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Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	27th April 2021	Agenda Item	2.1
Report Title	Integrated Performance Report		
Report Author	Darren Griffiths, Director of Finance and Performance (interim)		
Report Sponsor	Darren Griffiths, Director of Finance and Performance (interim)		
Presented by	Darren Griffiths, Director of Finance and Performance (interim)		
Freedom of Information	Open		
Purpose of the Report	The purpose of this report is to provide an update on the current performance of the Health Board across the national measures outlined in the 2020/21 NHS Wales Delivery Framework.		
Key Issues	<p>Key high level issues to highlight this month are as follows:</p> <p>COVID19- The number of new cases of COVID19 continues to reduce with March 2021 having the lowest amount of new cases of COVID19 since September 2020. Consequently, the occupancy rate of confirmed COVID patients in general medical and critical care beds continue to be reduce.</p> <p>Unscheduled Care- Demand for emergency department care within Swansea Bay University (SBU) Health Board significantly increased in March 2021 however, despite this increase in demand, there was an in-month improvement in the percentage of patients seen within 4 hours in A&E as well as the number of patients waiting over 12 hours in A&E.</p> <p>Planned Care- March 2021 saw an in-month increase in the number of patients waiting over 36 weeks for treatment and the number of patients waiting over 26 weeks has stabilised. Diagnostics and Therapy waiting times continue to improve and the number of patients waiting over target reduced again in March 2021 with some therapy services maintaining a nil breach position (i.e. Occupational Therapy and Physiotherapy).</p> <p>Cancer- February 2021 saw a deterioration in performance against the Single Cancer Pathway measure of patients receiving definitive treatment within 62 days. The backlog of patients waiting over 63 days increased in March 2021 but remained lower than the monthly positions seen in quarters 2 and 3 for 2020/21. March's figures are in the process of being validated at the time of writing this report.</p> <p>Mental Health- performance against the Mental Health Measures continues to be maintained. All targets were achieved in February</p>		

	<p>2021. Psychological therapies access times were 100% for the fourth month in a row in February 2021.</p> <p>Child and Adolescent Mental Health Services (CAMHS)- Access times for routine CAMHS significantly improved to 97% in February 2021 and crisis waiting times continue to be maintained at 100%. Neurodevelopmental Disorders (NDD) access times within 26 weeks continues to be a challenge achieving 28% in February 2021 against a target of 80%.</p>			
Specific Action Required	Information	Discussion	Assurance	Approval
	✓		✓	
Recommendations	<p>Members are asked to:</p> <ul style="list-style-type: none"> • NOTE the Health Board performance against key measures and targets. 			

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

2. BACKGROUND

The 2020/21 NHS Wales Delivery Framework sets out the 78 measures under the quadruple aims which the performance of the Health Board is measured. The aims within the NHS Delivery Framework are:

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

The Health Board's performance reports have traditionally been structured according to the aims within the NHS Delivery Framework however, the focus for NHS Wales reporting has shifted to harm management as a consequence of the COVID-19 pandemic. In order to improve the Health Board's visibility of measuring and managing harm, the structure of this report has been aligned with the four quadrants of harm as set out in the NHS Wales COVID-19 Operating Framework and the Health Board's Q2 Operational Plan. The harm quadrants are illustrated in the following diagram.

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

Appendix 1 provides an overview of the Health Board's latest performance against the Delivery Framework measures along with key local quality and safety measures. A number of local COVID-19 specific measures have been included in this iteration of the performance report and further work will be undertaken over the next quarter to introduce additional measures that will aid in measuring harm in the system.

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

3. GOVERNANCE AND RISK ISSUES

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

4. FINANCIAL IMPLICATIONS

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

5. RECOMMENDATION

Members are asked to:

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

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

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

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

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

Report History	The last iteration of the Integrated Performance Report was presented to Performance & Finance Committee in March 2021. This is a routine monthly report.
Appendices	Appendix 1: Integrated Performance Report



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Appendix 1- Integrated Performance Report April 2021



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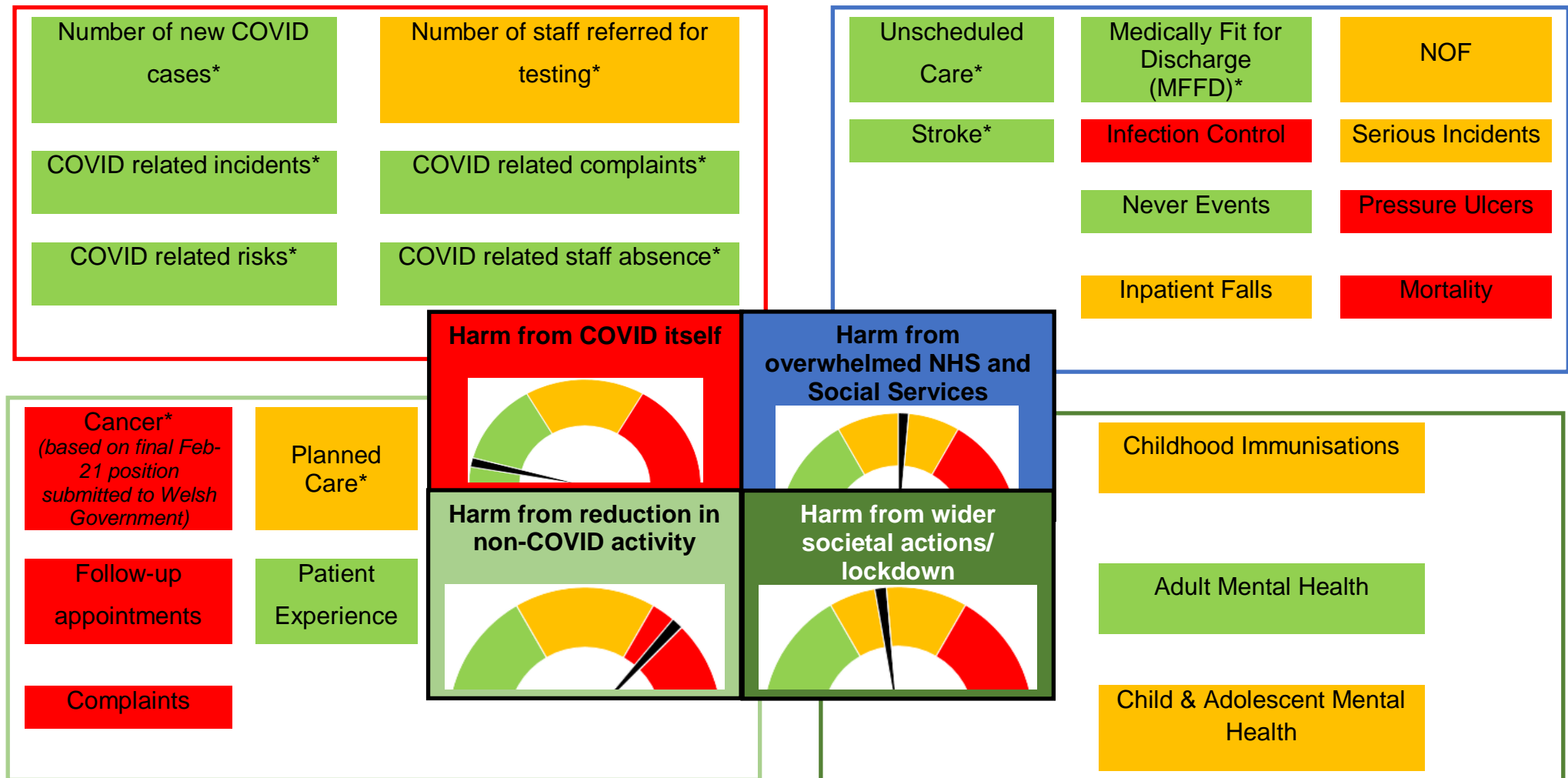
1. OVERVIEW

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

Successes	Priorities
<ul style="list-style-type: none"> 200,705 first doses and 66,945 second doses of the COVID19 vaccination administered by Swansea Bay UHB as at 14th April 2021. Emergency care requiring hospital treatment continues to be delivered as well as aspects of urgent elective care. The number of patients waiting over target for Diagnostics continues to reduce and March 2021 delivered the best position since March 2020. Waiting times for Therapy services continues to reduce month on month. Occupational Therapy and Physiotherapy are maintaining a nil breach position. In March 2021 Podiatry achieved a nil position for the first time in 2020/21. Sustained achievement of the mental health measures access targets throughout 20/21 the COVID pandemic. Psychological therapy waiting times achieved 100% in February 2021. 	<ul style="list-style-type: none"> Agree Goal Method Outcome and deliverables for 2021/22 and implement actions to deliver improvement. Build on improvements made in unscheduled care 4 hour performance Implement solutions to create capacity for patient treatments to reduce waiting list volumes and lengths of wait Ensure that cancer patients continue to be treated, backlog reduced and ensure that access to radiotherapy and chemotherapy is maintained. Maximise and grow elective care capacity to ensure that clinically urgent patients are treated within recommended timescales. Maximising staffing capacity with the Health Board, GP surgeries and pharmacies for the rollout of the COVID19 vaccination programme. Encourage antigen testing for staff and patients with COVID19 symptoms. Address volume and length of wait for outpatient contacts
Opportunities	Risks & Threats
<ul style="list-style-type: none"> Creation of a vaccination reserve list which anyone aged 18 or over who hasn't yet had their first dose and can attend at short notice can join. This is to use up any spare doses of vaccine at the end of clinics. Swansea Bay UHB has acted following numerous requests from the community and it's proved extremely popular, with almost 14,000 people now signed up. Link in with all-Wales work on risk stratification of elective waiting lists and adoption of consistent methodology for the reviewing of patients on elective waiting lists. Further development of digital solutions to interact with patients at varying stages of their clinical pathways 	<ul style="list-style-type: none"> The ongoing COVID pandemic continues to have a significant impact on the Health Board's ability to meet increasing demands. Extensive work continues to be undertaken in managing the outbreak. Key pressures include: <ul style="list-style-type: none"> Social distancing is limiting the rate at which staff can return to work and rota systems need to be considered alongside a continuation of remote working Number of staff self-isolating Reduction in capacity for elective treatments is increasing waiting times The health board's ability and pace to reintroduce and maintain essential services in the safest way for staff and patients

2. QUADRANTS OF HARM SUMMARY

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



NB- RAG status is against national or local target

** Data not available

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

3. ENHANCED MONITORING MEASURES SUMMARY (HEALTH BOARD LEVEL) –MARCH 2021

			Quarter 1			Quarter 2			Quarter 3			Quarter 4		
			Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-20	Feb-20	Mar-20
Unscheduled Care	4 hour A&E waits	Actual	78.4%	83.5%	87.7%	80.1%	80.6%	76.4%	77.2%	75.4%	72.6%	76.8%	71.3%	76.9%
		Profile	76.8%	77.2%	77.1%	78.8%	78.4%	77.7%	78.5%	78.9%	78.5%	79.0%	81.4%	82.5%
	12 hour A&E waits	Actual	131	97	81	223	286	537	494	626	776	570	534	457
		Profile	319	290	310	297	342	413	378	402	424	354	327	209
	1 hour ambulance handover	Actual	61	20	47	120	163	410	355	500	510	195	219	231
		Profile	332	311	337	262	286	352	375	373	386	301	303	183
Stroke	Direct admission within 4 hours	Actual			53%	57%	51%	50%	30%	24%	7%	7%	18%	20%
		Profile	61%	53%	56%	54%	41%	52%	64%	59%	63%	58%	77%	68%
	CT scan within 1 hour	Actual			49%	48%	53%	63%	42%	32%	23%	42%	31%	41%
		Profile												
	Assessed by Stroke Specialist within 24 hours	Actual			100%	95%	97%	98%	98%	97%	96%	96%	97%	100%
		Profile	96%	95%	95%	98%	97%	95%	95%	98%	98%	96%	96%	99%
	Thrombolysis door to needle within 45 minutes	Actual			30%	25%	0%	13%	11%	29%	0%	13%	0%	56%
		Profile												
Planned care	Outpatients waiting more than 26 weeks	Actual	5,499	9,300	11,964	15,721	20,497	23,069	22,050	21,005	21,179	21,208	21,225	21,750
		Profile												
	Treatment waits over 36 weeks	Actual	8,355	10,247	13,419	18,078	22,494	26,046	31,508	35,387	35,126	33,991	32,719	32,874
		Profile	6,013	5,895	6,187	6,627	6,868	7,374	7,287	7,590	8,185	8,263	8,454	8,620
	Diagnostic waits over 8 weeks	Actual	5,788	8,346	8,033	7,510	8,070	7,666	6,645	6,610	6,579	6,239	5,087	4,554
		Profile	400	390	380	370	330	250	180	150	130	100	50	0
	Therapy waits over 14 weeks	Actual	387	982	1,646	1,554	1,518	1,350	1,135	817	708	584	491	369
		Profile	0	0	0	0	0	0	0	0	0	0	0	0
Cancer	% of patients starting definitive treatment within 62 days from point of suspicion (without adjustments)	Actual	55%	62%	60%	68%	67%	62%	66%	55%	61%	68%	56%	64%
Healthcare Acquired Infections	Number of healthcare acquired C.difficile cases	Actual	11	16	20	11	23	18	15	10	9	3	11	12
		Profile	8	8	8	8	8	8	8	8	8	8	8	8
	Number of healthcare acquired S.Aureus Bacteraemia cases	Actual	10	6	12	6	12	14	12	13	9	9	9	11
		Profile	6	6	6	6	6	6	6	6	6	6	6	6
	Number of healthcare acquired E.Coli Bacteraemia cases	Actual	14	14	17	25	32	23	25	16	12	18	17	28
		Profile	21	21	21	21	21	21	21	21	21	21	21	21
	Number of healthcare acquired Klebsiella Bacteraemia cases	Actual	6	6	9	5	10	5	9	11	12	13	6	10
		Profile	6	6	6	6	6	6	6	6	6	6	6	6
	Number of healthcare acquired Pseudomonas Aeruginosa cases	Actual	2	5	0	1	3	0	2	2	1	1	1	1
		Profile	2	2	2	2	2	2	2	2	2	2	2	2

- The summary contains the measures that Welsh Government used to performance manage the Health Board when it was in Targeted Intervention. Even though the Health Board has been de-escalated to Enhanced Monitoring the measures will continue to be highlighted in this report in order to ensure that the Board remains sighted on these priority measures.
- No RAG status provided as profiles were aligned to the actions in the 20/21 annual plan which are not currently being progressed due to COVID19
- The profiles included are the profiles set out in the original 2020/21 Annual plan



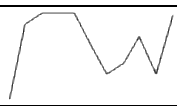

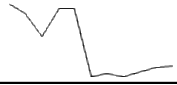

4. OPERATIONAL PLAN DASHBOARD

The following dashboard shows how the Health Board performed against the measures in the operational plan.

Harm from Covid itself														
	Trend <i>(from 1st Apr 20)</i>	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Comments
Covid Demand:														
•Number of new cases		1,381	303	57	53	66	787	4,664	5,525	11,976	3,759	1,208	907	Monthly totals are based on the last day of the month. Source: COVID19 dashboard
•Number of staff referred for the Testing (cumulative)		2,281	2,785	3,102	3,329	3,564	4,765	6,460	8,201	10,065	10,749	11,115	11,683	Cumulative total for each month. Source: COVID19 dashboard
Number of staff awaiting results		0	19	16	1	0	38 (as at 10/10/20)	21 (as at 06/11/20)	41 (as at 06/12/20)	99 (as at 05/01/21)	78 (as at 07/02/21)	69 (as at 06/03/21)	2 (as at 11/04/21)	Source: COVID dashboard
Contact tracing and antibody testing measures:														
Total number of people received an antibody test					15,524 <i>(as at 13.07.20)</i>	17,821 <i>(as at 09/09/20)</i>	18,414 <i>(as at 06/10/20)</i>	18,487 <i>(as at 02/11/20)</i>	18,546 <i>(as at 06/12/20)</i>	18,599 <i>(as at 05/101/21)</i>	18,868 <i>(as at 07/02/21)</i>	18,904 <i>(as at 07/03/21)</i>	Data not available	Source: COVID staff briefing (08/03/2021)
Complaints, incidents and risks related to Covid:														
•Number of incidents		119	67	40	26	39	30	87	141	127	84	63	53	Source:COVID19 dashboard
•Number of serious incidents		1	0	2	0	11	1	1	1	0	0	0	0	
•Number of complaints		77	61	39	58	27	30	37	50	83	106	131	98	
•Number of risk		19	20	19	5	8	2	6	7	10	3	3	3	
Daily PPE Stock- amount of supply:														
•Mask – FFP3	Morrison		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	Snapshot taken on the last day of the month. Source:COVID19 dashboard
	Singleton		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
	NPTH		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
	PCC		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
	MH & LD		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
•Mask – FRSM Type 11R	Morrison		24-48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	Snapshot taken on the last day of the month. Source:COVID19 dashboard
	Singleton		24-48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
	NPTH		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
	PCC		24-48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
	MH & LD		24-48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
•Gloves	Morrison		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	Snapshot taken on the last day of the month. Source:COVID19 dashboard
	Singleton		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
	NPTH		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
	PCC		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
	MH & LD		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
•Gowns	Morrison		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	Snapshot taken on the last day of the month. Source:COVID19 dashboard
	Singleton		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
	NPTH		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
	PCC		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
	MH & LD		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
Staff absence levels due to:														
Number of staff self isolated (asymptomatic)	Medical		81	39	27	29	24	34	17	36	55	7	2	Data reported a month in arrears. Snapshots taken mid month Source: Workforce
	Nursing Reg		270	166	145	133	142	149	106	93	152	61	40	
	Nursing Non Reg		148	105	112	97	96	77	95	56	81	57	33	
	Other		352	206	190	163	158	93	111	106	187	93	85	
Number of staff self isolated (symptomatic)	Medical		90	13	7	2	0	8	17	41	34	16	5	
	Nursing Reg		289	117	56	23	14	25	44	97	145	112	52	
	Nursing Non Reg		177	67	37	18	9	8	25	77	68	88	49	
	Other		304	95	41	27	13	31	46	79	147	100	50	
% sickness	Medical		14.9%	4.0%	3.0%	2.8%	2.5%	4.0%	3.2%	7.3%	8.3%	2.2%	0.7%	
	Nursing Reg		14.2%	7.0%	5.1%	4.0%	4.0%	4.4%	3.8%	4.7%	7.4%	4.3%	2.3%	
	Nursing Non Reg		16.6%	8.0%	7.2%	5.5%	5.2%	4.2%	6.0%	6.5%	7.3%	7.0%	3.9%	
	Other		11.0%	5.0%	3.6%	2.9%	2.7%	2.0%	2.5%	3.0%	5.4%	3.1%	2.2%	
	All		13.2%	6.0%	4.5%	3.6%	3.5%	3.2%	3.5%	4.4%	6.5%	4.0%	2.4%	

Harm from overwhelmed NHS and social care system														
	Trend (from 1st Apr 20)	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Comments
NHS Wales Delivery Measures for unscheduled care:														
•% of patients seen and discharged from A&E within 4 hours		78.4%	83.5%	87.7%	80.1%	80.6%	76.4%	77.2%	75.4%	72.6%	76.8%	71.3%	76.9%	Data includes Morriston Hospital and NPTH hospital. Source: Patient flow dashboard
•Number of patients waiting over 12 hours in A&E		131	97	81	223	286	537	494	626	776	570	534	457	Data includes Morriston Hospital and NPT hospital. Source: Patient flow dashboard
•Number of ambulance handovers taking over 1 hour		61	20	47	120	163	410	355	500	510	195	219	231	Data includes Morriston Hospital and Singleton hospital. Source: Patient flow dashboard
•% ambulance responses to red calls within 8 minutes		69.5%	75.0%	75.5%	73.8%	72.2%	69.2%	66.2%	67.3%	54.1%	67.3%	70.4%	73.0%	Source: WAST Health Board Area Report
ED demand (attendances)		5,280	7,761	8,525	9,116	9,684	9,329	7,908	7,942	6,985	6,561	6,677	8,839	Data includes Morriston Hospital and NPTH hospital. Source: Patient flow dashboard
Healthcare Acquired Infections:														
•E.coli bacteraemia	Number of cases		14	14	17	25	32	23	25	16	12	18	17	28
	Rate per 100k pop.		43.8	42.3	53.1	75.6	96.8	71.9	75.6	50	36.29	54.43	56.91	84.67
•Staph.Aueurs bacteraemia	Number of cases		10	6	12	6	12	14	12	13	9	9	9	11
	Rate per 100k pop.		31.3	18.1	37.5	18.1	36.3	43.8	36.3	40.6	27.2	30.2	30.1	33.3
•Clostridium Difficile	Number of cases		11	16	20	11	23	18	15	10	9	3	11	12
	Rate per 100k pop.		34.4	51.4	62.5	33.3	69.6	56.2	45.4	34.4	27.2	9.1	36.8	36.3
•Klebsiella spp. Bacteraemia	Number of cases		6	6	9	5	10	5	9	11	12	13	6	10
	Rate per 100k pop.		18.8	18.1	28.1	15.1	30.2	15.6	27.2	34.4	36.3	39.3	20.1	30.2
•Pseudomonas aeruginosa bacteraemia	Number of cases		2	5	0	1	3	0	2	2	1	1	1	1
	Rate per 100k pop.		6.3	15.1	0.0	3.0	9.1	0.0	6.1	6.3	3.0	3.0	3.4	3.0
Medically Fit for Discharge numbers		88	78	92	101	112	114	142	139	138	135	163	136	Snapshot taken on the last day of the month. Source: COVID19 dashboard
Number of mortuary spaces		72	161	233	188	170	164	158	140	89	146	156	168	Monthly totals are based on a snapshot of the number of vacant hospital mortuary spaces on the last day of the month. Source: COVID19 dashboard
Number of hospital deaths with positive COVID result		157	22	1	0	0	2	36	35	45	20	6	1	Source: COVID19 dashboard
Hospital bed occupancy (suspected and confirmed COVID19):														
•General bed		186	58	46	41	30	37	176	208	217	99	41	16	Snapshot taken on the last day of the month. Source: COVID19 dashboard
•Critical Care bed		19	5	4	1	0	3	11	15	15	6	2	2	Snapshot taken on the last day of the month. Source: COVID19 dashboard

Harm from reduction in non-Covid activity															
		Trend <i>(from 1st Apr 20)</i>	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Comments
NHS Wales Delivery Framework measures for cancer, RTT and diagnostics															
•Cancer	Single cancer pathway		70.9%	72.1%	73.0%	81.5%	80.0%	71.0%	73.0%	55.4%	61.0%	67.9%	56.4%	64.0%	Data reported two months in arrears. Final February 2021 data will be available on 31/02/21 Source: SaFF report.
•RTT	% waiting under 26 weeks		72.3%	64.0%	59.4%	52.5%	43.7%	41.0%	44.8%	47.6%	48.0%	47.0%	47.9%	48.8%	Snapshot taken on the last day of the month. Source: RTT and D&T monthly submission
	Number > 36 weeks		8,355	10,247	13,419	18,078	22,494	26,046	31,508	35,387	35,126	33,991	32,719	32,874	
•Diagnostics	Number > 8 weeks		5,788	8,346	8,033	7,510	8,070	7,666	6,645	6,610	6,579	6,239	5,087	1	
Patient Feedback:															
•Number of friends and family surveys completed			150	247	393	502	625	2,804	1,047	787	584	678	798	1,050	Source: Patient Feedback Team
•% of who would recommend and highly recommend			90%	92%	87%	91%	81%	93%	82%	84%	77%	79%	85%	87%	
•% of All Wales surveys scoring 9 or 10 on overall satisfaction			95%	100%	79%	91%	83%	84%	79%	85%	65%	81%	94%	93%	
Harm from wider societal actions/lockdown															
		Trend <i>(from 1st Apr 20)</i>	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Comments
Vaccination and Immunisation rates- % of children who received:															
•3 doses of the '6 in 1' vaccine by age 1					96.5%			96.5%			96.7%				Source: Public Health Wales COVER Report.
•MenB2 vaccine by age 1					96.8%			96.4%			96.6%				
•PCV2 vaccine by age 1					96.4%			96.2%			96.9%				
•Rotavirus vaccine by age 1					96.9%			94.8%			95.1%				
•MMR1 vaccine by age 2					94.4%			95.4%			94.6%				
•PCVf3 vaccine by age 2					94.1%			95.5%			94.7%				
•MenB4 vaccine by age 2					93.5%			95.6%			94.7%				
•Hib/MenC vaccine by age 2					93.6%			95.4%			94.4%				
•Up to date in schedule by age 4					88.7%			87.0%			87.2%				
•2 doses of the MMR vaccine by age 5					90.8%			91.7%			92.0%				
•4 in 1 vaccine by age 5					92.2%			92.8%			92.9%				
•MMR vaccination by age 16					95.1%			94.7%			94.5%				
•Teenage booster by age 16					90.9%			91.9%			92.4%				
•MenACWY vaccine by age 16					91.6%			92.8%			92.5%				
MHLD and Children's services activity															
Adult Mental Health Services	% of mental health assessments undertaken within (up to and including) 28 days from the date of receipt of referral		99%	99%	100%	99%	99%	97%	99.5%	98%	99%	96%	98%	Reported two months in arrears. Source: Mental Health Measures monthly submission to Welsh Government	
	% of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS		97%	100%	96%	96%	88%	94%	93%	98%	95%	95%	98%		
	% patients waiting < 26 weeks to start a psychological therapy in Specialist Adult Mental Health		93%	89%	84%	89%	91%	99%	99.7%	100%	100%	100%	100%		
	% residents in receipt of secondary MH services (all ages) who have a valid care and treatment plan (CTP)		93%	92%	92%	94%	92%	90%	91%	91%	89%	91%	91%		

Harm from wider societal actions/lockdown															
		Trend (from 1st Apr 20)	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Comments
Children & Adolescent Mental Health Services (CAMHS)	% of urgent assessments undertaken within 48 hours from receipt of referral (Crisis)		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		Source: Cwm Taf Morgannwg University Health Board
	% Patients with Neurodevelopmental Disorders (NDD) receiving a Diagnostic Assessment within 26 weeks		35%	30%	28%	30%	24%	21%	22%	24%	26%	24%	28%		
	% Patients waiting less than 28 days for a first outpatient appointment for Child and Adolescent Mental Health Services (CAMHS)		44%	78%	100%	100%	100%	98%	90%	88%	61%	53%	66%		
	P-CAMHS - % of Routine Assessment by CAMHS undertaken within 28 days from receipt of referral		Data not available	88%	100%	100%	100%	62%	29%	41%	73%	29%	97%		
	P-CAMHS - % of therapeutic interventions started within 28 days following assessment by LPMHSS		Data not available	100%	100%	100%	86%	100%	100%	100%	100%	93%	97%		
	S-CAMHS - % of Health Board residents in receipt of CAMHS to have a valid Care and Treatment Plan (CTP)		99%	97%	91%	98%	98%	81%	82%	81%	82%	83%	84%		
	S-CAMHS - % of Routine Assessment by SCAMHS undertaken within 28 days from receipt of referral		46%	72%	100%	100%	100%	98%	79%	62%	58%	60%	56%		

4.1 HARM FROM COVID ITSELF

Chart 1: Number of new COVID19 cases

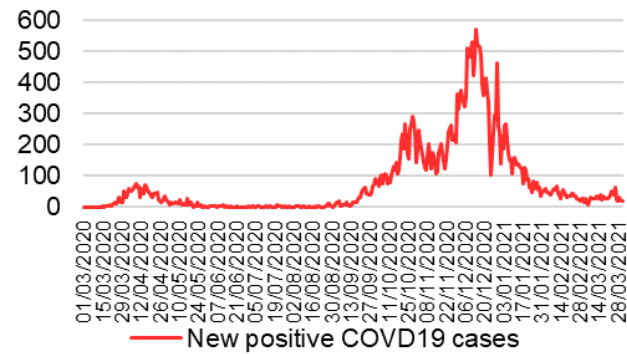


Chart 2: Number of new COVID19 cases (cumulative)

