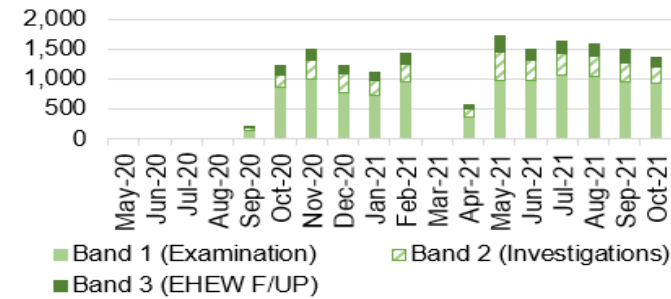
CRUDE MORTALITY																																																																								
Description	Current Performance	Trend																																																																						
Crude Mortality Rate	November 2021 reports the crude mortality rate for the Health Board at 0.99%, which is 0.04% lower than October 2021.	<b>Crude hospital mortality rate by Hospital (74 years of age or less)</b> <table><caption>Crude hospital mortality rate by Hospital (74 years of age or less)</caption><thead><tr><th>Month</th><th>Morriston Hospital</th><th>Singleton Hospital</th><th>NPT Hospital</th><th>HB Total</th></tr></thead><tbody><tr><td>Nov-20</td><td>1.7%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr><tr><td>Dec-20</td><td>1.8%</td><td>0.5%</td><td>0.2%</td><td>1.1%</td></tr><tr><td>Jan-21</td><td>1.9%</td><td>0.5%</td><td>0.3%</td><td>1.2%</td></tr><tr><td>Feb-21</td><td>2.0%</td><td>0.6%</td><td>0.2%</td><td>1.2%</td></tr><tr><td>Mar-21</td><td>1.8%</td><td>0.5%</td><td>0.2%</td><td>1.1%</td></tr><tr><td>Apr-21</td><td>1.7%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr><tr><td>May-21</td><td>1.7%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr><tr><td>Jun-21</td><td>1.7%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr><tr><td>Jul-21</td><td>1.7%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr><tr><td>Aug-21</td><td>1.7%</td><td>0.5%</td><td>0.3%</td><td>1.0%</td></tr><tr><td>Sep-21</td><td>1.7%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr><tr><td>Oct-21</td><td>1.7%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr><tr><td>Nov-21</td><td>1.8%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr></tbody></table>	Month	Morriston Hospital	Singleton Hospital	NPT Hospital	HB Total	Nov-20	1.7%	0.5%	0.2%	1.0%	Dec-20	1.8%	0.5%	0.2%	1.1%	Jan-21	1.9%	0.5%	0.3%	1.2%	Feb-21	2.0%	0.6%	0.2%	1.2%	Mar-21	1.8%	0.5%	0.2%	1.1%	Apr-21	1.7%	0.5%	0.2%	1.0%	May-21	1.7%	0.5%	0.2%	1.0%	Jun-21	1.7%	0.5%	0.2%	1.0%	Jul-21	1.7%	0.5%	0.2%	1.0%	Aug-21	1.7%	0.5%	0.3%	1.0%	Sep-21	1.7%	0.5%	0.2%	1.0%	Oct-21	1.7%	0.5%	0.2%	1.0%	Nov-21	1.8%	0.5%	0.2%	1.0%
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	A breakdown by Hospital for November 2021: <ul style="list-style-type: none"><li>• Morriston – 1.76%</li><li>• Singleton – 0.50%</li><li>• NPT – 0.21%</li></ul>																																																																							



## HARM FROM REDUCTION IN NON-COVID ACTIVITY

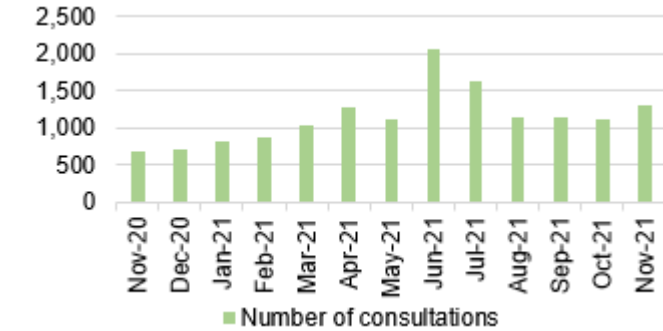
### 5.1 Primary and Community Care Overview

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



No claims submitted between April and August 2020

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



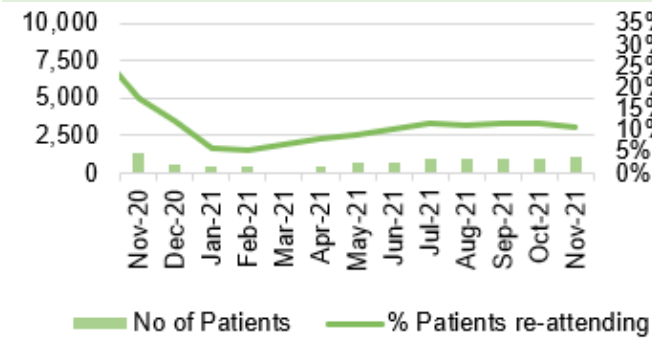
**Chart 3: GMS - Escalation Levels**



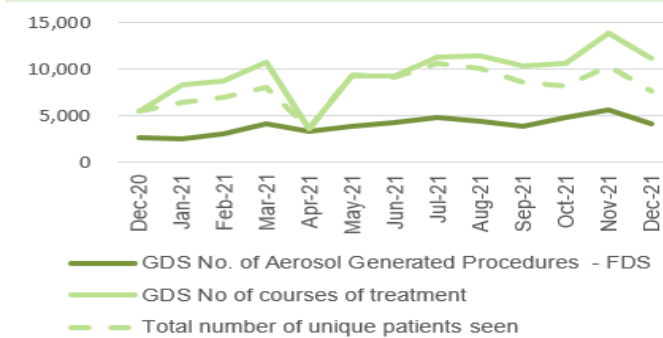
**Chart 4: GMS - Sustainability**



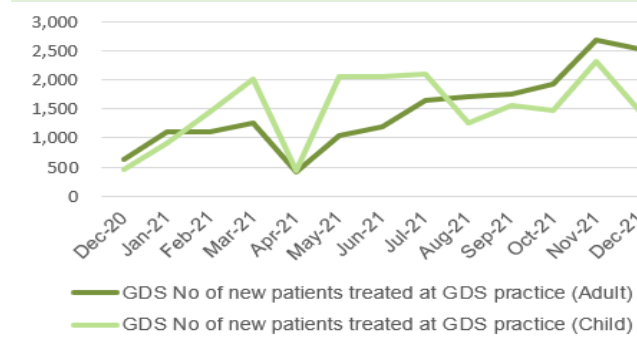
**Chart 5: Number and percentage of adult dental patients re-attending NHS Primary Dental Care between 6-9 months**



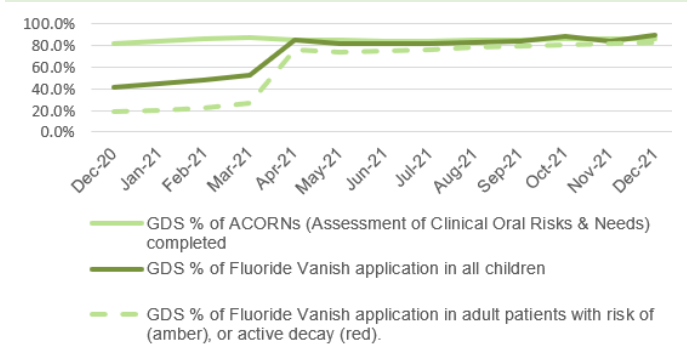
**Chart 6: General Dental Services - Activity**



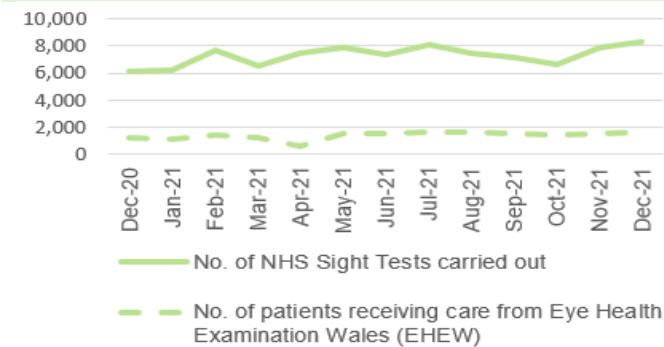
**Chart 7: General Dental Services - New Patients**



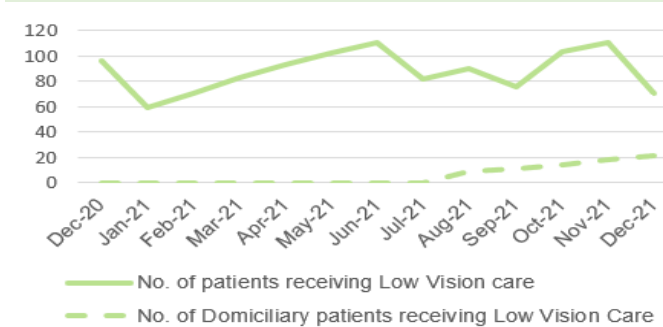
**Chart 8: General Dental Services - ACORNs/FV**



**Chart 9: Optometry Activity – sight tests**



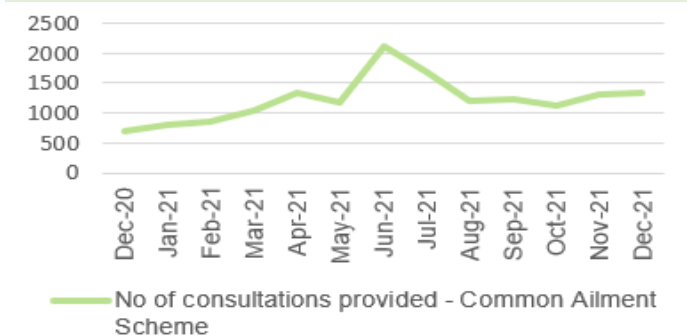
**Chart 10: Optometry Activity – low vision care**



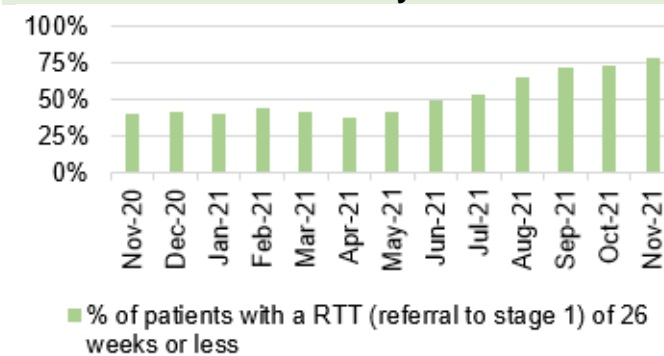
**Chart 11: Community Pharmacy – Escalation levels**



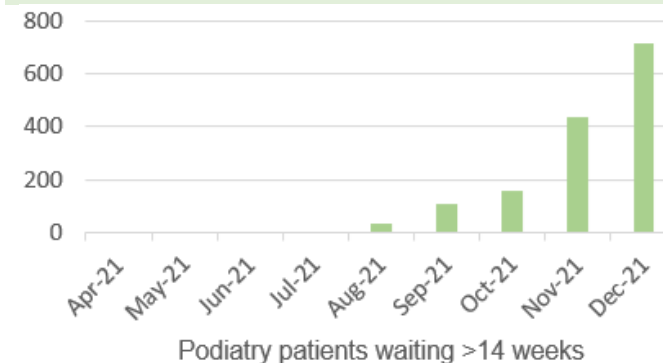
**Chart 12: Community Pharmacy – Common Ailment Scheme**



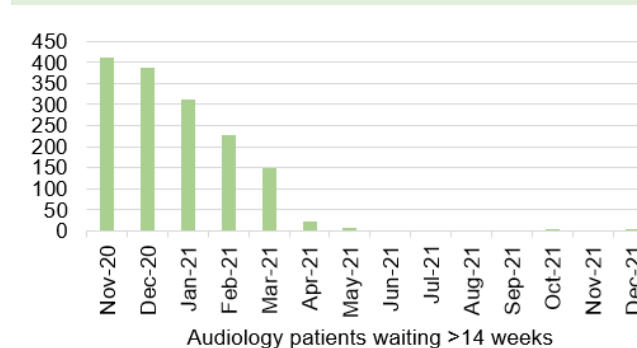
**Chart 13: % of patients with a RTT (referral to stage 1) of 26 weeks or less for Restorative Dentistry**



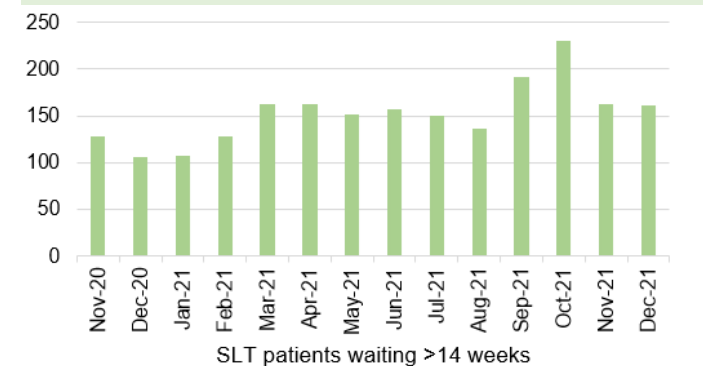
**Chart 14: Podiatry - Total number of patients waiting > 14 weeks**



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



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

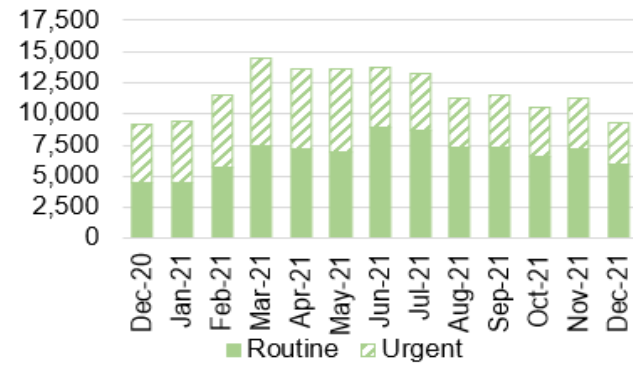




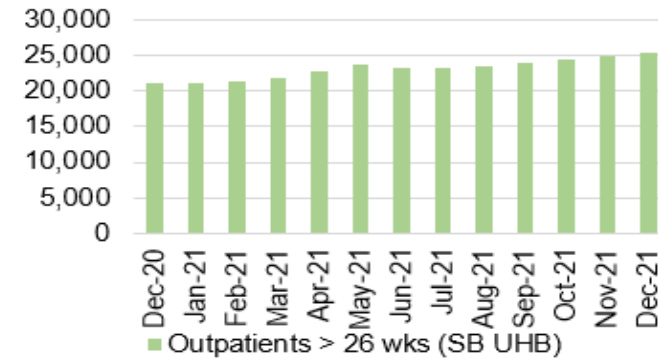
## Harm from reduction in non-Covid activity

### 5.2 Planned Care Overview

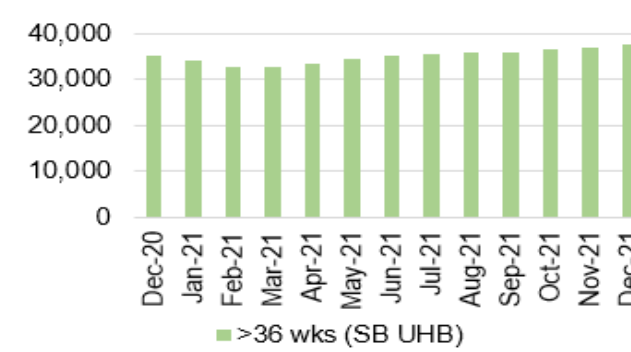
**Chart 1: Number of GP Referrals into secondary care**



