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Bwrdd Iechyd Prifysgol  
Bae Abertawe  
Swansea Bay University  
Health Board



<b>Meeting Date</b>	<b>15<sup>th</sup> December 2020</b>	<b>Agenda Item</b>	<b>3.1</b>
<b>Report Title</b>	<b>Integrated Performance Report</b>		
<b>Report Author</b>	Hannah Roan, Head of Performance & Commissioning (interim)		
<b>Report Sponsor</b>	Darren Griffiths, Director of Finance and Performance (interim)		
<b>Presented by</b>	Darren Griffiths, Director of Finance and Performance (interim)		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	The purpose of this report is to provide an update on the current performance of the Health Board at the end of the most recent reporting window in delivering key local performance measures as well as the national measures outlined in the 2020/21 NHS Wales Delivery Framework.		
<b>Key Issues</b>	<p>The Integrated Performance Report is a routine report that provides an overview of how the Health Board is performing against the National Delivery measures and key local quality and safety measures. The traditional format for the report includes identifying actions where performance is not compliant with national or local targets as well as highlighting both short term and long terms risks to delivery. However, due to the operational pressures within the Health Board relating to the COVID-19 pandemic, it was agreed that the narrative update would be omitted from this iteration of the performance report.</p> <p>From the 1<sup>st</sup> April 2020, RAG'ing has not been applied to the targeted intervention priorities as the profiles were based on the actions within the 2020/21 annual plan which are now not being progressed due to the COVID-19 pandemic. In the absence of local profiles, in-month movement will now be utilised as the basis of RAGing for these measures until revised profiles are received. However, this is unlikely to happen until the pandemic has subsided and services start to return to a new level of normality.</p> <p><b>Key high level issues to highlight this month are as follows:</b></p> <p><b>COVID19-</b> November 2020 saw a rise in the number of positive COVID19 cases and consequently an increase in admissions into hospital. The occupancy rate of COVID patients in both general medical beds and critical care beds was very high in November 2020 resulting in significant pressure on the entire secondary care system.</p> <p><b>Unscheduled Care-</b> Demand for emergency department care within Swansea Bay University (SBU) Health Board marginally increased in November 2020. The percentage of patients seen</p>		

	<p>within 4 hours in A&amp;E and the number of patients waiting over 12 hours both deteriorated in November 2020, as well as the number of ambulance to hospital delays over 1 hour.</p> <p><b>Planned Care-</b> November 2020 saw another in-month reduction in the number of patients waiting over 26 weeks for an outpatient appointment. However, the in-month reduction may be the result of the dip in primary care referrals during the first COVID19 wave in April and May 2020. Diagnostics and Therapy waiting times have significantly increased since March 2020 however, the number of patients waiting over target reduced again in November 2020 with some therapy services maintaining a nil breach position (i.e. Occupational Therapy and Physiotherapy).</p> <p><b>Cancer-</b> The backlog of Urgent Suspected Cancer (USC) patients waiting over 53 days remains high. Referrals significantly increased in September and October 2020, which combined with restricted capacity due to the COVID response, has resulted in a worsening projected position for November 2020 for the 62 day access targets (USC and Single Cancer Pathway). November's figures are in the process of being validated at the time of writing this report.</p> <p><b>Mental Health-</b> performance against the Mental Health Measures continues to be maintained and all targets were achieved in October 2020. Psychological therapies access times significantly improved, with an achievement of 99.7% against the 95% target in October 2020.</p> <p><b>Child and Adolescent Mental Health Services (CAMHS)-</b> Access times for routine and specialist CAMHS significantly reduced in October 2020. This was due to an increase in demand in September and October, which was anticipated with the reopening of schools. In October 2020, staffing was at a minimum, resulting in a small number of assessments being completed during this period and focus was given to those waiting more than 28 days. The result was a sudden drop in percentage. At the CAMHS commissioning meeting in November 2020 with Cwm Taf Morgannwg University Health Board, the Service confirmed that the position has now stabilised and an improved position will be delivered for November 2020.</p>			
<b>Specific Action Required</b>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>	<b>Approval</b>
	✓		✓	
<b>Recommendations</b>	<p>Members are asked to:</p> <ul style="list-style-type: none"> <li>• <b>NOTE</b> the Health Board performance against key measures and targets.</li> </ul>			

# 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.

<b>Report History</b>	The last iteration of the Integrated Performance Report was presented to Performance & Finance Committee in November 2020. This is a routine monthly report.
<b>Appendices</b>	Appendix 1: Integrated Performance Report



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## Appendix 1- Integrated Performance Report December 2020



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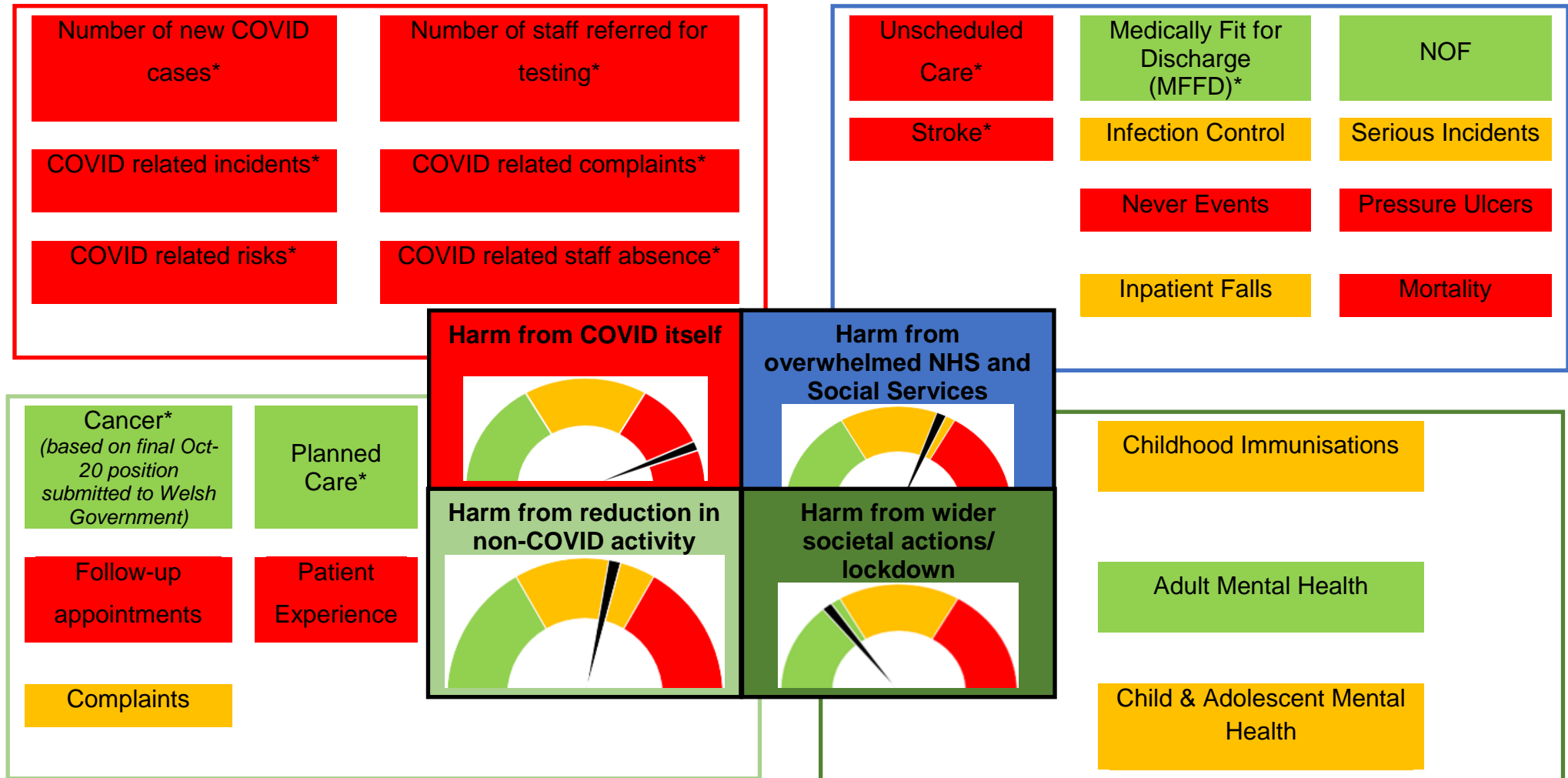
# 1. OVERVIEW