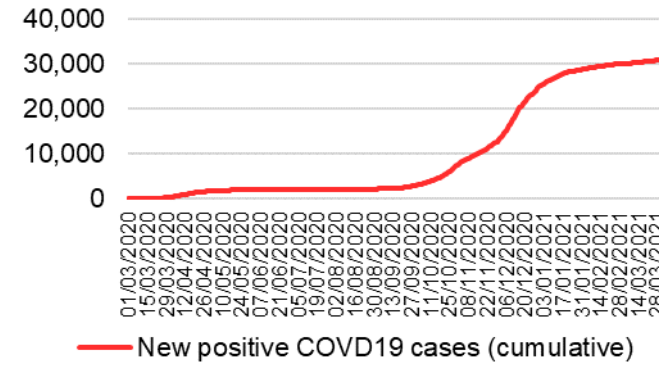


Chart 3: Number of COVID19 tests completed and positivity rate

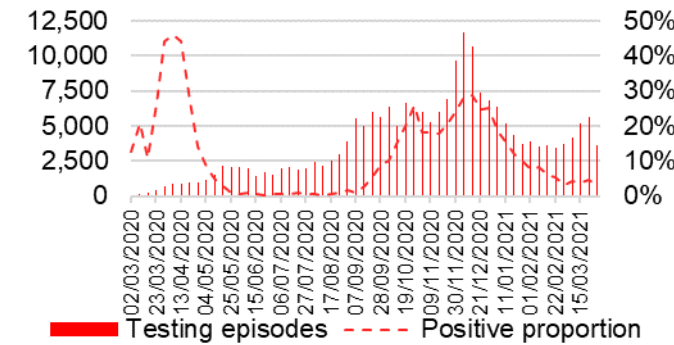


Chart 4: Number of staff referred for Antigen testing

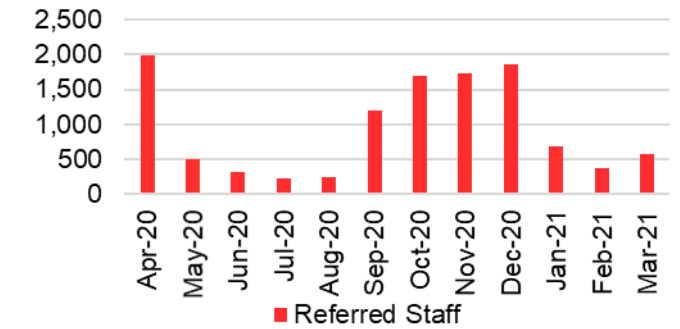


Chart 5: Outcome of staff COVID19/ antigen tests

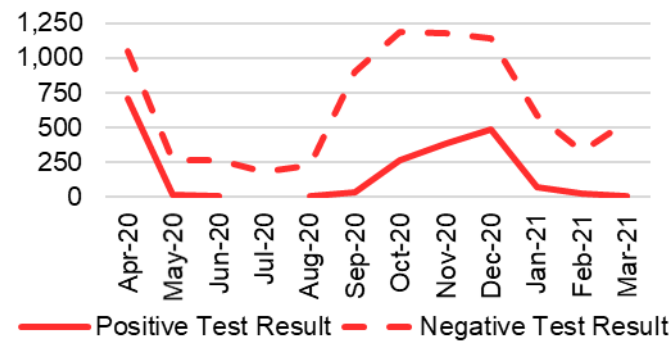


Chart 6: Number of COVID19 related incidents

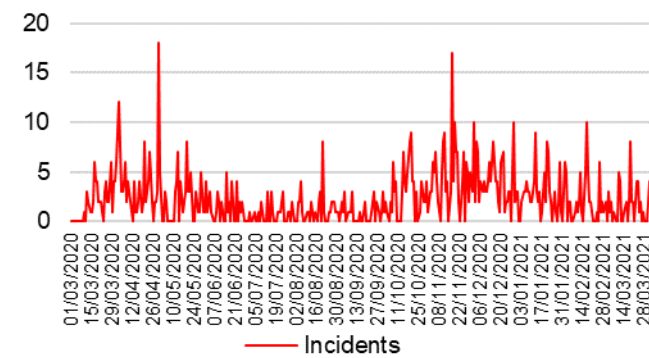


Chart 7: Number of COVID19 related serious incidents

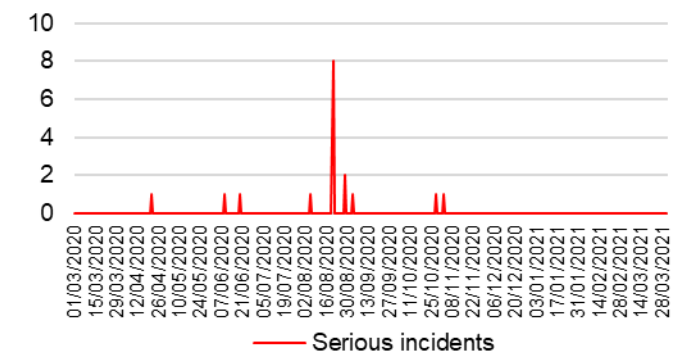


Chart 8: Number of COVID19 related complaints

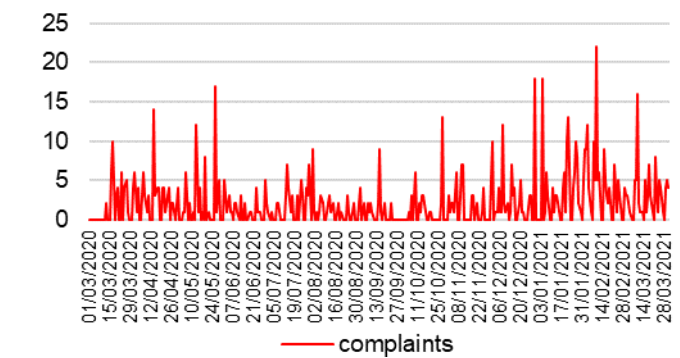


Chart 9: Number of COVID19 related risks

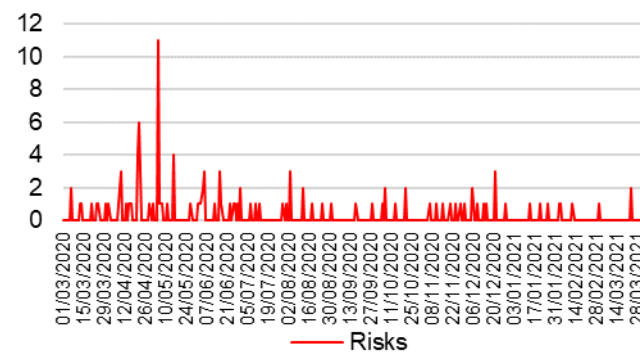


Chart 10: Number of staff self isolating (asymptomatic)

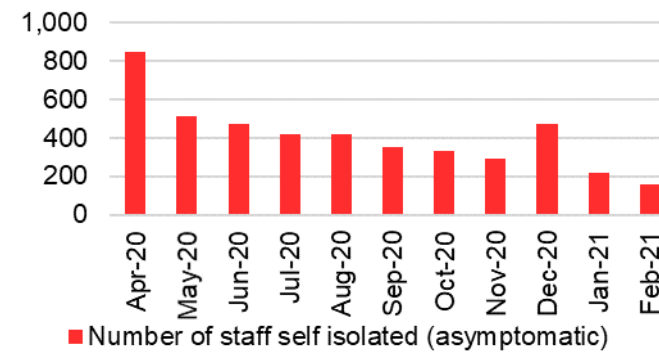


Chart 11: Number of staff self isolating (symptomatic)

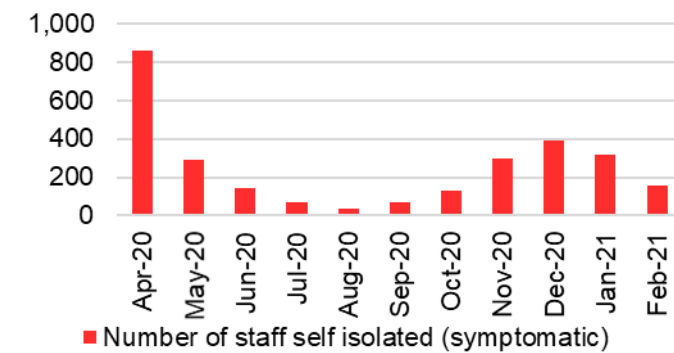


Chart 12: % staff sickness

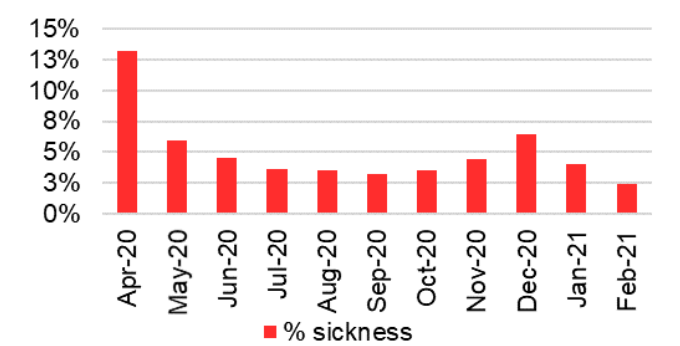


Chart 13: Bed Occupancy for suspected and confirmed COVID19 cases

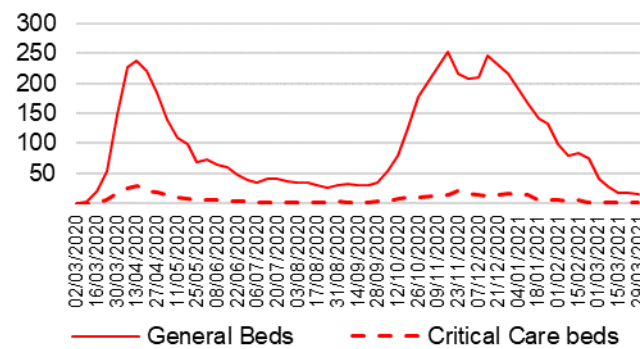


Chart 14: Number of hospital deaths with any mention of COVID19

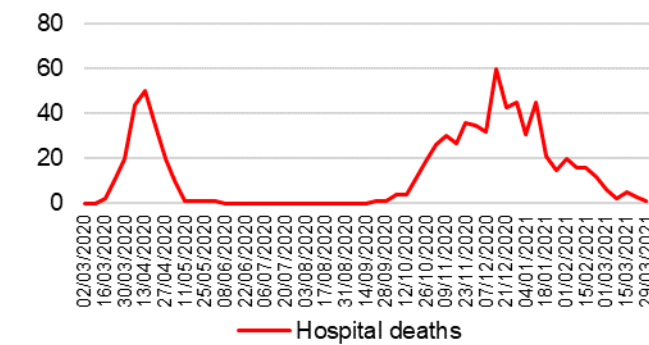


Chart 15: Number of weekly registered deaths with any mention of COVID19 (ONS data)

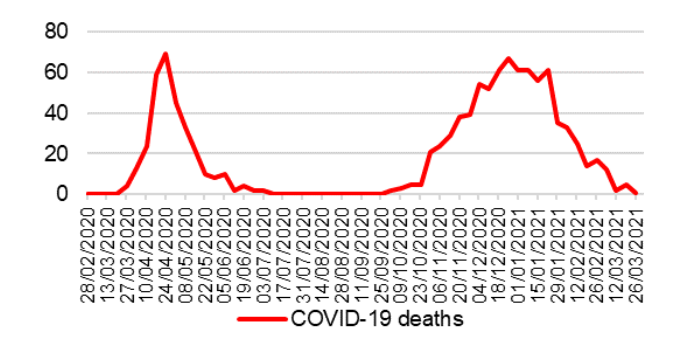
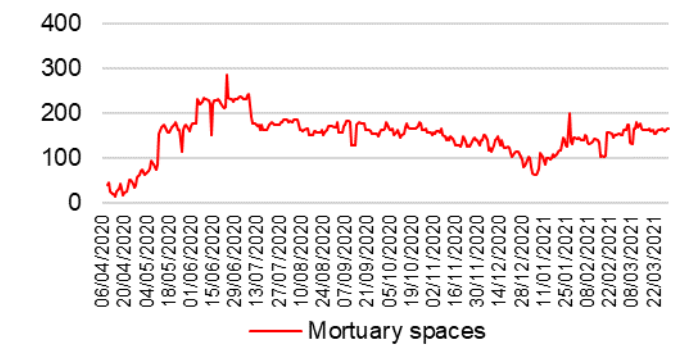
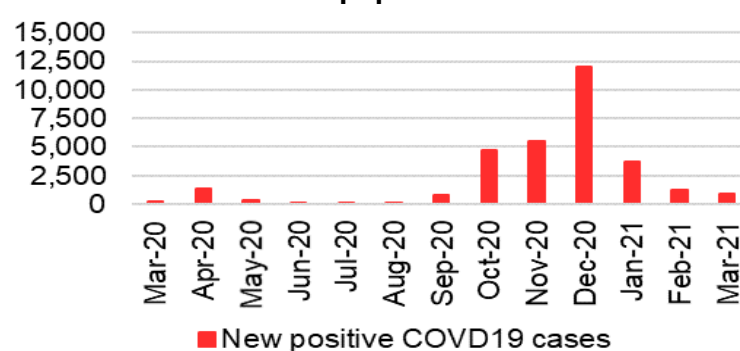
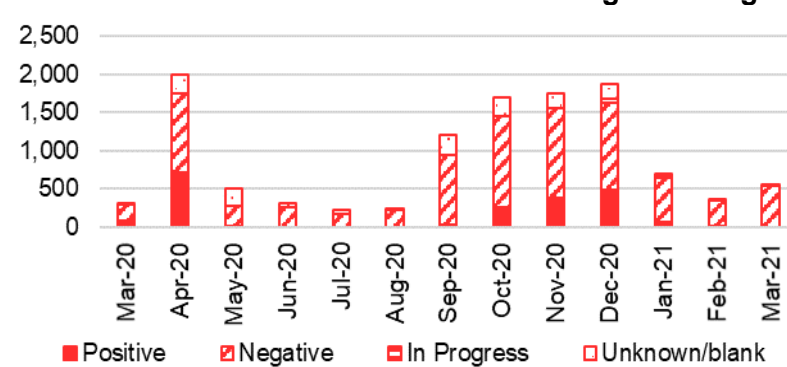
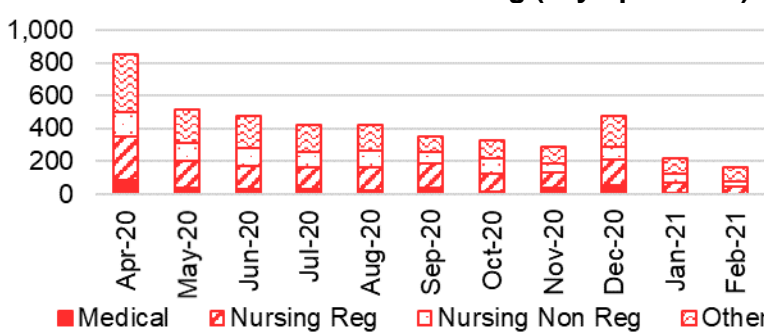
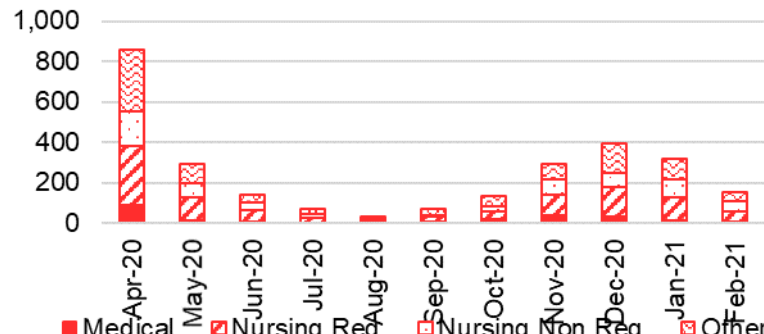


Chart 16: Number of mortuary spaces



4.1 Updates on key measures

COVID TESTING																																																																								
Description	Current Performance	Trend																																																																						
1. Number of new COVID19 cases in Swansea Bay population area	1. Number of new COVID cases In March 2021, there were an additional 907 positive cases recorded bringing the cumulative total to 30,948 in Swansea Bay since March 2020. In March 2021, 39,287 tests were carried out of which 2% (907) were positive. This is the lowest positivity rate since August 2020.	1.Number of new COVID19 cases for Swansea Bay population  <table border="1"><caption>1. Number of new COVID19 cases for Swansea Bay population</caption><thead><tr><th>Month</th><th>New positive COVID19 cases</th></tr></thead><tbody><tr><td>Mar-20</td><td>0</td></tr><tr><td>Apr-20</td><td>1,000</td></tr><tr><td>May-20</td><td>500</td></tr><tr><td>Jun-20</td><td>0</td></tr><tr><td>Jul-20</td><td>0</td></tr><tr><td>Aug-20</td><td>0</td></tr><tr><td>Sep-20</td><td>500</td></tr><tr><td>Oct-20</td><td>4,500</td></tr><tr><td>Nov-20</td><td>5,500</td></tr><tr><td>Dec-20</td><td>12,500</td></tr><tr><td>Jan-21</td><td>4,000</td></tr><tr><td>Feb-21</td><td>1,500</td></tr><tr><td>Mar-21</td><td>1,000</td></tr></tbody></table>	Month	New positive COVID19 cases	Mar-20	0	Apr-20	1,000	May-20	500	Jun-20	0	Jul-20	0	Aug-20	0	Sep-20	500	Oct-20	4,500	Nov-20	5,500	Dec-20	12,500	Jan-21	4,000	Feb-21	1,500	Mar-21	1,000																																										
	Month	New positive COVID19 cases																																																																						
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Feb-21	1,500																																																																							
Mar-21	1,000																																																																							
2. Number of staff referred for Antigen testing	2. Staff referred for Antigen testing The cumulative number of staff referred for COVID testing between March 2020 and March 2021 is 11,683 of which 2,102 have had a positive COVID test result (18%).	2.Outcome of staff referred for Antigen testing  <table border="1"><caption>2. Outcome of staff referred for Antigen testing</caption><thead><tr><th>Month</th><th>Positive</th><th>Negative</th><th>In Progress</th><th>Unknown/blank</th></tr></thead><tbody><tr><td>Mar-20</td><td>200</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Apr-20</td><td>2,000</td><td>0</td><td>0</td><td>0</td></tr><tr><td>May-20</td><td>400</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Jun-20</td><td>300</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Jul-20</td><td>200</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Aug-20</td><td>200</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Sep-20</td><td>1,200</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Oct-20</td><td>1,600</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Nov-20</td><td>1,700</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Dec-20</td><td>1,800</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Jan-21</td><td>700</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Feb-21</td><td>300</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Mar-21</td><td>500</td><td>0</td><td>0</td><td>0</td></tr></tbody></table>	Month	Positive	Negative	In Progress	Unknown/blank	Mar-20	200	0	0	0	Apr-20	2,000	0	0	0	May-20	400	0	0	0	Jun-20	300	0	0	0	Jul-20	200	0	0	0	Aug-20	200	0	0	0	Sep-20	1,200	0	0	0	Oct-20	1,600	0	0	0	Nov-20	1,700	0	0	0	Dec-20	1,800	0	0	0	Jan-21	700	0	0	0	Feb-21	300	0	0	0	Mar-21	500	0	0	0
Month	Positive	Negative	In Progress	Unknown/blank																																																																				
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Feb-21	300	0	0	0																																																																				
Mar-21	500	0	0	0																																																																				
3. Number of staff waiting results of Antigen test	3. Number of staff awaiting results of Antigen test Occupational Health has implemented a new reporting system that is now integrated with the Health Board's internal COVID dashboard. The new data is reported on a weekly rather than daily basis. The latest figures as at 9 th April 2021 shows that 2 members of staff awaiting their antigen test result.																																																																							

COVID RELATED STAFF ABSENCE																	
Description	Current Performance					Trend											
Staff absence due to COVID19 <i>1.Number of staff self-isolating (asymptomatic)</i> <i>2.Number of staff self isolating (symptomatic)</i> <i>3.% staff sickness</i>	<p>The following data is based on the mid-month position and broken down into the categories requested by Welsh Government.</p> <p>1. & 2. Number of staff self-isolating (asymptomatic and symptomatic) Between January and February 2021, the number of staff self-isolating (asymptomatic) significantly reduced from 218 to 160 and the number of staff self-isolating (symptomatic) reduced from 316 to 156. In February 2021, “other” staff had the largest number of self-isolating staff who are asymptomatic and Registered Nursing had the largest number of self-isolating staff who are symptomatic.</p> <p>3. % Staff sickness The percentage of staff sickness absence due to COVID19 has significantly reduced from 13.2% in April 2020 to 2.4% in February 2021.</p> <p>February saw the lowest level of COVID19 related sickness since the pandemic began in March 2020.</p>					1.Number of staff self isolating (asymptomatic)											
																	
						2.Number of staff self isolating (symptomatic)											
																	
						3.% staff sickness											
						Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	
						Medical	14.9%	4.0%	3.0%	2.8%	2.5%	4.0%	3.2%	7.3%	8.3%	2.2%	0.7%
						Nursing Reg	14.2%	7.0%	5.1%	4.0%	4.0%	4.4%	3.8%	4.7%	7.4%	4.3%	2.3%
						Nursing Non Reg	16.6%	8.0%	7.2%	5.5%	5.2%	4.2%	6.0%	6.5%	7.3%	7.0%	3.9%
						Other	11.0%	5.0%	3.6%	2.9%	2.7%	2.0%	2.5%	3.0%	5.4%	3.1%	2.2%
						All	13.2%	6.0%	4.5%	3.6%	3.5%	3.2%	3.5%	4.4%	6.5%	4.0%	2.4%

HARM FROM OVERWHELMED NHS AND SOCIAL CARE SYSTEM

5.1 Unscheduled Care- Overview

Chart 1: GP Out of Hours/ 111

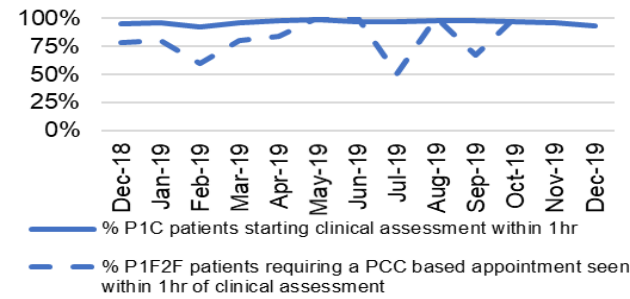


Chart 2: % red calls responded to within 8 minutes

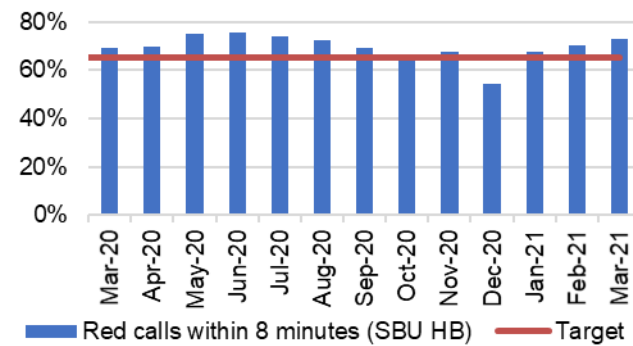


Chart 3: Number of ambulance handovers over 1 hour

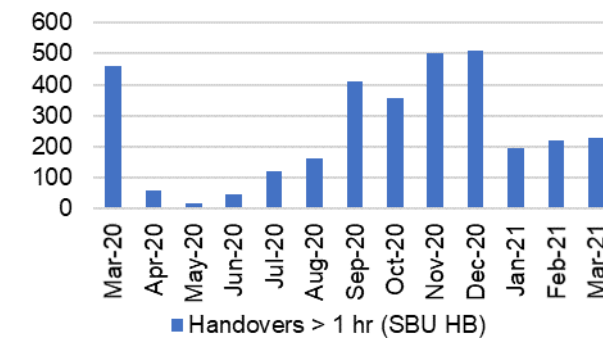


Chart 4: Lost hours- notification to ambulance handover over 15 minutes

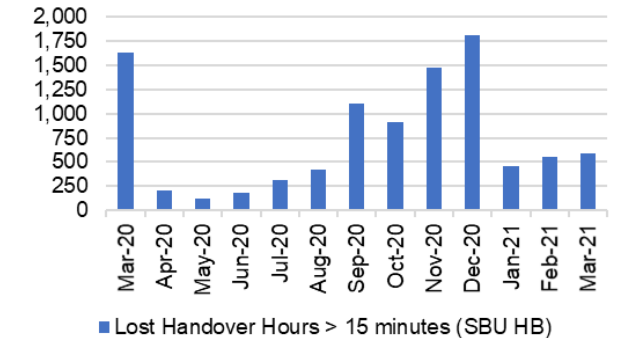


Chart 5: A&E Attendances

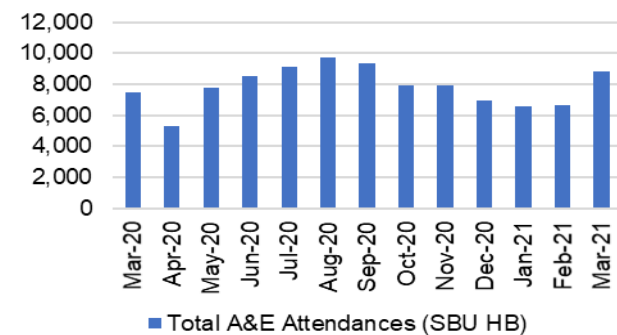


Chart 6: % patients who spend less than 4 hours in A&E

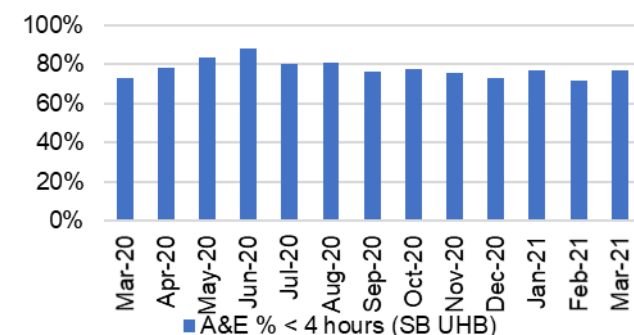


Chart 7: Number of patients waiting over 12 hours in A&E

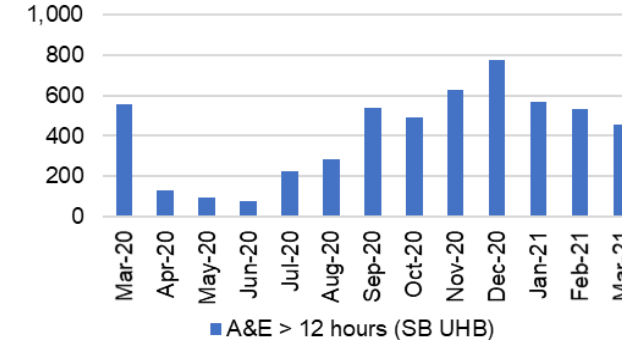


Chart 8: Number of emergency admissions

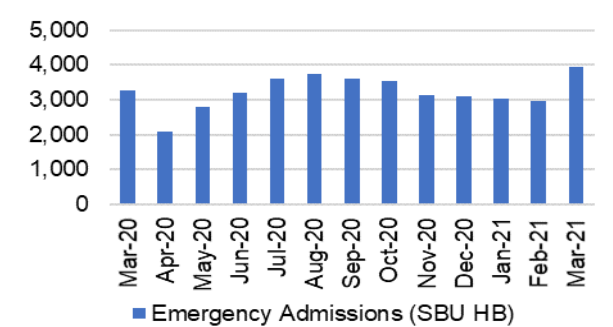


Chart 9: Elective procedures cancelled due to lack of beds

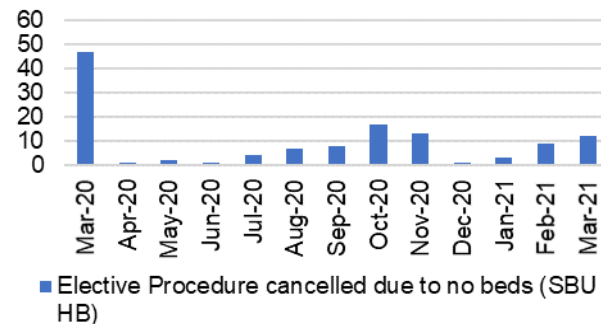


Chart 10: Number of Medically Fit For Discharge (MFFD) patients

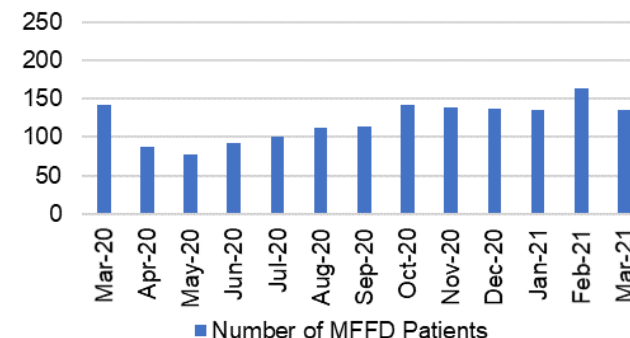
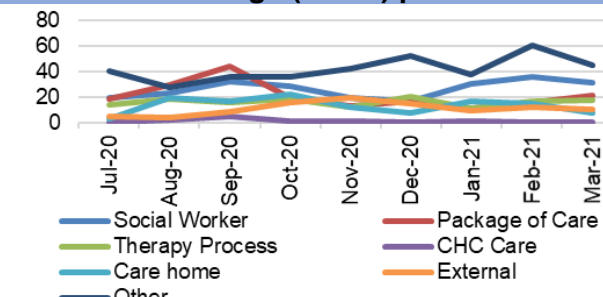