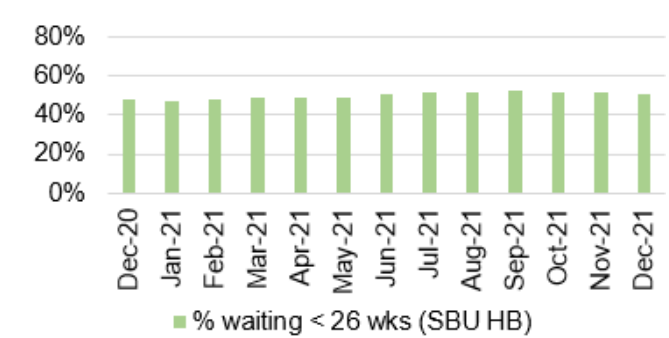
**Chart 2: Number of patients waiting over 26 weeks for an outpatient appointment**



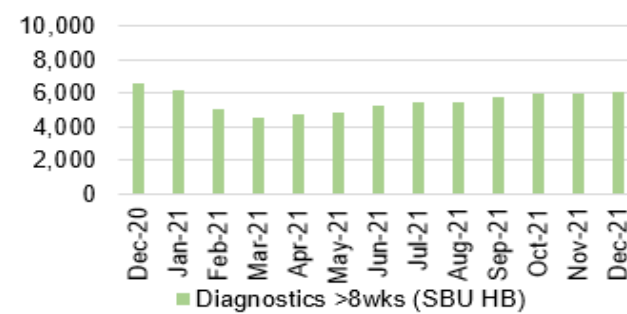
**Chart 3: Number of patients waiting over 36 weeks for treatment**



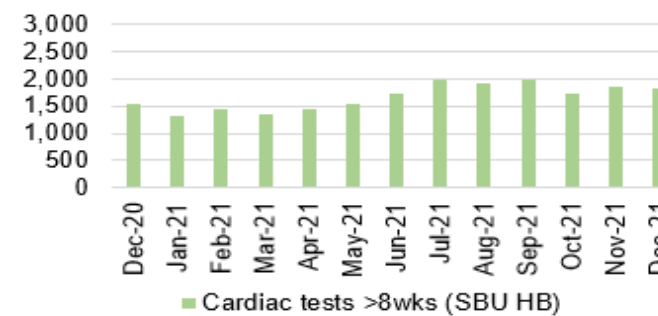
**Chart 4: % patients waiting less than 26 weeks from referral to treatment**



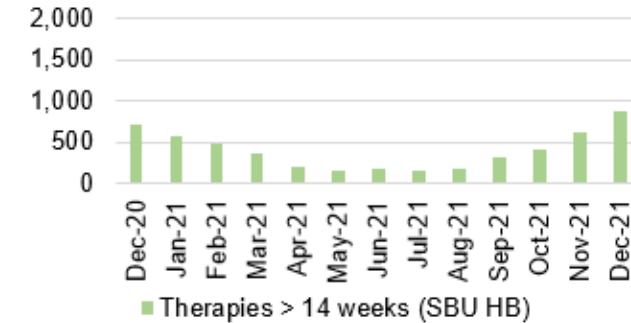
**Chart 5: Number of patients waiting for reportable diagnostics over 8 weeks**



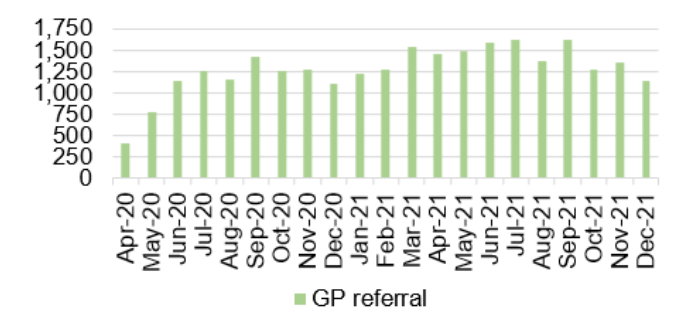
**Chart 6: Number of patients waiting for reportable Cardiac diagnostics over 8 weeks**



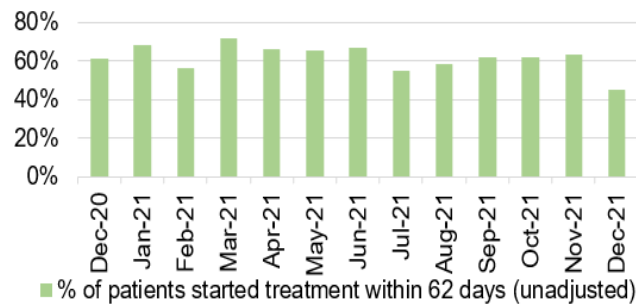
**Chart 7: Number of patients waiting more than 14 weeks for Therapies**



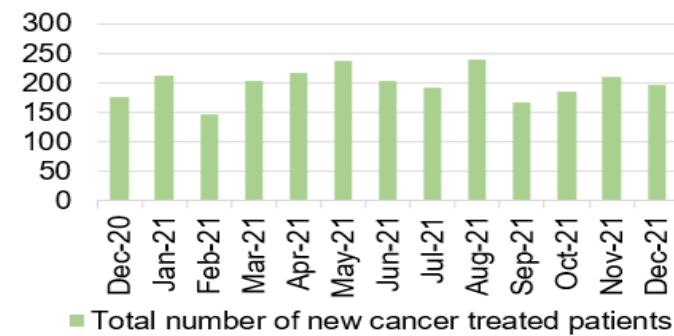
**Chart 8: Cancer referrals**



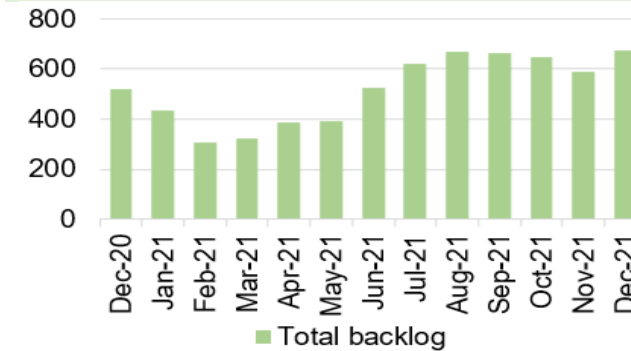
**Chart 9: Single Cancer Pathway- % of patients starting definitive treatment within 62 days from point of suspicion**



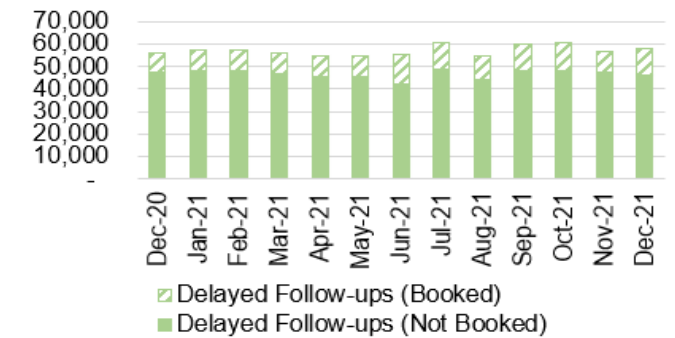
**Chart 10: Number of new cancer patients starting definitive treatment**



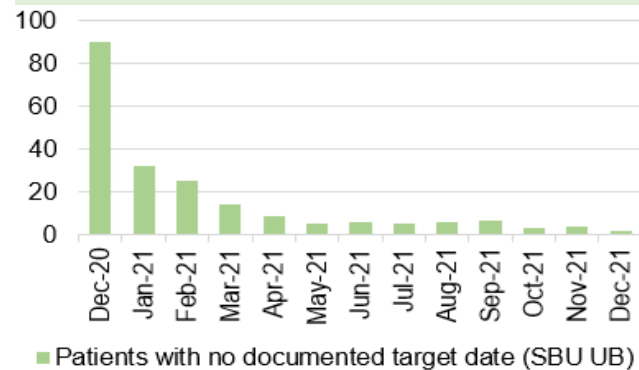
**Chart 11: Single Cancer Pathway backlog- patients waiting over 63 days**



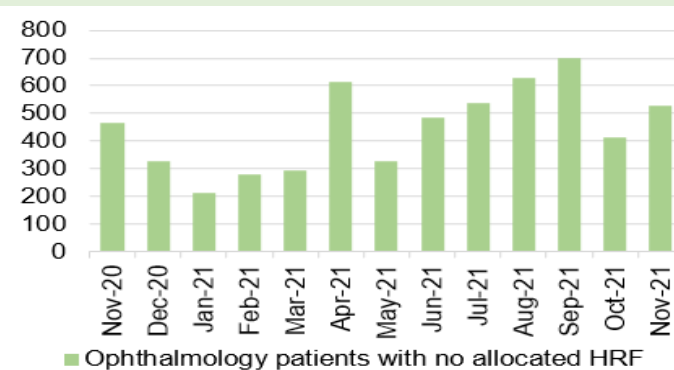
**Chart 12: Number of patients waiting for an outpatient follow-up who are delayed past their target date**



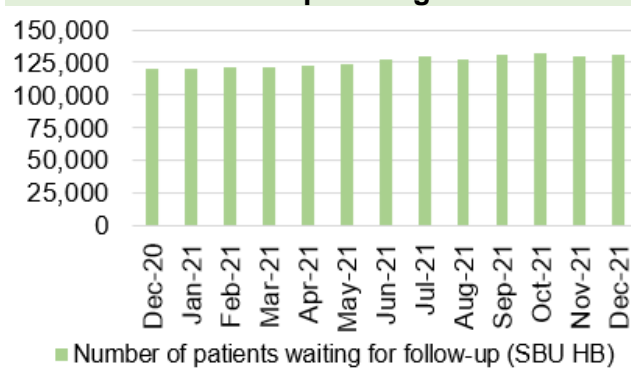
**Chart 13: Number of patients without a documented clinical review date**



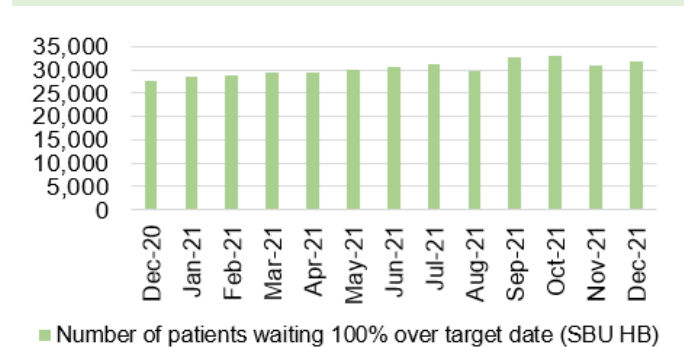
**Chart 14: Ophthalmology patients without an allocated health risk factor**



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



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





## Planned Care- Overview (December 2021)

Demand		Waiting Times	
<b>9,336 (17%↓)</b> Total GP referrals	<b>25,452 (3%↑)</b> Patients waiting over 26 weeks for a new outpatient appointment	<b>37,504 (1.2%↑)</b> Patients waiting over 36 weeks for treatment	<b>27,268 (2%↓)</b> Patients waiting over 52 weeks for treatment
<b>5,915 (18%↓)</b> Routine GP referrals	<b>50.5% (0.8%↓)</b> Patients waiting under 26 weeks from referral to treatment	<b>6,071 (1%↑)</b> Patients waiting over 8 weeks for all reportable diagnostics	<b>1,813 (2.3%↓)</b> Patients waiting over 8 weeks for Cardiac diagnostics only
<b>3,421 (15%↓)</b> Urgent GP referrals	<b>889 (29%↑)</b> Patients waiting over 14 weeks for reportable therapies	<b>131,403 (1.6%↑)</b> Patients waiting for a follow-up outpatient appointment	<b>31,912 (3.1%↑)</b> Patients waiting for a follow-up outpatients appointment who are delayed over 100%
Cancer		Theatre Efficiencies	
<b>1,450 (13.8%↓)</b> Number of USC referrals received	<b>673 (15.2%↑)</b> USC backlog over 63 days	<b>62% (5%↓)</b> Theatre utilisation rate	<b>48% (2%→)</b> % of theatres sessions finishing early
<b>45% (18.4%↓)</b> <i>draft Dec '21</i> Patients starting first definitive cancer treatment within 62 days		<b>40% (3%↓)</b> % of theatres sessions starting late	<b>36% (2%↓)</b> Operations cancelled on the day

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

### 5.3 Updates on key measures

PLANNED CARE	
Description	Current Performance
<b>Referrals and shape of the waiting list</b>  <b>1. GP Referrals</b> <i>The number of Stage 1 additions per week</i>  <b>2. Stage 1 additions</b> <i>The number of new patients that have been added to the outpatient waiting list</i>  <b>3. Size of the waiting list</b> <i>Total number of patients on the waiting list by stage as at December 2019</i>  <b>4. Size of the waiting list</b> <i>Total number of patients on the waiting list by stage as at December 2021</i>	<p>December 2021 has seen a reduction 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. Chart 3 shows the waiting list as at December 2019 as this reflects a typical monthly snapshot of the waiting list prior to the COVID19 pandemic.</p> <p><b>Trend</b></p> <div> <div> <b>1. Number of GP referrals received by SBU Health Board</b> </div> <div> <b>2. Number of stage 1 additions per week</b> </div> </div> <div> <div> <b>3. Total size of the waiting list and movement (December 2019)</b> </div> <div> <b>4. Total size of the waiting list and movement (December 2021)</b> </div> </div>

PLANNED CARE																																																																																																																																																																																																											
Description	Current Performance																																																																																																																																																																																																										
<b>Outpatient waiting times</b>  1. Number of patients waiting more than 26 weeks for an outpatient appointment (stage 1)- Health Board Total  2. Number of patients waiting more than 26 weeks for an outpatient appointment (stage 1)- Hospital Level  3. Patients waiting over 26 weeks for an outpatient appointment by specialty  4. Outpatient activity undertaken	<p>The number of patients waiting over 26 weeks for a first outpatient appointment is still a challenge. December 2021 saw an in-month increase in the number of patients waiting over 26 weeks for an outpatient appointment. The number of breaches increased from 24,752 in November 2021 to 25,452 in December 2021. Orthopaedics has the largest proportion of patients waiting over 26 weeks for an outpatient appointment, closely followed by Ophthalmology and ENT. The number of outpatient attendances has significantly reduced since February 2020 due to COVID19. Chart 4 shows that the number of attendances started to increase from April 2021 before remaining steady for a period and then increasing again in November 2021.</p>																																																																																																																																																																																																										
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PLANNED CARE	
Description	Current Performance
<p><b>Patients waiting over 36 weeks for treatment</b></p> <p>1. Number of patients waiting more than 36 weeks for treatment and the number of elective patients admitted for treatment- Health Board Total</p> <p>2. Number of patients waiting more than 36 weeks for treatment and the number of elective patients admitted for treatment- Hospital level</p> <p>3. Number of elective admissions</p>	<p>The number of patients waiting longer than 36 weeks from referral to treatment has increased every month since the first wave of COVID19 in March 2020. December 2020 was the first month in 2020 that saw an in-month reduction and this trend continued into January and February 2021 however, the number of breaches increased again from March 2021. In December 2021, there were 37,504 patients waiting over 36 weeks which is a 1.2% in-month increase from November 2021. 27,7268 of the 37,504 were waiting over 52 weeks in December 2021.</p>
	Trend
	<div> <p><b>1. Number of patients waiting over 36 weeks- HB total</b></p> <p>■ &gt;36 wks (SB UHB)</p> </div> <div> <p><b>2. Number of patients waiting over 36 weeks- Hospital level</b></p> <p>— Morriston — Singleton — PCT — NPTH</p> </div> <div> <p><b>3. Number of elective admissions</b></p> <p>— Admitted elective patients</p> </div>