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"> <li>Primary Care contractors continue to provide services utilising digital technology and delivering face to face care whilst adhering to COVID19 regulations.</li> <li>Emergency care requiring hospital treatment continues to be delivered and aspects of urgent elective care have recommenced</li> <li>The number of patients waiting over target for Diagnostics continues to reduce and November 2020 delivered the best position since May 2020.</li> <li>Waiting times for Therapy services continues to reduce month on month. Occupational Therapy and Physiotherapy are maintaining a nil breach position.</li> <li>In November 2020, the number of patients waiting over 26 weeks for an outpatient appointment reduced for the second month in a row.</li> <li>Sustained achievement of the mental health measures access targets throughout the COVID19 pandemic. Psychological therapy waiting times significantly improved to 99.7% in October 2020.</li> </ul>	<ul style="list-style-type: none"> <li>Ensure the hospital sites have maximum capacity to deal with increasing COVID19 and unscheduled care demand as seasonal pressures make an impact during the winter months.</li> <li>Retaining patient access and sustainability of Essential Primary Care Services across 240 contractors in line with National Escalation Framework.</li> <li>Ensure that clinically urgent and cancer patients continue to be treated and ensure that access to radiotherapy and chemotherapy is maintained.</li> <li>Roll out of mass COVID vaccine starting with frontline staff with direct patient contact in Morriston Hospital.</li> <li>Continue to encourage maximum uptake of the flu vaccine for all healthcare workers and all eligible people.</li> <li>Make sure staff are able to access COVID19 antigen testing in a timely manner.</li> <li>Address volume and length of wait for outpatient contacts</li> </ul>
Opportunities	Risks & Threats
<ul style="list-style-type: none"> <li>Resilience study day- A new virtual well-being course has been arranged for 10<sup>th</sup> December 2020 and is open to all staff. The course aims to help process the emotions and difficult experiences many staff have been through during the COVID-19 pandemic.</li> <li>Experimental new measures for emergency departments in Wales have been launched. The new measures will better record what happens to patients when accessing emergency care than existing targets, and should help to drive improvement in patient care. Data collection for the new measures will commenced in November 2020 and will be routinely published from January 2021.</li> <li>Link in with all-Wales work on risk stratification of elective waiting lists.</li> </ul>	<ul style="list-style-type: none"> <li>The ongoing COVID19 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"> <li>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</li> <li>Number of staff self isolating</li> <li>Reduction in capacity for elective treatments is increasing waiting times</li> <li>The health board's ability and pace to reintroduce and maintain essential services in the safest way for staff and patients</li> </ul> </li> </ul>

## 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) –NOVEMBER 2020




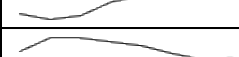

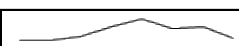
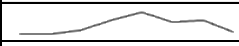
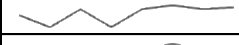
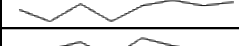
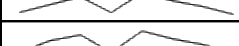
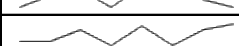

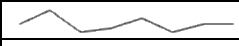
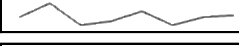



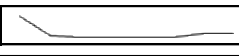
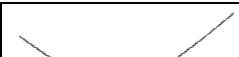

			Quarter 1			Quarter 2			Quarter 3			Quarter 4		
			Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-20	Feb-20	Mar-20
Unscheduled Care	4 hour A&E waits	Actual	78.4%	83.5%	87.7%	80.1%	80.6%	76.4%	77.2%	75.4%				
		Profile	76.8%	77.2%	77.1%	78.8%	78.4%	77.7%	78.5%	78.9%	78.5%	79.0%	81.4%	82.5%
	12 hour A&E waits	Actual	131	97	81	223	286	537	494	626				
		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				
		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%				
		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%				
		Profile												
	Assessed by Stroke Specialist within 24 hours	Actual			100%	95%	97%	98%	98%	97%				
		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%				
		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				
		Profile												
	Treatment waits over 36 weeks	Actual	8,355	10,248	13,419	18,078	22,494	26,046	30,776	34,431				
		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				
		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				
		Profile	0	0	0	0	0	0	0	0	0	0	0	0
Cancer	NUSC patients starting treatment in 31 days	Actual	97%	82%	85%	90%	91%	94%	83%	86%				
		Profile	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%
	USC patients starting treatment in 62 days	Actual	81%	86%	88%	91%	91%	82%	85%	62%				
		Profile	87%	83%	86%	86%	90%	93%	92%	91%	96%	95%	94%	94%
Healthcare Acquired Infections	Number of healthcare acquired C.difficile cases	Actual	11	16	20	11	23	18	15	10				
		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				
		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				
		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				
		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				
		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





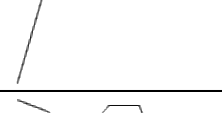

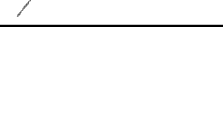
The following dashboard shows how the Health Board performed against the measures in the operational plan.

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	Comments
Covid Demand:												
• Number of new cases				1,381	303	57	53	66	787	4,662	5,523	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	6,459	8,199	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)	Source: COVID staff briefing (07/12/2020)
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>	Source: COVID staff briefing (07/12/2020)
Complaints, incidents and risks related to Covid:												
• Number of incidents				119	67	40	26	39	30	87	137	Source:COVID19 dashboard
• Number of serious incidents				1	0	2	0	11	1	1		
• Number of complaints				77	61	39	58	27	30	37	48	
• Number of risk				19	20	19	5	8	2	6	7	
Daily PPE Stock- amount of supply:												
•Mask – FFP3	Morriston		>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		
	NPTH		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs		
	PCC		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs		
	MH & LD		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs		
•Mask – FRSM Type 11R	Morriston		24-48hrs	>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		
	NPTH		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs		
	PCC		24-48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs		
	MH & LD		24-48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs		
•Gloves	Morriston		>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		
	NPTH		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs		
	PCC		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs		
	MH & LD		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs		
•Gowns	Morriston		>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		
	NPTH		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs		
	PCC		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs		
	MH & LD		>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		Data reported a month in arrears. Snapshots taken mid month Source: Workforce	
	Nursing Reg		270	166	145	133	142	149	106			
	Nursing Non Reg		148	105	112	97	96	77	95			
	Other		352	206	190	163	158	93	111			
Number of staff self isolated (symptomatic)	Medical		90	13	7	2	0	8	17			
	Nursing Reg		289	117	56	23	14	25	44			
	Nursing Non Reg		177	67	37	18	9	8	25			
	Other		304	95	41	27	13	31	46			
% sickness	Medical		14.9%	4.0%	3.0%	2.8%	2.5%	4.0%	3.2%			
	Nursing Reg		14.2%	7.0%	5.1%	4.0%	4.0%	4.4%	3.8%			
	Nursing Non Reg		16.6%	8.0%	7.2%	5.5%	5.2%	4.2%	6.0%			
	Other		11.0%	5.0%	3.6%	2.9%	2.7%	2.0%	2.5%			
	All		13.2%	6.0%	4.5%	3.6%	3.5%	3.2%	3.5%			

Harm from overwhelmed NHS and social care system											
		Trend <i>(from 1st Apr 20)</i>	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Comments
NHS Wales Delivery Measures for USC:											
•% 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%	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	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	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%	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	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	Hospital and community attributed cases of infection. Source: Public Health Wales HCAI dashboard
	Rate per 100k pop.		43.8	42.3	53.1	75.6	96.8	71.9	75.6	50	
•Staph.Aueurs bacteraemia	Number of cases		10	6	12	6	12	14	12	13	
	Rate per 100k pop.		31.3	18.1	37.5	18.1	36.3	43.8	36.3	40.6	
•Clostridium Difficile	Number of cases		11	16	20	11	23	18	15	10	
	Rate per 100k pop.		34.4	51.4	62.5	33.3	69.6	56.2	45.4	34.4	
•Klebsiella spp. Bacteraemia	Number of cases		6	6	9	5	10	5	9	11	
	Rate per 100k pop.		18.8	18.1	28.1	15.1	30.2	15.6	27.2	34.4	
•Pseudomonas aeruginosa bacteraemia	Number of cases		2	5	0	1	3	0	2	2	
	Rate per 100k pop.		6.3	15.1	0.0	3.0	9.1	0.0	6.1	6.3	
Medically Fit for Discharge numbers			88	78	92	101	112	114	142	139	Snapshot taken on the last day of the month. Source: COVID19 dashboard
Number of mortuary spaces			72	161	233	188	170	164	158	129	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	29	Source: COVID19 dashboard
Hospital bed occupancy (suspected and confirmed COVID19):											
•General bed			186	58	46	41	30	37	176	343	Snapshot taken on the last day of the month. Source: COVID19 dashboard
•Critical Care bed			19	5	4	1	0	3	11	18	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	Comments
NHS Wales Delivery Framework measures for cancer, RTT and diagnostics											
•Cancer	NUSC- 31 day access target		97.1%	90.6%	84.7%	90.3%	90.0%	94.2%	83.1%	86% (draft)	Data reported two months in arrears.
	USC- 62 day access target		80.8%	91.7%	87.8%	90.5%	90.6%	81.6%	85.2%	62% (draft)	Final November 2020 data will be available on 31/12/20
	Single cancer pathway		70.9%	72.1%	73.0%	81.5%	80.0%	71.0%	73.0%	52% (draft)	Source: SaFF report.
•RTT	% waiting under 26 weeks		72.3%	64.0%	59.5%	52.4%	46.5%	41.0%	44.8%	49.2%	Snapshot taken on the last day of the month.
	Number > 36 weeks		8,355	10,248	13,419	18,078	22,494	26,046	30,776	34,431	Source: RTT and D&T monthly submission
•Diagnostics	Number > 8 weeks		5,788	8,346	8,033	7,510	8,070	7,666	6,645	6,610	
PROMs and PREMs			Data to be sourced								
Patient Feedback:											
•Number of friends and family surveys completed			150	247	393	502	625	2,804	1,047	787	Source: Patient Feedback Team
•% of who would recommend and highly recommend			90%	92%	87%	91%	81%	93%	82%	84%	
•% of All Wales surveys scoring 9 or 10 on overall satisfaction			95%	100%	79%	91%	83%	84%	79%	85%	
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	Comments
Vaccination and Immunisation rates- % of children who received:											
•3 doses of the '6 in 1' vaccine by age 1					96.5%						Source: Public Health Wales COVER Report.
•MenB2 vaccine by age 1					96.8%						
•PCV2 vaccine by age 1					96.4%						
•Rotavirus vaccine by age 1					96.9%						
•MMR1 vaccine by age 2					94.4%						
•PCVf3 vaccine by age 2					94.1%						
•MenB4 vaccine by age 2					93.5%						
•Hib/MenC vaccine by age 2					93.6%						
•Up to date in schedule by age 4					88.7%						
•2 doses of the MMR vaccine by age 5					90.8%						
•4 in 1 vaccine by age 5					92.2%						
•MMR vaccination by age 16					95.1%						
•Teenage booster by age 16					90.9%						
•MenACWY vaccine by age 16					91.6%						
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%		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%		
	% patients waiting < 26 weeks to start a psychological therapy in Specialist Adult Mental Health		93%	89%	84%	89%	91%	99%	99.7%		
	% 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%		