Chart 11: Delay reason for Medically Fit For Discharge (MFFD) patients



* accurate split of data in above categories not available before July 2020

Chart 12: % of critical care bed days lost to delayed transfers of care

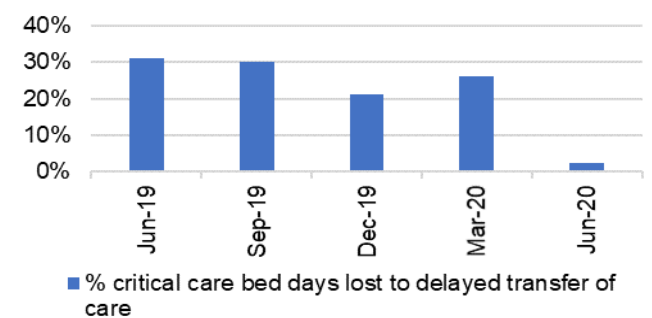


Chart 12: % of patients (> 60 years) who presented with a hip fracture that received an orthogeriatrician assessment within 72 hours

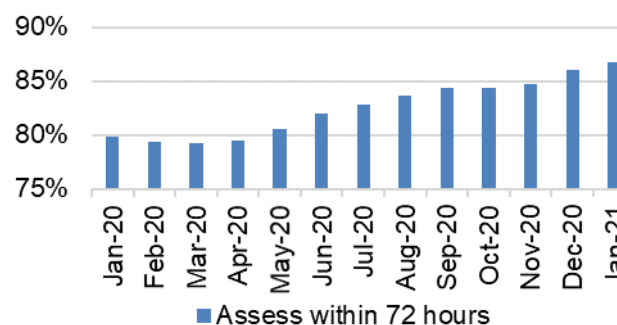
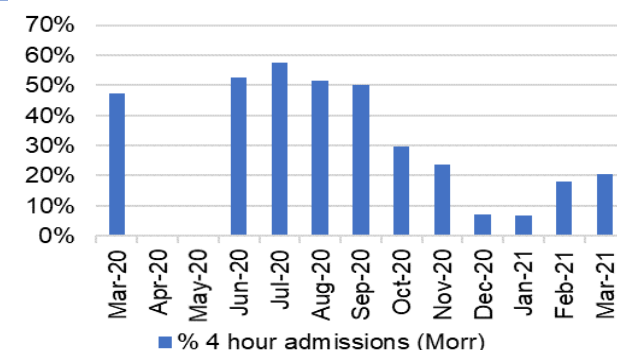
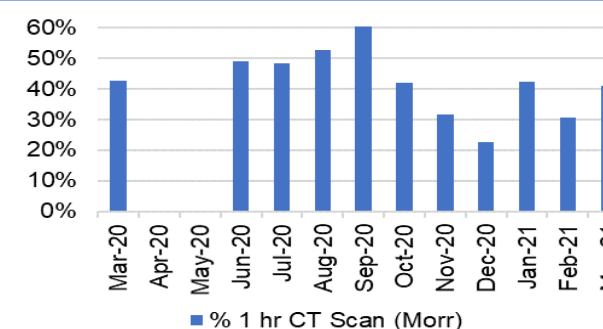


Chart 13: Direct admission to Acute Stroke Unit within 4 hours



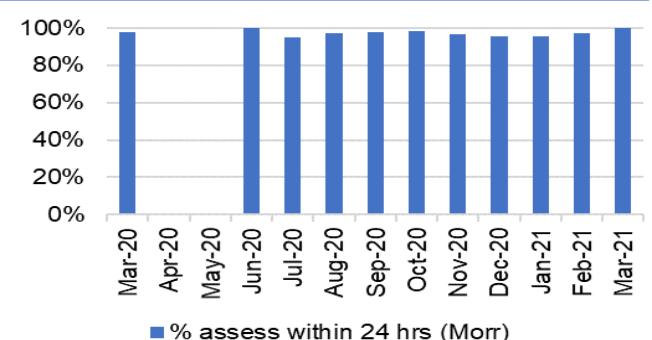
* No data available for April and May 2020

Chart 14: % of stroke patients receiving CT scan with 1 hour



* No data available for April and May 2020

Chart 15: % stroke patients receiving consultant assessment within 24 hours



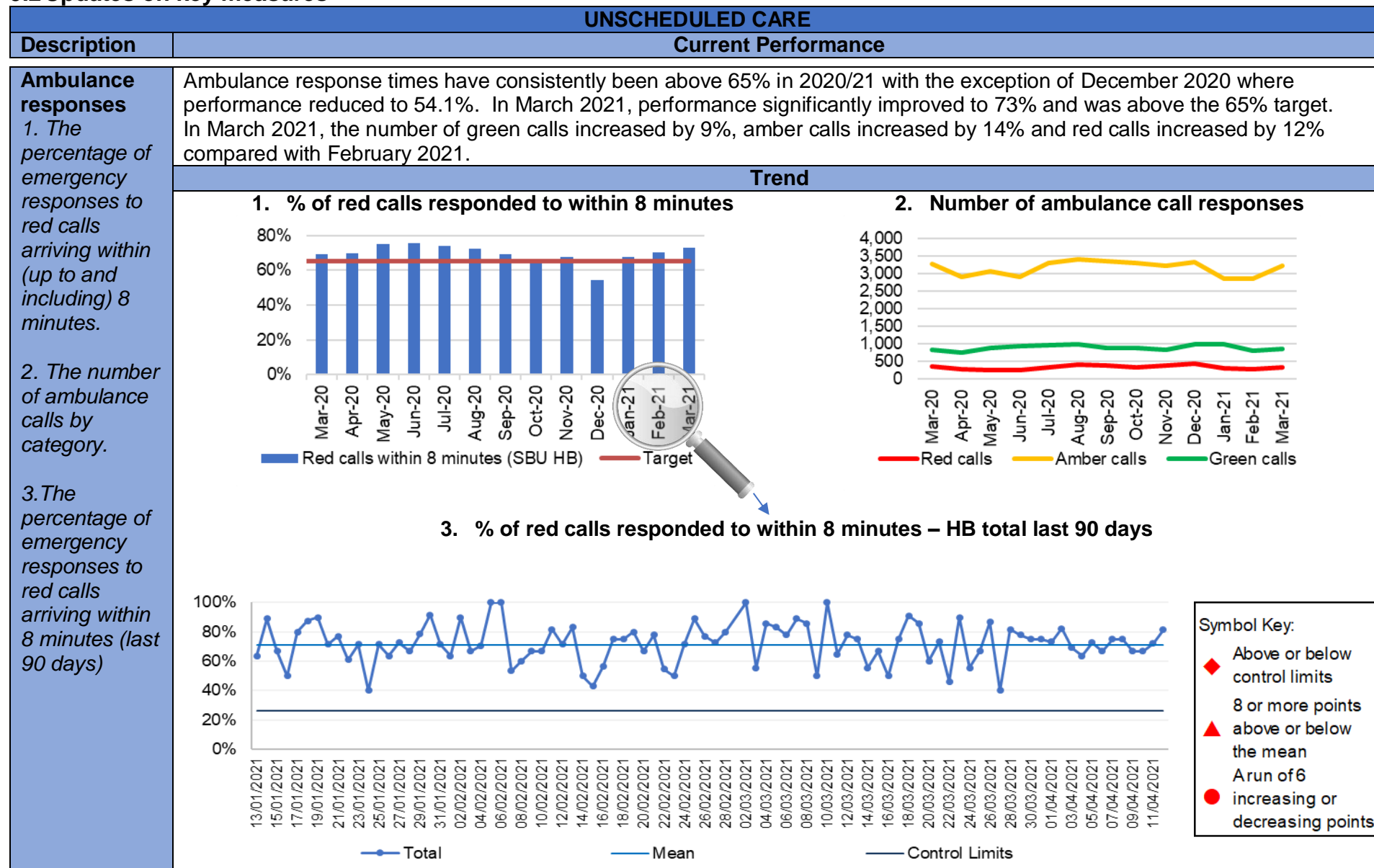
* No data available for April and May 2020

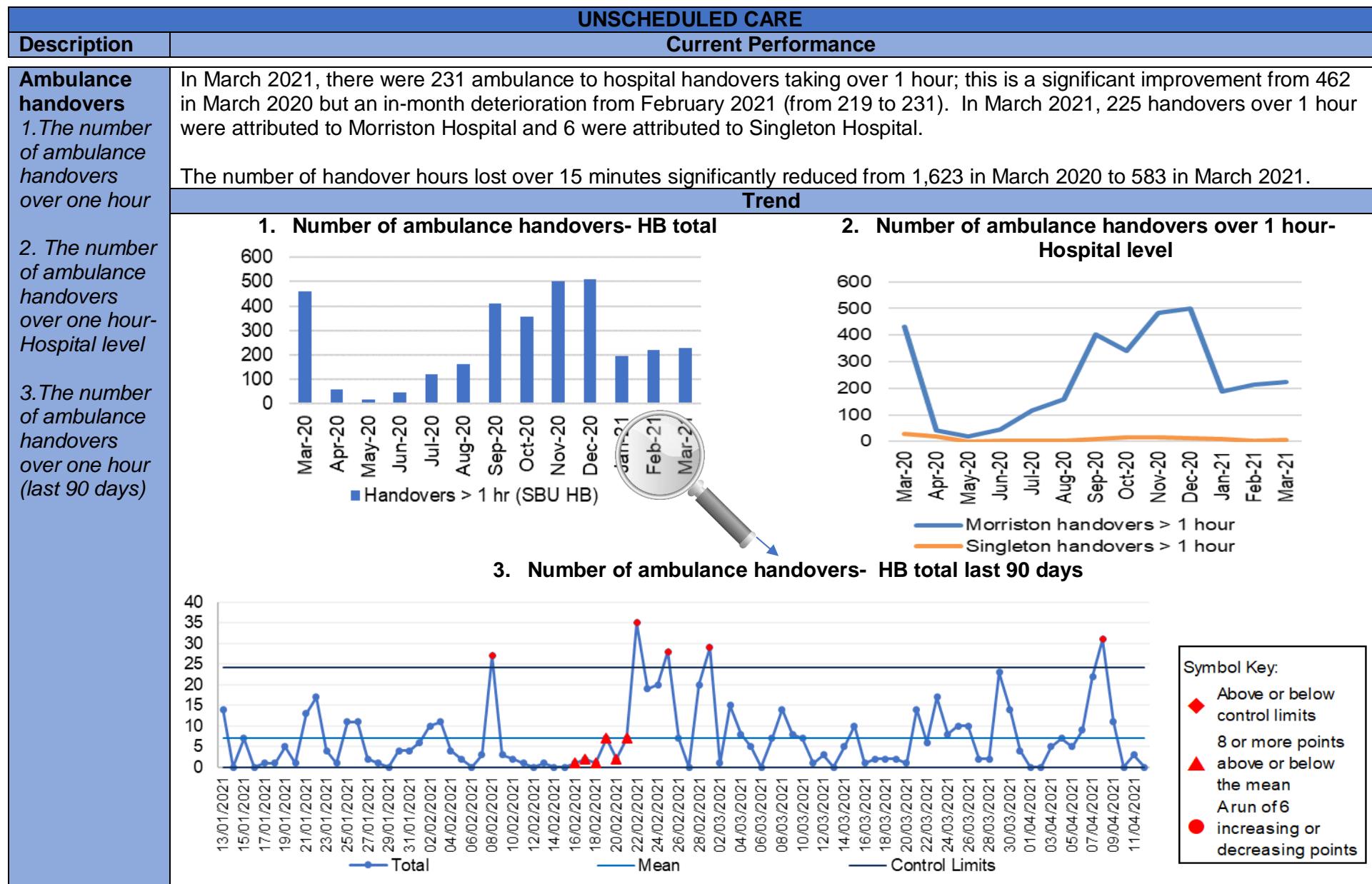
Unscheduled Care Overview (March 2021)

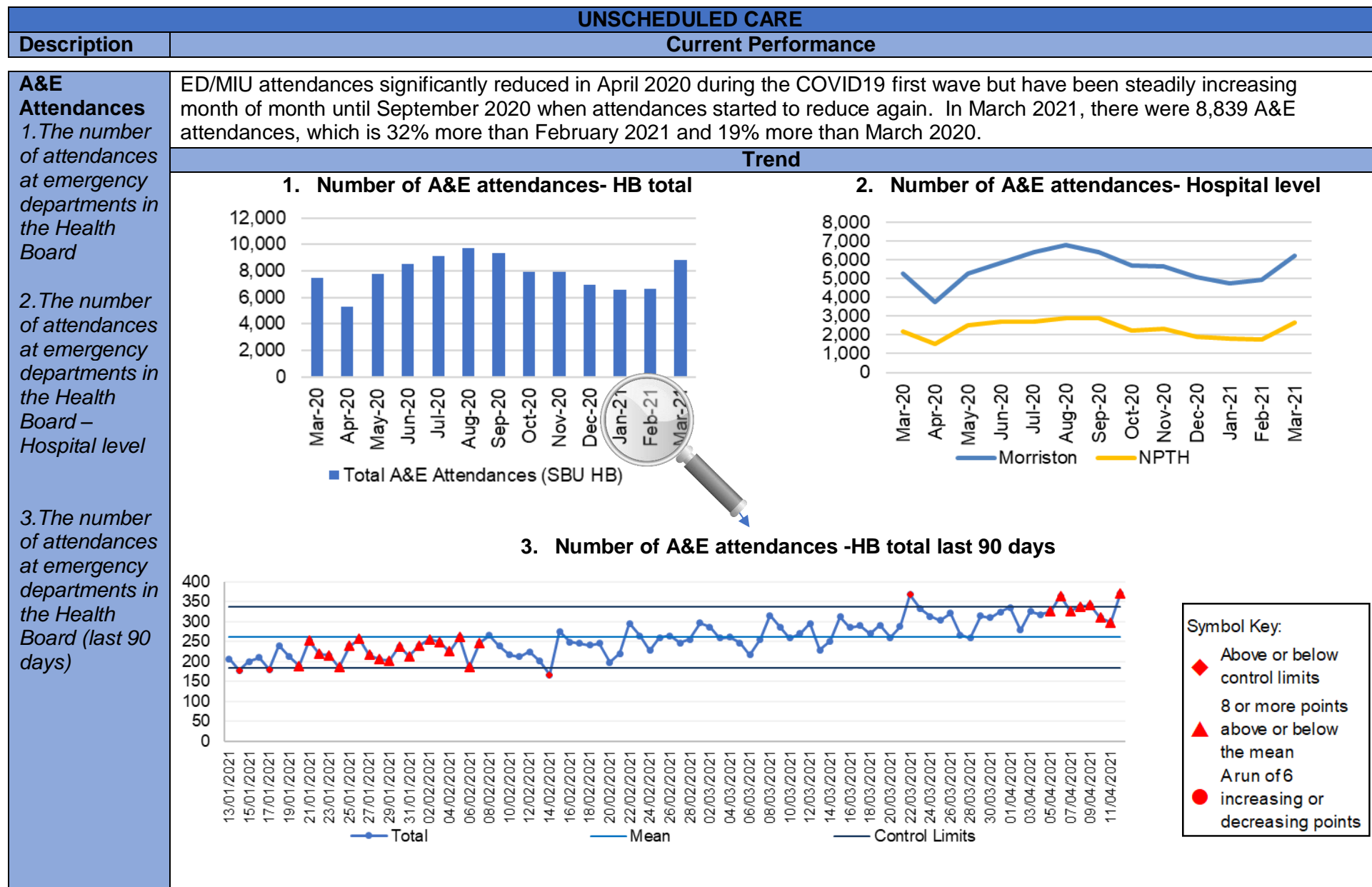
Primary Care Access		Ambulance	Emergency Department	
97% (→) GP practices open during daily core hours	88% (→) GP practices offering appointments between 5pm-6:30pm	73.0% (3%↑) Red calls responded to within 8 minutes	8,839 (32%↑) A&E attendances	76.91% (5.7%↑) Waits in A&E under 4 hours
93% (3%↓) % of 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>)	100% (33%↑) % 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>)	231 (5%↑) Ambulance handovers over 1 hour	457 (14%↓) Waits in A&E over 12 hours	1,916 (23%↑) Patients admitted from A&E
		3,232 (14%↑) Amber calls		
		321 (12%↑) Red calls		
Emergency Activity		Patient Flow		
3,946 (32%↑) Emergency Inpatient Admissions	359 (41%↑) Emergency Theatre Cases	13 (19%↓) (Mar-20) Mental Health DTOCs * Data collection temporarily suspended	60 (13%↓) (Mar-20) Non-Mental Health DTOCs * Data collection temporarily suspended	
325 (18%↑) Trauma theatre cases	12 (33%↑) Elective procedures cancelled due to no beds		136 (17%↓) Medically fit patients	

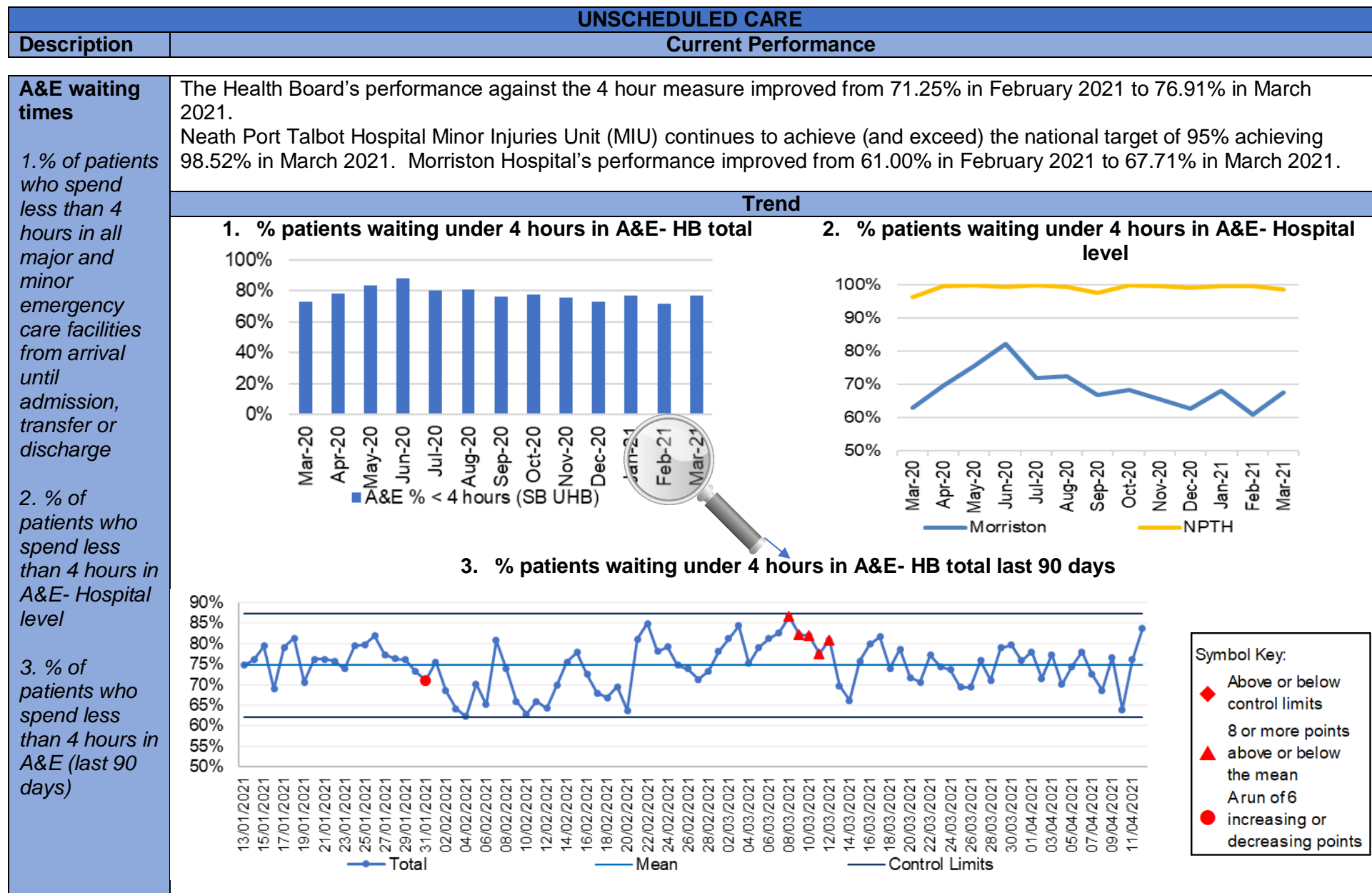
**RAG status and trend is based on in month-movement*