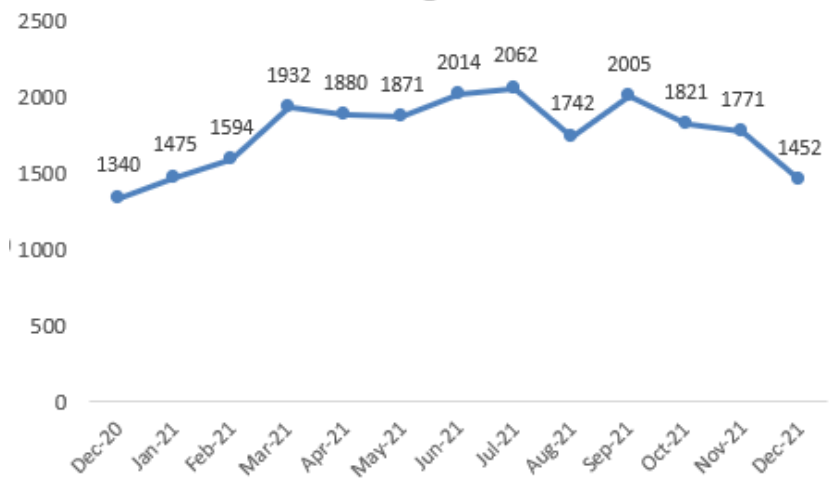
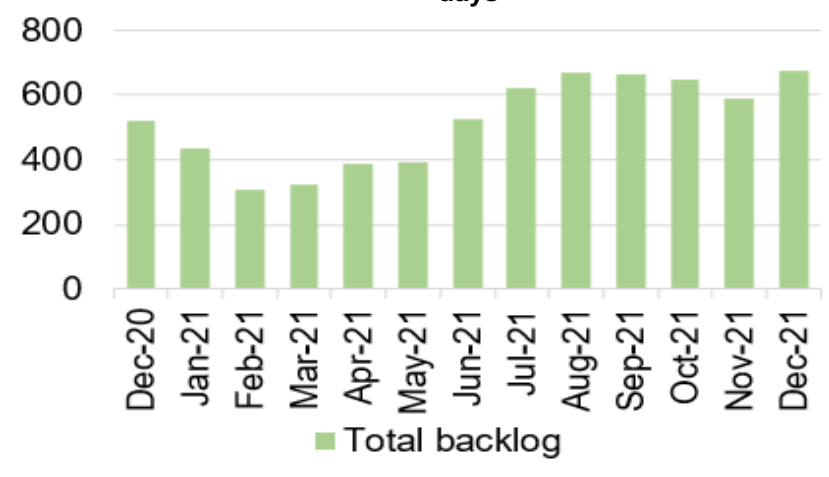
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<b>Total waiting times</b> <i>Percentage of patients waiting less than 26 weeks from referral to treatment</i>	<p>Throughout 2019/20 the overall percentage of patients waiting less than 26 weeks from referral to treatment ranged between 80% and 88%. Whereas, throughout the Covid19 pandemic in 2020/21 the percentage ranged between 41% and 72%.</p> <p>In December 2021, 50.5% of patients were waiting under 26 weeks from referral to treatment, which is a reduction from November 2021.</p>	<p><b>Percentage of patient waiting less than 26 weeks</b></p> <table><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>PCT</th><th>NPTH</th></tr></thead><tbody><tr><td>Dec-20</td><td>40%</td><td>50%</td><td>40%</td><td>95%</td></tr><tr><td>Jan-21</td><td>40%</td><td>48%</td><td>40%</td><td>92%</td></tr><tr><td>Feb-21</td><td>42%</td><td>48%</td><td>45%</td><td>88%</td></tr><tr><td>Mar-21</td><td>42%</td><td>48%</td><td>40%</td><td>92%</td></tr><tr><td>Apr-21</td><td>42%</td><td>48%</td><td>38%</td><td>90%</td></tr><tr><td>May-21</td><td>42%</td><td>48%</td><td>45%</td><td>85%</td></tr><tr><td>Jun-21</td><td>45%</td><td>48%</td><td>55%</td><td>82%</td></tr><tr><td>Jul-21</td><td>45%</td><td>48%</td><td>65%</td><td>80%</td></tr><tr><td>Aug-21</td><td>45%</td><td>48%</td><td>75%</td><td>78%</td></tr><tr><td>Sep-21</td><td>45%</td><td>48%</td><td>78%</td><td>75%</td></tr><tr><td>Oct-21</td><td>45%</td><td>48%</td><td>75%</td><td>72%</td></tr><tr><td>Nov-21</td><td>45%</td><td>48%</td><td>78%</td><td>70%</td></tr><tr><td>Dec-21</td><td>45%</td><td>50%</td><td>80%</td><td>75%</td></tr></tbody></table>	Month	Morriston	Singleton	PCT	NPTH	Dec-20	40%	50%	40%	95%	Jan-21	40%	48%	40%	92%	Feb-21	42%	48%	45%	88%	Mar-21	42%	48%	40%	92%	Apr-21	42%	48%	38%	90%	May-21	42%	48%	45%	85%	Jun-21	45%	48%	55%	82%	Jul-21	45%	48%	65%	80%	Aug-21	45%	48%	75%	78%	Sep-21	45%	48%	78%	75%	Oct-21	45%	48%	75%	72%	Nov-21	45%	48%	78%	70%	Dec-21	45%	50%	80%	75%
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<b>Ophthalmology waiting times</b> <i>Percentage of ophthalmology R1 patients who are waiting within their clinical target date or within 25% in excess of their clinical target date for their care or treatments</i>	<p>In December 2021, 48.7% 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><b>Percentage of ophthalmology R1 patients who are waiting within their clinical target date or within 25% in excess of their clinical target date for their care or treatments</b></p> <table><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>Dec-20</td><td>48%</td><td>95%</td></tr><tr><td>Jan-21</td><td>48%</td><td>95%</td></tr><tr><td>Feb-21</td><td>48%</td><td>95%</td></tr><tr><td>Mar-21</td><td>48%</td><td>95%</td></tr><tr><td>Apr-21</td><td>48%</td><td>95%</td></tr><tr><td>May-21</td><td>48%</td><td>95%</td></tr><tr><td>Jun-21</td><td>48%</td><td>95%</td></tr><tr><td>Jul-21</td><td>48%</td><td>95%</td></tr><tr><td>Aug-21</td><td>48%</td><td>95%</td></tr><tr><td>Sep-21</td><td>48%</td><td>95%</td></tr><tr><td>Oct-21</td><td>48%</td><td>95%</td></tr><tr><td>Nov-21</td><td>48%</td><td>95%</td></tr><tr><td>Dec-21</td><td>48.7%</td><td>95%</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	Dec-20	48%	95%	Jan-21	48%	95%	Feb-21	48%	95%	Mar-21	48%	95%	Apr-21	48%	95%	May-21	48%	95%	Jun-21	48%	95%	Jul-21	48%	95%	Aug-21	48%	95%	Sep-21	48%	95%	Oct-21	48%	95%	Nov-21	48%	95%	Dec-21	48.7%	95%																												
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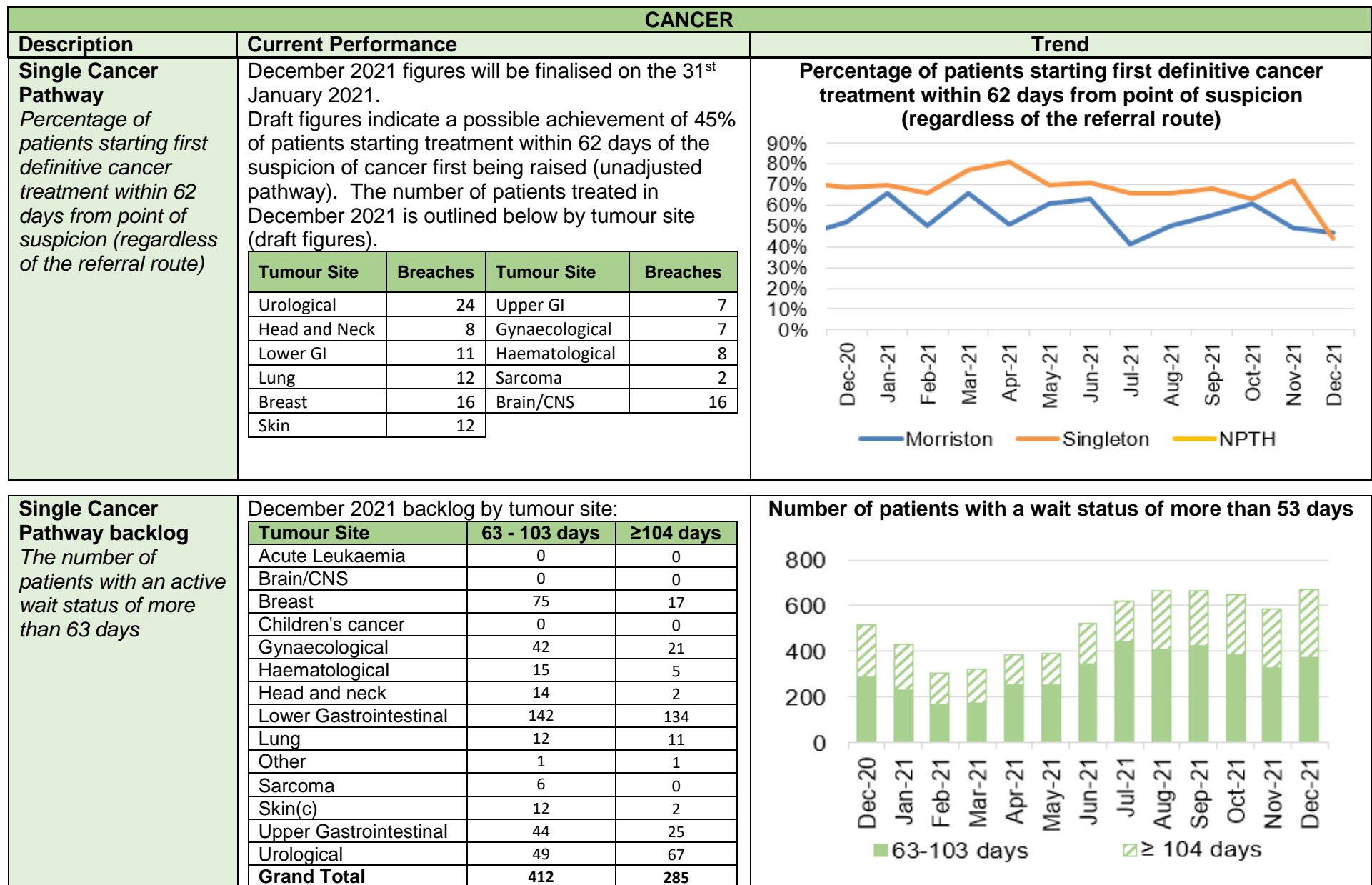
THEATRE EFFICIENCY																																																									
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<b>Theatre Efficiency</b> <i>1. Theatre Utilisation Rates</i>  <i>2. % of theatre sessions starting late</i>  <i>3. % of theatre sessions finishing early</i>  <i>4. % of theatre sessions cancelled at short notice (&lt;28 days)</i>  <i>5. % of operations cancelled on the day</i>	<p>In December 2021 the Theatre Utilisation rate was 62%. This is an in-month reduction of 5% and a 3% increase compared to December 2020.</p>	<p><b>1. Theatre Utilisation Rates</b></p> <table border="1"><caption>Theatre Utilisation Rate (SBU HB)</caption><thead><tr><th>Month</th><th>Rate (%)</th></tr></thead><tbody><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>70</td></tr><tr><td>Apr-21</td><td>75</td></tr><tr><td>May-21</td><td>75</td></tr><tr><td>Jun-21</td><td>70</td></tr><tr><td>Jul-21</td><td>65</td></tr><tr><td>Aug-21</td><td>65</td></tr><tr><td>Sep-21</td><td>65</td></tr><tr><td>Oct-21</td><td>60</td></tr><tr><td>Nov-21</td><td>60</td></tr><tr><td>Dec-21</td><td>62</td></tr></tbody></table>	Month	Rate (%)	Dec-20	60	Jan-21	65	Feb-21	70	Mar-21	70	Apr-21	75	May-21	75	Jun-21	70	Jul-21	65	Aug-21	65	Sep-21	65	Oct-21	60	Nov-21	60	Dec-21	62																											
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<b>Diagnostics waiting times</b> <i>The number of patients waiting more than 8 weeks for specified diagnostics</i>	<p>In December 2021, there was a small increase in the number of patients waiting over 8 weeks for specified diagnostics. It increased from 6,008 in November 2021 to 6,071 in December 2021.</p> <p>The following is a breakdown for the 8-week breaches by diagnostic test for December 2021:</p> <ul style="list-style-type: none"><li>• Endoscopy= 3,144</li><li>• Cardiac tests= 1,813</li><li>• Other Diagnostics = 1,106</li></ul>	<p><b>Number of patients waiting longer than 8 weeks for diagnostics</b></p> <table border="1"><caption>Approximate data for Diagnostics waiting times (8 weeks)</caption><thead><tr><th>Month</th><th>Cardiac tests</th><th>Endoscopy</th><th>Other diagnostics (inc. radiology)</th></tr></thead><tbody><tr><td>Dec-20</td><td>1,500</td><td>2,200</td><td>2,800</td></tr><tr><td>Jan-21</td><td>1,300</td><td>2,300</td><td>2,500</td></tr><tr><td>Feb-21</td><td>1,400</td><td>2,100</td><td>1,500</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>1,400</td><td>2,100</td><td>1,300</td></tr><tr><td>May-21</td><td>1,500</td><td>2,100</td><td>1,200</td></tr><tr><td>Jun-21</td><td>1,800</td><td>2,000</td><td>1,400</td></tr><tr><td>Jul-21</td><td>1,900</td><td>2,000</td><td>1,400</td></tr><tr><td>Aug-21</td><td>1,800</td><td>2,000</td><td>1,600</td></tr><tr><td>Sep-21</td><td>1,900</td><td>2,200</td><td>1,500</td></tr><tr><td>Oct-21</td><td>1,700</td><td>2,500</td><td>1,500</td></tr><tr><td>Nov-21</td><td>1,800</td><td>2,800</td><td>1,400</td></tr><tr><td>Dec-21</td><td>1,813</td><td>3,144</td><td>1,106</td></tr></tbody></table>	Month	Cardiac tests	Endoscopy	Other diagnostics (inc. radiology)	Dec-20	1,500	2,200	2,800	Jan-21	1,300	2,300	2,500	Feb-21	1,400	2,100	1,500	Mar-21	1,300	2,100	1,200	Apr-21	1,400	2,100	1,300	May-21	1,500	2,100	1,200	Jun-21	1,800	2,000	1,400	Jul-21	1,900	2,000	1,400	Aug-21	1,800	2,000	1,600	Sep-21	1,900	2,200	1,500	Oct-21	1,700	2,500	1,500	Nov-21	1,800	2,800	1,400	Dec-21	1,813	3,144	1,106																																																								
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<b>Therapy waiting times</b> <i>The number of patients waiting more than 14 weeks for specified therapies</i>	<p>In December 2021 there were 889 patients waiting over 14 weeks for specified Therapies.</p> <p>The breakdown for the breaches in December 2021 are:</p> <ul style="list-style-type: none"><li>• Podiatry = 714</li><li>• Speech &amp; Language Therapy= 161</li><li>• Dietetics = 8</li></ul> <p><u>Podiatry Recovery</u> Specifically, within Podiatry, Staff sickness/vacancies are having a detrimental impact on Waiting list performance. Active recruitment is currently taking place, with locum cover being explored. A detailed action plan will be developed by 21<sup>st</sup> January 2022 to address the further deteriorating position.</p>	<p><b>Number of patients waiting longer than 14 weeks for therapies</b></p> <table border="1"><caption>Approximate data for Therapy waiting times (14 weeks)</caption><thead><tr><th>Month</th><th>Occ Therapy/ LD (MH)</th><th>Occ Therapy (exc. MH)</th><th>Audiology</th><th>Speech &amp; Language</th><th>Dietetics</th><th>Physio</th><th>Podiatry</th></tr></thead><tbody><tr><td>Dec-20</td><td>100</td><td>100</td><td>100</td><td>100</td><td>10</td><td>10</td><td>100</td></tr><tr><td>Jan-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>10</td><td>10</td><td>100</td></tr><tr><td>Feb-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>10</td><td>10</td><td>100</td></tr><tr><td>Mar-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>10</td><td>10</td><td>100</td></tr><tr><td>Apr-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>10</td><td>10</td><td>100</td></tr><tr><td>May-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>10</td><td>10</td><td>100</td></tr><tr><td>Jun-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>10</td><td>10</td><td>100</td></tr><tr><td>Jul-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>10</td><td>10</td><td>100</td></tr><tr><td>Aug-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>10</td><td>10</td><td>100</td></tr><tr><td>Sep-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>10</td><td>10</td><td>100</td></tr><tr><td>Oct-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>10</td><td>10</td><td>100</td></tr><tr><td>Nov-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>10</td><td>10</td><td>100</td></tr><tr><td>Dec-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>10</td><td>10</td><td>714</td></tr></tbody></table>	Month	Occ Therapy/ LD (MH)	Occ Therapy (exc. MH)	Audiology	Speech & Language	Dietetics	Physio	Podiatry	Dec-20	100	100	100	100	10	10	100	Jan-21	100	100	100	100	10	10	100	Feb-21	100	100	100	100	10	10	100	Mar-21	100	100	100	100	10	10	100	Apr-21	100	100	100	100	10	10	100	May-21	100	100	100	100	10	10	100	Jun-21	100	100	100	100	10	10	100	Jul-21	100	100	100	100	10	10	100	Aug-21	100	100	100	100	10	10	100	Sep-21	100	100	100	100	10	10	100	Oct-21	100	100	100	100	10	10	100	Nov-21	100	100	100	100	10	10	100	Dec-21	100	100	100	100	10	10	714
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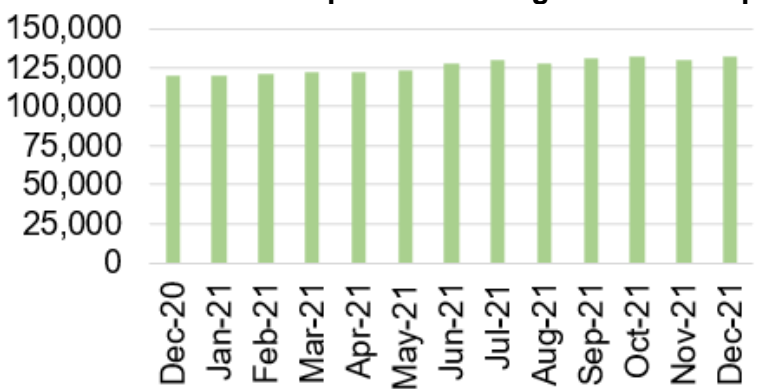
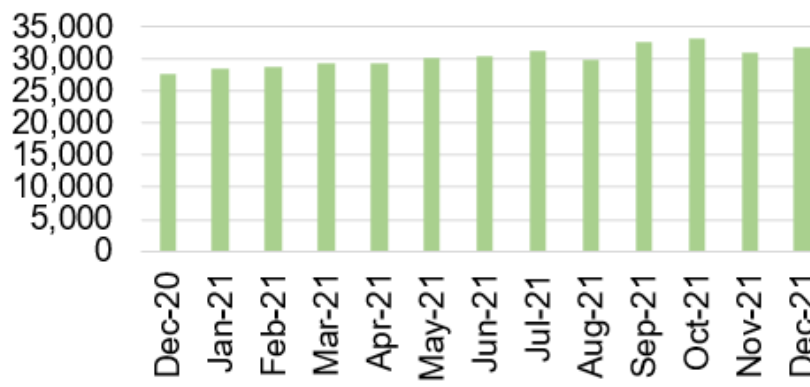