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	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%		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%		
	% 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%		
	P-CAMHS - % of Routine Assessment by CAMHS undertaken within 28 days from receipt of referral		Data not available	88%	100%	100%	100%	62%	21%		
	P-CAMHS - % of therapeutic interventions started within 28 days following assessment by LPMHSS		Data not available	100%	100%	100%	86%	100%	100%		
	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%		
	S-CAMHS - % of Routine Assessment by SCAMHS undertaken within 28 days from receipt of referral		46%	72%	100%	100%	100%	98%	79%		



## 4.1 HARM FROM COVID ITSELF

Chart 1: Number of new COVID19 cases

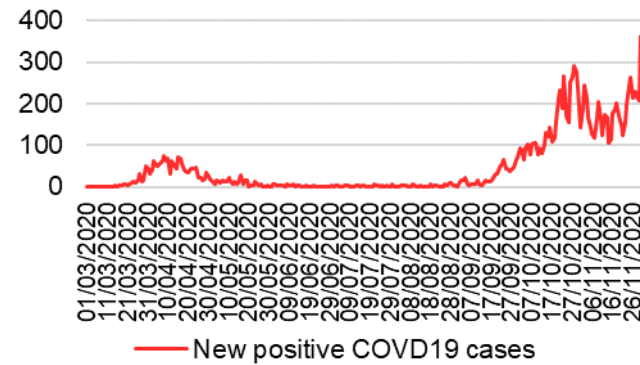


Chart 2: Number of new COVID19 cases (cumulative)

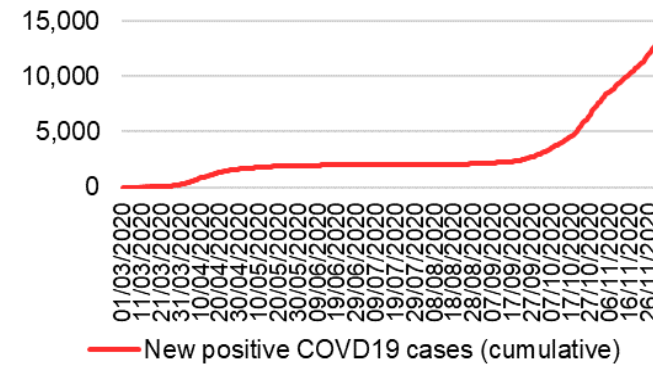


Chart 3: Number of COVID19 tests completed and positivity rate

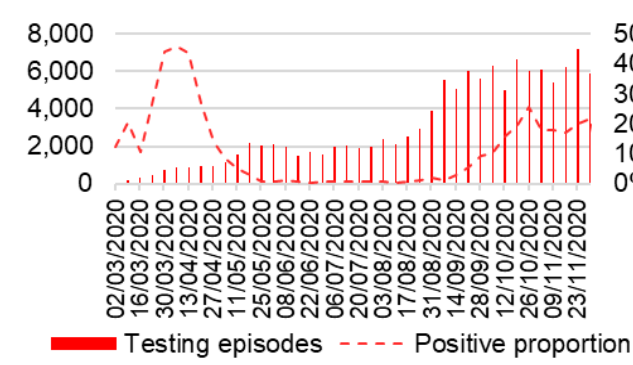


Chart 4: Number of staff referred for Antigen testing

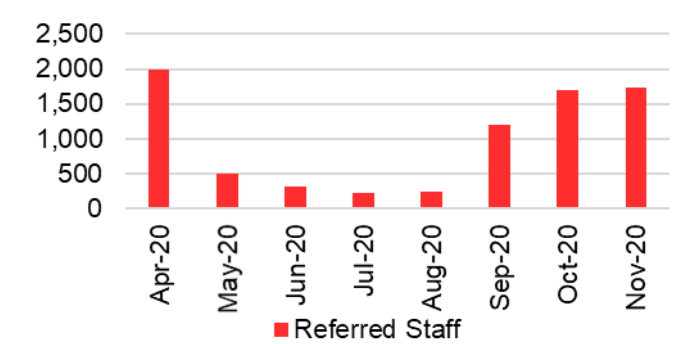


Chart 5: Outcome of staff COVID19/ antigen tests

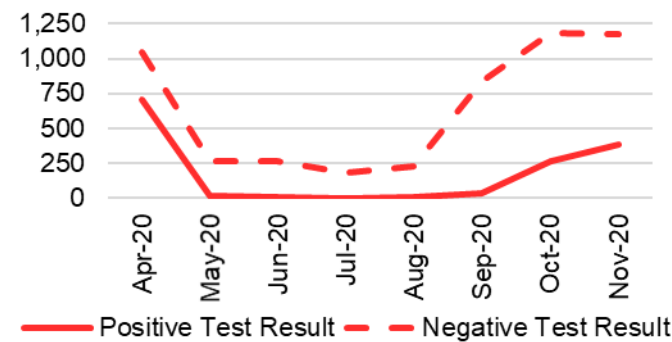


Chart 6: Number of COVID19 related incidents

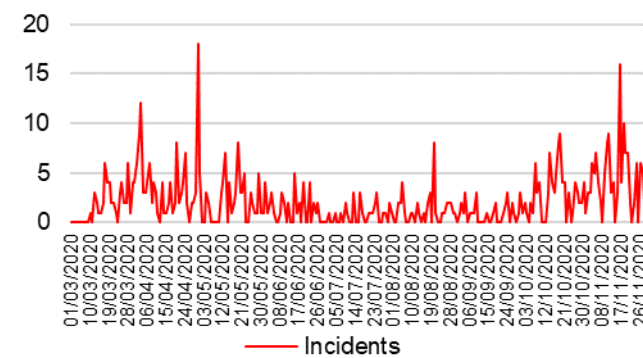


Chart 7: Number of COVID19 related serious incidents

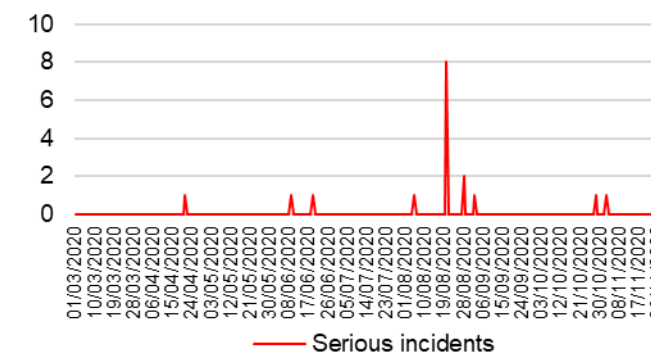


Chart 8: Number of COVID19 related complaints

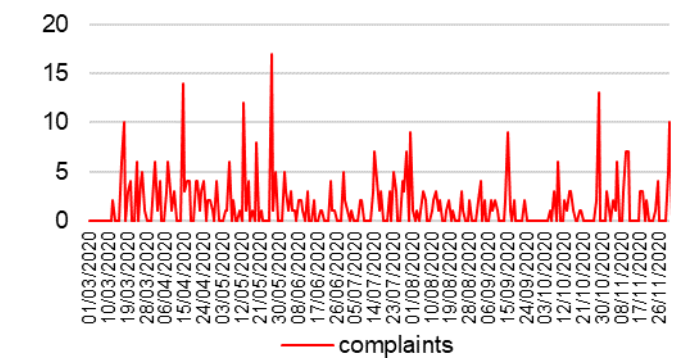


Chart 9: Number of COVID19 related risks

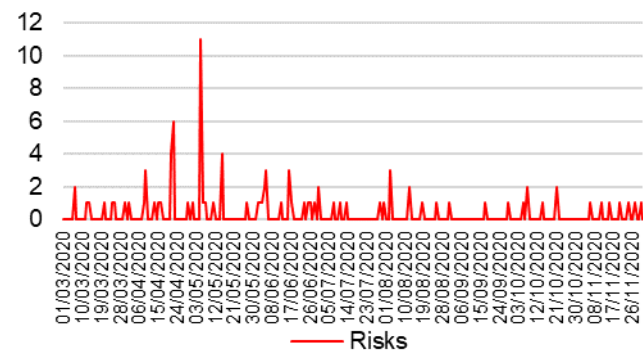


Chart 10: Number of staff self isolating (asymptomatic)

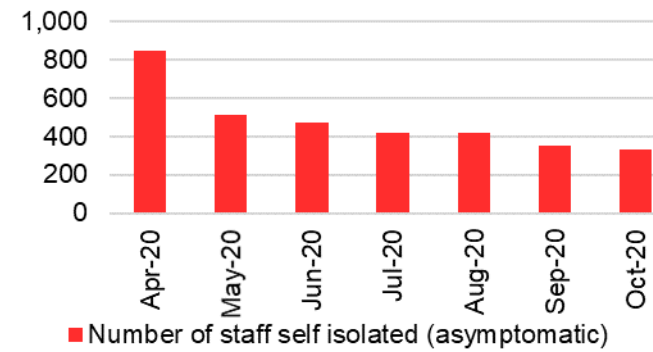


Chart 11: Number of staff self isolating (symptomatic)