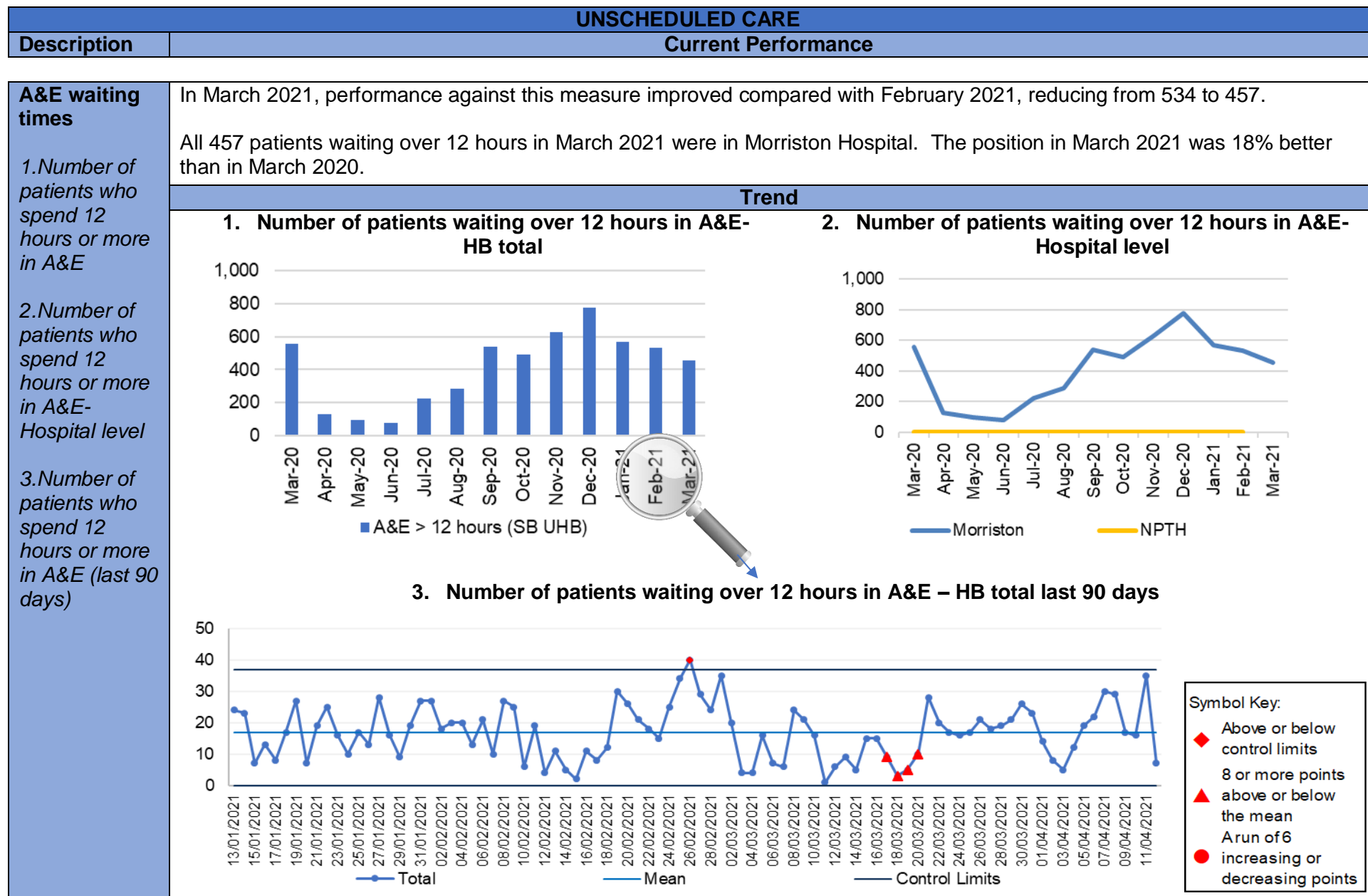
5.2 Updates on key measures

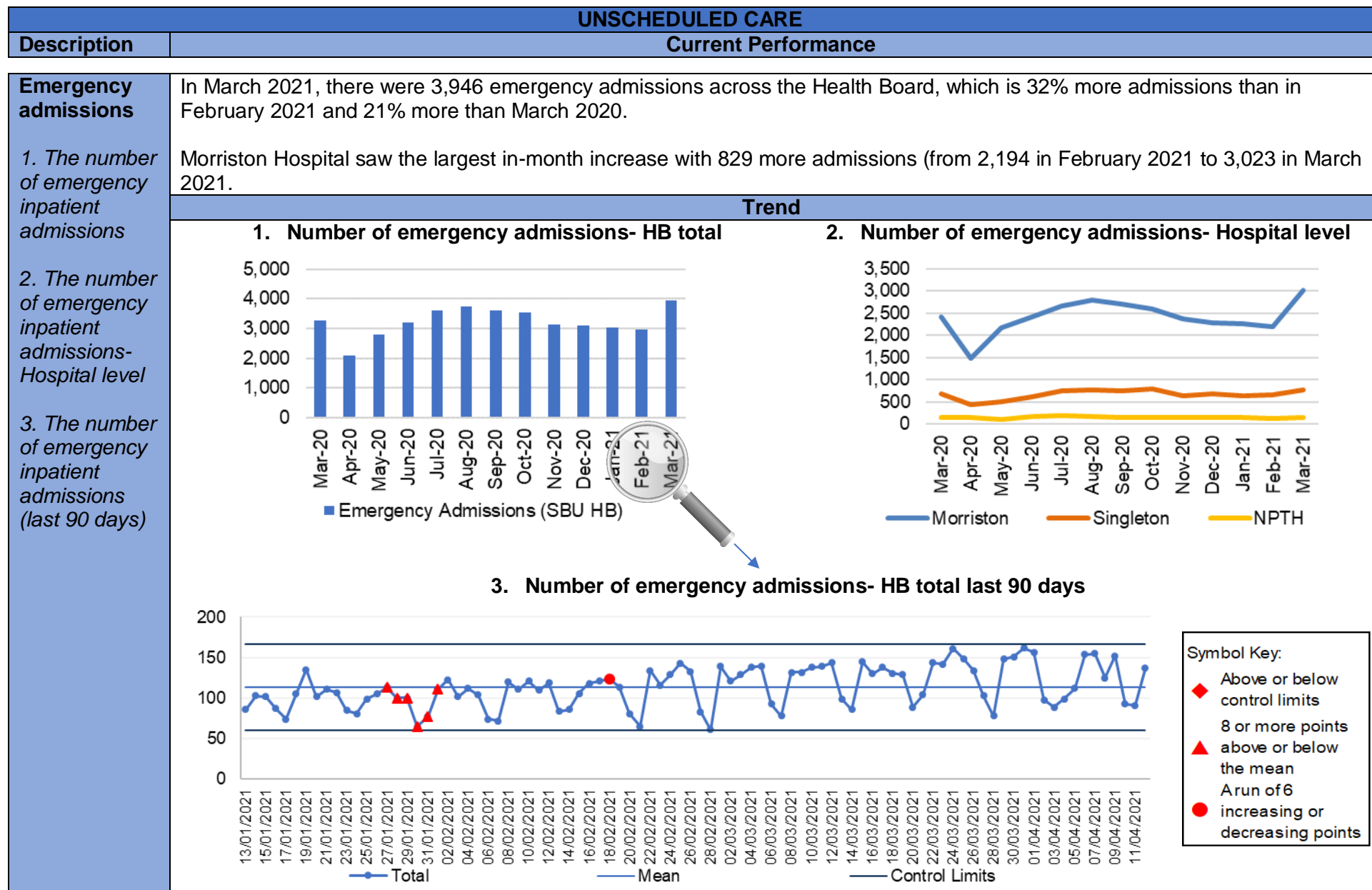


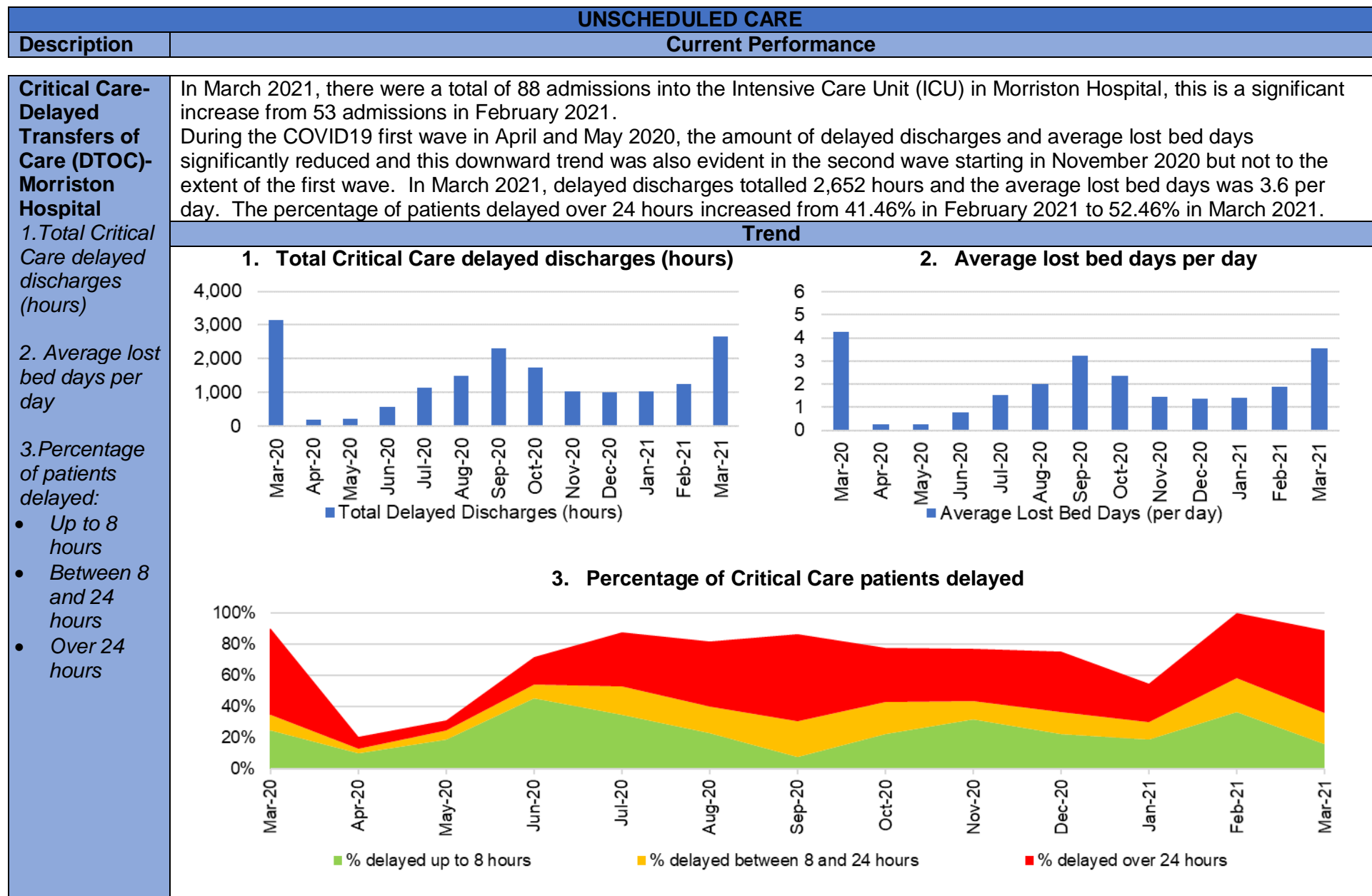








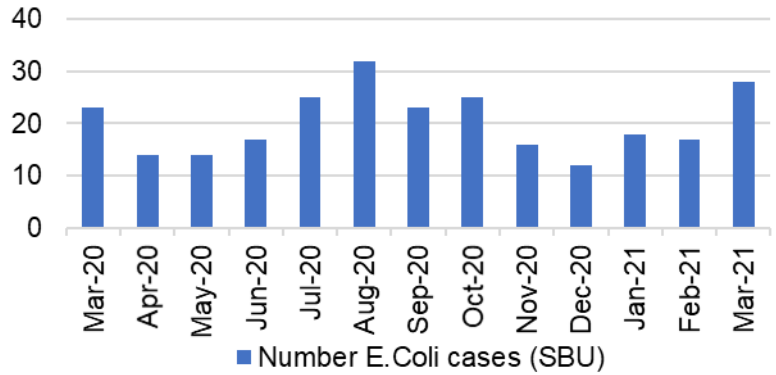
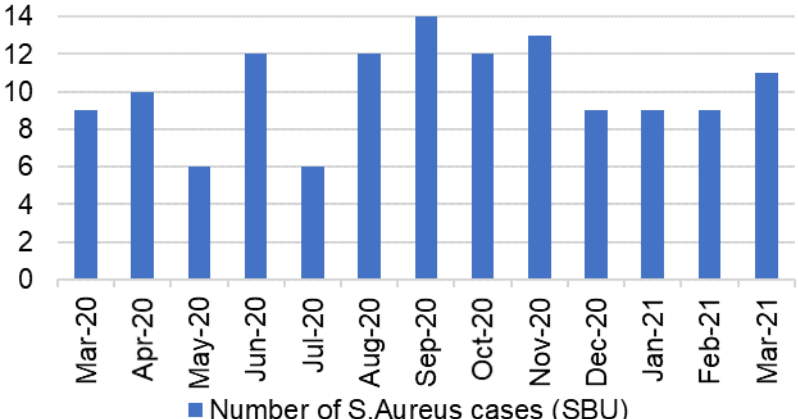




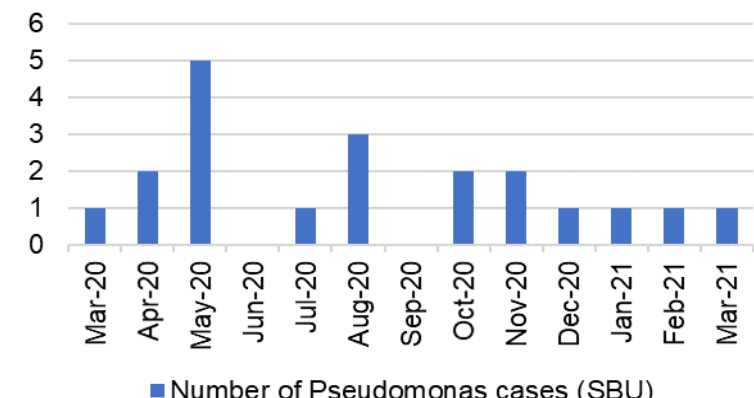
UNSCHEDULED CARE		
Description	Current Performance	Trend
Medically Fit <i>The number of patients waiting at each site in the Health Board that are deemed discharge/medically fit</i>	<p>In March 2021, there were on average 136 patients who were deemed medically/ discharge fit but were still occupying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

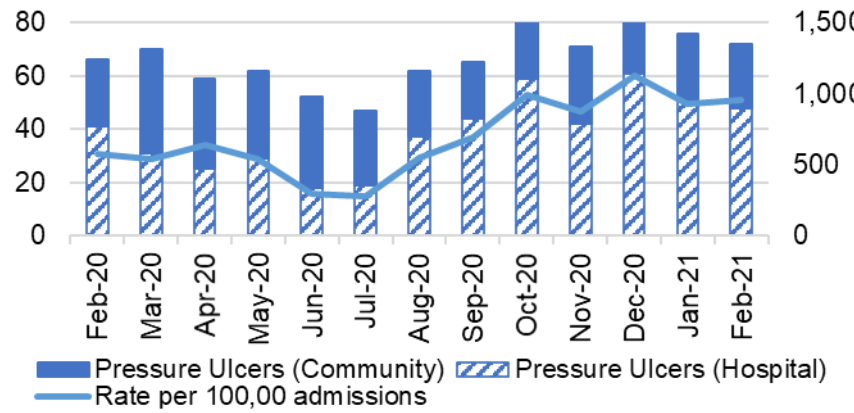
FRACTURED NECK OF FEMUR (#NOF)		
Description	Current Performance	Trend
Fractured Neck of Femur (#NOF) 1. Prompt orthogeriatric assessment- % patients receiving an assessment by a senior geriatrician within 72 hours of presentation 2. Prompt surgery - % patients undergoing surgery the day following presentation with hip fracture 3. NICE compliant surgery - % of operations consistent with the recommendations of NICE CG124 4. Prompt mobilisation after surgery - % patients out of bed (standing or hoisted) by the day after operation	1. Prompt orthogeriatric assessment- In January 2021, 86.8% of patients in Morriston hospital received an assessment by a senior geriatrician within 72 hours. This is 7.0% more than in January 2020.	1. Prompt orthogeriatric assessment
	2. Prompt surgery- In January 2021, 55.5% of patients had surgery the day following presentation with a hip fracture. This is a reduction from January 2020 which was 56.8%	2. Prompt surgery
	3. NICE compliant surgery- 70.3% of operations were consistent with the NICE recommendations in January 2021. This is 2.7% less than in January 2020. In January 2021, Morriston was below the all-Wales average of 72.3%.	3. NICE compliant Surgery
	4. Prompt mobilisation- In January 2021, 74.1% of patients were out of bed the day after surgery. This is 1.3% more than in January 2020.	4. Prompt mobilisation

FRACTURED NECK OF FEMUR (#NOF)																																																										
Description	Current Performance	Trend																																																								
5. <i>Not delirious when tested- % patients (<4 on 4AT test) when tested in the week after operation</i>	5. Not delirious when tested- 74.4% of patients were not delirious in the week after their operation in January 2021. This is an improvement of 25.8% compared with January 2020.	<p>5. Not delirious when tested</p> <table><caption>5. Not delirious when tested (Estimated Data)</caption><thead><tr><th>Month</th><th>Morriston (%)</th><th>All-Wales (%)</th><th>Eng, Wal & N. Ire (%)</th></tr></thead><tbody><tr><td>Jan-20</td><td>45</td><td>55</td><td>60</td></tr><tr><td>Feb-20</td><td>48</td><td>55</td><td>60</td></tr><tr><td>Mar-20</td><td>50</td><td>55</td><td>60</td></tr><tr><td>Apr-20</td><td>52</td><td>55</td><td>60</td></tr><tr><td>May-20</td><td>55</td><td>55</td><td>60</td></tr><tr><td>Jun-20</td><td>58</td><td>55</td><td>60</td></tr><tr><td>Jul-20</td><td>60</td><td>55</td><td>60</td></tr><tr><td>Aug-20</td><td>62</td><td>55</td><td>60</td></tr><tr><td>Sep-20</td><td>65</td><td>55</td><td>60</td></tr><tr><td>Oct-20</td><td>68</td><td>55</td><td>60</td></tr><tr><td>Nov-20</td><td>70</td><td>55</td><td>60</td></tr><tr><td>Dec-20</td><td>72</td><td>55</td><td>60</td></tr><tr><td>Jan-21</td><td>75</td><td>55</td><td>60</td></tr></tbody></table>	Month	Morriston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)	Jan-20	45	55	60	Feb-20	48	55	60	Mar-20	50	55	60	Apr-20	52	55	60	May-20	55	55	60	Jun-20	58	55	60	Jul-20	60	55	60	Aug-20	62	55	60	Sep-20	65	55	60	Oct-20	68	55	60	Nov-20	70	55	60	Dec-20	72	55	60	Jan-21	75	55	60
Month	Morriston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)																																																							
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Dec-20	72	55	60																																																							
Jan-21	75	55	60																																																							
6. <i>Return to original residence- % patients discharged back to original residence, or in that residence at 120 day follow-up</i>	6. Return to original residence- 73.7% of patients in January 2021 were discharged back to their original residence. This was above the all-Wales average of 73.6%.	<p>6. Return to original residence</p> <table><caption>6. Return to original residence (Estimated Data)</caption><thead><tr><th>Month</th><th>Morriston (%)</th><th>All-Wales (%)</th><th>Eng, Wal & N. Ire (%)</th></tr></thead><tbody><tr><td>Jan-20</td><td>75</td><td>73.6</td><td>73.6</td></tr><tr><td>Feb-20</td><td>75</td><td>73.6</td><td>73.6</td></tr><tr><td>Mar-20</td><td>75</td><td>73.6</td><td>73.6</td></tr><tr><td>Apr-20</td><td>75</td><td>73.6</td><td>73.6</td></tr><tr><td>May-20</td><td>75</td><td>73.6</td><td>73.6</td></tr><tr><td>Jun-20</td><td>75</td><td>73.6</td><td>73.6</td></tr><tr><td>Jul-20</td><td>75</td><td>73.6</td><td>73.6</td></tr><tr><td>Aug-20</td><td>75</td><td>73.6</td><td>73.6</td></tr><tr><td>Sep-20</td><td>75</td><td>73.6</td><td>73.6</td></tr><tr><td>Oct-20</td><td>75</td><td>73.6</td><td>73.6</td></tr><tr><td>Nov-20</td><td>75</td><td>73.6</td><td>73.6</td></tr><tr><td>Dec-20</td><td>75</td><td>73.6</td><td>73.6</td></tr><tr><td>Jan-21</td><td>75</td><td>73.6</td><td>73.6</td></tr></tbody></table>	Month	Morriston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)	Jan-20	75	73.6	73.6	Feb-20	75	73.6	73.6	Mar-20	75	73.6	73.6	Apr-20	75	73.6	73.6	May-20	75	73.6	73.6	Jun-20	75	73.6	73.6	Jul-20	75	73.6	73.6	Aug-20	75	73.6	73.6	Sep-20	75	73.6	73.6	Oct-20	75	73.6	73.6	Nov-20	75	73.6	73.6	Dec-20	75	73.6	73.6	Jan-21	75	73.6	73.6
Month	Morriston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)																																																							
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Dec-20	75	73.6	73.6																																																							
Jan-21	75	73.6	73.6																																																							
7. <i>30 day mortality rate</i>	7. 30 day mortality rate- In December 2020 the mortality rate for Morriston Hospital was 8.4% which is 0.3% more than December 2020. The mortality rate in Morriston Hospital in December 2020 is higher than the all-Wales average of 7.3% and higher than the national average of 8.2%.	<p>7. 30 day mortality rate</p> <table><caption>7. 30 day mortality rate (Estimated Data)</caption><thead><tr><th>Month</th><th>Morriston (%)</th><th>All-Wales (%)</th><th>Eng, Wal & N. Ire (%)</th></tr></thead><tbody><tr><td>Dec-19</td><td>8.0</td><td>7.3</td><td>7.3</td></tr><tr><td>Jan-20</td><td>8.0</td><td>7.3</td><td>7.3</td></tr><tr><td>Feb-20</td><td>8.5</td><td>7.3</td><td>7.3</td></tr><tr><td>Mar-20</td><td>8.5</td><td>7.3</td><td>7.3</td></tr><tr><td>Apr-20</td><td>8.0</td><td>7.3</td><td>7.3</td></tr><tr><td>May-20</td><td>8.0</td><td>7.3</td><td>7.3</td></tr><tr><td>Jun-20</td><td>8.0</td><td>7.3</td><td>7.3</td></tr><tr><td>Jul-20</td><td>8.0</td><td>7.3</td><td>7.3</td></tr><tr><td>Aug-20</td><td>7.5</td><td>7.3</td><td>7.3</td></tr><tr><td>Sep-20</td><td>7.5</td><td>7.3</td><td>7.3</td></tr><tr><td>Oct-20</td><td>7.5</td><td>7.3</td><td>7.3</td></tr><tr><td>Nov-20</td><td>7.5</td><td>7.3</td><td>7.3</td></tr><tr><td>Dec-20</td><td>8.4</td><td>7.3</td><td>7.3</td></tr></tbody></table>	Month	Morriston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)	Dec-19	8.0	7.3	7.3	Jan-20	8.0	7.3	7.3	Feb-20	8.5	7.3	7.3	Mar-20	8.5	7.3	7.3	Apr-20	8.0	7.3	7.3	May-20	8.0	7.3	7.3	Jun-20	8.0	7.3	7.3	Jul-20	8.0	7.3	7.3	Aug-20	7.5	7.3	7.3	Sep-20	7.5	7.3	7.3	Oct-20	7.5	7.3	7.3	Nov-20	7.5	7.3	7.3	Dec-20	8.4	7.3	7.3
Month	Morriston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)																																																							
Dec-19	8.0	7.3	7.3																																																							
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Dec-20	8.4	7.3	7.3																																																							

HEALTHCARE ACQUIRED INFECTIONS																														
Description	Current Performance	Trend																												
Healthcare Acquired Infections (HCAI) - E.coli bacteraemia- <i>Number of laboratory confirmed E.coli bacteraemia cases</i>	<ul style="list-style-type: none">• 28 cases of <i>E. coli</i> bacteraemia were identified in March 2021, of which 9 were hospital acquired and 19 were community acquired.• Cumulative cases from April 2020 to March 2021 are 24% less than the equivalent period in 2019/20.	Number of healthcare acquired E.coli bacteraemia cases  <table><caption>Number of healthcare acquired E.coli bacteraemia cases (SBU)</caption><thead><tr><th>Month</th><th>Number of cases</th></tr></thead><tbody><tr><td>Mar-20</td><td>23</td></tr><tr><td>Apr-20</td><td>14</td></tr><tr><td>May-20</td><td>14</td></tr><tr><td>Jun-20</td><td>17</td></tr><tr><td>Jul-20</td><td>25</td></tr><tr><td>Aug-20</td><td>32</td></tr><tr><td>Sep-20</td><td>23</td></tr><tr><td>Oct-20</td><td>25</td></tr><tr><td>Nov-20</td><td>16</td></tr><tr><td>Dec-20</td><td>12</td></tr><tr><td>Jan-21</td><td>18</td></tr><tr><td>Feb-21</td><td>17</td></tr><tr><td>Mar-21</td><td>28</td></tr></tbody></table>	Month	Number of cases	Mar-20	23	Apr-20	14	May-20	14	Jun-20	17	Jul-20	25	Aug-20	32	Sep-20	23	Oct-20	25	Nov-20	16	Dec-20	12	Jan-21	18	Feb-21	17	Mar-21	28
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Dec-20	12																													
Jan-21	18																													
Feb-21	17																													
Mar-21	28																													
Healthcare Acquired Infections (HCAI)- S.aureus bacteraemia- <i>Number of laboratory confirmed S.aureus bacteraemias (MRSA & MSSA) cases</i>	<ul style="list-style-type: none">• There were 11 cases of Staph. aureus bacteraemia in March 2021, of which 4 were hospital acquired and 7 were community acquired.• Cumulative cases from April 2020 to March 2021 are 8% less than the equivalent period in 2019/20.	Number of healthcare acquired S.aureus bacteraemia cases  <table><caption>Number of healthcare acquired S.aureus bacteraemia cases (SBU)</caption><thead><tr><th>Month</th><th>Number of cases</th></tr></thead><tbody><tr><td>Mar-20</td><td>9</td></tr><tr><td>Apr-20</td><td>10</td></tr><tr><td>May-20</td><td>6</td></tr><tr><td>Jun-20</td><td>12</td></tr><tr><td>Jul-20</td><td>6</td></tr><tr><td>Aug-20</td><td>12</td></tr><tr><td>Sep-20</td><td>14</td></tr><tr><td>Oct-20</td><td>12</td></tr><tr><td>Nov-20</td><td>13</td></tr><tr><td>Dec-20</td><td>9</td></tr><tr><td>Jan-21</td><td>9</td></tr><tr><td>Feb-21</td><td>9</td></tr><tr><td>Mar-21</td><td>11</td></tr></tbody></table>	Month	Number of cases	Mar-20	9	Apr-20	10	May-20	6	Jun-20	12	Jul-20	6	Aug-20	12	Sep-20	14	Oct-20	12	Nov-20	13	Dec-20	9	Jan-21	9	Feb-21	9	Mar-21	11
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HEALTHCARE ACQUIRED INFECTIONS																														
Description	Current Performance	Trend																												
Healthcare Acquired Infections (HCAI)- C.difficile- <i>Number of laboratory confirmed C.difficile cases</i>	<ul style="list-style-type: none">There were 12 <i>Clostridium difficile</i> toxin positive cases in March 2021, of which 7 were hospital acquired and 5 were community acquired.Cumulative cases from April 2020 to March 2021 are 15% more than the equivalent period of 2019/20 (159 in 2020/21 compared with 138 in 2019/20).	<p>Number of healthcare acquired C.difficile cases</p> <table><thead><tr><th>Month</th><th>Number of C.diff cases (SBU)</th></tr></thead><tbody><tr><td>Mar-20</td><td>8</td></tr><tr><td>Apr-20</td><td>11</td></tr><tr><td>May-20</td><td>16</td></tr><tr><td>Jun-20</td><td>20</td></tr><tr><td>Jul-20</td><td>11</td></tr><tr><td>Aug-20</td><td>23</td></tr><tr><td>Sep-20</td><td>18</td></tr><tr><td>Oct-20</td><td>15</td></tr><tr><td>Nov-20</td><td>10</td></tr><tr><td>Dec-20</td><td>9</td></tr><tr><td>Jan-21</td><td>3</td></tr><tr><td>Feb-21</td><td>11</td></tr><tr><td>Mar-21</td><td>12</td></tr></tbody></table> <p>■ Number of C.diff cases (SBU)</p>	Month	Number of C.diff cases (SBU)	Mar-20	8	Apr-20	11	May-20	16	Jun-20	20	Jul-20	11	Aug-20	23	Sep-20	18	Oct-20	15	Nov-20	10	Dec-20	9	Jan-21	3	Feb-21	11	Mar-21	12
Month	Number of C.diff cases (SBU)																													
Mar-20	8																													
Apr-20	11																													
May-20	16																													
Jun-20	20																													
Jul-20	11																													
Aug-20	23																													
Sep-20	18																													
Oct-20	15																													
Nov-20	10																													
Dec-20	9																													
Jan-21	3																													
Feb-21	11																													
Mar-21	12																													
Healthcare Acquired Infections (HCAI)- Klebsiella sp- <i>Number of laboratory confirmed Klebsiella sp cases</i>	<ul style="list-style-type: none">There were 10 cases of Klebsiella sp in March 2021, of which 1 was hospital acquired and 9 were community acquired.Cumulative cases from April 2020 to March 2021 are 24% more than the equivalent period in 2019/20 (102 in 2020/21 compared with 82 in 2019/20).	<p>Number of healthcare acquired Klebsiella cases</p> <table><thead><tr><th>Month</th><th>Number of Klebsiella cases (SBU)</th></tr></thead><tbody><tr><td>Mar-20</td><td>7</td></tr><tr><td>Apr-20</td><td>6</td></tr><tr><td>May-20</td><td>6</td></tr><tr><td>Jun-20</td><td>9</td></tr><tr><td>Jul-20</td><td>5</td></tr><tr><td>Aug-20</td><td>10</td></tr><tr><td>Sep-20</td><td>5</td></tr><tr><td>Oct-20</td><td>9</td></tr><tr><td>Nov-20</td><td>11</td></tr><tr><td>Dec-20</td><td>12</td></tr><tr><td>Jan-21</td><td>13</td></tr><tr><td>Feb-21</td><td>6</td></tr><tr><td>Mar-21</td><td>10</td></tr></tbody></table> <p>■ Number of Klebsiella cases (SBU)</p>	Month	Number of Klebsiella cases (SBU)	Mar-20	7	Apr-20	6	May-20	6	Jun-20	9	Jul-20	5	Aug-20	10	Sep-20	5	Oct-20	9	Nov-20	11	Dec-20	12	Jan-21	13	Feb-21	6	Mar-21	10
Month	Number of Klebsiella cases (SBU)																													
Mar-20	7																													
Apr-20	6																													
May-20	6																													
Jun-20	9																													
Jul-20	5																													
Aug-20	10																													
Sep-20	5																													
Oct-20	9																													
Nov-20	11																													
Dec-20	12																													
Jan-21	13																													
Feb-21	6																													
Mar-21	10																													

HEALTHCARE ACQUIRED INFECTIONS		
Description	Current Performance	Trend
Healthcare Acquired Infections (HCAI)- Aeruginosa- <i>Number of laboratory confirmed Aeruginosa cases</i>	<ul style="list-style-type: none"> There was 1 hospital acquired case of <i>P.Aeruginosa</i> bacteraemia in March 2021. Cumulative cases from April 2020 to February 2021 are 32% less than the equivalent period in 2019/20. 	Number of healthcare acquired Pseudomonas cases  <p>■ Number of Pseudomonas cases (SBU)</p>

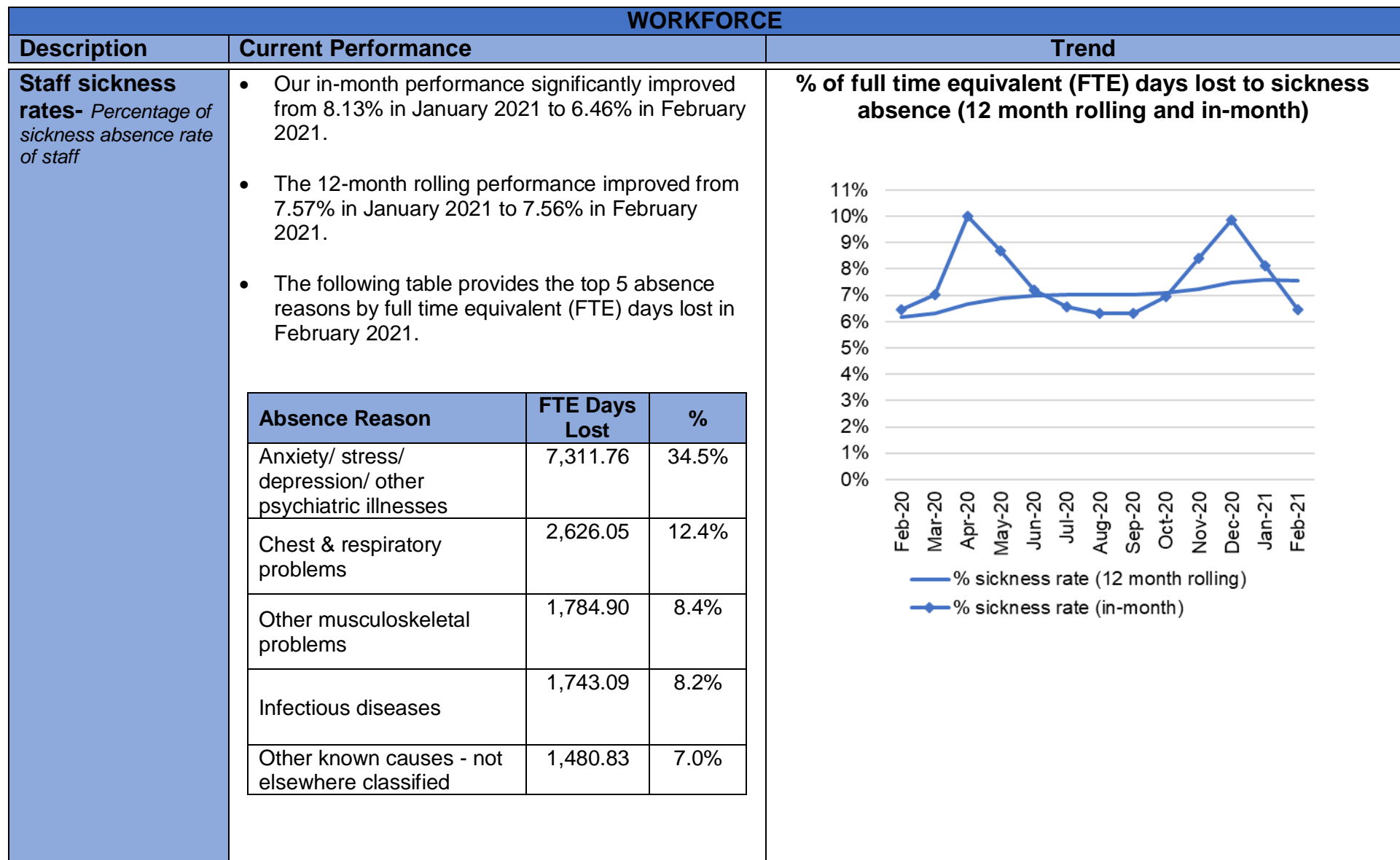
PRESSURE ULCERS		
Description	Current Performance	Trend
Number of pressure ulcers 1. <i>Total number of pressure ulcers developed in hospital and in the community</i> 2. <i>Rate of pressure ulcers per 100,000 admissions</i>	<ol style="list-style-type: none"> In February 2021 there were 72 cases of healthcare acquired pressure ulcers, of which 24 were community acquired and 24 were hospital acquired. There were 7 grade 3+ pressure ulcers in February 2021, of which 4 were community acquired and 3 were hospital acquired. The rate per 100,000 admissions increased from 948 in January 2021 to 951 in February 2021. 	Total number of hospital and community acquired Pressure Ulcers (PU) and rate per 100,000 admissions  <p>■ Pressure Ulcers (Community) ■ Pressure Ulcers (Hospital) — Rate per 100,00 admissions</p>