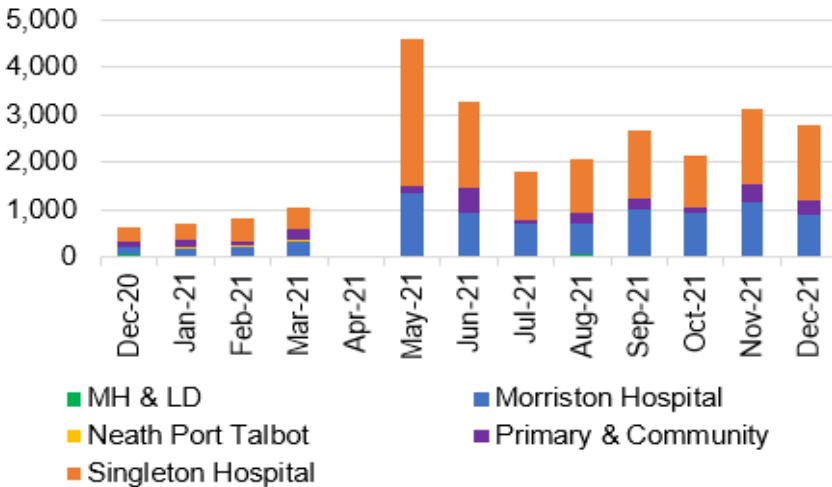
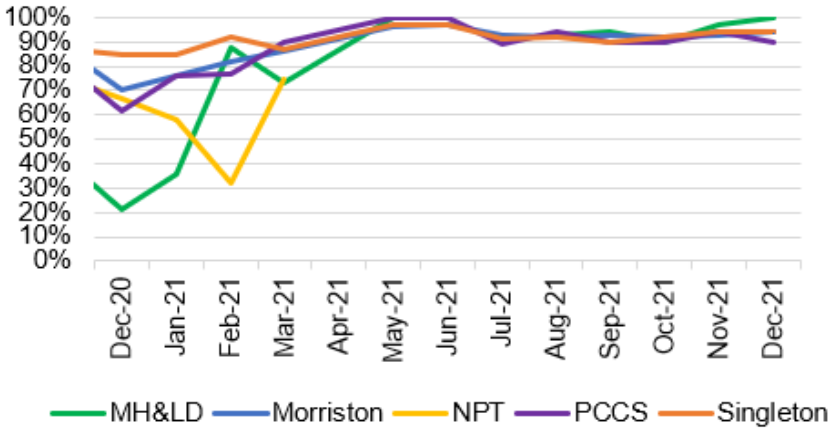
CANCER																														
Description	Current Performance	Trend																												
Cancer demand and shape of the waiting list  1. Number of Urgent Suspected Cancer (USC) referrals received	<p>The number of Urgent Suspected Cancer (USC) referrals significantly reduced between March 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><b>1. Number of USC referrals</b></p>  <table><tr><th>Month</th><th>Number of USC referrals</th></tr><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>1871</td></tr><tr><td>Jun-21</td><td>2014</td></tr><tr><td>Jul-21</td><td>2062</td></tr><tr><td>Aug-21</td><td>1742</td></tr><tr><td>Sep-21</td><td>2005</td></tr><tr><td>Oct-21</td><td>1821</td></tr><tr><td>Nov-21</td><td>1771</td></tr><tr><td>Dec-21</td><td>1452</td></tr></table>	Month	Number of USC referrals	Dec-20	1340	Jan-21	1475	Feb-21	1594	Mar-21	1932	Apr-21	1880	May-21	1871	Jun-21	2014	Jul-21	2062	Aug-21	1742	Sep-21	2005	Oct-21	1821	Nov-21	1771	Dec-21	1452
	Month	Number of USC referrals																												
Dec-20	1340																													
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Nov-21	1771																													
Dec-21	1452																													
2. Single Cancer Pathway backlog- patients waiting over 63 days	<p>December 2021 has seen an increase in the number of patients waiting over 63 days. The following actions have been outlined to support backlog reduction;</p> <ul style="list-style-type: none"><li>- Currently finalising plans to establish FIT testing in Primary care – this change will improve pathway efficiency.</li><li>- A new cancer performance service manager has been appointed and will start in post on 31<sup>st</sup> January 2022.</li><li>- A new pelvic mass clinic pilot is due to commence on 17<sup>th</sup> January 2022 to support rapid assessment, diagnosis and management of patient presenting with suspected ovarian cancer.</li><li>- Currently progressing with filling the breast surgeon vacancy, the Job Description is currently being finalised.</li><li>- Waiting list initiatives for PMB patients have started from W/C 10<sup>th</sup> January 2022</li></ul>	<p><b>2. Single Cancer Pathway backlog- patients waiting over 63 days</b></p>  <table><tr><th>Month</th><th>Total backlog</th></tr><tr><td>Dec-20</td><td>520</td></tr><tr><td>Jan-21</td><td>430</td></tr><tr><td>Feb-21</td><td>300</td></tr><tr><td>Mar-21</td><td>320</td></tr><tr><td>Apr-21</td><td>380</td></tr><tr><td>May-21</td><td>390</td></tr><tr><td>Jun-21</td><td>520</td></tr><tr><td>Jul-21</td><td>610</td></tr><tr><td>Aug-21</td><td>660</td></tr><tr><td>Sep-21</td><td>650</td></tr><tr><td>Oct-21</td><td>640</td></tr><tr><td>Nov-21</td><td>580</td></tr><tr><td>Dec-21</td><td>670</td></tr></table>	Month	Total backlog	Dec-20	520	Jan-21	430	Feb-21	300	Mar-21	320	Apr-21	380	May-21	390	Jun-21	520	Jul-21	610	Aug-21	660	Sep-21	650	Oct-21	640	Nov-21	580	Dec-21	670
Month	Total backlog																													
Dec-20	520																													
Jan-21	430																													
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CANCER					
Description	Current Performance	Trend			
<b>USC First Outpatient Appointments</b> <i>The number of patients at first outpatient appointment stage by days waiting</i>	To date, early January 2022 figures show total wait volumes have decreased by 13%. This can be attributed to a change in the data recording following the introduction of a new category of patients who are first reviewed in a ‘diagnostic one stop’ outpatient appointment.	<b>The number of patients waiting for a first outpatient appointment (by total days waiting) – Early January 2021</b>			
		<b>FIRST OPA</b>	<b>2-Jan</b>	<b>9-Jan</b>	<b>% change</b>
		Acute Leukaemia	0	0	0%
		Brain/CNS	1	0	-100%
		Breast	1	0	-100%
		Children's Cancer	1	0	-100%
		Gynaecological	58	34	-41%
		Haematological	2	4	100%
		Head and Neck	55	50	-9%
		Lower GI	53	75	42%
		Lung	7	5	-29%
		Other	47	33	-30%
		Sarcoma	6	4	-33%
		Skin	71	38	-46%
		Upper GI	48	47	-2%
Urological	30	41	37%		
	<b>380</b>	<b>331</b>	<b>-13%</b>		

<b>Radiotherapy waiting times</b> <i>The percentage of patients receiving radiotherapy treatment</i>	<p>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.</p> <table border="1"> <thead> <tr> <th>Measure</th><th>Target</th><th>Dec-21</th></tr> </thead> <tbody> <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>78%</td></tr> <tr><td>Urgent SC (7 Day Target)</td><td>80%</td><td>37%</td></tr> <tr><td>Urgent SC (14 Day Target)</td><td>100%</td><td>87%</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>92%</td></tr> <tr><td>Elective Delay (28 Day Target)</td><td>100%</td><td>100%</td></tr> </tbody> </table>	Measure	Target	Dec-21	Scheduled (21 Day Target)	80%	37%	Scheduled (28 Day Target)	100%	78%	Urgent SC (7 Day Target)	80%	37%	Urgent SC (14 Day Target)	100%	87%	Emergency (within 1 day)	80%	100%	Emergency (within 2 days)	100%	100%	Elective Delay (21 Day Target)	80%	92%	Elective Delay (28 Day Target)	100%	100%	<p><b>Radiotherapy waiting times</b></p>
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FOLLOW-UP APPOINTMENTS																																																										
Description	Current Performance	Trend																																																								
<b>Follow-up appointments</b>  1. The total number of patients on the follow-up waiting list  2. The number of patients waiting 100% over target for a follow-up appointment	In December 2021, the overall size of the follow-up waiting list increased by 2,148 patients compared with November 2021 (from 129,255 to 131,403).	<b>1. Total number of patients waiting for a follow-up</b>  <table><caption>1. Total number of patients waiting for a follow-up (SBU HB)</caption><thead><tr><th>Month</th><th>Number of patients</th></tr></thead><tbody><tr><td>Dec-20</td><td>125,000</td></tr><tr><td>Jan-21</td><td>125,000</td></tr><tr><td>Feb-21</td><td>125,000</td></tr><tr><td>Mar-21</td><td>125,000</td></tr><tr><td>Apr-21</td><td>125,000</td></tr><tr><td>May-21</td><td>125,000</td></tr><tr><td>Jun-21</td><td>125,000</td></tr><tr><td>Jul-21</td><td>125,000</td></tr><tr><td>Aug-21</td><td>125,000</td></tr><tr><td>Sep-21</td><td>125,000</td></tr><tr><td>Oct-21</td><td>125,000</td></tr><tr><td>Nov-21</td><td>125,000</td></tr><tr><td>Dec-21</td><td>125,000</td></tr></tbody></table> <b>2. Delayed follow-ups: Number of patients waiting 100% over target</b>  <table><caption>2. Delayed follow-ups: Number of patients waiting 100% over target date (SBU HB)</caption><thead><tr><th>Month</th><th>Number of patients</th></tr></thead><tbody><tr><td>Dec-20</td><td>30,000</td></tr><tr><td>Jan-21</td><td>30,000</td></tr><tr><td>Feb-21</td><td>30,000</td></tr><tr><td>Mar-21</td><td>30,000</td></tr><tr><td>Apr-21</td><td>30,000</td></tr><tr><td>May-21</td><td>30,000</td></tr><tr><td>Jun-21</td><td>30,000</td></tr><tr><td>Jul-21</td><td>30,000</td></tr><tr><td>Aug-21</td><td>30,000</td></tr><tr><td>Sep-21</td><td>30,000</td></tr><tr><td>Oct-21</td><td>30,000</td></tr><tr><td>Nov-21</td><td>30,000</td></tr><tr><td>Dec-21</td><td>30,000</td></tr></tbody></table> ■ Number of patients waiting 100% over target date (SBU HB)	Month	Number of patients	Dec-20	125,000	Jan-21	125,000	Feb-21	125,000	Mar-21	125,000	Apr-21	125,000	May-21	125,000	Jun-21	125,000	Jul-21	125,000	Aug-21	125,000	Sep-21	125,000	Oct-21	125,000	Nov-21	125,000	Dec-21	125,000	Month	Number of patients	Dec-20	30,000	Jan-21	30,000	Feb-21	30,000	Mar-21	30,000	Apr-21	30,000	May-21	30,000	Jun-21	30,000	Jul-21	30,000	Aug-21	30,000	Sep-21	30,000	Oct-21	30,000	Nov-21	30,000	Dec-21	30,000
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In December 2021, there was a total of 58,006 patients waiting for a follow-up past their target date. This is an in-month increase of 2.5% (from 56,618 in November 2021 to 58,006 in December 2021).																																																										
Of the 58,006 delayed follow-ups in December 2021, 11,680 had appointment dates and 46,326 were still waiting for an appointment.																																																										
In addition, 31,912 patients were waiting 100%+ over target date in December 2021. This is a 3.1% increase when compared with November 2021.																																																										