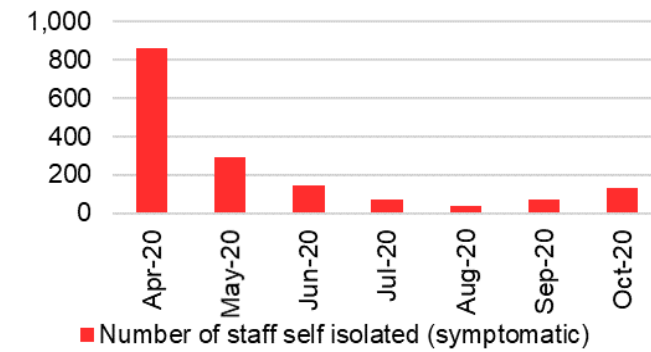


Chart 12: % staff sickness

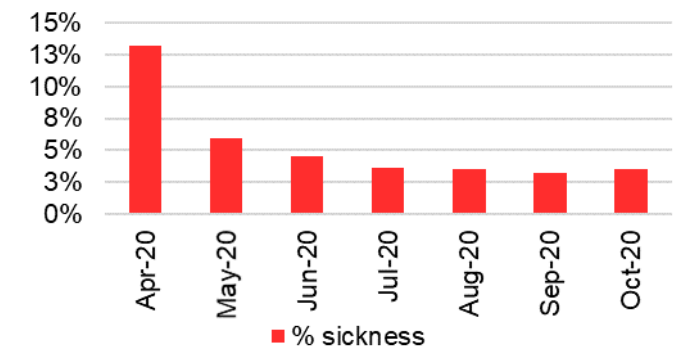


Chart 13: Bed Occupancy for suspected and confirmed COVID19 cases

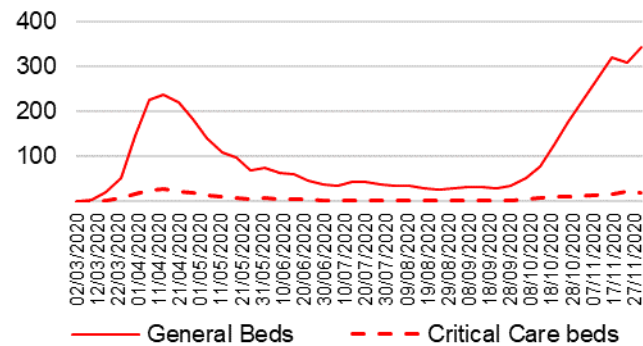


Chart 14: Number of hospital deaths with any mention of COVID19

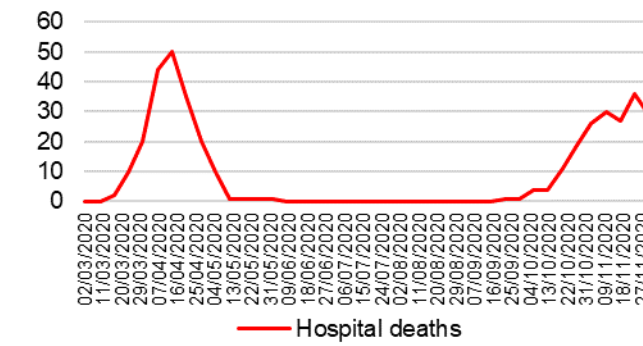


Chart 15: Number of weekly registered deaths with any mention of COVID19 (ONS data)

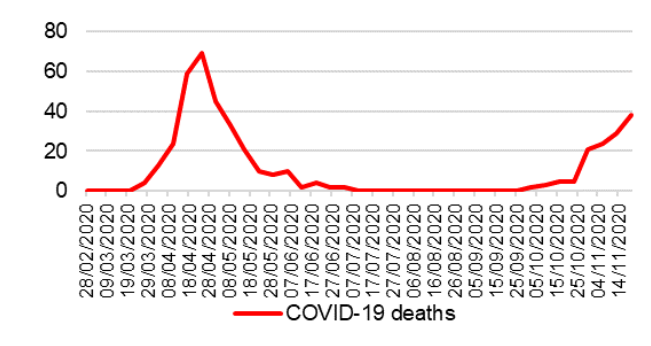
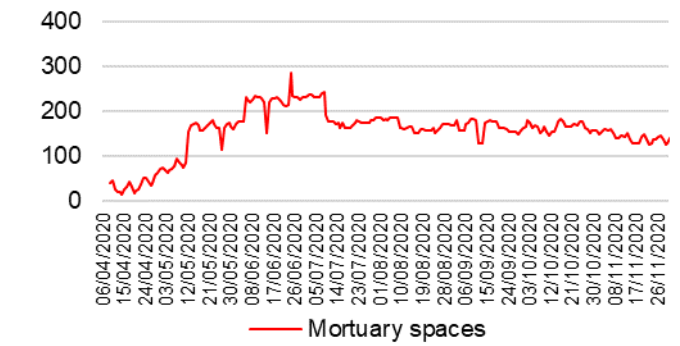
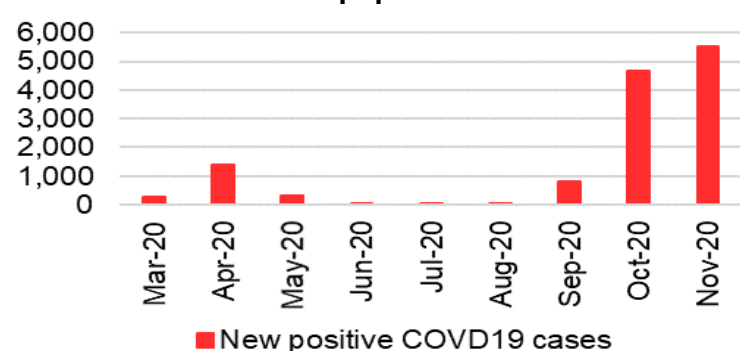
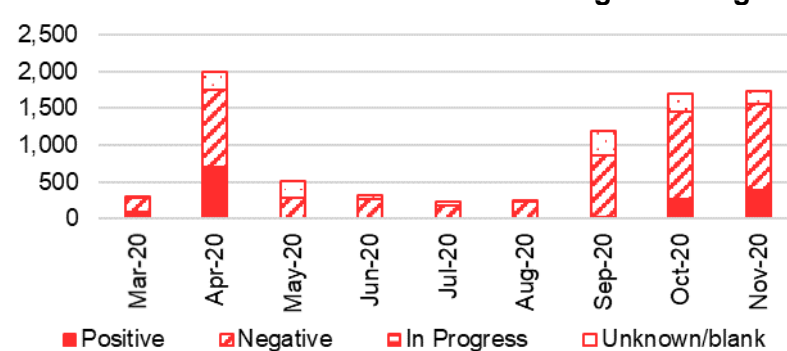
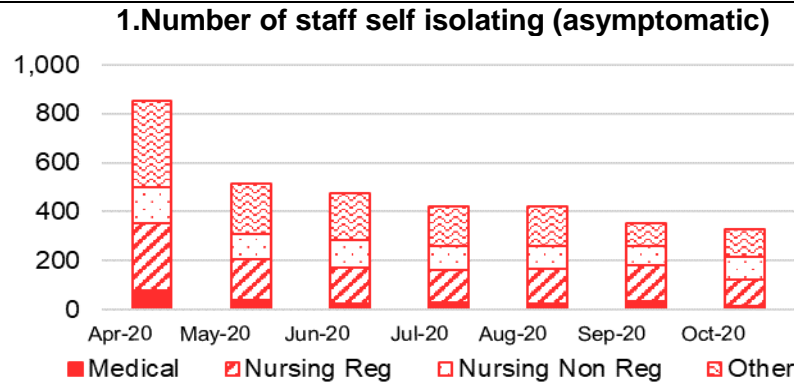
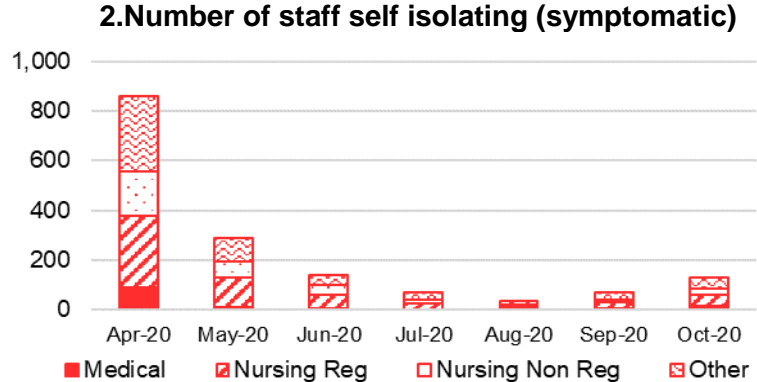