SERIOUS INCIDENTS																																												
Description	Current Performance	Trend																																										
Serious Incidents- <i>1. The number of serious incidents</i> <i>2. The number of Never Events</i> <i>3. Of the serious incidents due for assurance, the percentage which were assured within the agreed timescales</i>	<p>1. The Health Board reported 4 Serious Incidents for the month of March 2021 to Welsh Government. The breakdown of incidents in March 2021 are set out below:</p> <ul style="list-style-type: none">• 2 in Morriston Hospital• 1 in Primary, Community and Therapy Services• 1 in Mental Health and Learning Disabilities	<p>1. and 2. Number of serious incidents and never events</p> <table><caption>1. and 2. Number of serious incidents and never events</caption><thead><tr><th>Month</th><th>Number of Serious Incidents</th><th>Number of never events</th></tr></thead><tbody><tr><td>Mar-20</td><td>20</td><td>0</td></tr><tr><td>Apr-20</td><td>9</td><td>0</td></tr><tr><td>May-20</td><td>6</td><td>0</td></tr><tr><td>Jun-20</td><td>9</td><td>0</td></tr><tr><td>Jul-20</td><td>10</td><td>0</td></tr><tr><td>Aug-20</td><td>6</td><td>0</td></tr><tr><td>Sep-20</td><td>21</td><td>0</td></tr><tr><td>Oct-20</td><td>15</td><td>0</td></tr><tr><td>Nov-20</td><td>18</td><td>0</td></tr><tr><td>Dec-20</td><td>12</td><td>0</td></tr><tr><td>Jan-21</td><td>4</td><td>0</td></tr><tr><td>Feb-21</td><td>5</td><td>0</td></tr><tr><td>Mar-21</td><td>4</td><td>0</td></tr></tbody></table>	Month	Number of Serious Incidents	Number of never events	Mar-20	20	0	Apr-20	9	0	May-20	6	0	Jun-20	9	0	Jul-20	10	0	Aug-20	6	0	Sep-20	21	0	Oct-20	15	0	Nov-20	18	0	Dec-20	12	0	Jan-21	4	0	Feb-21	5	0	Mar-21	4	0
	Month	Number of Serious Incidents	Number of never events																																									
	Mar-20	20	0																																									
Apr-20	9	0																																										
May-20	6	0																																										
Jun-20	9	0																																										
Jul-20	10	0																																										
Aug-20	6	0																																										
Sep-20	21	0																																										
Oct-20	15	0																																										
Nov-20	18	0																																										
Dec-20	12	0																																										
Jan-21	4	0																																										
Feb-21	5	0																																										
Mar-21	4	0																																										
<p>2. There was no new Never Event reported in March 2021.</p>																																												
<p>3. In March 2021, performance against the 80% target of submitting closure forms within 60 working days was 0% as none of the eleven closure forms due to be submitted to Welsh Government in February 2021 were submitted on time. Below is a breakdown of the eleven outstanding forms:</p> <ul style="list-style-type: none">• 7 in Mental Health and Learning Disabilities• 3 in Singleton Hospital• 1 in Morriston Hospital	<p>3. % of serious incidents closed within 60 days</p> <table><caption>3. % of serious incidents closed within 60 days</caption><thead><tr><th>Month</th><th>% Serious Incidents assured</th><th>Profile</th></tr></thead><tbody><tr><td>Mar-20</td><td>30%</td><td>80%</td></tr><tr><td>Apr-20</td><td>8%</td><td>80%</td></tr><tr><td>May-20</td><td>28%</td><td>80%</td></tr><tr><td>Jun-20</td><td>0%</td><td>80%</td></tr><tr><td>Jul-20</td><td>0%</td><td>80%</td></tr><tr><td>Aug-20</td><td>50%</td><td>80%</td></tr><tr><td>Sep-20</td><td>20%</td><td>80%</td></tr><tr><td>Oct-20</td><td>0%</td><td>80%</td></tr><tr><td>Nov-20</td><td>0%</td><td>80%</td></tr><tr><td>Dec-20</td><td>5%</td><td>80%</td></tr><tr><td>Jan-21</td><td>0%</td><td>80%</td></tr><tr><td>Feb-21</td><td>10%</td><td>80%</td></tr><tr><td>Mar-21</td><td>0%</td><td>80%</td></tr></tbody></table> <p>* 0% compliance in June, July, October and November 2020 and January and March 2021</p>	Month	% Serious Incidents assured	Profile	Mar-20	30%	80%	Apr-20	8%	80%	May-20	28%	80%	Jun-20	0%	80%	Jul-20	0%	80%	Aug-20	50%	80%	Sep-20	20%	80%	Oct-20	0%	80%	Nov-20	0%	80%	Dec-20	5%	80%	Jan-21	0%	80%	Feb-21	10%	80%	Mar-21	0%	80%	
Month	% Serious Incidents assured	Profile																																										
Mar-20	30%	80%																																										
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Aug-20	50%	80%																																										
Sep-20	20%	80%																																										
Oct-20	0%	80%																																										
Nov-20	0%	80%																																										
Dec-20	5%	80%																																										
Jan-21	0%	80%																																										
Feb-21	10%	80%																																										
Mar-21	0%	80%																																										

INPATIENT FALLS																														
Description	Current Performance	Trend																												
Inpatient Falls <i>The total number of inpatient falls</i>	<ul style="list-style-type: none">The number of Falls reported via Datix web for Swansea Bay UHB was 171 in March 2021. This is 19% less than March 2020 where 210 falls were recorded.The Health Board has agreed a targeted action to reduce Falls by 10%.	<p>Number of inpatient Falls</p> <table><thead><tr><th>Month</th><th>Inpatient Falls (SBU HB)</th></tr></thead><tbody><tr><td>Mar-20</td><td>210</td></tr><tr><td>Apr-20</td><td>190</td></tr><tr><td>May-20</td><td>200</td></tr><tr><td>Jun-20</td><td>190</td></tr><tr><td>Jul-20</td><td>200</td></tr><tr><td>Aug-20</td><td>220</td></tr><tr><td>Sep-20</td><td>210</td></tr><tr><td>Oct-20</td><td>180</td></tr><tr><td>Nov-20</td><td>240</td></tr><tr><td>Dec-20</td><td>240</td></tr><tr><td>Jan-21</td><td>200</td></tr><tr><td>Feb-21</td><td>170</td></tr><tr><td>Mar-21</td><td>171</td></tr></tbody></table> <p>■ Inpatient Falls (SBU HB) — 10% reduction profile</p>	Month	Inpatient Falls (SBU HB)	Mar-20	210	Apr-20	190	May-20	200	Jun-20	190	Jul-20	200	Aug-20	220	Sep-20	210	Oct-20	180	Nov-20	240	Dec-20	240	Jan-21	200	Feb-21	170	Mar-21	171
Month	Inpatient Falls (SBU HB)																													
Mar-20	210																													
Apr-20	190																													
May-20	200																													
Jun-20	190																													
Jul-20	200																													
Aug-20	220																													
Sep-20	210																													
Oct-20	180																													
Nov-20	240																													
Dec-20	240																													
Jan-21	200																													
Feb-21	170																													
Mar-21	171																													

DISCHARGE SUMMARIES																														
Description	Current Performance	Trend																												
Discharge Summaries <i>Percentage of discharge summaries approved and sent to patients' doctor following discharge</i>	<p>The latest data shows that in March 2021, the percentage of completed discharge summaries was 64%.</p> <p>In March 2021, compliance ranged from 59% in Singleton Hospital to 84% in Mental Health & Learning Disabilities.</p>	<p>% discharge summaries approved and sent</p> <table><thead><tr><th>Month</th><th>% of completed discharge summaries</th></tr></thead><tbody><tr><td>Mar-20</td><td>68%</td></tr><tr><td>Apr-20</td><td>60%</td></tr><tr><td>May-20</td><td>62%</td></tr><tr><td>Jun-20</td><td>65%</td></tr><tr><td>Jul-20</td><td>62%</td></tr><tr><td>Aug-20</td><td>65%</td></tr><tr><td>Sep-20</td><td>68%</td></tr><tr><td>Oct-20</td><td>65%</td></tr><tr><td>Nov-20</td><td>65%</td></tr><tr><td>Dec-20</td><td>58%</td></tr><tr><td>Jan-21</td><td>65%</td></tr><tr><td>Feb-21</td><td>62%</td></tr><tr><td>Mar-21</td><td>64%</td></tr></tbody></table> <p>■ % of completed discharge summaries</p>	Month	% of completed discharge summaries	Mar-20	68%	Apr-20	60%	May-20	62%	Jun-20	65%	Jul-20	62%	Aug-20	65%	Sep-20	68%	Oct-20	65%	Nov-20	65%	Dec-20	58%	Jan-21	65%	Feb-21	62%	Mar-21	64%
Month	% of completed discharge summaries																													
Mar-20	68%																													
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Jan-21	65%																													
Feb-21	62%																													
Mar-21	64%																													

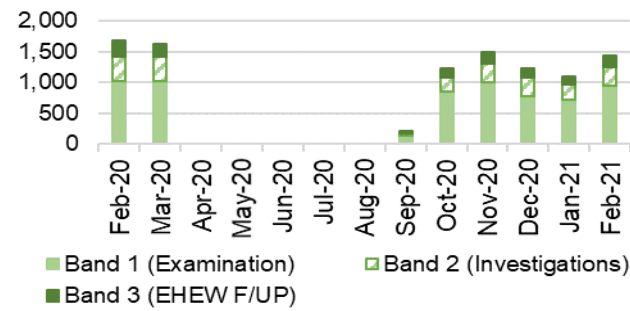
CRUDE MORTALITY																																																																								
Description	Current Performance	Trend																																																																						
Crude Mortality Rate	February 2021 reports the crude mortality rate for the Health Board at 1.24% compared with 1.14% in February 2021.	Crude hospital mortality rate by Hospital (74 years of age or less) <table><thead><tr><th>Month</th><th>Morriston Hospital</th><th>Singleton Hospital</th><th>NPT Hospital</th><th>HB Total</th></tr></thead><tbody><tr><td>Feb-20</td><td>1.3%</td><td>0.5%</td><td>0.2%</td><td>0.7%</td></tr><tr><td>Mar-20</td><td>1.3%</td><td>0.5%</td><td>0.2%</td><td>0.8%</td></tr><tr><td>Apr-20</td><td>1.4%</td><td>0.5%</td><td>0.2%</td><td>0.9%</td></tr><tr><td>May-20</td><td>1.5%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr><tr><td>Jun-20</td><td>1.5%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr><tr><td>Jul-20</td><td>1.6%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr><tr><td>Aug-20</td><td>1.6%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr><tr><td>Sep-20</td><td>1.6%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr><tr><td>Oct-20</td><td>1.7%</td><td>0.5%</td><td>0.2%</td><td>1.1%</td></tr><tr><td>Nov-20</td><td>1.8%</td><td>0.5%</td><td>0.2%</td><td>1.1%</td></tr><tr><td>Dec-20</td><td>1.9%</td><td>0.5%</td><td>0.2%</td><td>1.2%</td></tr><tr><td>Jan-21</td><td>2.0%</td><td>0.5%</td><td>0.2%</td><td>1.2%</td></tr><tr><td>Feb-21</td><td>2.1%</td><td>0.5%</td><td>0.2%</td><td>1.3%</td></tr></tbody></table>	Month	Morriston Hospital	Singleton Hospital	NPT Hospital	HB Total	Feb-20	1.3%	0.5%	0.2%	0.7%	Mar-20	1.3%	0.5%	0.2%	0.8%	Apr-20	1.4%	0.5%	0.2%	0.9%	May-20	1.5%	0.5%	0.2%	1.0%	Jun-20	1.5%	0.5%	0.2%	1.0%	Jul-20	1.6%	0.5%	0.2%	1.0%	Aug-20	1.6%	0.5%	0.2%	1.0%	Sep-20	1.6%	0.5%	0.2%	1.0%	Oct-20	1.7%	0.5%	0.2%	1.1%	Nov-20	1.8%	0.5%	0.2%	1.1%	Dec-20	1.9%	0.5%	0.2%	1.2%	Jan-21	2.0%	0.5%	0.2%	1.2%	Feb-21	2.1%	0.5%	0.2%	1.3%
	Month		Morriston Hospital	Singleton Hospital	NPT Hospital	HB Total																																																																		
Feb-20	1.3%	0.5%	0.2%	0.7%																																																																				
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Dec-20	1.9%	0.5%	0.2%	1.2%																																																																				
Jan-21	2.0%	0.5%	0.2%	1.2%																																																																				
Feb-21	2.1%	0.5%	0.2%	1.3%																																																																				
	A breakdown by Hospital for December 2020: <ul style="list-style-type: none">• Morriston – 2.05%• Singleton – 0.57%• NPT – 0.18%																																																																							



HARM FROM REDUCTION IN NON-COVID ACTIVITY

6.1 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 5: Number and percentage of adult dental patients re-attending NHS Primary Dental Care between 6-9 months

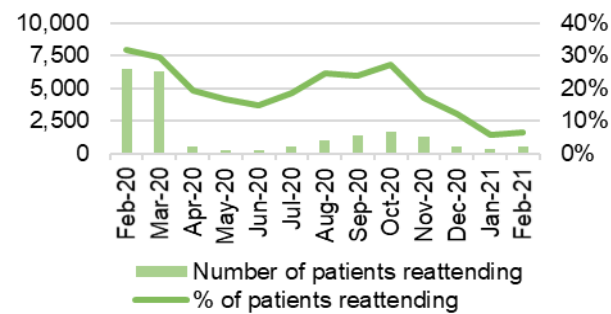


Chart 9: District Nursing- Number of patients on caseload

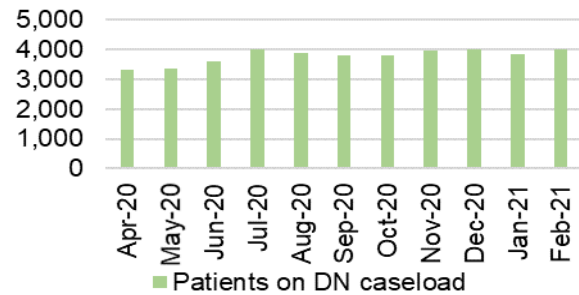


Chart 13: % of patients with a RTT (referral to stage 1) of 26 weeks or less for Restorative Dentistry

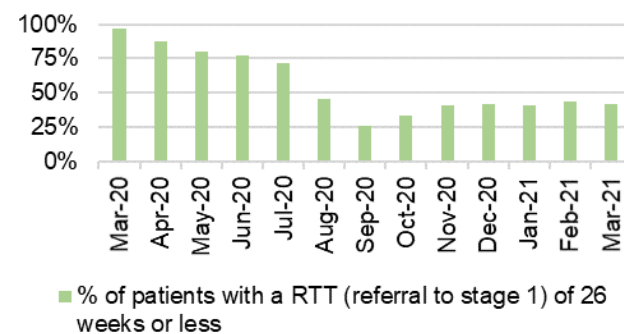


Chart 2: Common Ailment Scheme - Number of consultations provided

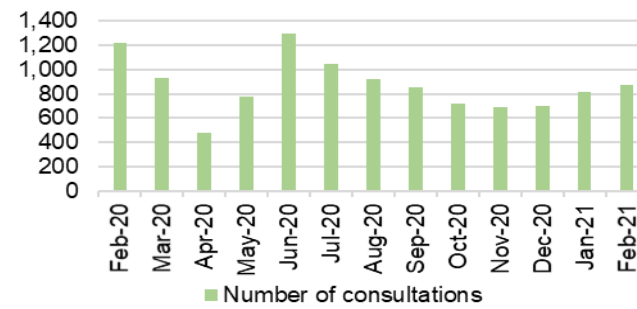


Chart 6: Pregnancy Advisory Service- Referral to appointment within 5 days and treatment within 10 days

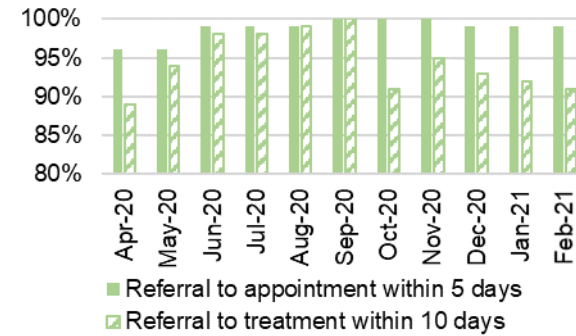


Chart 10: District Nursing- Total number of contacts

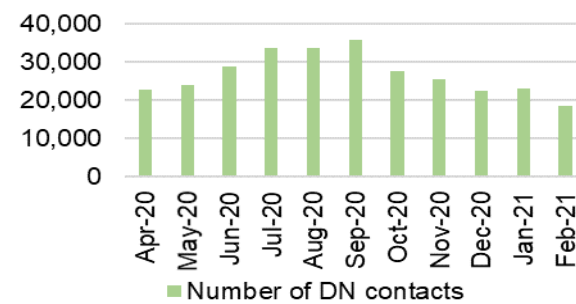
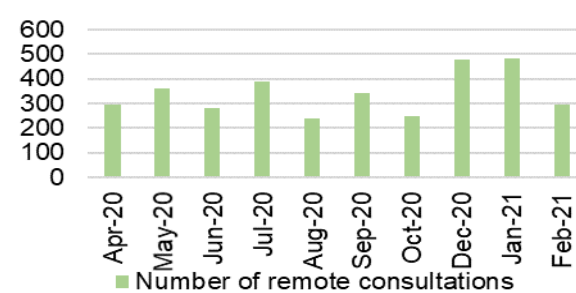


Chart 14: Audiology- Number of remote consultations



Nov-20 data not available

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

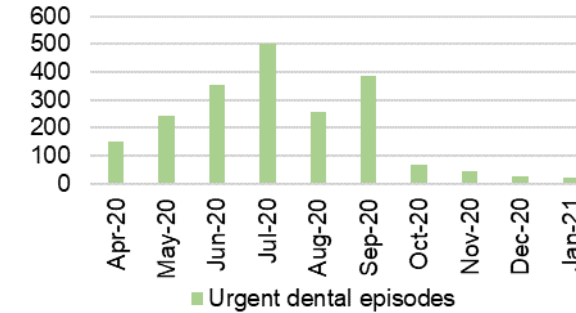


Chart 7: Sexual health services- Attendances at sexual health ambulance

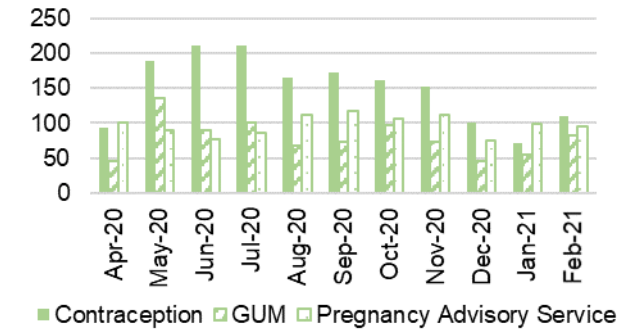


Chart 11: Community wound clinic- Number of attendances and number of home visits

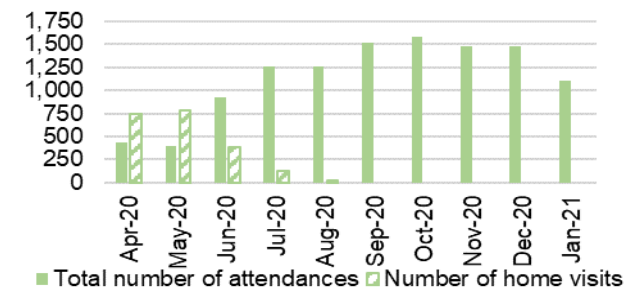
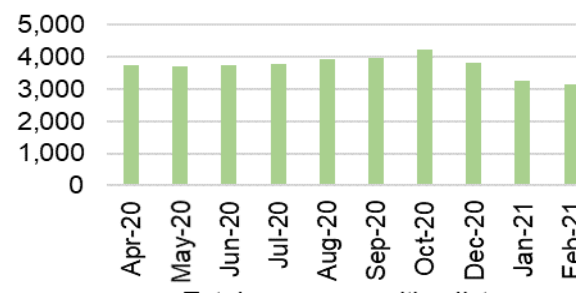


Chart 15: Audiology- Total number of patients on the waiting list



Nov-20 data not available

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

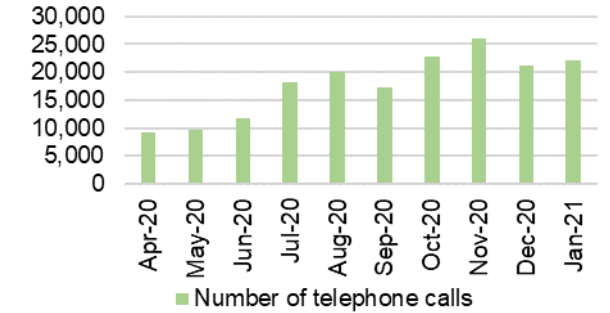


Chart 8: Sexual health services- Patient outcomes

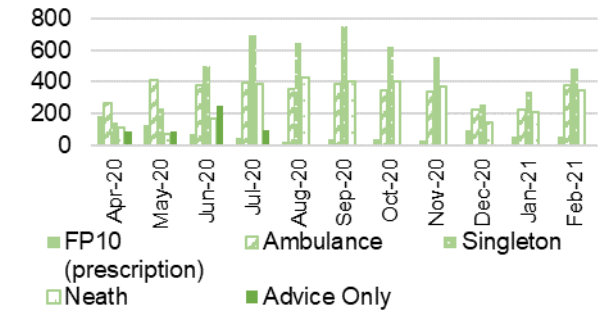


Chart 12: Community wound clinic- Number of assessments by location

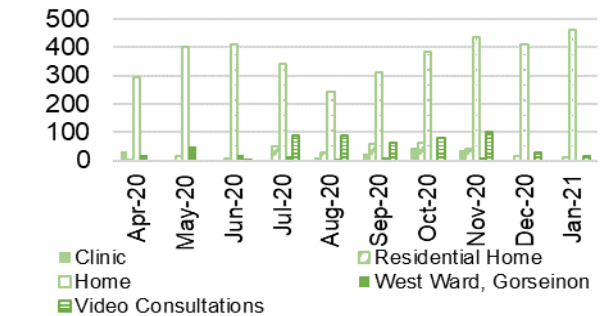
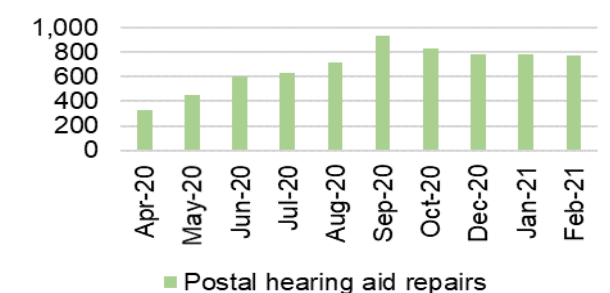


Chart 16: Audiology- Number of postal hearing aid repairs



Nov-20 data not available

Harm from reduction in non-Covid activity

6.2 Planned Care Overview

Chart 1: Number of GP Referrals into secondary care

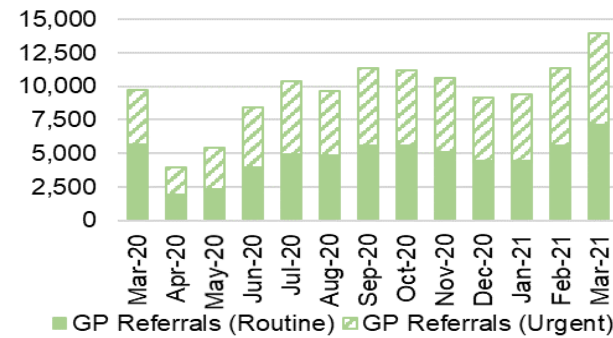


Chart 2: Number of patients waiting over 26 weeks for an outpatient appointment

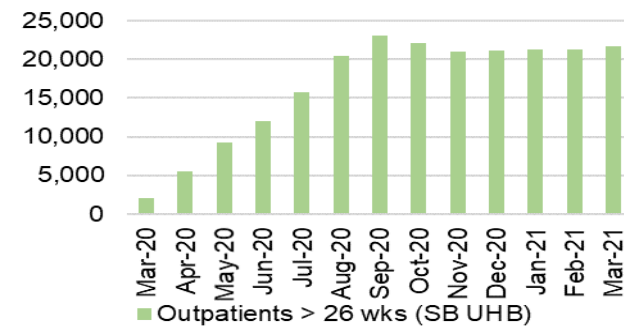


Chart 3: Number of patients waiting over 36 weeks for treatment

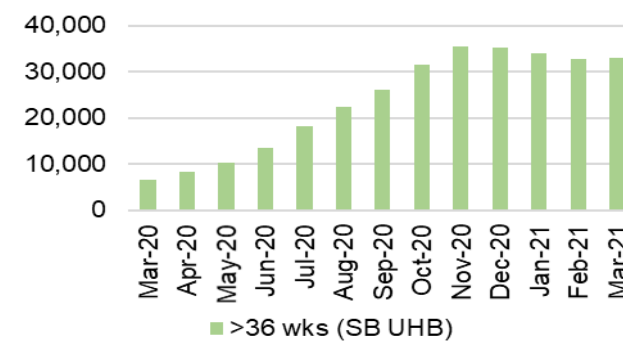


Chart 4: % patients waiting less than 26 weeks from referral to treatment

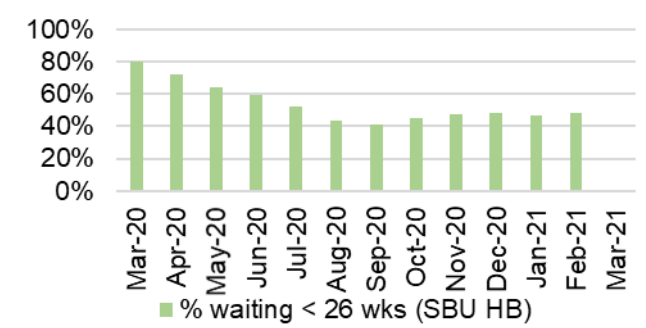


Chart 5: Number of patients waiting for reportable diagnostics over 8 weeks

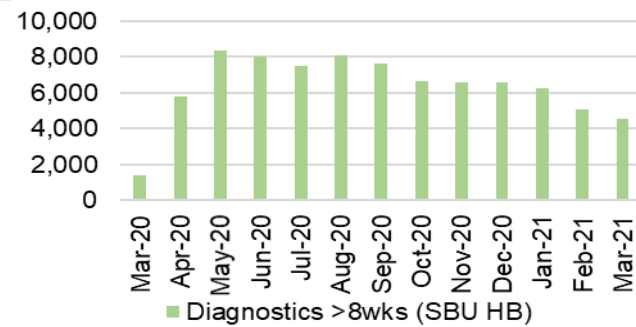


Chart 6: Number of patients waiting for reportable Cardiac diagnostics over 8 weeks

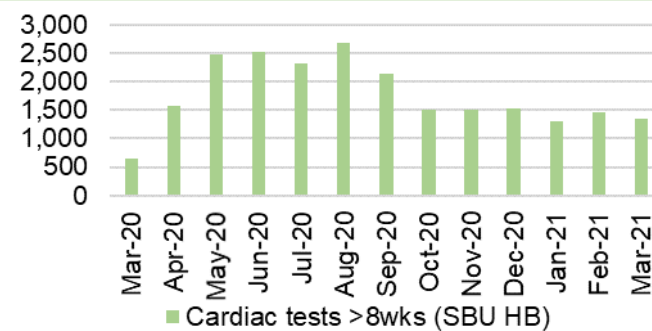


Chart 7: Number of patients waiting less than 14 weeks for Therapies

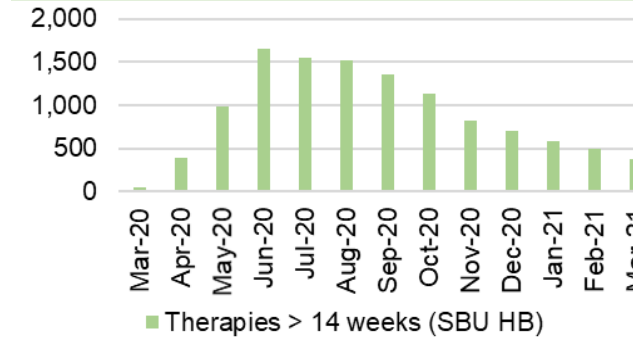


Chart 8: Cancer referrals

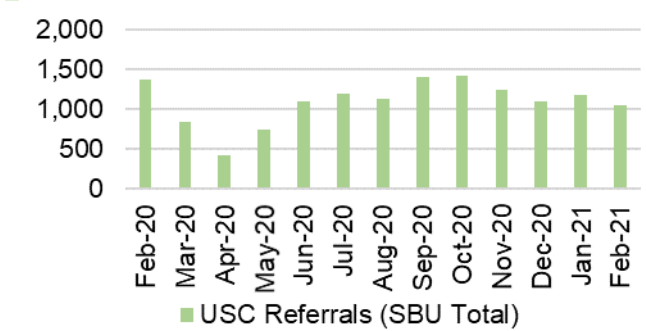


Chart 9: Single Cancer Pathway- % of patients starting definitive treatment within 62 days from point of suspicion