PATIENT EXPERIENCE		
Description	Current Performance	Trend
<b>Patient experience</b>  1. Number of friends and family surveys completed  2. Percentage of patients/ service users who would recommend and highly recommend	<ul style="list-style-type: none"> <li>Health Board Friends &amp; Family patient satisfaction level in December 2021 was 93% and 2,776 surveys were completed.               <ul style="list-style-type: none"> <li>Singleton/ Neath Port Talbot Hospitals Service Group completed 1,580 surveys in December 2021, with a recommended score of 94%.</li> <li>Morrison Hospital completed 878 surveys in December 2021, with a recommended score of 94%.</li> <li>Primary &amp; Community Care completed 291 surveys for December 2021, with a recommended score of 90%.</li> <li>The Mental Health Service Group completed 23 surveys for December 2021, with a recommended score of 100%.</li> </ul> </li> </ul>	<p><b>1. Number of friends and family surveys completed</b></p>  <p><b>2. % of patients/ service users who would recommend and highly recommend</b></p>  <p>* Data not available for April 2021. Neath Port Talbot included in Singleton's figures from May 2021</p>

COMPLAINTS																																																							
Description	Current Performance	Trend																																																					
<b>Patient concerns</b>  <i>1. Number of formal complaints received</i>          <i>2. Percentage of concerns that have received a final reply or an interim reply up to and including 30 working days from the date the concern was first received by the organisation</i>	<p>1. In October 2021, the Health Board received 135 formal complaints; this is a 14.2% increase on the number seen in September 2021.</p> <p>Since the COVID19 outbreak began in March 2020, the monthly number of complaints received has been significantly low. The numbers have gradually increased each month and numbers are now consistent with those seen pre-Covid.</p>	<p><b>1. Number of formal complaints received</b></p> <table border="1"><caption>1. Number of formal complaints received</caption><thead><tr><th>Month</th><th>MH &amp; LD</th><th>Morriston Hospital</th><th>NPT Hospital</th><th>PCCS</th><th>Singleton Hospital</th></tr></thead><tbody><tr><td>May-21</td><td>15</td><td>55</td><td>5</td><td>15</td><td>25</td></tr><tr><td>Jun-21</td><td>20</td><td>70</td><td>10</td><td>15</td><td>35</td></tr><tr><td>Jul-21</td><td>25</td><td>55</td><td>10</td><td>20</td><td>30</td></tr><tr><td>Aug-21</td><td>15</td><td>55</td><td>10</td><td>10</td><td>35</td></tr><tr><td>Sep-21</td><td>15</td><td>65</td><td>10</td><td>15</td><td>25</td></tr><tr><td>Oct-21</td><td>15</td><td>60</td><td>10</td><td>15</td><td>35</td></tr></tbody></table> <p>■ MH &amp; LD ■ Morriston Hospital ■ NPT Hospital ■ PCCS ■ Singleton Hospital</p>	Month	MH & LD	Morriston Hospital	NPT Hospital	PCCS	Singleton Hospital	May-21	15	55	5	15	25	Jun-21	20	70	10	15	35	Jul-21	25	55	10	20	30	Aug-21	15	55	10	10	35	Sep-21	15	65	10	15	25	Oct-21	15	60	10	15	35											
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<p>2. The overall Health Board rate for responding to concerns within 30 working days was 67% in October 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>83%</td></tr><tr><td>Morriston Hospital</td><td>70%</td></tr><tr><td>Mental Health &amp; Learning Disabilities</td><td>69%</td></tr><tr><td>Primary, Community and Therapies</td><td>83%</td></tr><tr><td>Singleton Hospital</td><td>48%</td></tr></tbody></table>		30 day response rate	Neath Port Talbot Hospital	83%	Morriston Hospital	70%	Mental Health & Learning Disabilities	69%	Primary, Community and Therapies	83%	Singleton Hospital	48%	<p><b>2. Response rate for concerns within 30 days</b></p> <table border="1"><caption>2. Response rate for concerns within 30 days</caption><thead><tr><th>Month</th><th>Health Board Total</th><th>HB Profile</th></tr></thead><tbody><tr><td>Oct-20</td><td>75%</td><td>80%</td></tr><tr><td>Nov-20</td><td>82%</td><td>80%</td></tr><tr><td>Dec-20</td><td>80%</td><td>80%</td></tr><tr><td>Jan-21</td><td>70%</td><td>80%</td></tr><tr><td>Feb-21</td><td>80%</td><td>80%</td></tr><tr><td>Mar-21</td><td>80%</td><td>80%</td></tr><tr><td>Apr-21</td><td>78%</td><td>80%</td></tr><tr><td>May-21</td><td>78%</td><td>80%</td></tr><tr><td>Jun-21</td><td>68%</td><td>80%</td></tr><tr><td>Jul-21</td><td>68%</td><td>80%</td></tr><tr><td>Aug-21</td><td>83%</td><td>80%</td></tr><tr><td>Sep-21</td><td>75%</td><td>80%</td></tr><tr><td>Oct-21</td><td>67%</td><td>80%</td></tr></tbody></table> <p>■ Health Board Total ■ HB Profile</p>	Month	Health Board Total	HB Profile	Oct-20	75%	80%	Nov-20	82%	80%	Dec-20	80%	80%	Jan-21	70%	80%	Feb-21	80%	80%	Mar-21	80%	80%	Apr-21	78%	80%	May-21	78%	80%	Jun-21	68%	80%	Jul-21	68%	80%	Aug-21	83%	80%	Sep-21	75%	80%	Oct-21	67%	80%
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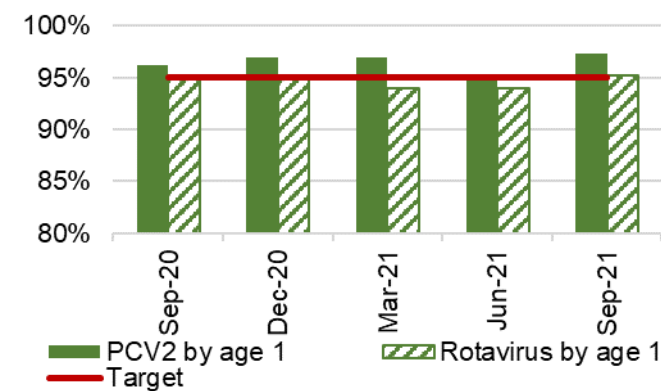
## HARM FROM WIDER SOCIETAL ACTIONS/LOCKDOWN

### 6.1 Vaccinations and Immunisations

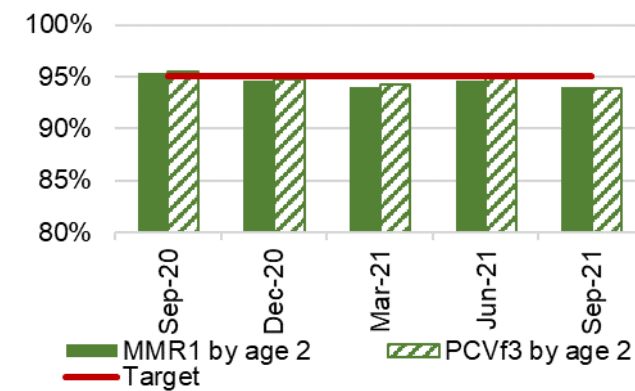
**Chart 1: % children who received 3 doses of the hexavalent '6 in 1' vaccine and MenB2 vaccine by age 1**



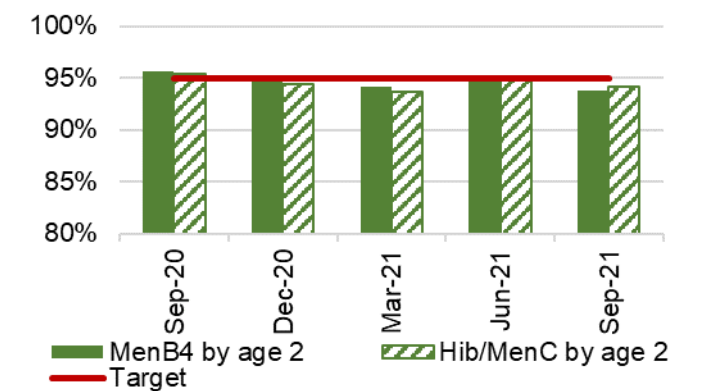
**Chart 2: % children who received PCV2 vaccine and Rotavirus vaccine by age 1**



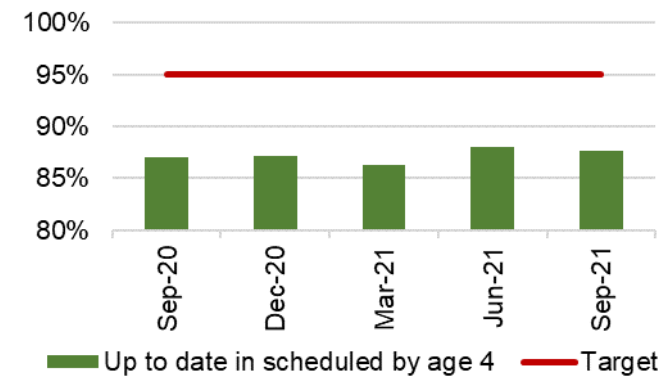
**Chart 3: % children who received MMR1 vaccine and PCVf3 vaccine by age 2**



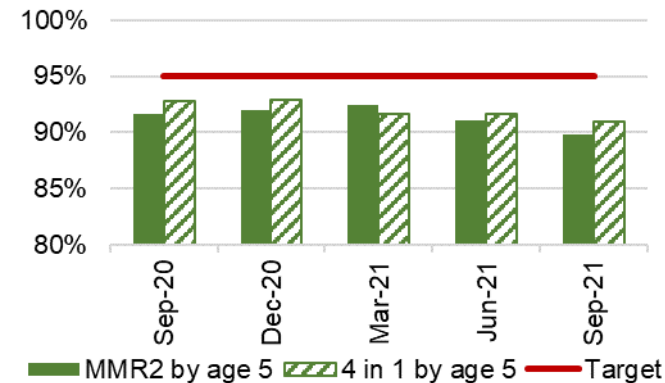
**Chart 4: % children who received MenB4 vaccine and Hib/MenC vaccine by age 2**



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



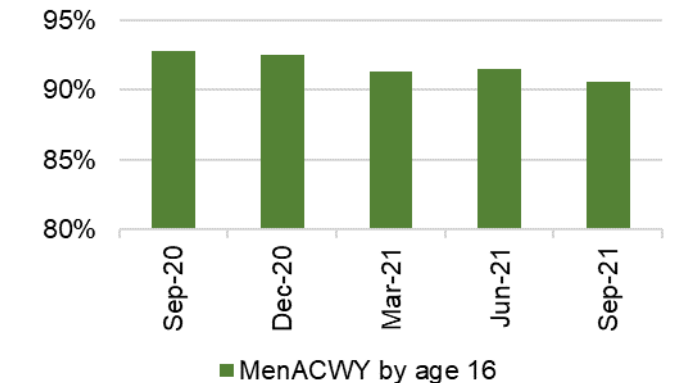
**Chart 6: % children who received 2 doses of the MMR vaccine and 4 in 1 vaccine by age 5**



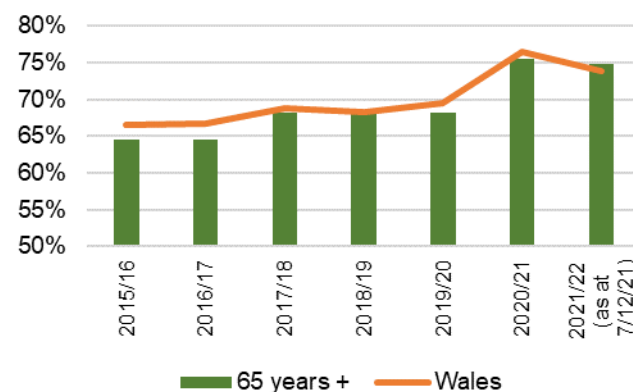
**Chart 7: % children who received MMR vaccine and teenage booster by age 16**



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

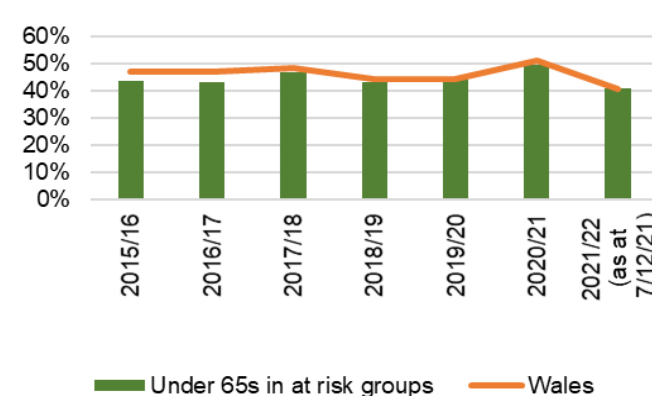


**Chart 9: Influenza uptake for amongst 65 year olds and over**



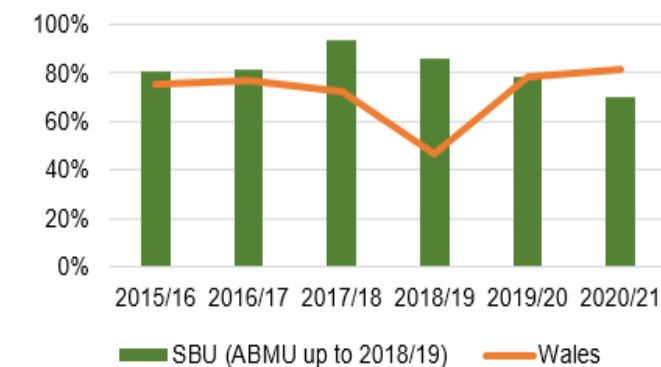
Data prior to April 2019 relates to Abertawe Bro Morgannwg University Health Board

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



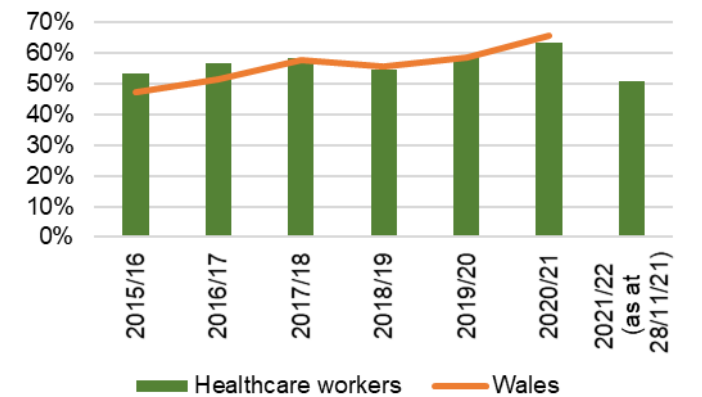
Data prior to April 2019 relates to Abertawe Bro Morgannwg University Health Board