Chart 16: Number of mortuary spaces



## 4.1 Updates on key measures

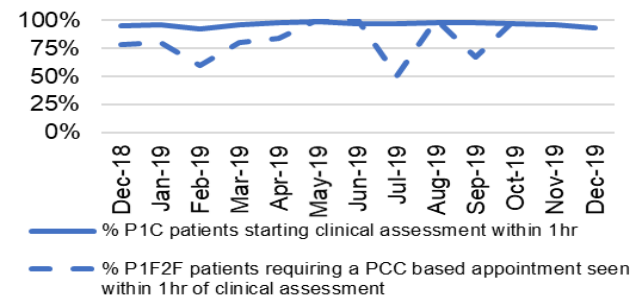
COVID TESTING																																																			
Description	Current Performance	Trend																																																	
1. Number of new COVID19 cases in Swansea Bay population area  2. Number of staff referred for Antigen testing  3. Number of staff waiting results of Antigen test	<b>1. Number of new COVID cases</b> In November 2020, there were an additional 5,523 positive cases recorded bringing the cumulative total to 13,094 in Swansea Bay since March 2020. In November 2020, 43,297 tests were carried out of which 13% (5,523) were positive.	<b>1. Number of new COVID19 cases for Swansea Bay population</b>  <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>~200</td></tr><tr><td>Apr-20</td><td>~1,500</td></tr><tr><td>May-20</td><td>~500</td></tr><tr><td>Jun-20</td><td>~100</td></tr><tr><td>Jul-20</td><td>~100</td></tr><tr><td>Aug-20</td><td>~100</td></tr><tr><td>Sep-20</td><td>~800</td></tr><tr><td>Oct-20</td><td>~4,500</td></tr><tr><td>Nov-20</td><td>~5,500</td></tr></tbody></table>	Month	New positive COVID19 cases	Mar-20	~200	Apr-20	~1,500	May-20	~500	Jun-20	~100	Jul-20	~100	Aug-20	~100	Sep-20	~800	Oct-20	~4,500	Nov-20	~5,500																													
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Nov-20	~5,500																																																		
<b>2. Staff referred for Antigen testing</b> The cumulative number of staff referred for COVID testing between March 2020 and November 2020 is 8,199 of which 1,504 had had a positive COVID test result (18%).	<b>2. Number of staff referred for Antigen testing</b>  <table border="1"><caption>2. Number 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>~100</td><td>~100</td><td>~100</td></tr><tr><td>Apr-20</td><td>~1,800</td><td>~1,200</td><td>~100</td><td>~100</td></tr><tr><td>May-20</td><td>~400</td><td>~400</td><td>~100</td><td>~100</td></tr><tr><td>Jun-20</td><td>~200</td><td>~200</td><td>~100</td><td>~100</td></tr><tr><td>Jul-20</td><td>~100</td><td>~100</td><td>~100</td><td>~100</td></tr><tr><td>Aug-20</td><td>~100</td><td>~100</td><td>~100</td><td>~100</td></tr><tr><td>Sep-20</td><td>~1,200</td><td>~800</td><td>~100</td><td>~100</td></tr><tr><td>Oct-20</td><td>~1,600</td><td>~1,000</td><td>~100</td><td>~100</td></tr><tr><td>Nov-20</td><td>~1,700</td><td>~1,000</td><td>~100</td><td>~100</td></tr></tbody></table>	Month	Positive	Negative	In Progress	Unknown/blank	Mar-20	~200	~100	~100	~100	Apr-20	~1,800	~1,200	~100	~100	May-20	~400	~400	~100	~100	Jun-20	~200	~200	~100	~100	Jul-20	~100	~100	~100	~100	Aug-20	~100	~100	~100	~100	Sep-20	~1,200	~800	~100	~100	Oct-20	~1,600	~1,000	~100	~100	Nov-20	~1,700	~1,000	~100	~100
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Nov-20	~1,700	~1,000	~100	~100																																															
<b>3. Number of staff awaiting results of Antigen test</b> 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 6 <sup>th</sup> December 2020 show that 41 members of staff awaiting their antigen test result.																																																			

COVID RELATED STAFF ABSENCE																																																						
Description	Current Performance	Trend																																																				
Staff absence due to COVID19	The following data is based on the mid-month position and broken down into the categories requested by Welsh Government.																																																					
	1. & 2. Number of staff self-isolating (asymptomatic and symptomatic) The number of staff self-isolating increased between September and October 2020. "Other" staff has the largest number of self-isolating staff who are asymptomatic and symptomatic in October 2020.	<div>1.Number of staff self isolating (asymptomatic)</div> 																																																				
	3. % Staff sickness The percentage of staff sickness absence due to COVID-19 has significantly reduced from 13.2% in April 2020 to 3.5% in October 2020.	<div>2.Number of staff self isolating (symptomatic)</div>  <div>3.% staff sickness</div> <table><tr><th></th><th>Apr-20</th><th>May-20</th><th>Jun-20</th><th>Jul-20</th><th>Aug-20</th><th>Sep-20</th><th>Oct-20</th></tr><tr><td>Medical</td><td>14.9%</td><td>4.0%</td><td>3.0%</td><td>2.8%</td><td>2.5%</td><td>4.0%</td><td>3.2%</td></tr><tr><td>Nursing Reg</td><td>14.2%</td><td>7.0%</td><td>5.1%</td><td>4.0%</td><td>4.0%</td><td>4.4%</td><td>3.8%</td></tr><tr><td>Nursing Non Reg</td><td>16.6%</td><td>8.0%</td><td>7.2%</td><td>5.5%</td><td>5.2%</td><td>4.2%</td><td>6.0%</td></tr><tr><td>Other</td><td>11.0%</td><td>5.0%</td><td>3.6%</td><td>2.9%</td><td>2.7%</td><td>2.0%</td><td>2.5%</td></tr><tr><td>All</td><td>13.2%</td><td>6.0%</td><td>4.5%</td><td>3.6%</td><td>3.5%</td><td>3.2%</td><td>3.5%</td></tr></table>							Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Medical	14.9%	4.0%	3.0%	2.8%	2.5%	4.0%	3.2%	Nursing Reg	14.2%	7.0%	5.1%	4.0%	4.0%	4.4%	3.8%	Nursing Non Reg	16.6%	8.0%	7.2%	5.5%	5.2%	4.2%	6.0%	Other	11.0%	5.0%	3.6%	2.9%	2.7%	2.0%	2.5%	All	13.2%	6.0%	4.5%	3.6%	3.5%	3.2%
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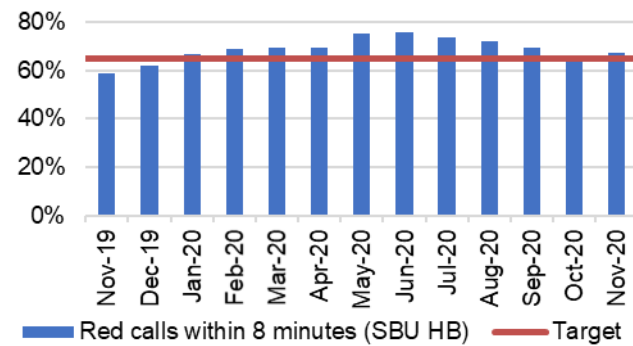
## HARM FROM OVERWHELMED NHS AND SOCIAL CARE SYSTEM

### 5.1 Unscheduled Care- Overview

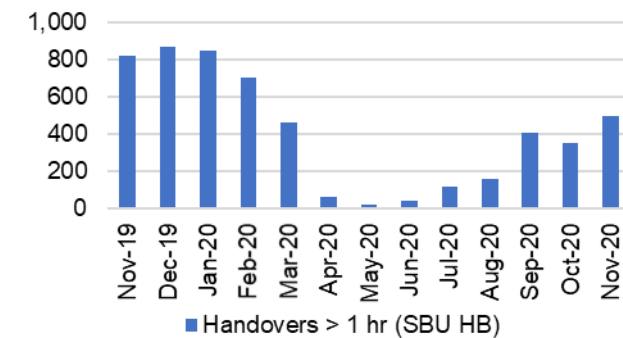
**Chart 1: GP Out of Hours/ 111**



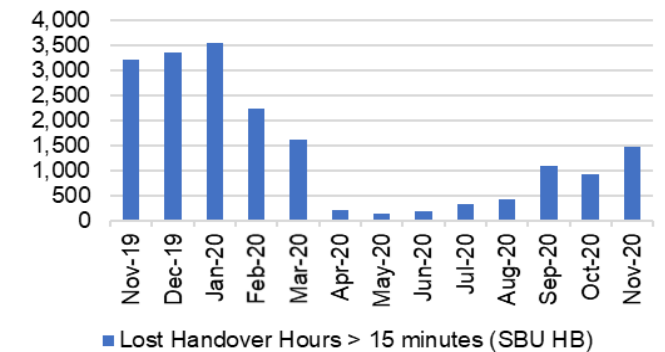
**Chart 2: % red calls responded to within 8 minutes**



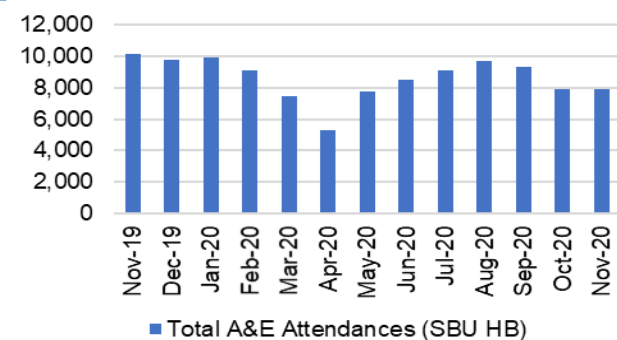
**Chart 3: Number of ambulance handovers over 1 hour**



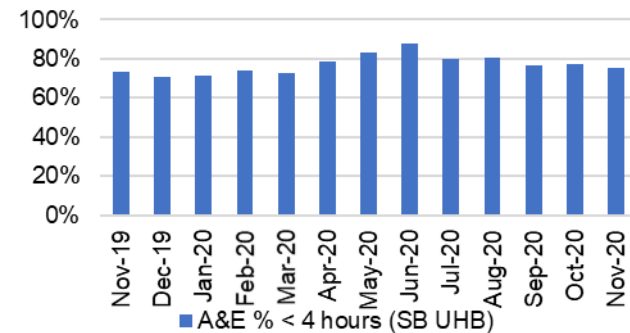
**Chart 4: Lost hours- notification to ambulance handover over 15 minutes**