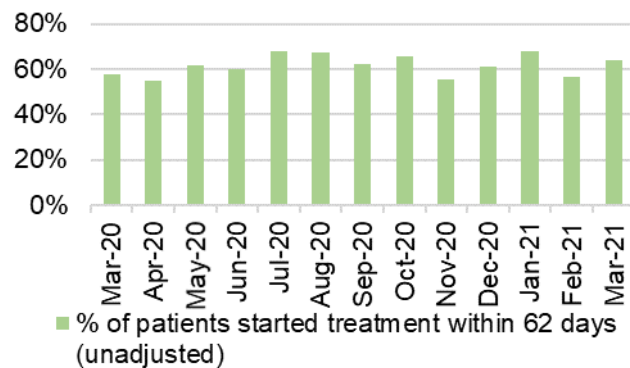


Chart 10: Number of new cancer patients starting definitive treatment

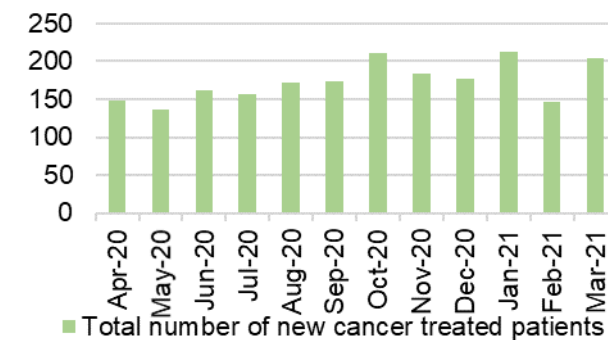


Chart 11: Single Cancer Pathway backlog- patients waiting over 63 days

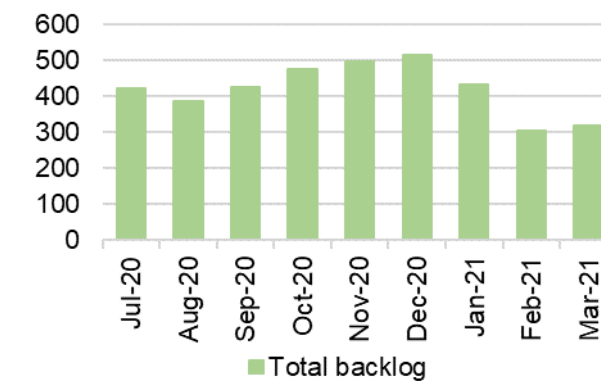


Chart 12: Number of patients waiting for an outpatient follow-up who are delayed past their target date

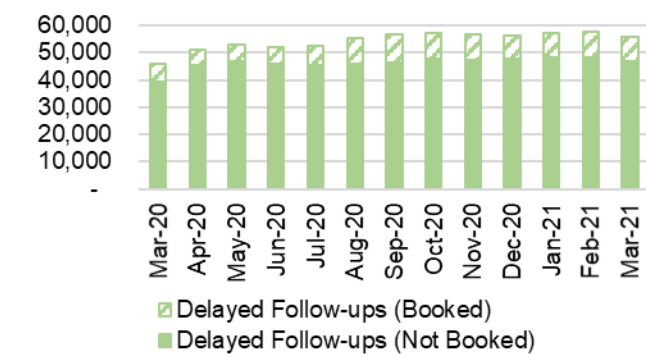


Chart 13: Number of patients without a documented clinical review date

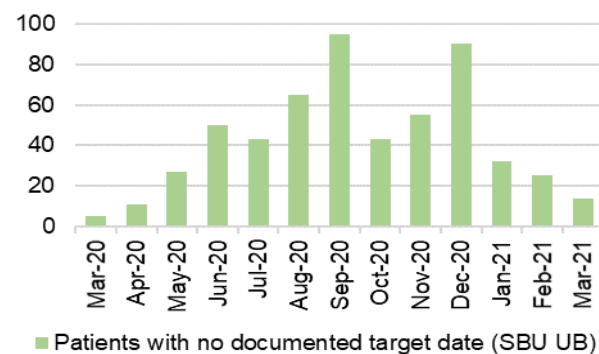


Chart 14: Ophthalmology patients without an allocated health risk factor

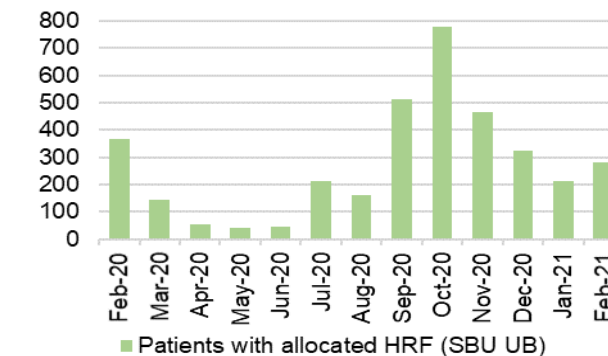


Chart 15: Total number of patients on the follow-up waiting list

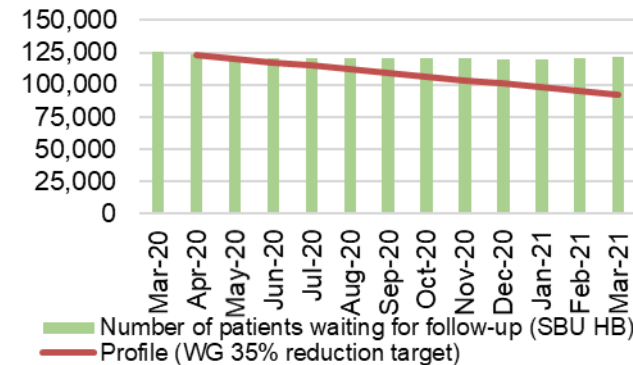
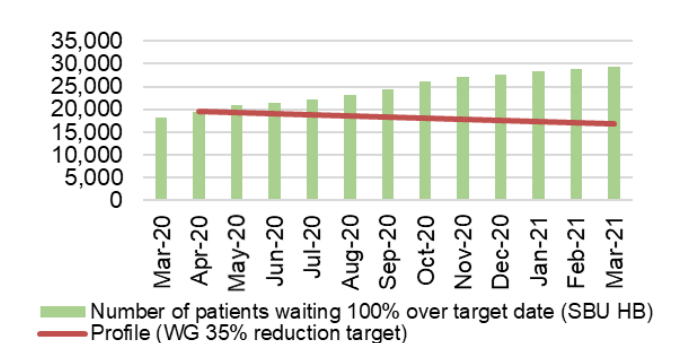


Chart 16: Number of patients delayed by over 100%



Planned Care- Overview (March 2021)

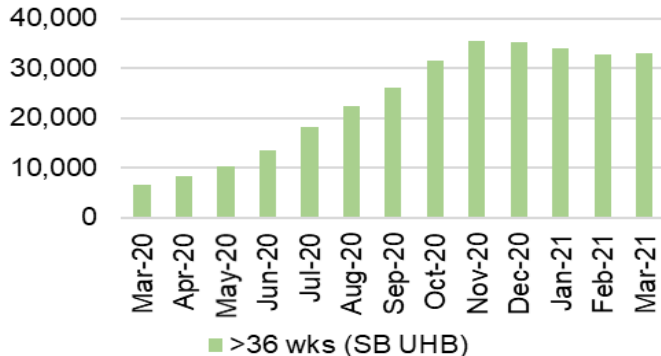
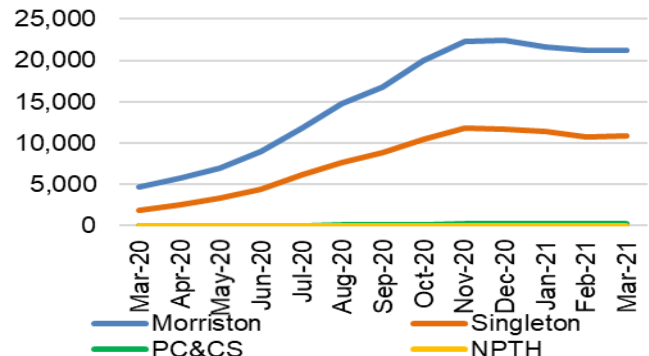
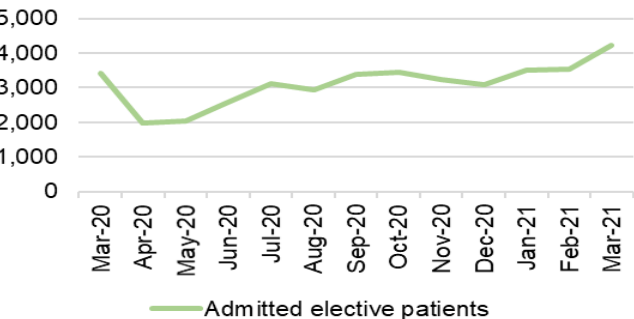
Demand		Waiting Times	
13,964 (23%↑) Total GP referrals	21,750 (2%↑) Patients waiting over 26 weeks for a new outpatient appointment	32,874 (0.5%↑) Patients waiting over 36 weeks for treatment	27,226 (8%↑) Patients waiting over 52 weeks for treatment
7,132 (27%↑) Routine GP referrals	48.8% (0.9%↑) Patients waiting under 26 weeks from referral to treatment	4,554 (10%↓) Patients waiting over 8 weeks for all reportable diagnostics	1,342 (7.7%↓) Patients waiting over 8 weeks for Cardiac diagnostics only
6,832 (18%↑) Urgent GP referrals	369 (25%↓) Patients waiting over 14 weeks for reportable therapies	121,403 (0.4%↑) Patients waiting for a follow-up outpatient appointment	29,316 (1.6%↑) Patients waiting for a follow-up outpatients appointment who are delayed over 100%
Cancer		Theatre Efficiencies	
1,041 (11.7%↓) Number of USC referrals received	320 (4.9%↑) USC backlog over 63 days	75% (2%↑) Theatre utilisation rate	48% (4%↑) % of theatres sessions finishing early
64% (7.6%↑) draft Patients starting first definitive cancer treatment within 62 days		40% (1%↓) % of theatres sessions starting late	169 (35%↑) Operations cancelled on the day

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

6.3 Updates on key measures

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

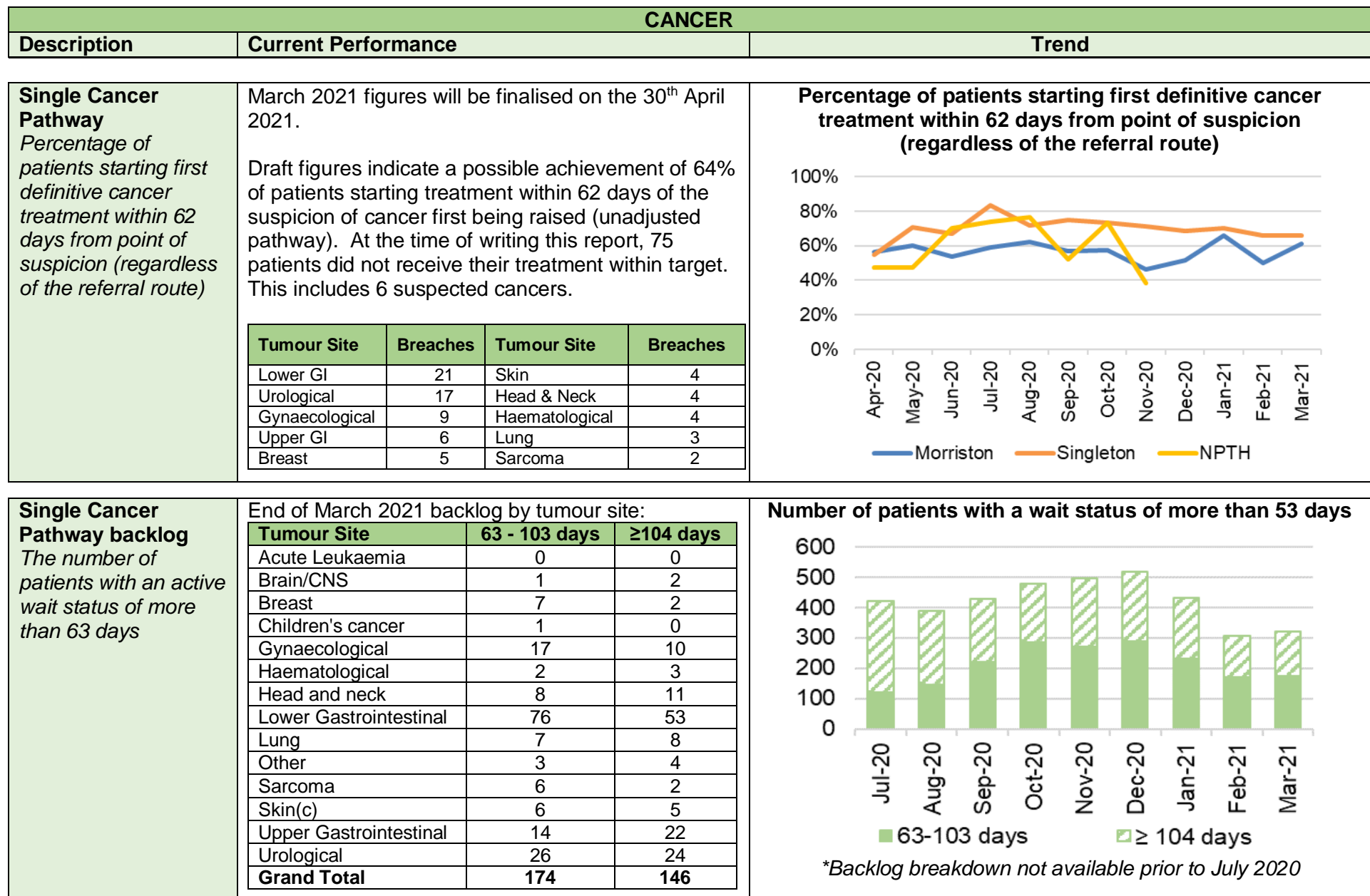
PLANNED CARE	
Description	Current Performance
Outpatient waiting times 1. Number of patients waiting more than 26 weeks for an outpatient appointment (stage 1)- Health Board Total 2. Number of patients waiting more than 26 weeks for an outpatient appointment (stage 1)- Hospital Level 3. Patients waiting over 26 weeks for an outpatient appointment by specialty 4. Outpatient activity undertaken	<p>The number of patients waiting over 26 weeks for a first outpatient appointment is a challenge. March 2021 saw an in-month increase in the number of patients waiting over 26 weeks for an outpatient appointment. The number of breaches increased from 21,225 in February 2021 to 21,750 in March 2021. Ophthalmology has the largest proportion of patients waiting over 26 weeks for an outpatient appointment closely followed by Orthopaedics and ENT. The number of outpatient attendances has significantly reduced since February 2020 due to COVID19. Chart 4 shows that the number of attendances started to increase from May 2020 but has plateaued from December 2020 onwards. Work continues to be undertaken to accurately record the split between face-to-face and virtual attendances and will be reported through a new Outpatient dashboard.</p>
	Trend
	<div> <div> 1. Number of stage 1 over 26 weeks- HB total <p>■ Outpatients > 26 wks (SB UHB)</p> </div> <div> 2. Number of stage 1 over 26 weeks- Hospital level <p>— Morriston — Singleton — PC&CS — NPTH</p> </div> </div>
	<div> <div> 3. Patients waiting over 26 weeks for an outpatient appointment by specialty as at March 2021 </div> <div> 4. Outpatient activity undertaken <p>— New outpatient attendances - - - Follow-up attendances</p> </div> </div>

PLANNED CARE	
Description	Current Performance
<p>Patients waiting over 36 weeks for treatment</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 in 2020 that saw an in-month reduction and this trend continued into January and February 2021 however, the number of breaches increased again in March 2021. In March 2021, there was 32,874 patient waiting over 36 weeks which is a 0.5% in-month increase from February 2021. 27,226 of the 32,874 were waiting over 52 weeks in March 2021. Orthopaedics/ Spinal accounted for 23% of the breaches, followed by Ophthalmology with 13%.</p> <p>The number of patients receiving a procedure (and subsequently removed from the waiting list) has significantly reduced since March 2020 which is resulting in the increase in waiting times.</p>
	Trend
	<div> <p>1. Number of patients waiting over 36 weeks- HB total</p>  <p>■ >36 wks (SB UHB)</p> </div> <div> <p>2. Number of patients waiting over 36 weeks- Hospital level</p>  <p>— Morriston — Singleton — PC&CS — NPTH</p> </div> <div> <p>3. Number of elective admissions</p>  <p>— Admitted elective patients</p> </div>

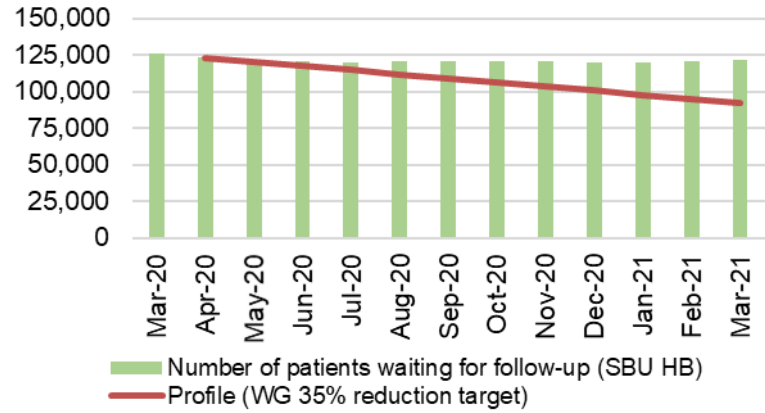
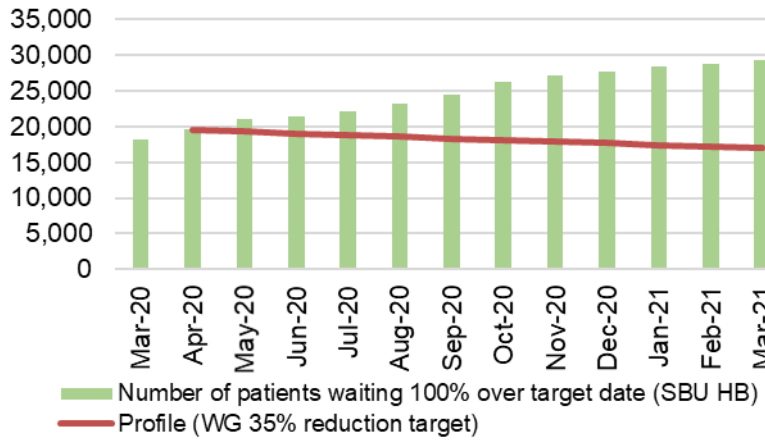
PLANNED CARE																																																																								
Description	Current Performance																																																																							
Total waiting times <i>Percentage of patients waiting less than 26 weeks from referral to treatment</i>	<p>Throughout 2019/20 the overall percentage of patients waiting less than 26 weeks from referral to treatment ranged between 80% and 88%.</p> <p>The percentage consistently fell every month between April and September 2020, but has started to increase again. In March 2021, 48.8% of patients were waiting under 26 weeks from referral to treatment. This is an in-month improvement of 0.9% from 47.9% in February 2021 to 48.8% in March 2021.</p>	<p>Percentage of patient waiting less than 26 weeks</p> <table><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>PC&CS</th><th>NPTH</th></tr></thead><tbody><tr><td>Mar-20</td><td>75%</td><td>80%</td><td>90%</td><td>95%</td></tr><tr><td>Apr-20</td><td>70%</td><td>75%</td><td>85%</td><td>95%</td></tr><tr><td>May-20</td><td>65%</td><td>70%</td><td>80%</td><td>95%</td></tr><tr><td>Jun-20</td><td>60%</td><td>65%</td><td>75%</td><td>95%</td></tr><tr><td>Jul-20</td><td>55%</td><td>60%</td><td>70%</td><td>90%</td></tr><tr><td>Aug-20</td><td>50%</td><td>55%</td><td>65%</td><td>85%</td></tr><tr><td>Sep-20</td><td>45%</td><td>50%</td><td>60%</td><td>80%</td></tr><tr><td>Oct-20</td><td>45%</td><td>50%</td><td>65%</td><td>85%</td></tr><tr><td>Nov-20</td><td>45%</td><td>50%</td><td>65%</td><td>90%</td></tr><tr><td>Dec-20</td><td>45%</td><td>50%</td><td>65%</td><td>90%</td></tr><tr><td>Jan-21</td><td>45%</td><td>50%</td><td>65%</td><td>90%</td></tr><tr><td>Feb-21</td><td>45%</td><td>50%</td><td>65%</td><td>90%</td></tr><tr><td>Mar-21</td><td>45%</td><td>48%</td><td>45%</td><td>90%</td></tr></tbody></table>	Month	Morriston	Singleton	PC&CS	NPTH	Mar-20	75%	80%	90%	95%	Apr-20	70%	75%	85%	95%	May-20	65%	70%	80%	95%	Jun-20	60%	65%	75%	95%	Jul-20	55%	60%	70%	90%	Aug-20	50%	55%	65%	85%	Sep-20	45%	50%	60%	80%	Oct-20	45%	50%	65%	85%	Nov-20	45%	50%	65%	90%	Dec-20	45%	50%	65%	90%	Jan-21	45%	50%	65%	90%	Feb-21	45%	50%	65%	90%	Mar-21	45%	48%	45%	90%
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Ophthalmology waiting times <i>Percentage of ophthalmology R1 patients who are waiting within their clinical target date or within 25% in excess of their clinical target date for their care or treatments</i>	<p>In March 2021, 47.% of Ophthalmology R1 patients were waiting within their clinical target date or within 25% of the target date.</p> <p>There was an upward trend in performance in 2019/20 however, there has been a continuous downward trend in performance in 2020/21.</p>	<p>Percentage of ophthalmology R1 patients who are waiting within their clinical target date or within 25% in excess of their clinical target date for their care or treatments</p> <table><thead><tr><th>Month</th><th>% R1 patients seen within target or within 25% of target date</th><th>Target</th></tr></thead><tbody><tr><td>Mar-20</td><td>75%</td><td>95%</td></tr><tr><td>Apr-20</td><td>70%</td><td>95%</td></tr><tr><td>May-20</td><td>65%</td><td>95%</td></tr><tr><td>Jun-20</td><td>65%</td><td>95%</td></tr><tr><td>Jul-20</td><td>60%</td><td>95%</td></tr><tr><td>Aug-20</td><td>55%</td><td>95%</td></tr><tr><td>Sep-20</td><td>50%</td><td>95%</td></tr><tr><td>Oct-20</td><td>45%</td><td>95%</td></tr><tr><td>Nov-20</td><td>45%</td><td>95%</td></tr><tr><td>Dec-20</td><td>45%</td><td>95%</td></tr><tr><td>Jan-21</td><td>45%</td><td>95%</td></tr><tr><td>Feb-21</td><td>45%</td><td>95%</td></tr><tr><td>Mar-21</td><td>47%</td><td>95%</td></tr></tbody></table>	Month	% R1 patients seen within target or within 25% of target date	Target	Mar-20	75%	95%	Apr-20	70%	95%	May-20	65%	95%	Jun-20	65%	95%	Jul-20	60%	95%	Aug-20	55%	95%	Sep-20	50%	95%	Oct-20	45%	95%	Nov-20	45%	95%	Dec-20	45%	95%	Jan-21	45%	95%	Feb-21	45%	95%	Mar-21	47%	95%																												
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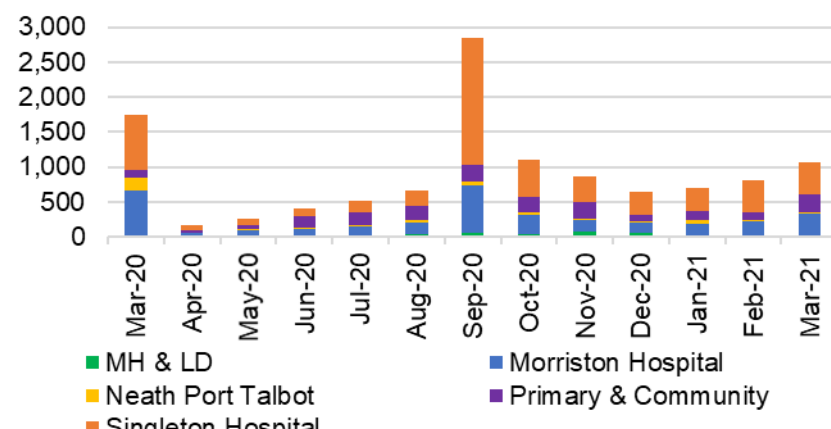
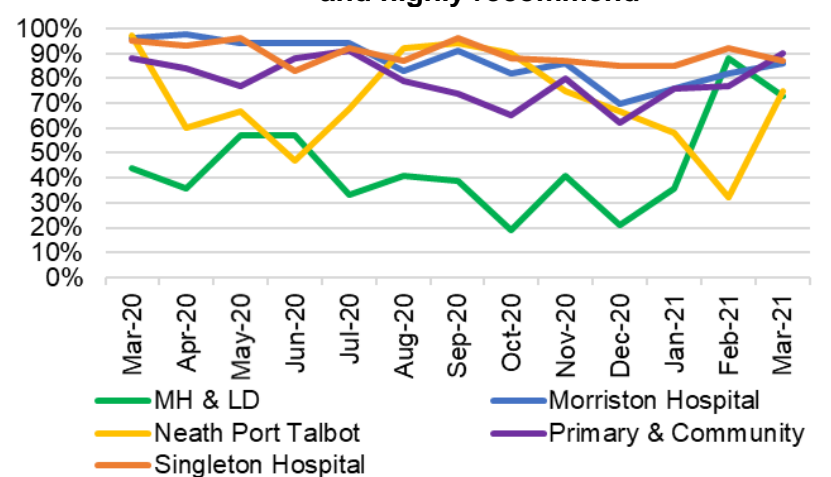
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Description	Current Performance	Trend																																																																																																																
Diagnostics waiting times <i>The number of patients waiting more than 8 weeks for specified diagnostics</i>	<p>In March 2021, there was a reduction in the number of patients waiting over 8 weeks for specified diagnostics. It reduced 5,087 in February 2021 to 4,554.</p> <p>The following is a breakdown for the 8 week breaches by diagnostic test for March 2021:</p> <ul style="list-style-type: none">• Endoscopy= 2,037• Cardiac tests= 1,342• Neurophysiology= 885• Radiology= 228• Fluoroscopy= 25• Cystoscopy= 20• Physiological measurement= 17	<p>Number of patients waiting longer than 8 weeks for diagnostics</p> <table><caption>Approximate data for Number of patients waiting longer than 8 weeks for diagnostics</caption><thead><tr><th>Month</th><th>Cardiac tests</th><th>Endoscopy</th><th>Other diagnostics (inc. radiology)</th></tr></thead><tbody><tr><td>Mar-20</td><td>500</td><td>200</td><td>800</td></tr><tr><td>Apr-20</td><td>1500</td><td>500</td><td>4000</td></tr><tr><td>May-20</td><td>2500</td><td>1200</td><td>4800</td></tr><tr><td>Jun-20</td><td>2500</td><td>1200</td><td>4200</td></tr><tr><td>Jul-20</td><td>2300</td><td>1300</td><td>4000</td></tr><tr><td>Aug-20</td><td>2600</td><td>1500</td><td>3900</td></tr><tr><td>Sep-20</td><td>2000</td><td>1800</td><td>3800</td></tr><tr><td>Oct-20</td><td>1500</td><td>2100</td><td>3000</td></tr><tr><td>Nov-20</td><td>1500</td><td>2000</td><td>3000</td></tr><tr><td>Dec-20</td><td>1600</td><td>2100</td><td>2800</td></tr><tr><td>Jan-21</td><td>1300</td><td>2300</td><td>2500</td></tr><tr><td>Feb-21</td><td>1400</td><td>2100</td><td>1500</td></tr><tr><td>Mar-21</td><td>1300</td><td>2000</td><td>1200</td></tr></tbody></table>	Month	Cardiac tests	Endoscopy	Other diagnostics (inc. radiology)	Mar-20	500	200	800	Apr-20	1500	500	4000	May-20	2500	1200	4800	Jun-20	2500	1200	4200	Jul-20	2300	1300	4000	Aug-20	2600	1500	3900	Sep-20	2000	1800	3800	Oct-20	1500	2100	3000	Nov-20	1500	2000	3000	Dec-20	1600	2100	2800	Jan-21	1300	2300	2500	Feb-21	1400	2100	1500	Mar-21	1300	2000	1200																																																								
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Therapy waiting times <i>The number of patients waiting more than 14 weeks for specified therapies</i>	<p>In March 2021 there were 369 patients waiting over 14 weeks for specified Therapies.</p> <p>The breakdown for the breaches in March 2021 are:</p> <ul style="list-style-type: none">• Speech & Language Therapy= 162• Audiology=147• Dietetics= 60	<p>Number of patients waiting longer than 14 weeks for therapies</p> <table><caption>Approximate data for Number of patients waiting longer than 14 weeks for therapies</caption><thead><tr><th>Month</th><th>Occ Therapy/ LD (MH)</th><th>Occ Therapy (exc. MH)</th><th>Audiology</th><th>Speech & Language</th><th>Dietetics</th><th>Phsyio</th><th>Podiatry</th></tr></thead><tbody><tr><td>Mar-20</td><td>10</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Apr-20</td><td>100</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>May-20</td><td>200</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Jun-20</td><td>300</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Jul-20</td><td>250</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Aug-20</td><td>200</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Sep-20</td><td>150</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Oct-20</td><td>100</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Nov-20</td><td>80</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Dec-20</td><td>70</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Jan-21</td><td>60</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Feb-21</td><td>50</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Mar-21</td><td>40</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr></tbody></table>	Month	Occ Therapy/ LD (MH)	Occ Therapy (exc. MH)	Audiology	Speech & Language	Dietetics	Phsyio	Podiatry	Mar-20	10	0	0	0	0	0	0	Apr-20	100	0	0	0	0	0	0	May-20	200	0	0	0	0	0	0	Jun-20	300	0	0	0	0	0	0	Jul-20	250	0	0	0	0	0	0	Aug-20	200	0	0	0	0	0	0	Sep-20	150	0	0	0	0	0	0	Oct-20	100	0	0	0	0	0	0	Nov-20	80	0	0	0	0	0	0	Dec-20	70	0	0	0	0	0	0	Jan-21	60	0	0	0	0	0	0	Feb-21	50	0	0	0	0	0	0	Mar-21	40	0	0	0	0	0	0
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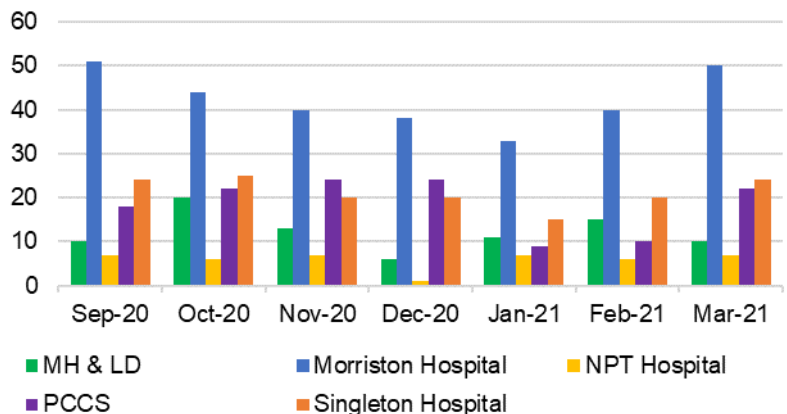
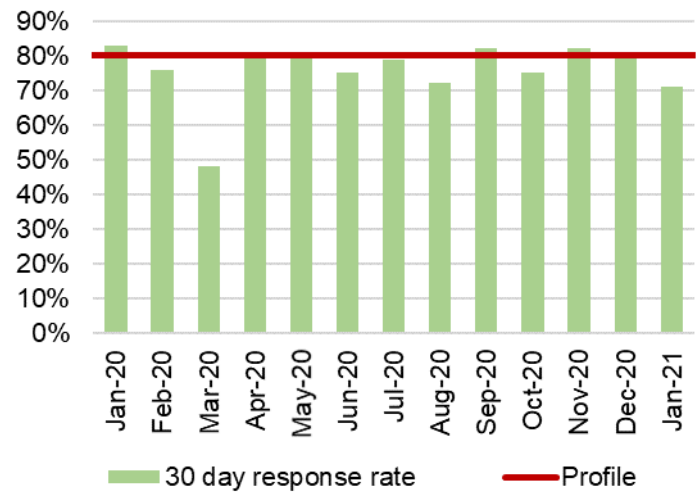
CANCER	
Description	Current Performance
Cancer demand and shape of the waiting list 1. Number of Urgent Suspected Cancer (USC) referrals received 2. Source of suspicion for patients on Single Cancer Pathway (SCP) 3. Volume of patients by stage and adjusted wait-SCP (March 2020) 4. Volume of patients by stage and adjusted wait-SCP (March 2021)	<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. The shape of the waiting list shows that there is a significant “wave” of patients that are likely to breach in the near future and there are more patients waiting at the tail end of the waiting list when compared with March 2020.</p> <p>Trend</p> <div> <div> <p>1. Number of USC referrals</p> </div> <div> <p>2. Source of suspicion for patients starting cancer treatment</p> </div> <div> <p>3. Volume of patients by stage and adjusted wait (beginning of March 2020)-SCP</p> </div> <div> <p>4. Volume of patients by stage and adjusted wait (March 2021)- SCP</p> </div> </div>