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



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

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



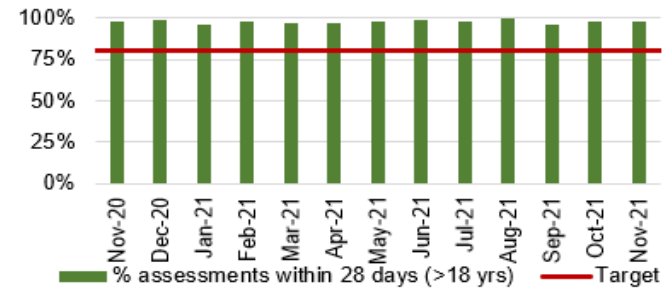
Data prior to April 2019 relates to Abertawe Bro Morgannwg University Health Board.  
2020/21 all-Wales data not yet available



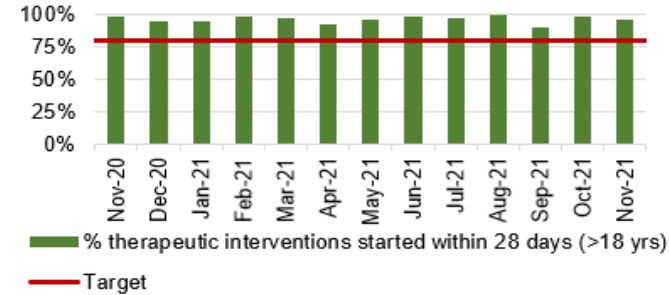
## HARM FROM WIDER SOCIETAL ACTIONS/LOCKDOWN

### 6.2 Mental Health Overview

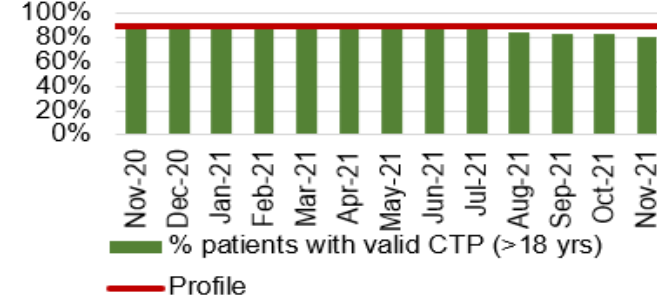
**Chart 1: % of mental health assessments undertaken within (up to and including) 28 days from the date of receipt of referral**



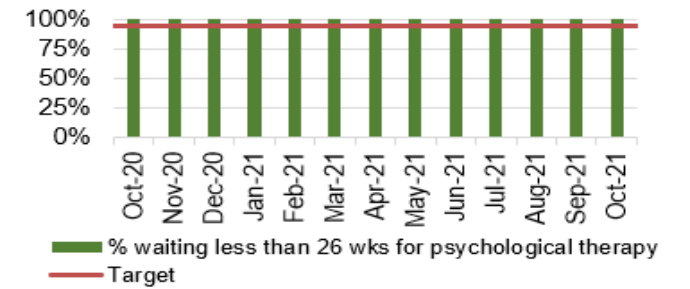
**Chart 2: % of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS**



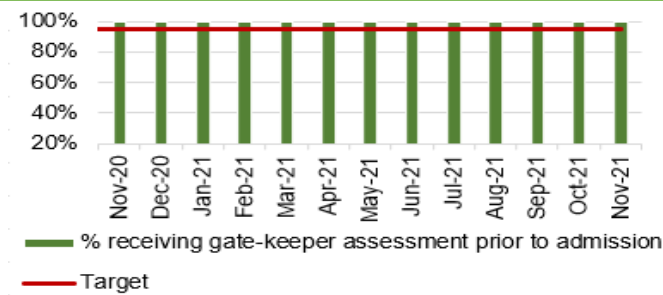
**Chart 3: % of health board residents in receipt of secondary mental health services (all ages) who have a valid care and treatment plan**



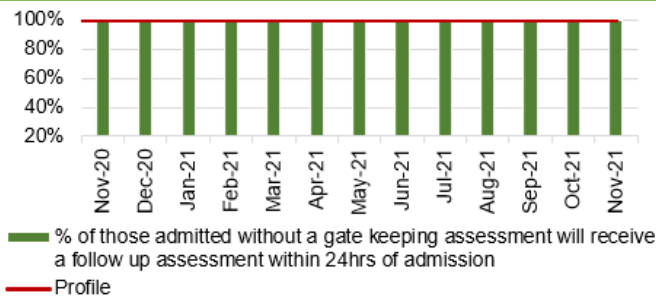
**Chart 4: % of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health**



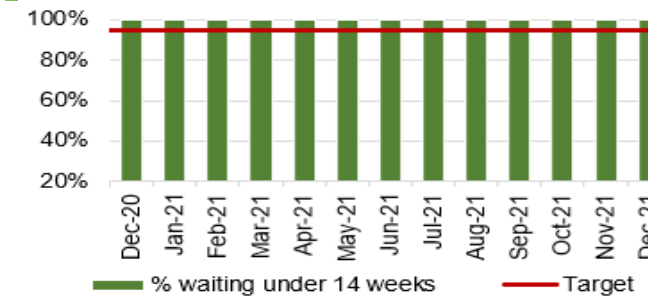
**Chart 5: 95% of those admitted 0900-2100 will receive a gate-keeping assessment by the CRHTS prior to admission**



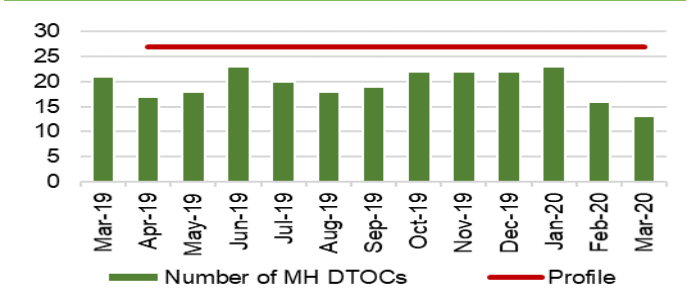
**Chart 6: 100% of those admitted without a gate keeping assessment will receive a follow up assessment by CRHTS within 24hrs of admission**



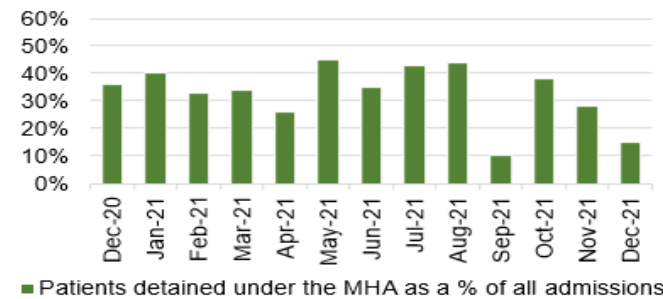
**Chart 7: % of patients waiting under 14 weeks for Therapies**



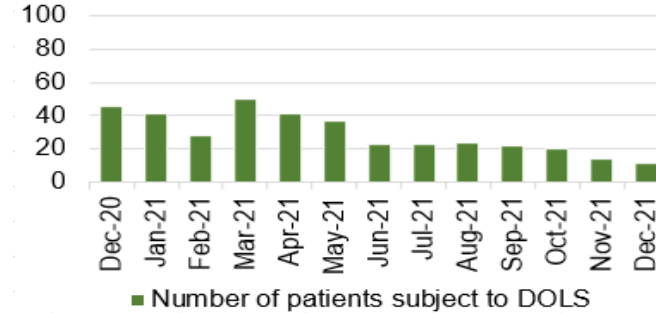
**Chart 8: Number of Mental Health Delayed Transfers of Care (DTOCs)**



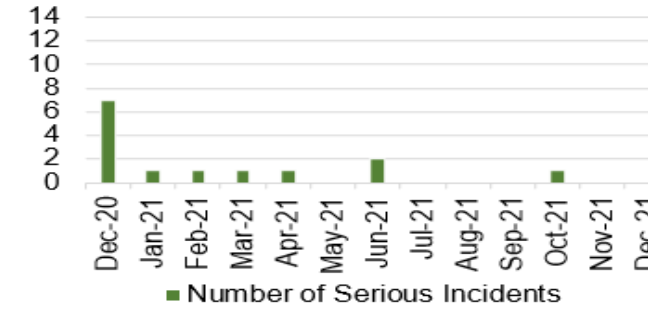
**Chart 9: Number of patients detained under the Mental Health Act as a percentage of all admissions**



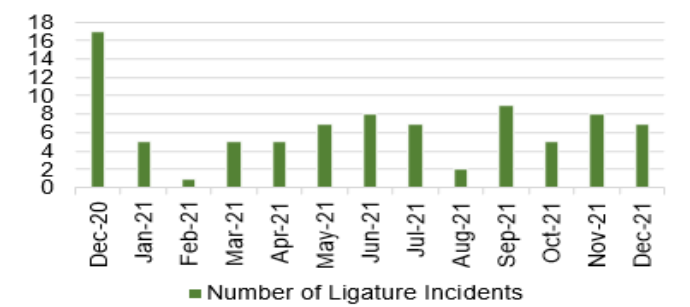
**Chart 10: Number of patients subject to Deprivation of Liberty Safeguards (DOLS)**



**Chart 11: Number of Serious Incidents**

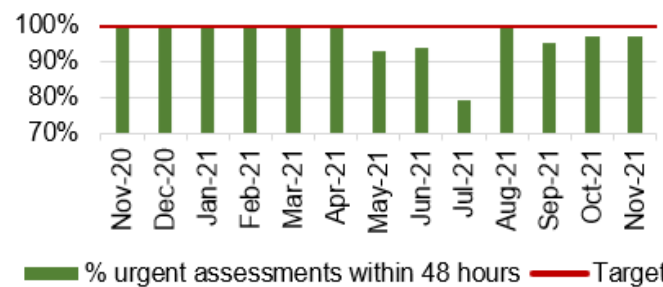


**Chart 12: Number of ligature incidents**

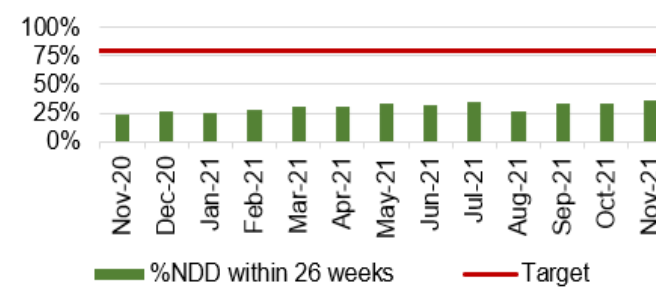


### Child & Adolescent Mental Health Services (CAMHS)

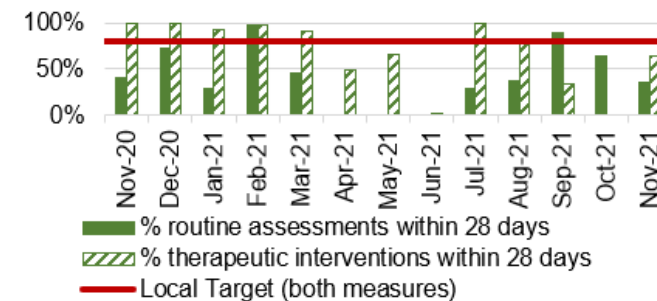
**Chart 13: Urgent assessments undertaken within 48 hours from receipt of referral**



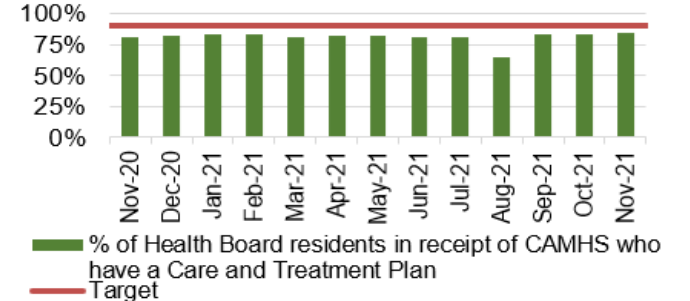
**Chart 14: Neuro-developmental disorder assessment and intervention received within 26 weeks**



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



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



## 6.3 Updates on key measures

ADULT MENTAL HEALTH		
Description	Current Performance	Trend
<p>Adult Mental Health Measures:</p> <p>1. % of MH assessments undertaken within 28 days from the date of receipt of referral (18 years and over)</p> <p>2. % of therapeutic interventions started within 28 days following an assessment by LPMHSS (18 years and over)</p> <p>3. % of health board residents in receipt of secondary mental health services who have a valid Care and Treatment Plan (CTP) (18 years and over)</p> <p>4. % of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health</p>	<p>1. In November 2021, 98.1% of assessments were undertaken within 28 days of referral for patients 18 years and over.</p> <p>2. In November 2021, the percentage of therapeutic interventions started within 28 days following an assessment by the Local Primary Mental Health Support Service (LPMHSS) was 96.1%.</p> <p>3. 81% of residents in receipt of secondary care mental health services had a valid Care and Treatment Plan in November 2021.</p> <p>4. In November 2021, 100% of patients waited less than 26 weeks for psychological therapy. This was above the national target of 95%.</p>	<p><b>1. % Mental Health assessments undertaken within 28 days from receipt of referral</b></p> <p><b>2. % Mental Health therapeutic interventions started within 28 days following LPMHSS assessment</b></p> <p><b>3. % residents with a valid Care and Treatment Plan (CTP)</b></p> <p><b>4. % waiting less than 26 weeks for Psychology Therapy</b></p>

CHILD & ADOLESCENT MENTAL HEALTH (CAMHS)		
Description	Current Performance	Trend
1. Crisis - % Urgent Assessment by CAMHS undertaken within 48 Hours from receipt of referral	1. In November 2021, 97% of CAMHS patients received an assessment within 48 hours.	<p><b>1. Crisis- assessment within 48 hours</b></p>
2. Primary CAMHS (P-CAMHS) - % Routine Assessment by CAMHS undertaken within 28 days from receipt of referral	2. 36% of routine assessments were undertaken within 28 days from referral in November 2021 against a target of 80%.	<p><b>2. and 3. P-CAMHS % assessments and therapeutic interventions within 28 days</b></p>
3. Primary CAMHS (P-CAMHS) - % Therapeutic interventions started within 28 days following assessment by LPMHSS	3. 64% of therapeutic interventions were started within 28 days following assessment by LPMHSS in November 2021.	
4. NDD - % Neurodevelopmental Disorder patients receiving a Diagnostic Assessment within 26 weeks	4. 37% of NDD patients received a diagnostic assessment within 26 weeks in November 2021 against a target of 80%.	<p><b>4. NDD- assessment within 26 weeks</b></p>
5. Specialist CAMHS (S-CAMHS) - % Routine Assessment by SCAMHS undertaken within 28 days from receipt of referral	5. 3% of routine assessments by SCAMHS were undertaken within 28 days in November 2021.	<p><b>5. S-CAMHS % assessments within 28 days</b></p>