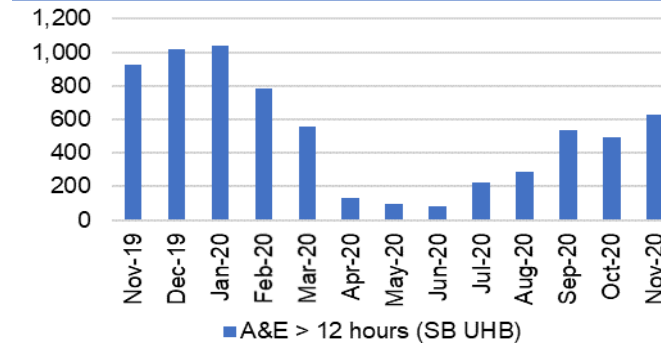
**Chart 5: A&E Attendances**



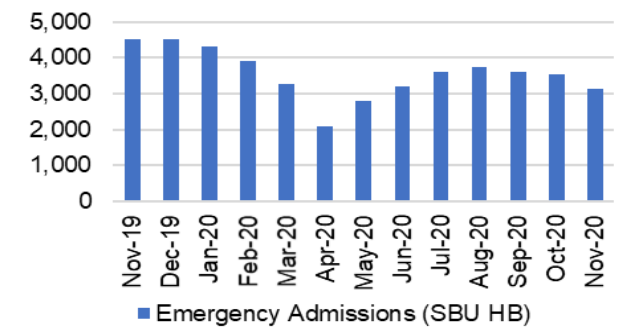
**Chart 6: % patients who spend less than 4 hours in A&E**



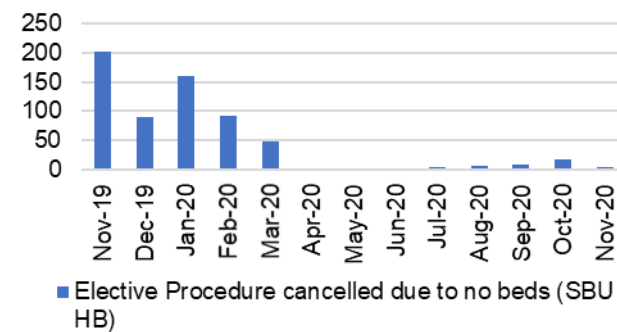
**Chart 7: Number of patients waiting over 12 hours in A&E**



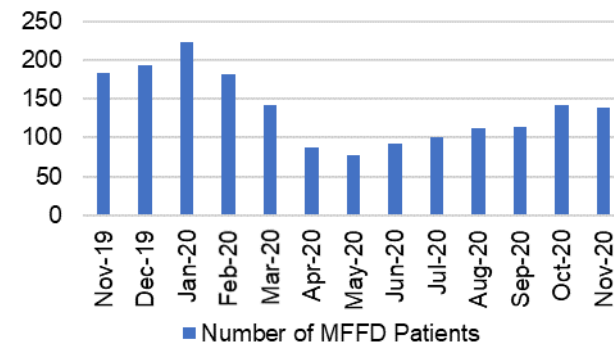
**Chart 8: Number of emergency admissions**



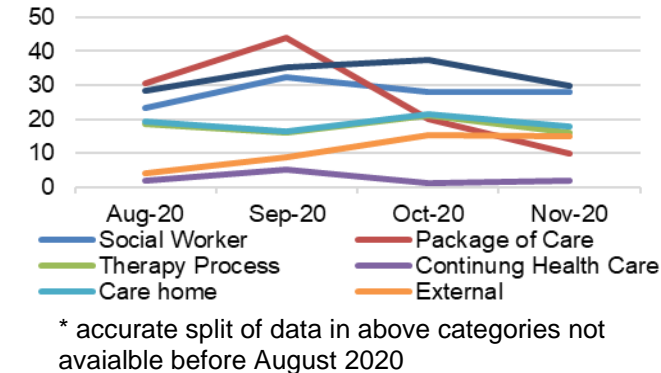
**Chart 9: Elective procedures cancelled due to lack of beds**



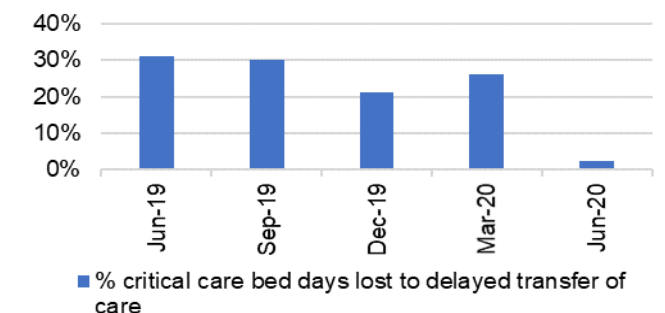
**Chart 10: Number of Medically Fit For Discharge (MFFD) patients**



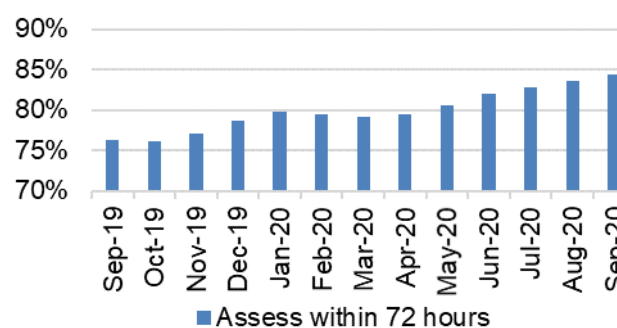
**Chart 11: Delay reason for Medically Fit For Discharge (MFFD) patients**



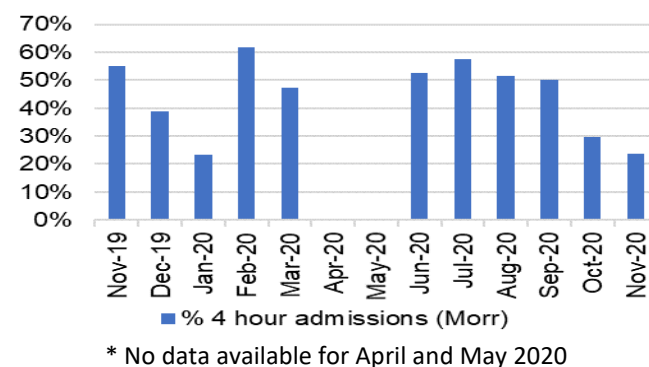
**Chart 12: % of critical care bed days lost to delayed transfers of care**



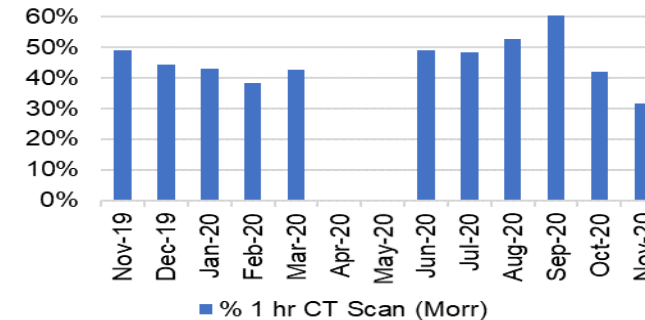
**Chart 12: % of patients (> 60 years) who presented with a hip fracture that received an orthogeriatrician assessment within 72 hours**



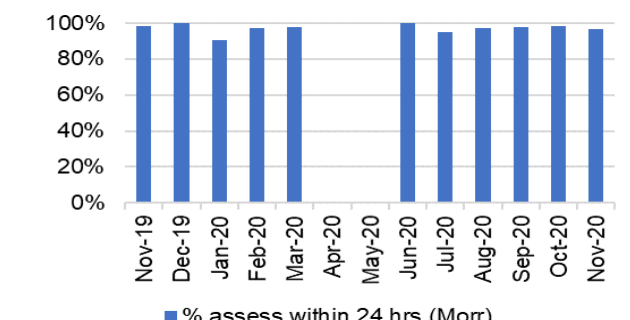
**Chart 13: Direct admission to Acute Stroke Unit within 4 hours**