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

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

COMPLAINTS																																																																																												
Description	Current Performance	Trend																																																																																										
Patient concerns <i>1. Number of formal complaints received</i> <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 March 2021, the Health Board received 117 formal complaints; this is a 27% increase when compared with March 2020 (from 92 to 117).</p> <p>The monthly number of complaints received has been significantly lower since the COVID19 outbreak in March 2020 however, the numbers have gradually increased month on month since April 2020 until December 2020 when numbers started to reduce again. However, the increase in March 2021 saw the monthly position increase back to pre-COVID level.</p> <p>2. The overall Health Board rate for responding to concerns within 30 working days was 71% in January 2021 against the Welsh Government target of 75% and Health Board target of 80%.</p> <p>Performance in January 2021 ranged from 57% in Neath Port Talbot Hospital to 81% in Morryston Hospital.</p>	<p>1. Number of formal complaints received</p>  <table><caption>1. Number of formal complaints received</caption><thead><tr><th>Month</th><th>MH & LD</th><th>Morryston Hospital</th><th>NPT Hospital</th><th>PCCS</th><th>Singleton Hospital</th></tr></thead><tbody><tr><td>Sep-20</td><td>10</td><td>50</td><td>5</td><td>18</td><td>22</td></tr><tr><td>Oct-20</td><td>20</td><td>45</td><td>5</td><td>22</td><td>25</td></tr><tr><td>Nov-20</td><td>13</td><td>40</td><td>5</td><td>24</td><td>20</td></tr><tr><td>Dec-20</td><td>5</td><td>38</td><td>2</td><td>24</td><td>20</td></tr><tr><td>Jan-21</td><td>11</td><td>33</td><td>5</td><td>10</td><td>15</td></tr><tr><td>Feb-21</td><td>15</td><td>40</td><td>5</td><td>10</td><td>20</td></tr><tr><td>Mar-21</td><td>10</td><td>50</td><td>5</td><td>22</td><td>25</td></tr></tbody></table> <p>2. Response rate for concerns within 30 days</p>  <table><caption>2. Response rate for concerns within 30 days</caption><thead><tr><th>Month</th><th>30 day response rate (%)</th><th>Profile (%)</th></tr></thead><tbody><tr><td>Jan-20</td><td>82</td><td>80</td></tr><tr><td>Feb-20</td><td>75</td><td>80</td></tr><tr><td>Mar-20</td><td>48</td><td>80</td></tr><tr><td>Apr-20</td><td>80</td><td>80</td></tr><tr><td>May-20</td><td>80</td><td>80</td></tr><tr><td>Jun-20</td><td>75</td><td>80</td></tr><tr><td>Jul-20</td><td>80</td><td>80</td></tr><tr><td>Aug-20</td><td>72</td><td>80</td></tr><tr><td>Sep-20</td><td>82</td><td>80</td></tr><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>71</td><td>80</td></tr></tbody></table>	Month	MH & LD	Morryston Hospital	NPT Hospital	PCCS	Singleton Hospital	Sep-20	10	50	5	18	22	Oct-20	20	45	5	22	25	Nov-20	13	40	5	24	20	Dec-20	5	38	2	24	20	Jan-21	11	33	5	10	15	Feb-21	15	40	5	10	20	Mar-21	10	50	5	22	25	Month	30 day response rate (%)	Profile (%)	Jan-20	82	80	Feb-20	75	80	Mar-20	48	80	Apr-20	80	80	May-20	80	80	Jun-20	75	80	Jul-20	80	80	Aug-20	72	80	Sep-20	82	80	Oct-20	75	80	Nov-20	82	80	Dec-20	80	80	Jan-21	71	80
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HARM FROM WIDER SOCIETAL ACTIONS/LOCKDOWN

7.1 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

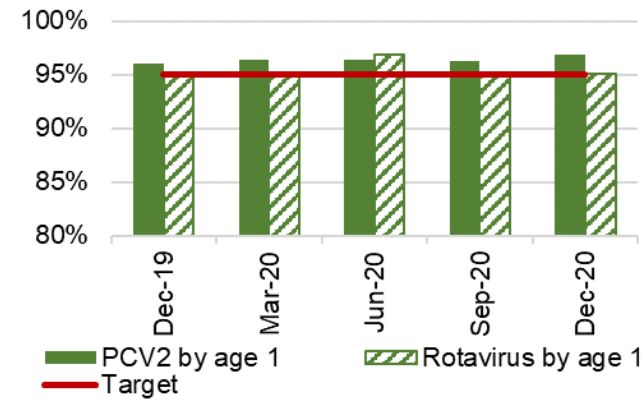


Chart 3: % children who received MMR1 vaccine and PCVf3 vaccine by age 2

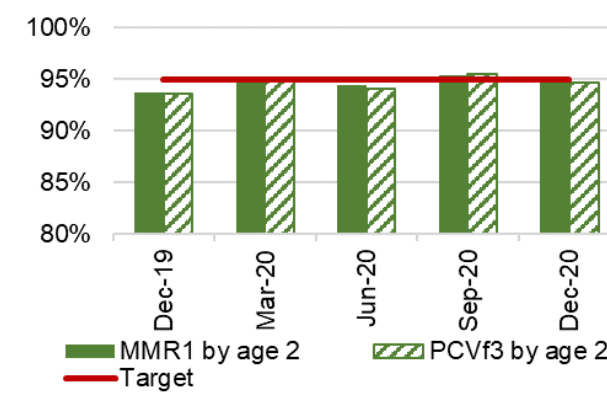


Chart 4: % children who received MenB4 vaccine and Hib/MenC vaccine by age 2

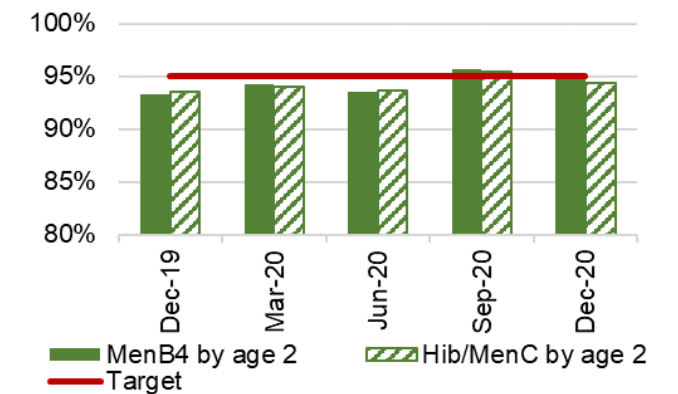


Chart 5: % children who are up to date in schedule by age 4

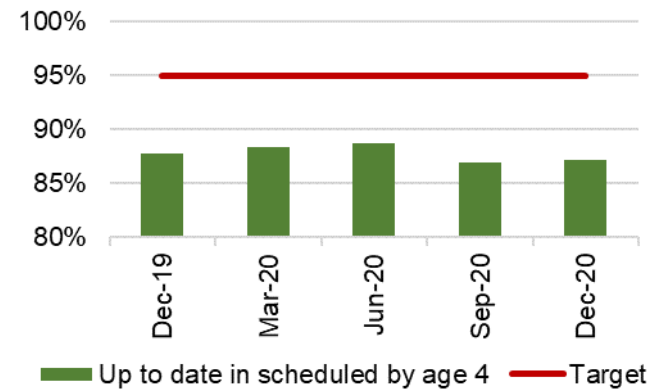


Chart 6: % children who received 2 doses of the MMR vaccine and 4 in 1 vaccine by age 5

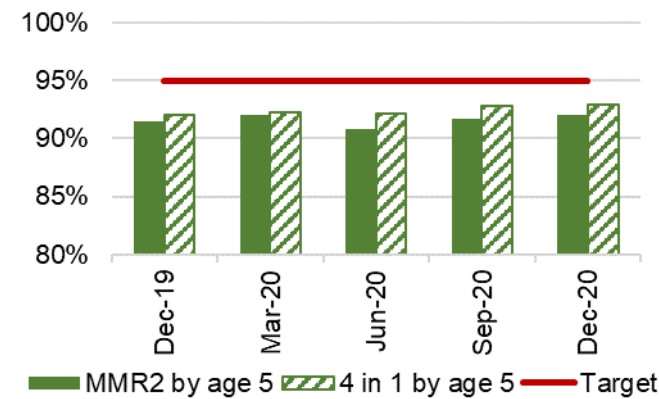


Chart 7: % children who received MMR vaccine and teenage booster by age 16

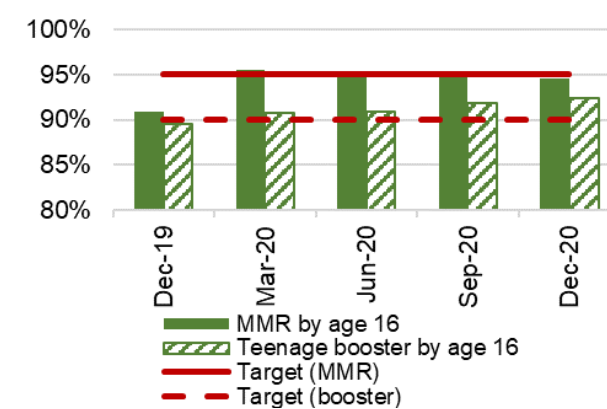


Chart 8: % children who received MenACWY vaccine by age 16

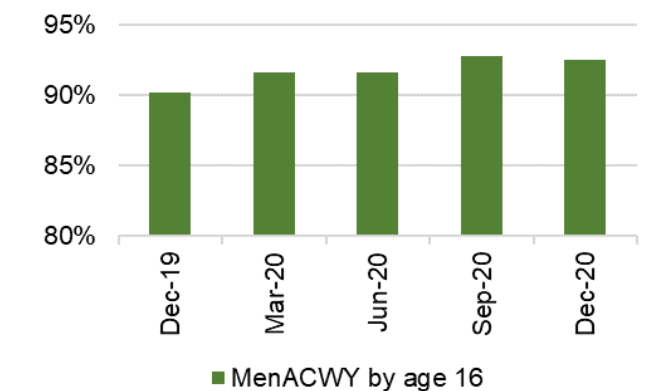
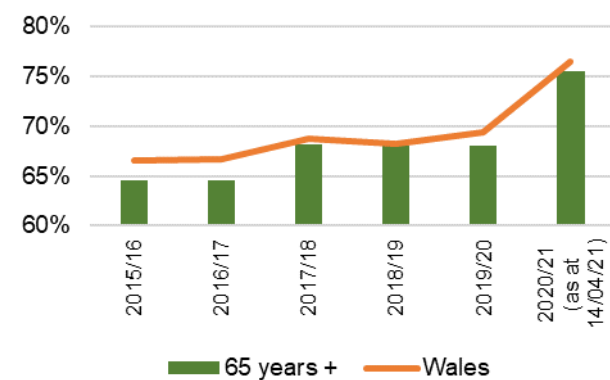
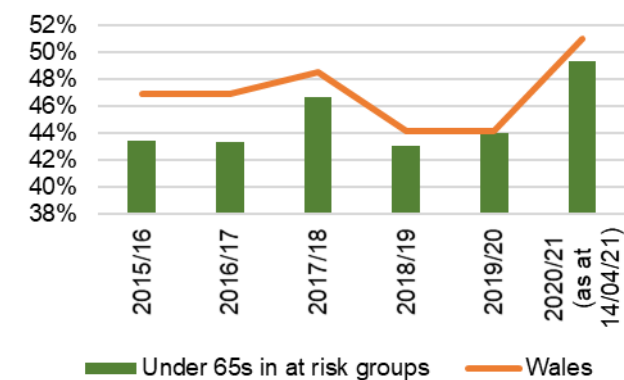


Chart 9: Influenza uptake for amongst 65 year olds and over



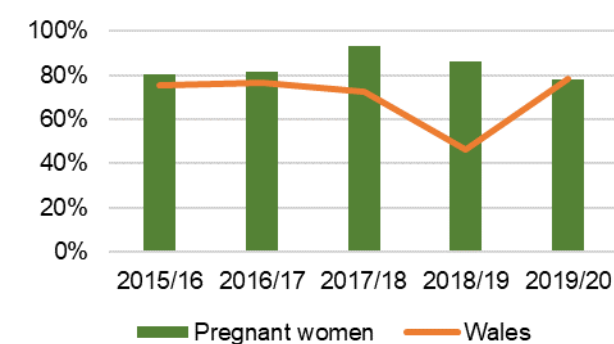
Data prior to April 2019 relates to Abertawe Bro Morgannwg University Health Board

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



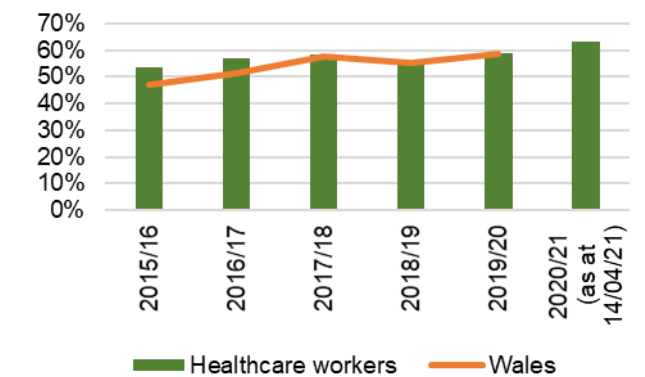
Data prior to April 2019 relates to Abertawe Bro Morgannwg University Health Board

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

7.2 Mental Health Overview

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

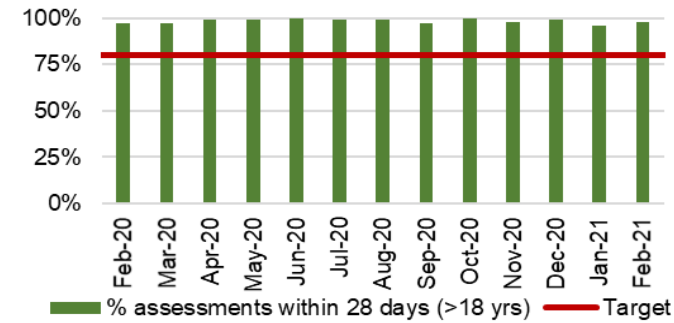


Chart 2: % of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS

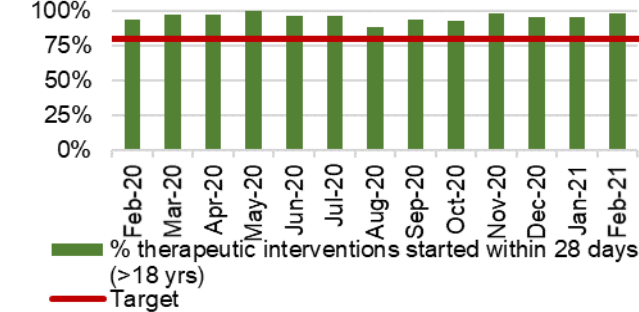


Chart 3: % of health board residents in receipt of secondary mental health services (all ages) who have a valid care and treatment plan

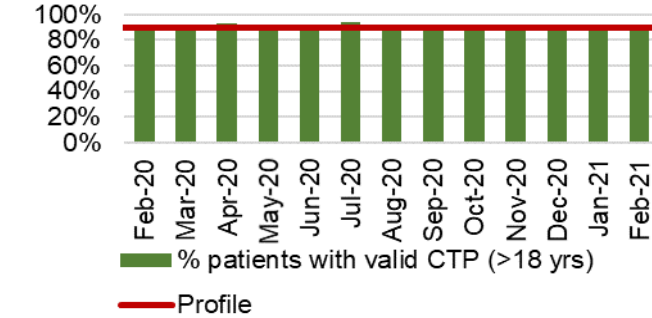


Chart 4: % of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health

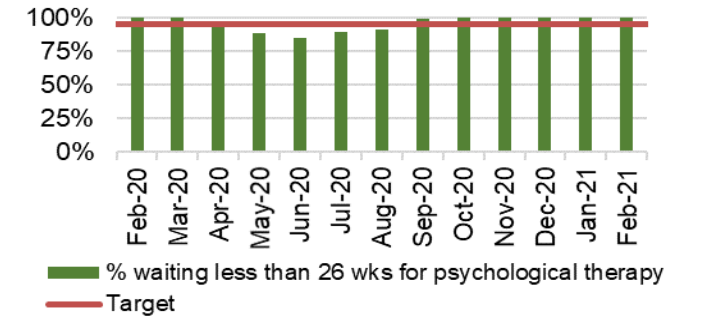


Chart 5: 95% of those admitted 0900-2100 will receive a gate-keeping assessment by the CRHTS prior to admission

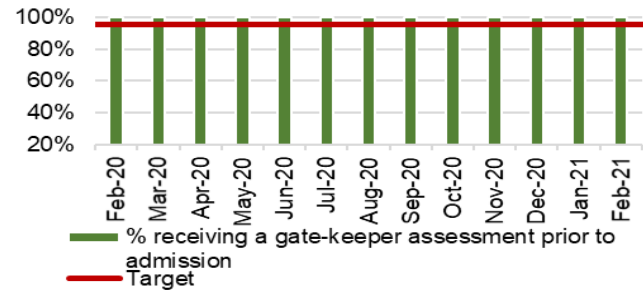


Chart 6: 100% of those admitted without a gate keeping assessment will receive a follow up assessment by CRHTS within 24hrs of admission

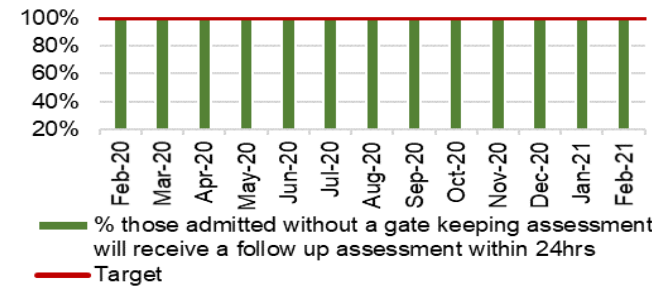


Chart 7: % of patients waiting under 14 weeks for Therapies

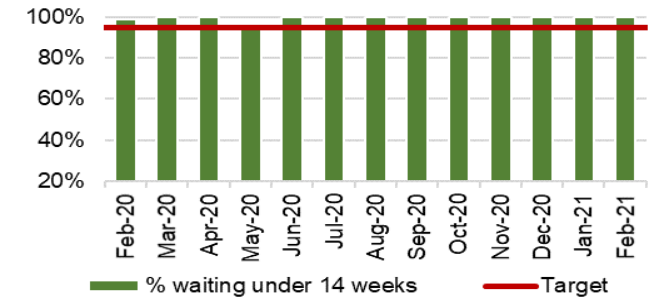


Chart 8: Number of Mental Health Delayed Transfers of Care (DTOCs)

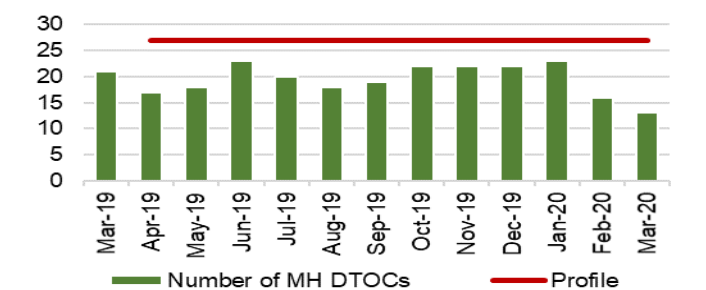


Chart 9: Number of patients detained under the Mental Health Act as a percentage of all admissions

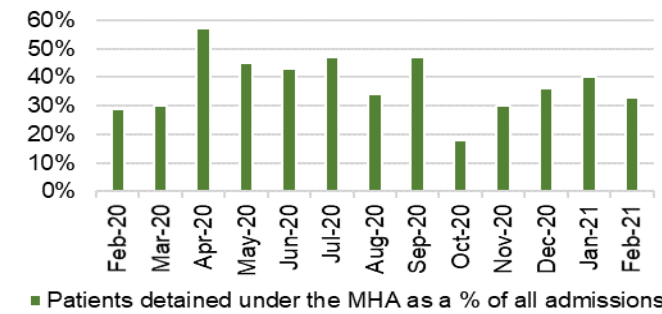


Chart 10: Number of patients subject to Deprivation of Liberty Safeguards (DOLS)

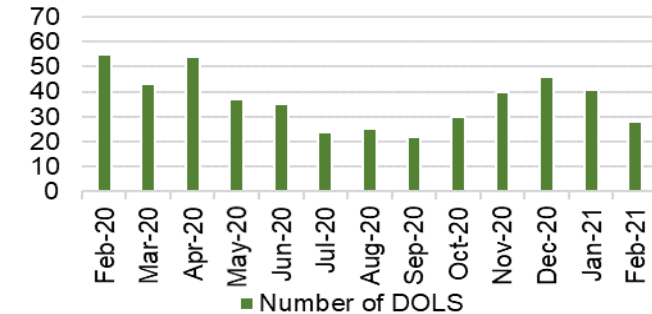


Chart 11: Number of Serious Incidents

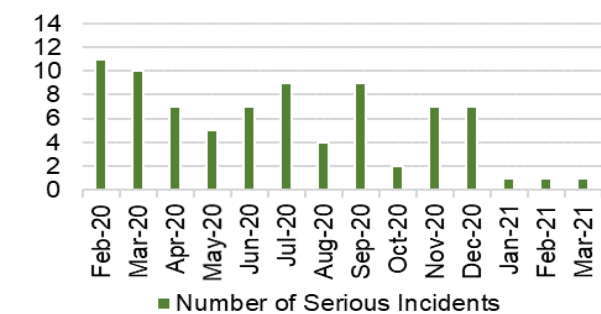
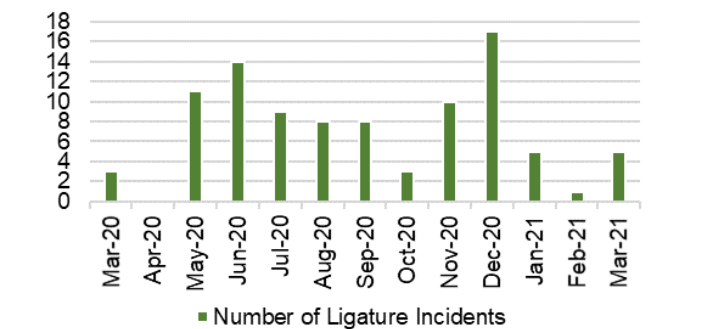


Chart 12: Number of ligature incidents



Child & Adolescent Mental Health Services (CAMHS)

Chart 13: Urgent assessments undertaken within 24 hours from receipt of referral

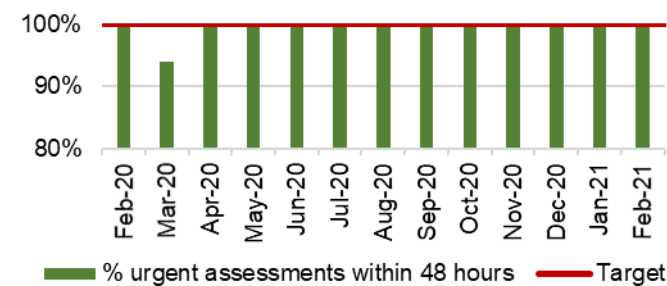


Chart 14: Neuro-developmental disorder assessment and intervention received within 26 weeks