## 8. FINANCE UPDATES

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

Description	Current Performance	Trend																																																				
Revenue Financial Position – expenditure incurred against revenue resource limit	<ul style="list-style-type: none"><li>The Health Board’s annual plan produces a forecast deficit for 2021/22 of £42.077m. This includes £17.672m impact on savings delivery from 2020/21.</li><li>The £42.077m forecast deficit equates to an expected monthly overspend of £3.506m.</li><li>The Health Board was advised by WG to anticipate non-recurrent funding to support the 2020/21 savings impact and this reduces the HB forecast to £24.405m, which equates to an expected monthly overspend of £2.034m.</li><li>This was reflected in the May position.</li><li>The Health Board has reported a cumulative overspend of £17.57m against a forecast position of £18.304m.</li></ul>	<div><div>HEALTH BOARD FINANCIAL PERFORMANCE 2021/22</div><table><thead><tr><th>Month</th><th>Operational Position (£'000)</th><th>Forecast Position (£'000)</th><th>Target Overspend (£'000)</th></tr></thead><tbody><tr><td>M1</td><td>3,541</td><td></td><td></td></tr><tr><td>M2</td><td>564</td><td></td><td></td></tr><tr><td>M3</td><td>1,976</td><td></td><td>2,034</td></tr><tr><td>M4</td><td>1,973</td><td></td><td>2,034</td></tr><tr><td>M5</td><td>2,131</td><td></td><td>2,034</td></tr><tr><td>M6</td><td>1,821</td><td></td><td>2,034</td></tr><tr><td>M7</td><td>1,875</td><td></td><td>2,034</td></tr><tr><td>M8</td><td>1,805</td><td></td><td>2,034</td></tr><tr><td>M9</td><td>1,884</td><td></td><td>2,034</td></tr><tr><td>M10</td><td></td><td>2,284</td><td>2,034</td></tr><tr><td>M11</td><td></td><td>2,261</td><td>2,034</td></tr><tr><td>M12</td><td></td><td>2,290</td><td>2,034</td></tr></tbody></table></div>	Month	Operational Position (£'000)	Forecast Position (£'000)	Target Overspend (£'000)	M1	3,541			M2	564			M3	1,976		2,034	M4	1,973		2,034	M5	2,131		2,034	M6	1,821		2,034	M7	1,875		2,034	M8	1,805		2,034	M9	1,884		2,034	M10		2,284	2,034	M11		2,261	2,034	M12		2,290	2,034
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Description	Current Performance	Trend
<b>Capital Financial Position – expenditure incurred against capital resource limit</b>	<ul style="list-style-type: none"> <li>The forecast outturn capital position for 2021/22 is an overspend of £0.705m. Allocations are anticipated from Welsh Government which will balance this position.</li> <li>There are several All Wales Capital schemes reported to Welsh Government as high/medium risk. Any schemes where risks are reported are being closely monitored and discussed at the Capital Review progress meetings with Welsh Government.</li> <li>The reported forecast outturn position assumes that outstanding expected sale proceeds of £0.387m will be received as disposal income.</li> </ul>	<p><b>Capital - Cumulative Performance to Plan</b></p>
<b>Workforce Spend – workforce expenditure profile</b>	<ul style="list-style-type: none"> <li>The pay budgets are underspent by £8.2m after 9 months.</li> <li>Funding has been allocated to : <ul style="list-style-type: none"> <li>support additional costs associated with COVID,</li> <li>funding of the overtime holiday pay arrears which were paid in August and again in November. These payments are driving the increases in overtime payments (pink) in P05 and P08 on the variable pay expenditure graph.</li> <li>the application of funding for the 2021/22 pay award, which was implemented with arrears in September.</li> </ul> </li> <li>Variable pay remains high, this reflects operational pressures, increasing sickness levels and recovery actions.</li> <li>The Health Board is incurring around £3m of additional pay costs per month related to COVID response and recovery, in addition to the TTP and vaccination costs.</li> </ul>	<p><b>Variable Pay Expenditure</b></p>



Description	Current Performance	Trend																																							
<p><b>PSPP</b> – pay 95% of Non-NHS invoices within 30 days of receipt of goods or valid invoice</p>	<ul style="list-style-type: none"> <li>The Health Board failed to deliver this target in 2020/21, with the target only being met on three of the twelve months.</li> <li>There was a very positive start to the financial year, with the target being met in the first six months, with a cumulative achievement of 96.07% for the first six months.</li> <li>However, October and November saw a significant reduction in compliance with the target and this has continued in November, with both months at 91.3%.</li> <li>The December position improved to 95.6% despite the ongoing challenges and the cumulative position is 95.08% which is just above target.</li> <li>The key area of impact is nurse agency invoices where the volume of invoices has increased significantly and service pressures are impacting on the timeliness of the sign off of shifts to allow invoices to be processed. Additional resource has been secured to support the processing process, which is starting to show benefit, however it is likely to impact on PSPP performance both in month and cumulatively for a number of months.</li> <li>There are also failures in achievement related to receipting of goods and authorisation of invoices, these are being reviewed to identify specific areas of concern and any training or resource requirements.</li> </ul>	<p><b>Percentage of non-NHS invoices paid within 30 days of receipt of goods or valid invoice</b></p> <table border="1"> <caption>PSPP Target Data</caption> <thead> <tr> <th>Month</th> <th>PSPP In Month (%)</th> <th>PSPP Cumulative (%)</th> </tr> </thead> <tbody> <tr><td>M1</td><td>95.5</td><td>95.5</td></tr> <tr><td>M2</td><td>97.0</td><td>96.3</td></tr> <tr><td>M3</td><td>95.0</td><td>96.0</td></tr> <tr><td>M4</td><td>95.8</td><td>95.9</td></tr> <tr><td>M5</td><td>96.8</td><td>96.0</td></tr> <tr><td>M6</td><td>96.5</td><td>96.1</td></tr> <tr><td>M7</td><td>91.3</td><td>95.8</td></tr> <tr><td>M8</td><td>91.3</td><td>95.0</td></tr> <tr><td>M9</td><td>95.6</td><td>95.0</td></tr> <tr><td>M10</td><td></td><td></td></tr> <tr><td>M11</td><td></td><td></td></tr> <tr><td>M12</td><td></td><td></td></tr> </tbody> </table>	Month	PSPP In Month (%)	PSPP Cumulative (%)	M1	95.5	95.5	M2	97.0	96.3	M3	95.0	96.0	M4	95.8	95.9	M5	96.8	96.0	M6	96.5	96.1	M7	91.3	95.8	M8	91.3	95.0	M9	95.6	95.0	M10			M11			M12		
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## APPENDIX 2: INTEGRATED PERFORMANCE DASHBOARD

Harm from Covid itself																							
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21
COVID19 related measures	Number of new COVID19 cases	Local	Dec-21	18,167		Reduce					11,976	3,759	1,208	907	406	189	708	1,946	7,177	12,839	10,918	8,247	18,167
	Number of staff referred for Antigen Testing	Local	Dec-21	15,756		Reduce					10,065	10,749	11,115	11,683	11,957	12,224	12,505	12,872	13,278	13,951	14,475	14,969	15,756
	Number of staff awaiting results of COVID19 test	Local	Dec-21	0		Reduce					99 (as at 05/01/21)	78 (as at 07/02/21)	69 (as at 06/03/21)	2 (as at 11/04/21)	0	0	0	0	0	0	0	0	0
	Number of COVID19 related incidents	Local	Dec-21	54		Reduce					127	84	63	53	74	67	23	24	36	36	47	53	54
	Number of COVID19 related serious incidents	Local	Oct-21	0		Reduce					0	0	0	0	0	0	0	0	0	0	0		
	Number of COVID19 related complaints	Local	Dec-21	20		Reduce					83	106	131	98	38	13	16	4	6	3	4	14	20
	Number of COVID19 related risks	Local	Oct-21	0		Reduce					10	3	3	3	2	2	1	1	1	0	0		
	Number of staff self isolated (asymptomatic)	Local	Dec-21	126		Reduce					475	218	160	145	84	71	70	71	115	227	120	65	126
	Number of staff self isolated (symptomatic)	Local	Dec-21	393		Reduce					394	316	156	108	87	71	50	67	114	204	180	120	393
	% sickness	Local	Dec-21	1.9%		Reduce					6.5%	4.0%	2.4%	1.9%	1.9%	1.9%	0.9%	1.9%	1.9%	1.9%	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	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21
Unscheduled Care	% of emergency responses to red calls arriving within (up to and including) 8 minutes	National	Dec-21	46%	65%	65%	✗	50% (Oct-21)	5th (Oct-21)		54%	67%	70%	73%	72%	62%	67%	64%	59%	50%	44%	52%	46%
	Number of ambulance handovers over one hour	National	Dec-21	612	0			5,350 (Oct-21)	2nd (Oct-21)		510	195	219	231	337	477	547	616	726	642	648	670	612
	Handover hours lost over 15 minutes	Local	Dec-21	2527							1,804	455	550	583	877	1,154	1,386	1,937	2,443	2,467	3,093	2,461	2,527
	% 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	Dec-21	70%	95%			65% (Oct-21)	2nd (Oct-21)		72.6%	77%	71%	77%	75%	73%	72%	75%	75%	73%	72%	73%	70%
	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	Dec-21	1101	0			9,484 (Oct-21)	4th (Oct-21)		776	570	534	457	631	684	880	1,014	1,060	1,250	1,276	1,055	1,101
NOF	% of survival within 30 days of emergency admission for a hip fracture	National	Sep-21	72.2%	12 month ↑			85.9% (Aug-21)	4th (Aug-21)		68.0%	65.3%	70.7%	59.6%	71.1%	72.1%	78.3%	84.8%	86.7%	72.2%			
	% of patients (age 60 years and over) who presented with a hip fracture that received an orthogeriatrician assessment within 72 hours	National	Oct-21	88.0%	12 month ↑			66% (Sep-21)	2nd (Sep-21)		86.0%	87.0%	88.0%	88.0%	90.0%	91.0%	91.0%	91.0%	88.0%	87.0%	88.0%		
Stroke	Direct admission to Acute Stroke Unit (<4 hrs)	National	Dec-21	17%	54.0%			18.8% (Oct-21)	Out of organisation (Oct-21)		7.1%	6.8%	18.2%	20.4%	20.3%	27.5%	28.3%	13.5%	15.4%	15.4%	0.0%	11.4%	16.7%
	CT Scan (<1 hrs) (local)	Local	Dec-21	35%							22.7%	42.2%	30.6%	40.8%	29.7%	36.5%	29.6%	34.6%	48.7%	34.1%	16.7%	40.9%	35.1%
	Assessed by a Stroke Specialist Consultant Physician (< 24 hrs)	Local	Dec-21	97%							95.5%	95.6%	97.2%	100.0%	96.9%	98.1%	100.0%	100.0%	92.3%	90.2%	100.0%	95.5%	97.3%
	Thrombolysis door to needle <= 45 mins	Local	Dec-21	10%							0.0%	12.5%	0.0%	55.6%	25.0%	0.0%	33.3%	28.6%	20.0%	0.0%	0.0%	9.1%	10.0%
	% compliance against the therapy target of an average of 16.1 minutes if speech and language therapist input per stroke patient	National	Dec-21	46%	12 month ↑						63.4%	65.7%	61.2%	55.9%	47.1%	39.7%	41.9%	45.4%	58.9%	58.6%	64.6%	54.4%	45.6%
DTCs	Number of mental health HB DTCs	National	Mar-20	13	12 month ↓	27	✓				DTC reporting temporarily suspended												
	Number of non-mental health HB DTCs	National	Mar-20	60	12 month ↓	50	✗				DTC reporting temporarily suspended												



Harm from overwhelmed NHS and social care system																							
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21
Infection control	Cumulative cases of E.coli bacteraemias per 100k pop	National	Dec-21	77.1	<67		✗	72.49 (Oct-21)	4th (Oct-21)		60.7	60.0	59.8	61.9	99.8	88.9	89.4	89.4	90.5	86.4	82.2	80.5	77.1
	Number of E.Coli bacteraemia cases (Hospital)		Dec-21	5							5	6	6	9	12	11	5	8	9	9	7	5	5
	Number of E.Coli bacteraemia cases (Community)			12							7	12	11	19	20	15	23	15	25	12	12	17	12
	Total number of E.Coli bacteraemia cases			17							12	18	17	28	32	26	28	23	34	21	19	22	17
	Cumulative cases of S.aureus bacteraemias per 100k pop		Dec-21	36.0	<20		✗	26.72 (Oct-21)	6th (Oct-21)		31.7	31.6	31.4	31.6	40.5	44.5	37.0	36.0	35.5	38.3	40.6	37.2	36.0
	Number of S.aureus bacteraemias cases (Hospital)		Dec-21	5							6	5	7	4	4	5	5	7	8	13	11	1	5
	Number of S.aureus bacteraemias cases (Community)			4							3	4	2	7	9	10	2	4	4	4	7	3	4
	Total number of S.aureus bacteraemias cases			9							9	9	9	11	13	15	7	11	12	17	18	4	9
	Cumulative cases of C.difficile per 100k pop		Dec-21	51.3	<25		✗	37.49 (Oct-21)	6th (Oct-21)		45.7	42.0	41.5	41.1	62.3	49.1	46.2	52.0	55.0	53.2	52.9	53.3	51.3
	Number of C.difficile cases (Hospital)		Dec-21	11							6	3	9	7	15	7	6	16	20	9	10	10	11
	Number of C.difficile cases (Community)			1							3	0	2	5	5	5	6	7	2	5	5	10	1
	Total number of C.difficile cases			12							9	3	11	12	20	12	12	23	22	14	15	20	12
	Cumulative cases of Klebsiella per 100k pop		Dec-21	26.5							24.9	26.4	25.8	26.2	28.1	21.5	26.7	0.0	22.6	24.5	27.1	26.5	26.5
	Number of Klebsiella cases (Hospital)		Dec-21	6							8	8	4	1	4	3	5	2	4	8	8	2	6
	Number of Klebsiella cases (Community)			3							4	5	2	9	5	2	7	1	4	3	5	5	3
	Total number of Klebsiella cases			9				64 (Oct-21)	6th (Oct-21)		12	13	6	10	9	5	12	3	8	11	13	7	9
	Cumulative cases of Aeruginosa per 100k pop		Dec-21	6.1							5.5	5.2	5.1	4.9	9.4	6.1	6.2	0.0	5.5	5.6	4.8	5.4	6.1
	Number of Aeruginosa cases (Hospital)		Dec-21	3							1	0	0	0	2	0	1	0	1	2	0	3	3
	Number of Aeruginosa cases (Community)			1							0	1	1	1	1	1	1	1	1	0	0	0	1
	Total number of Aeruginosa cases			4				22 (Oct-21)	1st (Oct-21)		1	1	1	1	3	1	2	1	2	2	0	3	4
	Hand Hygiene Audits- compliance with WHO 5 moments	Local	Dec-21	95.8%		95%	✓				96%	95%	93%	97%	96%	98%	96%	95%	95%	96%	97%	92%	96%
Serious Incidents and risks	Of the serious incidents due for assurance, the % which were assured within the agreed timescales	National	Dec-21	0.0%	90%	80%	✗				4%	0%	10%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
	Number of new Never Events	National		0	0	0	✓				0	0	0	0	0	0	1	0	0	0	0	1	0
	Number of risks with a score greater than 20	Local	Dec-21	35		12 month ↓	✓				146	148	140	142	132	127	113	104	105	114	118	121	35
	Number of risks with a score greater than 16	Local		60		12 month ↓	✗				238	242	233	230	217	224	219	221	220	240	235	238	60
Pressure Ulcers	Number of pressure ulcers acquired in hospital	Local	Nov-21	43		12 month ↓	✓				61	51	48	36	59	53	53	58	53	65	42	43	
	Number of pressure ulcers developed in the community		Nov-21	31		12 month ↓	✗				26	25	24	26	31	20	21	33	34	39	32	31	
	Total number of pressure ulcers			74		12 month ↓	✗				87	76	72	62	90	73	74	91	87	104	74	74	
	Number of grade 3+ pressure ulcers acquired in hospital			2		12 month ↓	✓				3	2	3	1	4	1	2	3	2	1	1	2	
	Number of grade 3+ pressure ulcers acquired in community		Nov-21	8		12 month ↓	✗				7	5	4	2	10	2	4	2	8	6	7	8	
	Total number of grade 3+ pressure ulcers		Nov-21	10		12 month ↓	✗				10	7	7	3	14	3	6	5	10	7	8	10	
Inpatient Falls	Number of Inpatient Falls	Local	Dec-21	208		12 month ↓	✗				247	203	177	171	176	228	174	193	198	207	240	213	208