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



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



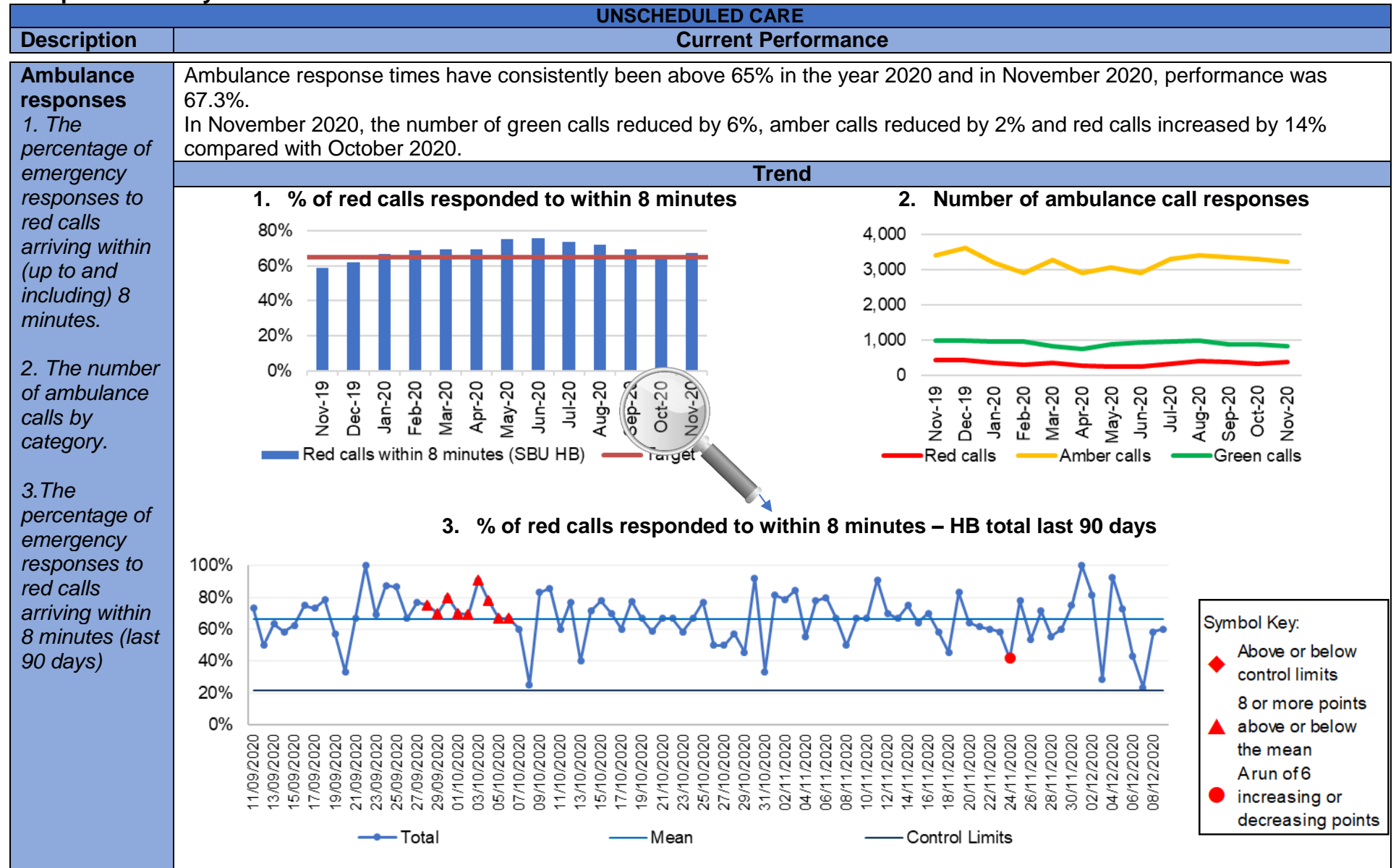


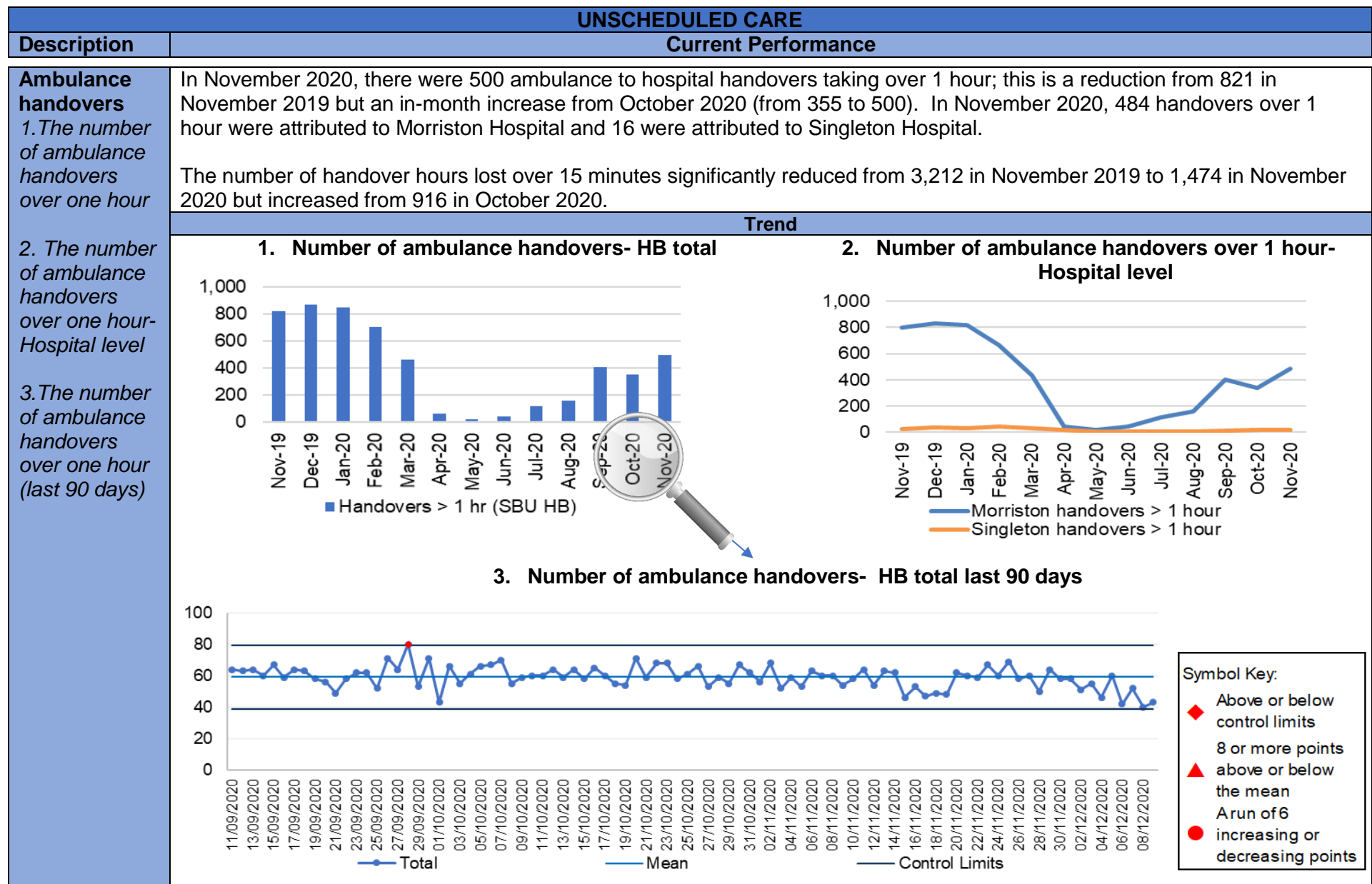
## Unscheduled Care Overview (November 2020)

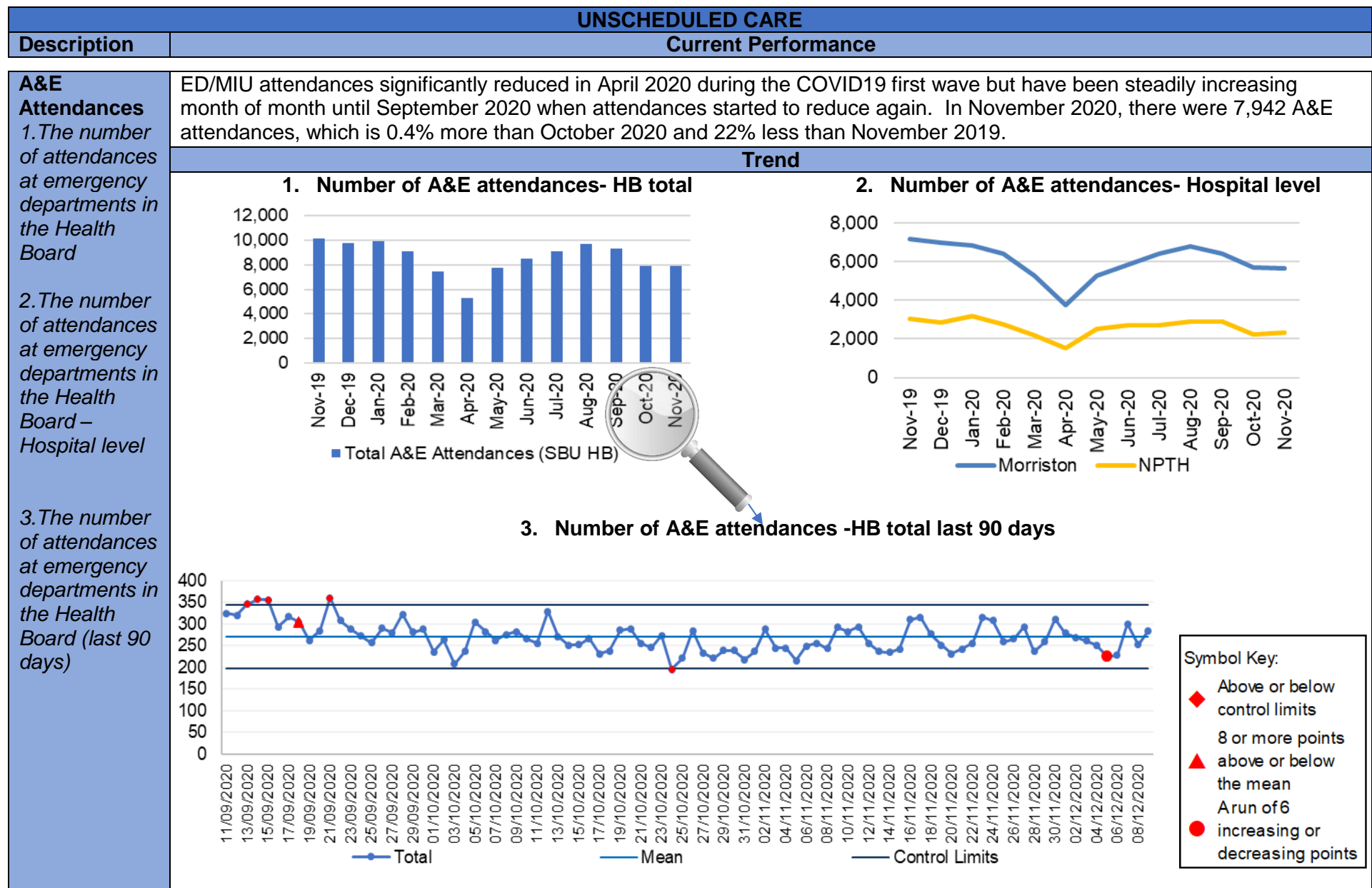
Primary Care Access		Ambulance	Emergency Department	
<b>97% (→)</b> GP practices open during daily core hours	<b>88% (→)</b> GP practices offering appointments between 5pm-6:30pm	<b>67.3% (1%↑)</b> Red calls responded to within 8 minutes	<b>7,942 (0.4%↑)</b> A&E attendances	<b>75.4% (1.8%↓)</b> Waits in A&E under 4 hours
<b>93% (3%↓)</b> % of Out of Hours (OoH)/111 patients prioritised as P1CH that started their definitive clinical assessment within 1 hour of their initial call being answered ( <i>July-19</i> )	<b>100% (33%↑)</b> % of Out of Hours (OOH)/111 patients prioritised as P1F2F requiring a Primary Care Centre (PCC) based appointment seen within 1 hour following completion of their definitive clinical assessment ( <i>Oct-19</i> )	<b>500 (41%↑)</b> Ambulance handovers over 1 hour	<b>626 (27%↑)</b> Waits in A&E over 12 hours	<b>1,178 (10%↓)</b> Patients admitted from A&E
		<b>3,216 (2%↓)</b> Amber calls		
		<b>386 (14%↑)</b> Red calls		
Emergency Activity		Patient Flow		
<b>3,149 (11%↓)</b> Emergency Inpatient Admissions	<b>323 (11%↓)</b> Emergency Theatre Cases	<b>13 (19%↓) (Mar-20)</b> Mental Health DTOCs * Data collection temporarily suspended	<b>60 (13%↓) (Mar-20)</b> Non-Mental Health DTOCs * Data collection temporarily suspended	
<b>279 (7%↓)</b> Trauma theatre cases	<b>5 (71%↓)</b> Elective procedures cancelled due to no beds			
			<b>139 (2%↓)</b> Medically fit patients	