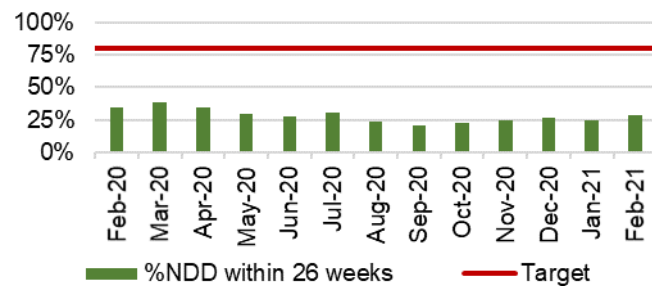


Chart 15: Assessment and intervention within 28 days

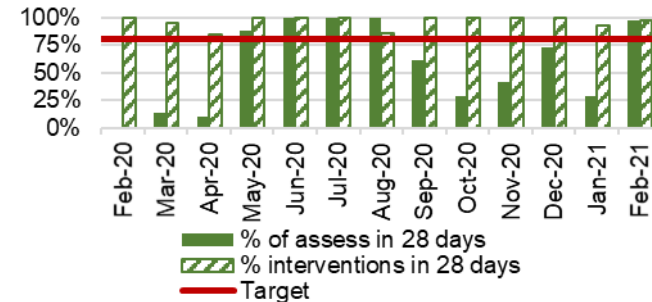
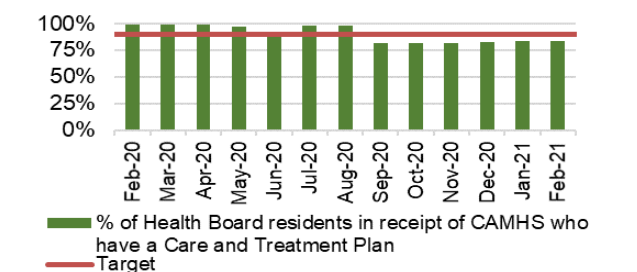


Chart 16: % of residents with a Care and Treatment Plan



7.3 Updates on key measures

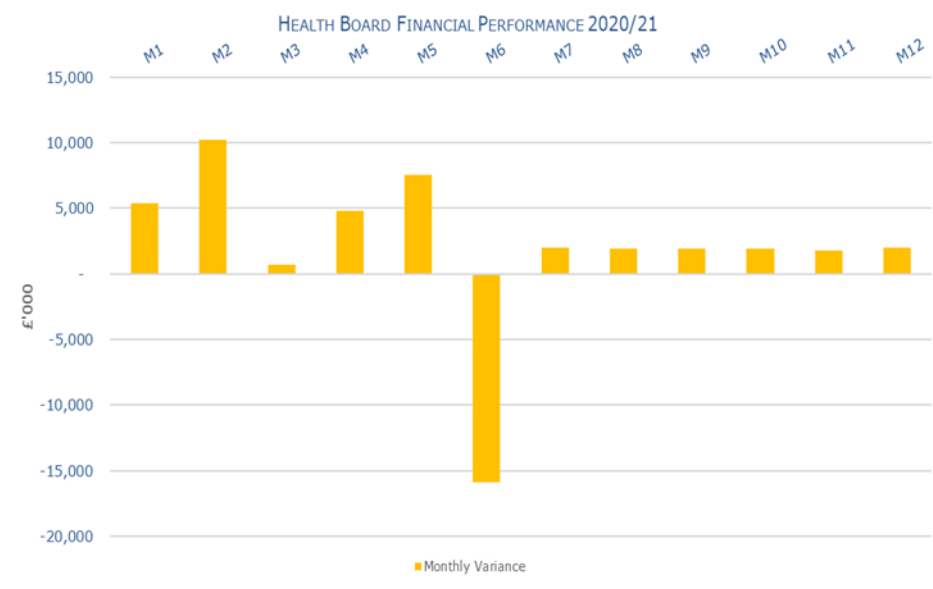
ADULT MENTAL HEALTH																																																																																																																																																																										
Description	Current Performance	Trend																																																																																																																																																																								
<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 February 2021, 98% of assessments were undertaken within 28 days of referral for patients 18 years and over.</p> <p>2. In February 2021, the percentage of therapeutic interventions started within 28 days following an assessment by the Local Primary Mental Health Support Service (LPMHSS) was 98%.</p> <p>3. 91% of residents in receipt of secondary care mental health services had a valid Care and Treatment Plan in February 2021.</p> <p>4. In February 2021, 100% of patients waited less than 26 weeks for psychological therapy. This was below the national target of 95%.</p>	<p>1. % Mental Health assessments undertaken within 28 days from receipt of referral</p> <table border="1"> <caption>1. % Mental Health assessments undertaken within 28 days from receipt of referral</caption> <thead> <tr> <th>Month</th> <th>% assessments within 28 days (>18 yrs)</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>Feb-20</td><td>98%</td><td>95%</td></tr> <tr><td>Mar-20</td><td>98%</td><td>95%</td></tr> <tr><td>Apr-20</td><td>98%</td><td>95%</td></tr> <tr><td>May-20</td><td>98%</td><td>95%</td></tr> <tr><td>Jun-20</td><td>98%</td><td>95%</td></tr> <tr><td>Jul-20</td><td>98%</td><td>95%</td></tr> <tr><td>Aug-20</td><td>98%</td><td>95%</td></tr> <tr><td>Sep-20</td><td>98%</td><td>95%</td></tr> <tr><td>Oct-20</td><td>98%</td><td>95%</td></tr> <tr><td>Nov-20</td><td>98%</td><td>95%</td></tr> <tr><td>Dec-20</td><td>98%</td><td>95%</td></tr> <tr><td>Jan-21</td><td>98%</td><td>95%</td></tr> <tr><td>Feb-21</td><td>98%</td><td>95%</td></tr> </tbody> </table> <p>2. % Mental Health therapeutic interventions started within 28 days following LPMHSS assessment</p> <table border="1"> <caption>2. % Mental Health therapeutic interventions started within 28 days following LPMHSS assessment</caption> <thead> <tr> <th>Month</th> <th>% therapeutic interventions started within 28 days (>18 yrs)</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>Feb-20</td><td>98%</td><td>95%</td></tr> <tr><td>Mar-20</td><td>98%</td><td>95%</td></tr> <tr><td>Apr-20</td><td>98%</td><td>95%</td></tr> <tr><td>May-20</td><td>98%</td><td>95%</td></tr> <tr><td>Jun-20</td><td>98%</td><td>95%</td></tr> <tr><td>Jul-20</td><td>98%</td><td>95%</td></tr> <tr><td>Aug-20</td><td>98%</td><td>95%</td></tr> <tr><td>Sep-20</td><td>98%</td><td>95%</td></tr> <tr><td>Oct-20</td><td>98%</td><td>95%</td></tr> <tr><td>Nov-20</td><td>98%</td><td>95%</td></tr> <tr><td>Dec-20</td><td>98%</td><td>95%</td></tr> <tr><td>Jan-21</td><td>98%</td><td>95%</td></tr> <tr><td>Feb-21</td><td>98%</td><td>95%</td></tr> </tbody> </table> <p>3. % residents with a valid Care and Treatment Plan (CTP)</p> <table border="1"> <caption>3. % residents with a valid Care and Treatment Plan (CTP)</caption> <thead> <tr> <th>Month</th> <th>% patients with valid CTP (>18 yrs)</th> <th>Profile</th> </tr> </thead> <tbody> <tr><td>Feb-20</td><td>91%</td><td>91%</td></tr> <tr><td>Mar-20</td><td>91%</td><td>91%</td></tr> <tr><td>Apr-20</td><td>91%</td><td>91%</td></tr> <tr><td>May-20</td><td>91%</td><td>91%</td></tr> <tr><td>Jun-20</td><td>91%</td><td>91%</td></tr> <tr><td>Jul-20</td><td>91%</td><td>91%</td></tr> <tr><td>Aug-20</td><td>91%</td><td>91%</td></tr> <tr><td>Sep-20</td><td>91%</td><td>91%</td></tr> <tr><td>Oct-20</td><td>91%</td><td>91%</td></tr> <tr><td>Nov-20</td><td>91%</td><td>91%</td></tr> <tr><td>Dec-20</td><td>91%</td><td>91%</td></tr> <tr><td>Jan-21</td><td>91%</td><td>91%</td></tr> <tr><td>Feb-21</td><td>91%</td><td>91%</td></tr> </tbody> </table> <p>4. % waiting less than 26 weeks for Psychology Therapy</p> <table border="1"> <caption>4. % waiting less than 26 wks for psychological therapy</caption> <thead> <tr> <th>Month</th> <th>% waiting less than 26 wks for psychological therapy</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>Feb-20</td><td>100%</td><td>95%</td></tr> <tr><td>Mar-20</td><td>100%</td><td>95%</td></tr> <tr><td>Apr-20</td><td>100%</td><td>95%</td></tr> <tr><td>May-20</td><td>100%</td><td>95%</td></tr> <tr><td>Jun-20</td><td>100%</td><td>95%</td></tr> <tr><td>Jul-20</td><td>100%</td><td>95%</td></tr> <tr><td>Aug-20</td><td>100%</td><td>95%</td></tr> <tr><td>Sep-20</td><td>100%</td><td>95%</td></tr> <tr><td>Oct-20</td><td>100%</td><td>95%</td></tr> <tr><td>Nov-20</td><td>100%</td><td>95%</td></tr> <tr><td>Dec-20</td><td>100%</td><td>95%</td></tr> <tr><td>Jan-21</td><td>100%</td><td>95%</td></tr> <tr><td>Feb-21</td><td>100%</td><td>95%</td></tr> </tbody> </table>	Month	% assessments within 28 days (>18 yrs)	Target	Feb-20	98%	95%	Mar-20	98%	95%	Apr-20	98%	95%	May-20	98%	95%	Jun-20	98%	95%	Jul-20	98%	95%	Aug-20	98%	95%	Sep-20	98%	95%	Oct-20	98%	95%	Nov-20	98%	95%	Dec-20	98%	95%	Jan-21	98%	95%	Feb-21	98%	95%	Month	% therapeutic interventions started within 28 days (>18 yrs)	Target	Feb-20	98%	95%	Mar-20	98%	95%	Apr-20	98%	95%	May-20	98%	95%	Jun-20	98%	95%	Jul-20	98%	95%	Aug-20	98%	95%	Sep-20	98%	95%	Oct-20	98%	95%	Nov-20	98%	95%	Dec-20	98%	95%	Jan-21	98%	95%	Feb-21	98%	95%	Month	% patients with valid CTP (>18 yrs)	Profile	Feb-20	91%	91%	Mar-20	91%	91%	Apr-20	91%	91%	May-20	91%	91%	Jun-20	91%	91%	Jul-20	91%	91%	Aug-20	91%	91%	Sep-20	91%	91%	Oct-20	91%	91%	Nov-20	91%	91%	Dec-20	91%	91%	Jan-21	91%	91%	Feb-21	91%	91%	Month	% waiting less than 26 wks for psychological therapy	Target	Feb-20	100%	95%	Mar-20	100%	95%	Apr-20	100%	95%	May-20	100%	95%	Jun-20	100%	95%	Jul-20	100%	95%	Aug-20	100%	95%	Sep-20	100%	95%	Oct-20	100%	95%	Nov-20	100%	95%	Dec-20	100%	95%	Jan-21	100%	95%	Feb-21	100%	95%
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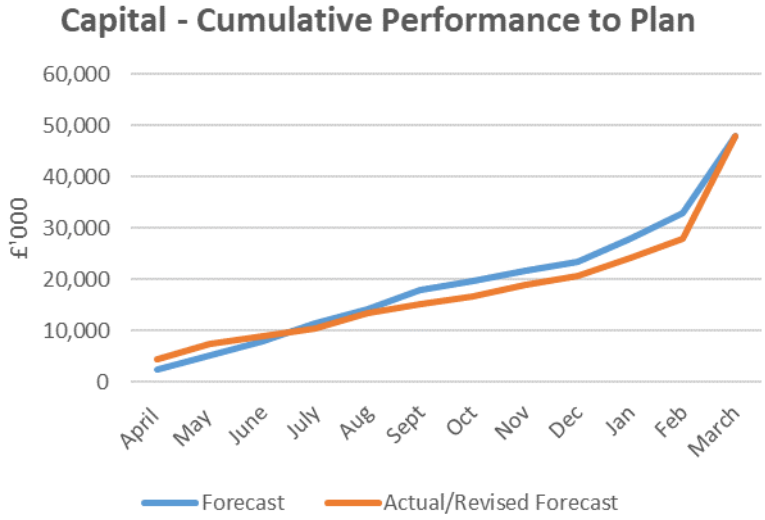
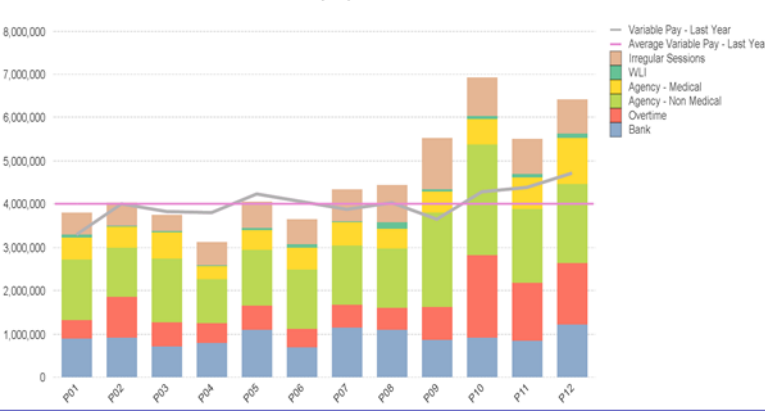
CHILD & ADOLESCENT MENTAL HEALTH (CAMHS)

Description	Current Performance	Trend																																																								
1. Crisis - % Urgent Assessment by CAMHS undertaken within 48 Hours from receipt of referral	1. In February 2021, 100% of CAMHS patients received an assessment within 48 hours.	<div>1. Crisis- assessment within 48 hours</div> <table><thead><tr><th>Month</th><th>% urgent assessments within 48 hours</th><th>Target</th></tr></thead><tbody><tr><td>Feb-20</td><td>100%</td><td>100%</td></tr><tr><td>Mar-20</td><td>95%</td><td>100%</td></tr><tr><td>Apr-20</td><td>100%</td><td>100%</td></tr><tr><td>May-20</td><td>100%</td><td>100%</td></tr><tr><td>Jun-20</td><td>100%</td><td>100%</td></tr><tr><td>Jul-20</td><td>100%</td><td>100%</td></tr><tr><td>Aug-20</td><td>100%</td><td>100%</td></tr><tr><td>Sep-20</td><td>100%</td><td>100%</td></tr><tr><td>Oct-20</td><td>100%</td><td>100%</td></tr><tr><td>Nov-20</td><td>100%</td><td>100%</td></tr><tr><td>Dec-20</td><td>100%</td><td>100%</td></tr><tr><td>Jan-21</td><td>100%</td><td>100%</td></tr><tr><td>Feb-21</td><td>100%</td><td>100%</td></tr></tbody></table>	Month	% urgent assessments within 48 hours	Target	Feb-20	100%	100%	Mar-20	95%	100%	Apr-20	100%	100%	May-20	100%	100%	Jun-20	100%	100%	Jul-20	100%	100%	Aug-20	100%	100%	Sep-20	100%	100%	Oct-20	100%	100%	Nov-20	100%	100%	Dec-20	100%	100%	Jan-21	100%	100%	Feb-21	100%	100%														
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2. Primary CAMHS (P-CAMHS) - % Routine Assessment by CAMHS undertaken within 28 days from receipt of referral	2. 97% of routine assessments were undertaken within 28 days from referral in February 2021 against a target of 80%.	<div>2. and 3. P-CAMHS % assessments and therapeutic interventions within 28 days</div> <table><thead><tr><th>Month</th><th>% of assess in 28 days</th><th>% interventions in 28 days</th><th>Target</th></tr></thead><tbody><tr><td>Feb-20</td><td>100%</td><td>100%</td><td>80%</td></tr><tr><td>Mar-20</td><td>100%</td><td>100%</td><td>80%</td></tr><tr><td>Apr-20</td><td>100%</td><td>100%</td><td>80%</td></tr><tr><td>May-20</td><td>100%</td><td>100%</td><td>80%</td></tr><tr><td>Jun-20</td><td>100%</td><td>100%</td><td>80%</td></tr><tr><td>Jul-20</td><td>100%</td><td>100%</td><td>80%</td></tr><tr><td>Aug-20</td><td>100%</td><td>100%</td><td>80%</td></tr><tr><td>Sep-20</td><td>100%</td><td>100%</td><td>80%</td></tr><tr><td>Oct-20</td><td>100%</td><td>100%</td><td>80%</td></tr><tr><td>Nov-20</td><td>100%</td><td>100%</td><td>80%</td></tr><tr><td>Dec-20</td><td>100%</td><td>100%</td><td>80%</td></tr><tr><td>Jan-21</td><td>100%</td><td>100%</td><td>80%</td></tr><tr><td>Feb-21</td><td>100%</td><td>100%</td><td>80%</td></tr></tbody></table> <p><i>*Data for April 2020 not available for measures 2 and 3</i></p>	Month	% of assess in 28 days	% interventions in 28 days	Target	Feb-20	100%	100%	80%	Mar-20	100%	100%	80%	Apr-20	100%	100%	80%	May-20	100%	100%	80%	Jun-20	100%	100%	80%	Jul-20	100%	100%	80%	Aug-20	100%	100%	80%	Sep-20	100%	100%	80%	Oct-20	100%	100%	80%	Nov-20	100%	100%	80%	Dec-20	100%	100%	80%	Jan-21	100%	100%	80%	Feb-21	100%	100%	80%
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3. Primary CAMHS (P-CAMHS) - % Therapeutic interventions started within 28 days following assessment by LPMHSS	3. 97% of therapeutic interventions were started within 28 days following assessment by LPMHSS in February 2021.																																																									
4. NDD - % Neurodevelopmental Disorder patients receiving a Diagnostic Assessment within 26 weeks	4. 28% of NDD patients received a diagnostic assessment within 26 weeks in February 2021 against a target of 80%.	<div>4. NDD- assessment within 26 weeks</div> <table><thead><tr><th>Month</th><th>%NDD within 26 weeks</th><th>Target</th></tr></thead><tbody><tr><td>Feb-20</td><td>25%</td><td>80%</td></tr><tr><td>Mar-20</td><td>25%</td><td>80%</td></tr><tr><td>Apr-20</td><td>25%</td><td>80%</td></tr><tr><td>May-20</td><td>25%</td><td>80%</td></tr><tr><td>Jun-20</td><td>25%</td><td>80%</td></tr><tr><td>Jul-20</td><td>25%</td><td>80%</td></tr><tr><td>Aug-20</td><td>25%</td><td>80%</td></tr><tr><td>Sep-20</td><td>25%</td><td>80%</td></tr><tr><td>Oct-20</td><td>25%</td><td>80%</td></tr><tr><td>Nov-20</td><td>25%</td><td>80%</td></tr><tr><td>Dec-20</td><td>25%</td><td>80%</td></tr><tr><td>Jan-21</td><td>25%</td><td>80%</td></tr><tr><td>Feb-21</td><td>28%</td><td>80%</td></tr></tbody></table>	Month	%NDD within 26 weeks	Target	Feb-20	25%	80%	Mar-20	25%	80%	Apr-20	25%	80%	May-20	25%	80%	Jun-20	25%	80%	Jul-20	25%	80%	Aug-20	25%	80%	Sep-20	25%	80%	Oct-20	25%	80%	Nov-20	25%	80%	Dec-20	25%	80%	Jan-21	25%	80%	Feb-21	28%	80%														
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Feb-21	28%	80%																																																								
5. Specialist CAMHS (S-CAMHS) - % Routine Assessment by SCAMHS undertaken within 28 days from receipt of referral	5. 56% of routine assessments by SCAMHS were undertaken within 28 days in February 2021.	<div>5. S-CAMHS % assessments within 28 days</div> <table><thead><tr><th>Month</th><th>% S-CAMHS assessments in 28 days</th><th>Target</th></tr></thead><tbody><tr><td>Feb-20</td><td>100%</td><td>80%</td></tr><tr><td>Mar-20</td><td>100%</td><td>80%</td></tr><tr><td>Apr-20</td><td>50%</td><td>80%</td></tr><tr><td>May-20</td><td>100%</td><td>80%</td></tr><tr><td>Jun-20</td><td>100%</td><td>80%</td></tr><tr><td>Jul-20</td><td>100%</td><td>80%</td></tr><tr><td>Aug-20</td><td>100%</td><td>80%</td></tr><tr><td>Sep-20</td><td>100%</td><td>80%</td></tr><tr><td>Oct-20</td><td>100%</td><td>80%</td></tr><tr><td>Nov-20</td><td>100%</td><td>80%</td></tr><tr><td>Dec-20</td><td>100%</td><td>80%</td></tr><tr><td>Jan-21</td><td>100%</td><td>80%</td></tr><tr><td>Feb-21</td><td>56%</td><td>80%</td></tr></tbody></table>	Month	% S-CAMHS assessments in 28 days	Target	Feb-20	100%	80%	Mar-20	100%	80%	Apr-20	50%	80%	May-20	100%	80%	Jun-20	100%	80%	Jul-20	100%	80%	Aug-20	100%	80%	Sep-20	100%	80%	Oct-20	100%	80%	Nov-20	100%	80%	Dec-20	100%	80%	Jan-21	100%	80%	Feb-21	56%	80%														
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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">The Health Board forecast a deficit year-end position of £24.405m. This was aligned to the Health Board initial plan for 2020/21.The Health Board finalised year-end position was a deficit of £24.305m, which is £0.1m below the forecast.This position must be considered a draft final position at this point as it remains subject to audit.	<div><p>HEALTH BOARD FINANCIAL PERFORMANCE 2020/21</p><table border="1"><thead><tr><th>Month</th><th>Monthly Variance (£'000)</th></tr></thead><tbody><tr><td>M1</td><td>5,000</td></tr><tr><td>M2</td><td>10,000</td></tr><tr><td>M3</td><td>-1,000</td></tr><tr><td>M4</td><td>5,000</td></tr><tr><td>M5</td><td>7,000</td></tr><tr><td>M6</td><td>-16,000</td></tr><tr><td>M7</td><td>2,000</td></tr><tr><td>M8</td><td>2,000</td></tr><tr><td>M9</td><td>2,000</td></tr><tr><td>M10</td><td>2,000</td></tr><tr><td>M11</td><td>2,000</td></tr><tr><td>M12</td><td>2,000</td></tr></tbody></table></div>	Month	Monthly Variance (£'000)	M1	5,000	M2	10,000	M3	-1,000	M4	5,000	M5	7,000	M6	-16,000	M7	2,000	M8	2,000	M9	2,000	M10	2,000	M11	2,000	M12	2,000
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Description	Current Performance	Trend
Capital Financial Position – expenditure incurred against capital resource limit	<ul style="list-style-type: none"> The outturn capital position for 2020/21 is a small closing underspend of £0.028m. 	<p>Capital - Cumulative Performance to Plan</p> 
Workforce Spend – workforce expenditure profile	<ul style="list-style-type: none"> Variable pay remained high in March. A significant element of the variable pay reflects the deployment of staff to the mass vaccination campaign. 	<p>Variable Pay Expenditure This Year and Last Year</p> 

Description	Current Performance	Trend																																							
<p>PSPP – pay 95% of Non-NHS invoices within 30 days of receipt of goods or valid invoice</p>	<ul style="list-style-type: none"> The number of invoices paid within 30 days in March again exceeded the 95% target with in month performance being 96.38%. This continued the improvement of recent months with December being 93.63%, January 94.62% and February 96.26%. The March performance increased the cumulative compliance for the year from 93.58% at the end of February to 93.89% at the end of March. However, the poor performance earlier in the financial year has meant that despite the improved performance in recent months it was not possible to achieve a cumulative compliance of 95% for the 2020/21 financial year. 	<p>Percentage of non-NHS invoices paid within 30 days of receipt of goods or valid invoice</p> <table border="1"> <thead> <tr> <th>Month</th> <th>In Month (%)</th> <th>Cumulative (%)</th> </tr> </thead> <tbody> <tr> <td>April</td> <td>87.86</td> <td>87.86</td> </tr> <tr> <td>May</td> <td>94.33</td> <td>92.69</td> </tr> <tr> <td>June</td> <td>96.93</td> <td>93.39</td> </tr> <tr> <td>July</td> <td>94.27</td> <td>93.39</td> </tr> <tr> <td>August</td> <td>94.27</td> <td>93.39</td> </tr> <tr> <td>September</td> <td>93.39</td> <td>93.39</td> </tr> <tr> <td>October</td> <td>89.99</td> <td>93.39</td> </tr> <tr> <td>November</td> <td>93.63</td> <td>93.39</td> </tr> <tr> <td>December</td> <td>93.63</td> <td>93.39</td> </tr> <tr> <td>January</td> <td>94.62</td> <td>93.58</td> </tr> <tr> <td>February</td> <td>96.26</td> <td>93.58</td> </tr> <tr> <td>March</td> <td>96.38</td> <td>93.89</td> </tr> </tbody> </table>	Month	In Month (%)	Cumulative (%)	April	87.86	87.86	May	94.33	92.69	June	96.93	93.39	July	94.27	93.39	August	94.27	93.39	September	93.39	93.39	October	89.99	93.39	November	93.63	93.39	December	93.63	93.39	January	94.62	93.58	February	96.26	93.58	March	96.38	93.89
Month	In Month (%)	Cumulative (%)																																							
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March	96.38	93.89																																							

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

Harm from overwhelmed NHS and social care system																								
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	
Unscheduled Care	% of emergency responses to red calls arriving within (up to and including) 8 minutes	National	Mar-21	73%	65%	65%	✔	64.4% (Feb-21)	2nd (Feb-21)		69%	70%	75%	76%	74%	72%	69%	66%	67%	54%	67%	70%	73%	
	Number of ambulance handovers over one hour	National	Mar-21	231	0			2,374 (Feb-21)	3rd (Feb-21)		462	61	20	47	120	163	410	355	500	510	195	219	231	
	Handover hours lost over 15 minutes	Local	Mar-21	583							1,623	209	125	178	315	418	1,100	916	1,474	1,804	455	550	583	
	% of patients who spend less than 4 hours in all major and minor emergency care (i.e. A&E) facilities from arrival until admission, transfer or discharge	National	Mar-21	77%	95%			76.8% (Feb-21)	5th (Feb-21)		72.8%	78.4%	83.5%	87.7%	80.1%	80.6%	76.4%	77.2%	75.4%	72.6%	77%	71%	77%	
	Number of patients who spend 12 hours or more in all hospital major and minor care facilities from arrival until admission, transfer or discharge	National	Mar-21	457	0			5,462 (Feb-21)	3rd (Feb-21)		557	131	97	81	223	286	537	494	626	776	570	534	457	
NOF	% of survival within 30 days of emergency admission for a hip fracture	National	Dec-20	68.0%	12 month ↑			80.1% (Dec-20)	5th (Dec-20)		75.0%	78.9%	77.1%	95.5%	93.5%	93.9%	89.4%	90.0%	67.9%	68.0%				
	% of patients (age 60 years and over) who presented with a hip fracture that received an orthogeriatrician assessment within 72 hours	National	Dec-20	86.0%	12 month ↑			60% (Jan-21)	2nd (Jan-21)		79.0%	79.0%	80.0%	82.0%	83.0%	83.0%	84.0%	84.0%	85.0%	86.0%	87.0%			
Stroke	Direct admission to Acute Stroke Unit (<4 hrs)	National	Mar-21	20%	54.0%			20.3% (Jan-21)	5th out of 6 organisations (Jan-21)		47.4%	Data not available			52.7%	57.4%	51.4%	50.0%	29.8%	23.7%	7.1%	6.8%	18.2%	20.4%
	CT Scan (<1 hrs) (local)	Local	Mar-21	41%							42.5%				49.1%	48.2%	52.8%	62.5%	42.1%	31.7%	22.7%	42.2%	30.6%	40.8%
	Assessed by a Stroke Specialist Consultant Physician (< 24 hrs)	National	Mar-21	100%	85.3%			82.7% (Jan-21)	3rd (Jan-21)		97.5%				100.0%	94.6%	97.2%	97.5%	98.2%	96.7%	95.5%	95.6%	97.2%	100.0%
	Thrombolysis door to needle <= 45 mins	Local	Mar-21	56%	12 month ↑						0.0%				30.0%	25.0%	0.0%	12.5%	11.1%	28.6%	0.0%	12.5%	0.0%	55.6%
	% compliance against the therapy target of an average of 16.1 minutes if speech and language therapist input per stroke patient	National	Mar-21	56%	12 month ↑			42.4% (Jan-21)	1st (Jan-21)		32.8%				30.7%	44.3%	61.7%	80.1%	86.5%	65.1%	63.4%	65.7%	61.2%	55.9%
	% of stroke patients who receive a 6 month follow-up assessment	National	Q3 19/20	49.6%	Qtr on qtr ↑			62.2% (Q3 19/20)	5th out of 6 organisations (Q3 19/20)															
DTOCs	Number of mental health HB DToCs	National	Mar-20	13	12 month ↓	27	✔				13	DTOC reporting temporarily suspended												
	Number of non-mental health HB DToCs	National	Mar-20	60	12 month ↓	50	✘				60	DTOC reporting temporarily suspended												
	% critical care bed days lost to delayed transfer of care	National	Q1 20/21	26.2%	Quarter on quarter ↓			5.3% (Q1 20/21)	2nd (Q1 20/21)		26.2%				2.5%									

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

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

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

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