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	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21
Mortality	% of universal mortality reviews (UMRs) undertaken within 28 days of a death	Local	Nov-21	99%	95%	95%	✓				99.0%	100.0%	100.0%	97.6%	99.3%	98.0%	98.6%	97.6%	93.0%	98.0%	96.8%	98.5%	
	Stage 2 mortality reviews required	Local	Nov-21	10							12	19	6	11	5	18	12	7	17	10	16	10	
	% stage 2 mortality reviews completed	Local	Aug-21	50.00%		100%	✗				75.0%	36.8%					25.0%	42.9%	50.0%				
	Crude hospital mortality rate (74 years of age or less)	National	Nov-21	0.99%	12 month ↓			1.35% (Sep-21)	4th (Sep-21)		1.08%	1.14%	1.17%	1.17%	1.04%	1.04%	1.01%	1.03%	1.02%	1.03%	1.03%	0.99%	
NEWS	% patients with completed NEWS scores & appropriate responses actioned	Local	Dec-21	89%		98%	✗				98.5%	95.0%	96.3%	93.5%	97.4%	98.9%	95.0%	89.7%	91.7%	91.6%	93.8%	92.2%	89.1%
Coding	% of episodes clinically coded within 1 month of discharge	Local	Nov-21	76%	95%	95%	✗				93%	95%	96%	96%	96%	96%	89%	90%	94%	90%	92%	76%	
E-TOC	% of completed discharge summaries (total signed and sent)	Local	Dec-21	62%		100%	✗				59%	67%	63%	64%	63%	67%	69%	62%	62%	68%	61%	63%	62%
Workforce	Agency spend as a % of the total pay bill	National	May-21	3.30%	12 month ↓			4.1% (May-21)	out of 10 organisations (May-21)		5.4%	6.2%	4.9%	5.7%	4.4%	3.3%							
	Overall staff engagement score – scale score method	National	2020	75%	Improvement			75% (2020)	out of 10 organisations (May-21)		2020 = 75%												
	% of headcount by organisation who have had a PADR/medical appraisal in the previous 12 months (excluding doctors and dentists in training)	National	Dec-21	57%	85%	85%	✗	60.0% (May-21)	out of 10 organisations (May-21)		54%	52%	51%	53%	57%	60%	65%	60%	60%	58%	56%	55%	57%
	% compliance for all completed Level 1 competency with the Core Skills and Training Framework	National	Dec-21	80%	85%	85%	✗	78.8% (May-21)	out of 10 organisations (May-21)		80%	80%	80%	80%	80%	80%	81%	81%	81%	80%	80%	80%	80%
	% workforce sickness absence (12 month rolling)	National	Nov-21	7.44%	12 month ↓			5.68% (May-21)	out of 10 organisations (May-21)		7.48%	7.57%	7.56%	7.44%	7.12%	6.93%	6.91%	6.99%	7.11%	7.29%	7.44%	7.44%	
	% staff who would be happy with the standards of care provided by their organisation if a friend or relative needed treatment	National	2020	67.1%	Improvement			67.8% (2020)	out of 10 organisations (2020)		2020 = 67.1%												

Harm from reduction in non-Covid activity																								
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	
Primary Care	% adult dental patients in the health board population re-attending NHS primary dental care between 6 and 9 months	National	Nov-21	10.5%	4 quarter ↓			21.8% (Q3 20/21)	1st (Q3 20/21)		12.0%	5.9%	5.3%	6.6%	7.8%	9.0%	10.2%	11.4%	11.0%	11.5%	11.4%	10.5%		
Cancer	% of patients starting definitive treatment within 62 days from point of suspicion (without adjustments)	National	Dec-21 (Draft)	45.0%	12 month ↑			59.0% (Sep-21)	2nd out of 6 organisations (Sep-21)		61.0%	67.9%	56.4%	71.6%	65.7%	65.4%	66.8%	55.0%	58.4%	62.2%	61.9%	63.4%	45.0%	
Radiotherapy waiting times	Scheduled (21 Day Target)	Local	Dec-21	37%	80%		✗				71%	45%	35%	42%	37%	40%	31%	60%	57%	58%	37%	30%	37%	
	Scheduled (28 Day Target)	Local	Dec-21	78%	100%		✗				88%	82%	80%	85%	77%	87%	70%	84%	91%	89%	84%	61%	78%	
	Urgent SC (7 Day Target)	Local	Dec-21	37%	80%		✗				50%	50%	23%	41%	38%	50%	45%	46%	55%	22%	30%	60%	37%	
	Urgent SC (14 Day Target)	Local	Dec-21	87%	100%		✗				85%	94%	91%	90%	83%	86%	87%	77%	95%	76%	90%	100%	87%	
	Emergency (within 1 day)	Local	Dec-21	100%	80%		✓				100%	100%	100%	100%	91%	100%	100%	100%	100%	100%	100%	100%	100%	
	Emergency (within 2 days)	Local	Dec-21	100%	100%		✓				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
	Elective Delay (21 Day Target)	Local	Dec-21	92%	80%		✓				71%	69%	61%	86%	82%	81%	91%	90%	94%	81%	89%	79%	92%	
	Elective Delay (28 Day Target)	Local	Dec-21	100%	100%		✓				88%	89%	75%	93%	92%	84%	95%	97%	97%	97%	94%	86%	100%	
Planned Care	Number of patients waiting > 8 weeks for a specified diagnostics	National	Dec-21	6071	0			48,408 (Sep-21)	2nd (Sep-21)		6,579	6,239	5,087	4,554	4,804	4,842	5,230	5,425	5,523	5,732	5,939	6,008	6,071	
	Number of patients waiting > 14 weeks for a specified therapy	National	Dec-21	889	0			5,798 (Sep-21)	2nd (Sep-21)		708	584	491	369	201	166	171	151	186	320	414	629	889	
	% of patients waiting < 26 weeks for treatment	National	Dec-21	50%	95%			54.9% (Sep-21)	6th (Sep-21)		48.0%	47.0%	47.9%	48.8%	49.1%	49.1%	50.7%	51.5%	51.9%	52.0%	51.6%	51.3%	50.5%	
	Number of patients waiting > 26 weeks for outpatient appointment	Local	Dec-21	25452	0						21,179	21,208	21,225	21,750	22,752	23,700	23,279	23,225	23,444	23,997	24,483	24,752	25,452	
	Number of patients waiting > 36 weeks for treatment	National	Dec-21	37504	0			240,306 (Sep-21)	3rd (Sep-21)		35,126	33,991	32,719	32,874	33,395	34,447	35,040	35,583	35,999	35,711	36,420	37,064	37,504	
	The number of patients waiting for a follow-up outpatient appointment	National	Dec-21	131,403	HB target TBC			779,662 (Oct-21)	5th (Oct-21)		119,963	119,999	120,882	121,403	122,303	123,088	127,444	130,208	127,391	130,963	131,554	129,255	131,403	
	The number of patients waiting for a follow-up outpatients appointment who are delayed over 100%	National	Dec-21	31,912				199,698 (Oct-21)	5th (Oct-21)		27,641	28,419	28,862	29,316	29,334	30,062	30,550	31,316	29,770	32,574	33,121	30,946	31,912	
	% of R1 ophthalmology patient pathways waiting within target date or within 25% beyond target date for an outpatient appointment	National	Dec-21	49%	95%			63.2% (Oct-21)	6th (Oct-21)		47.3%	46.7%	47.4%	47.7%	47.2%	46.7%	46.7%	46.3%	46.1%	47.9%	48.6%	49.2%	48.7%	
DNAs	% of patients who did not attend a new outpatient appointment	Local	Dec-21	6.3%	12 month ↓						7.7%	7.1%	6.2%	5.6%	5.3%	5.7%	6.5%	6.5%	6.4%	7.2%	7.7%	7.0%	6.3%	
	% of patients who did not attend a follow-up outpatient appointment	Local	Dec-21	6.4%	12 month ↓						8.2%	7.1%	6.2%	6.7%	6.1%	6.9%	5.5%	7.5%	7.5%	7.6%	7.8%	7.0%	6.4%	
Theatre Efficiencies	Theatre Utilisation rates	Local	Dec-21	62%		90%	✗				59%	65%	73%	75%	80%	78%	77%	72%	69%	72%	66%	67%	62%	
	% of theatre sessions starting late	Local	Dec-21	40%		<25%	✗				45%	40%	42%	40%	38%	43%	43%	44%	44%	42%	46%	43%	40%	
	% of theatre sessions finishing early	Local	Dec-21	48%		<20%	✗				47%	44%	44%	48%	41%	45%	43%	48%	46%	46%	50%	48%	48%	
Postponed operations	Number of procedures postponed either on the day or the day before for specified non-clinical reasons	Local	Jan-21	1,200							1,509	1,200												
Patient experience	Number of friends and family surveys completed	Local	Dec-21	2,776		12 month ↑	✓				584	678	798	1,050		4,590	3,297	1,912	2,075	2,025	2,733	3,194	2,776	
	% of who would recommend and highly recommend	Local	Dec-21	93%		90%	✓				77%	79%	85%	87%		96%	97%	92%	92%	92%	92%	94%	93%	
	% of all-Wales surveys scoring 9 out of 10 on overall satisfaction	Local	Dec-21	96%		90%	✓				65%	81%	94%	93%		92%	96%	95%	92%	96%	93%	93%	96%	
Complaints	Number of new formal complaints received	Local	Oct-21	134		12 month trend ↓	✗				83	78	94	117	100	115	159	139	115	115	134			
	% concerns that had final reply (Reg 24)/interim reply (Reg 26) within 30 working days of concern received	National	Oct-21	67%	75%	80%	✗	71.9% (Q3 20/21)	2nd (Q3 20/21)		80%	71%	80%	81%	78%	78%	68%	69%	83%	75%	67%			
	% of acknowledgements sent within 2 working days	Local	Oct-21	100%		100%	✓				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			

Harm from wider societal actions/lockdown																							
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21
Early years measures	% of babies who are exclusively breastfed at 10 days old	National	2020/21	35.6%	Annual ↑			36.8% (2020/21)	5th (2020/21)		2020/21= 35.6%												
	% children who received 3 doses of the hexavalent '6 in 1' vaccine by age 1	National	Q2 21/22	96.2%	95%			95.3% (Q1 21/22)	3rd (Q1 21/22)		96.7%			95.4%			95.7%			96.2%			
	% of children who received 2 doses of the MMR vaccine by age 5	National	Q2 21/22	89.8%	95%			91.7% (Q1 21/22)	4th (Q1 21/22)		92.0%			92.4%			91.1%			89.8%			
Alcohol	European age standardised rate of alcohol attributed hospital admissions for individuals resident in Wales	National	Q2 21/22	362.2	4 quarter ↓			356.6 (Q4 20/21)	2nd (Q4 20/21)		308.8			322.1			370.7			362.2			
	% of people who have been referred to health board services who have completed treatment for alcohol abuse	National	Q2 21/22	73.7%	4 quarter ↑			70.3% (Q2 21/22)	4th (Q2 21/22)		39.5%			45.5%			31.8%			73.7%			
Influenza	% uptake of influenza among 65 year olds and over	National	Dec-21	76.9%	75%			76.5% (Mar-21)	4th (Mar-21)		74.8%	75.2%	75.4%	75.5%	Data collection restarts October 2021						58.7%	74.8%	76.9%
	% uptake of influenza among under 65s in risk groups	National	Dec-21	44.9%	55%			51.07% (Mar-21)	5th (Mar-21)		47.2%	48.7%	49.4%	49.4%							26.0%	40.8%	44.9%
	% uptake of influenza among pregnant women	National	2020/21	69.8%	75%			78.5% (2019/20)	5th out of 10 organisations (2019/20)		2020/21= 69.8%										Data not available		
	% uptake of influenza among children 2 to 3 years old	Local	Dec-21	41.5%	50%			56.3% (Mar-21)	5th (Mar-21)		52.5%	53.2%	53.4%	53.4%							22.0%	37.7%	41.5%
	% uptake of influenza among healthcare workers	National	Dec-21	52.7%	60%			58.7% (2019/20)	7th out of 10 organisations (2019/20)		63.0%	63.4%	63.4%	63.4%							48.6%	50.8%	52.7%
CAMHS	% of urgent assessments undertaken within 48 hours from receipt of referral (Crisis)	Local	Nov-21	97%		100%	✗				100%	100%	100%	100%	100%	93%	94%	79%	100%	95%	97%	97%	
	% Patients with Neurodevelopmental Disorders (NDD) receiving a Diagnostic Assessment within 26 weeks	National	Nov-21	37%	80%	80%	✗	35.4 (Sep-21)	6th (Sep-21)		26%	24%	28%	30%	30%	33%	32%	34%	27%	34%	34%	37%	
	% Patients waiting less than 28 days for a first outpatient appointment for CAMHS	National	Nov-21	66%	80%	80%	✗	27.9% (Oct-21)	4th (Oct-21)		61%	53%	66%	63%	60%	61%	58%	41%	48%	40%	40%	66%	
	P-CAMHS - % of Routine Assessment by CAMHS undertaken within 28 days from receipt of referral	National	Nov-21	36%		80%	✗	44.2% (Sep-21)	2nd (Sep-21)		73%	29%	97%	46%	0%	0%	0%	29%	37%	89%	65%	36%	
	P-CAMHS - % of therapeutic interventions started within 28 days following assessment by LPMHSS	National	Nov-21	64%		80%	✗	45.7% (Sep-21)	4th (Sep-21)		100%	93%	97%	91%	49%	67%	1%	100%	82%	35%	0%	64%	
	S-CAMHS - % of Routine Assessment by SCAMHS undertaken within 28 days from receipt of referral	Local	Nov-21	3%		80%	✗				58%	60%	56%	53%	48%	53%	44%	29%	32%	41%	3%	3%	
	% residents in receipt of CAMHS to have a valid Care and Treatment Plan (CTP)	National	Nov-21	84%		90%	✗	89.3% (Sep-21)	5th (Sep-21)		82%	83%	84%	82%	82%	83%	81%	81%	65%	84%	84%	84%	
Mental Health	% of mental health assessments undertaken within (up to and including) 28 days from the date of receipt of referral (over 18 years of age)	National	Nov-21	98%	80%	80%	✓	65.4% (Sep-21)	1st (Sep-21)		99%	96%	98%	97%	97%	98%	99%	98%	100%	96%	98%	98%	
	% of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS (over 18 years of age)	National	Nov-21	96%	80%	80%	✓	75.0% (Sep-21)	4th (Sep-21)		95%	95%	98%	97%	92%	96%	99%	97%	100%	90%	98%	96%	
	% patients waiting < 26 weeks to start a psychological therapy in Specialist Adult Mental Health	National	Nov-21	100%	95%	95%	✓	72.2% (Sep-21)	1st (Sep-21)		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
	% residents in receipt of secondary MH services (all ages) who have a valid care and treatment plan (CTP)	National	Nov-21	81%	90%	90%	✗	85.8% (Sep-21)	6th (Sep-21)		89%	91%	91%	91%	91%	92%	88%	88%	84%	84%	83%	81%	
Self harm	Rate of hospital admissions with any mention of intentional self-harm of children and young people (aged 10-24 years) per 1,000 population	National	2020/21	2.96	Annual ↓			3.54 (2020/21)	3rd (2020/21)		2020/21 = 2.96												
Dementia	% of people with dementia in Wales age 65 years or over who are diagnosed (registered on a GP QOF register)	National	2019/20	56.3%	Annual ↑			53.1% (2019/20)	2nd (2019/20)														