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

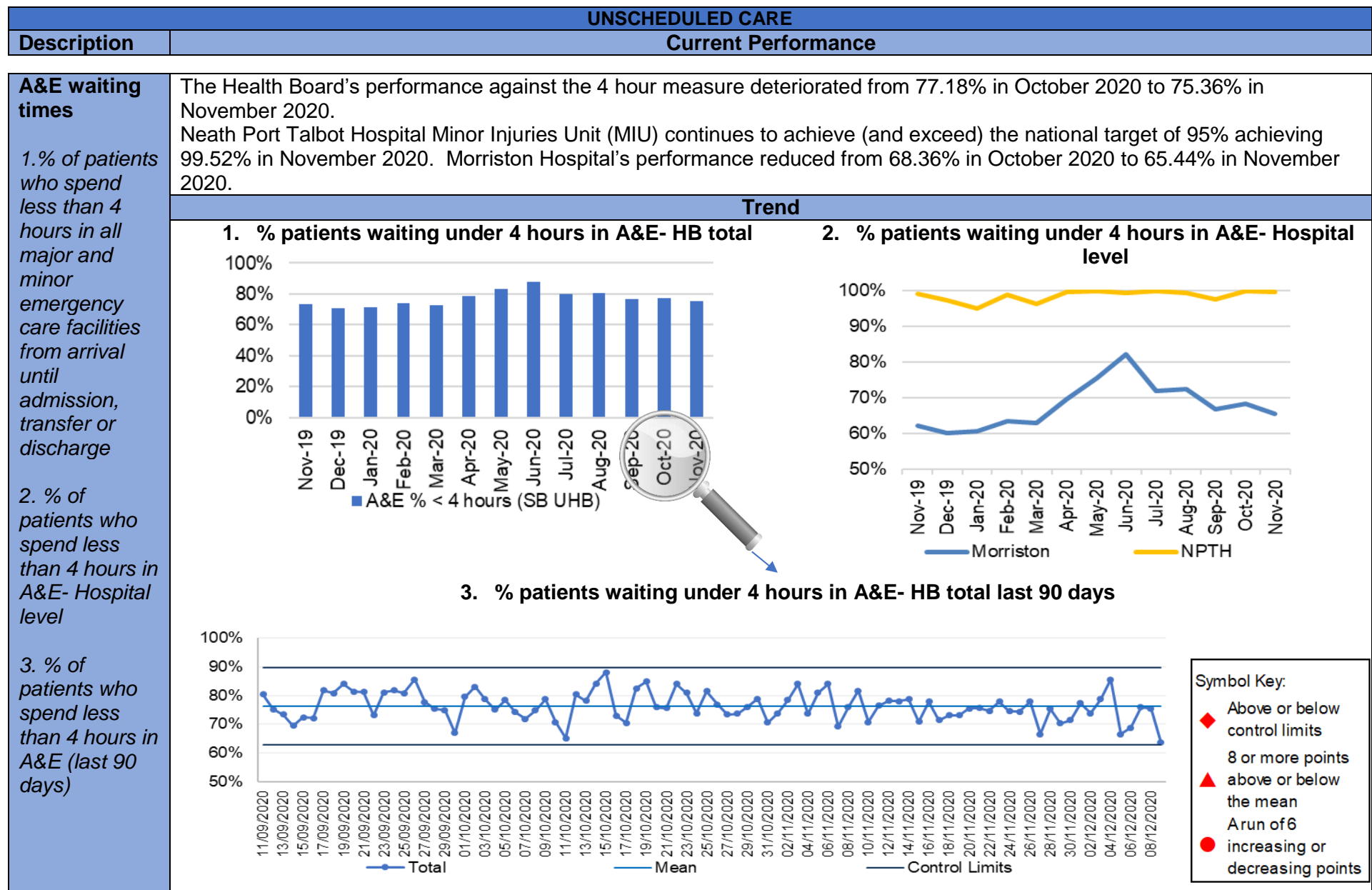
## 5.2 Updates on key measures

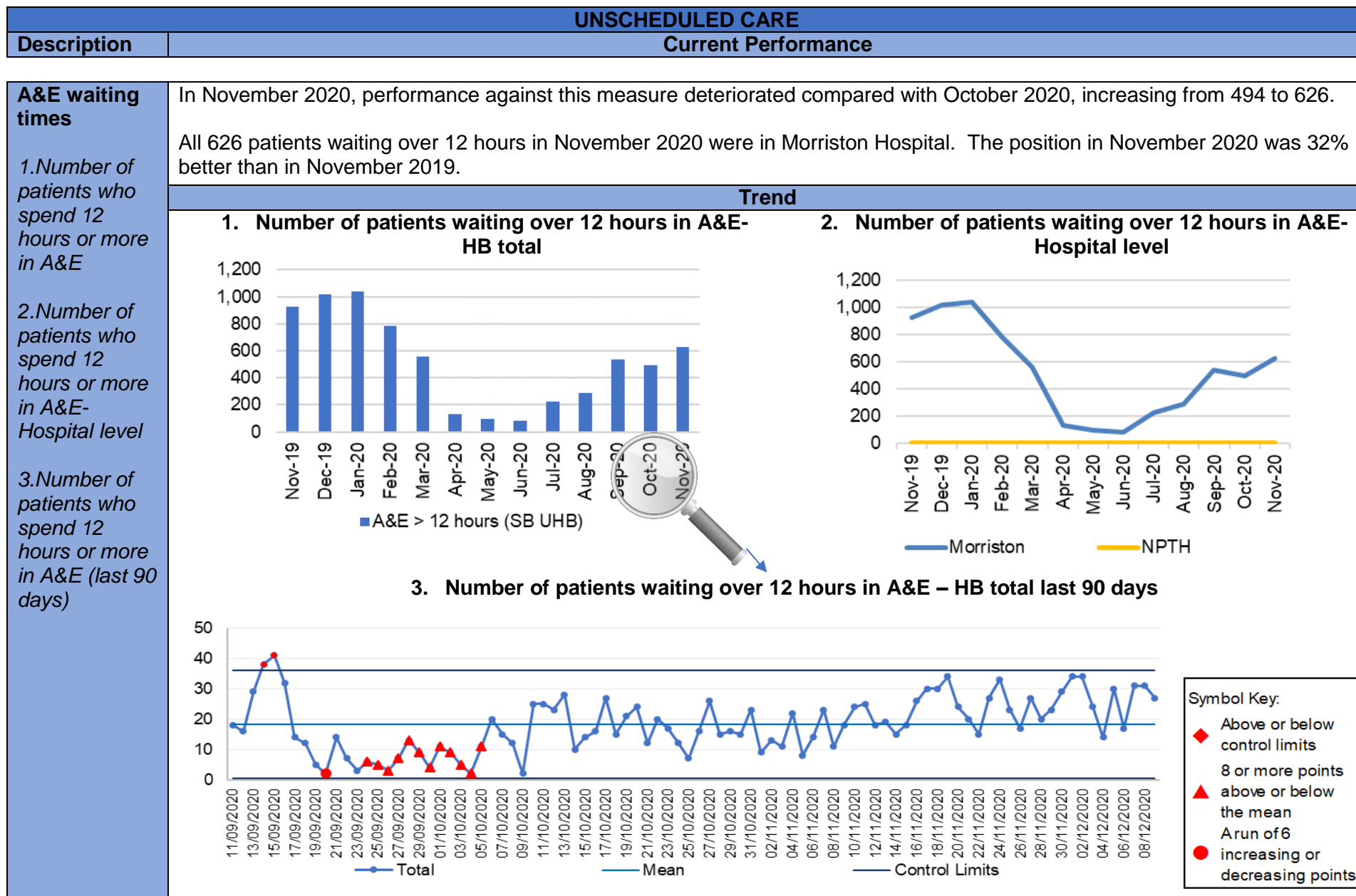


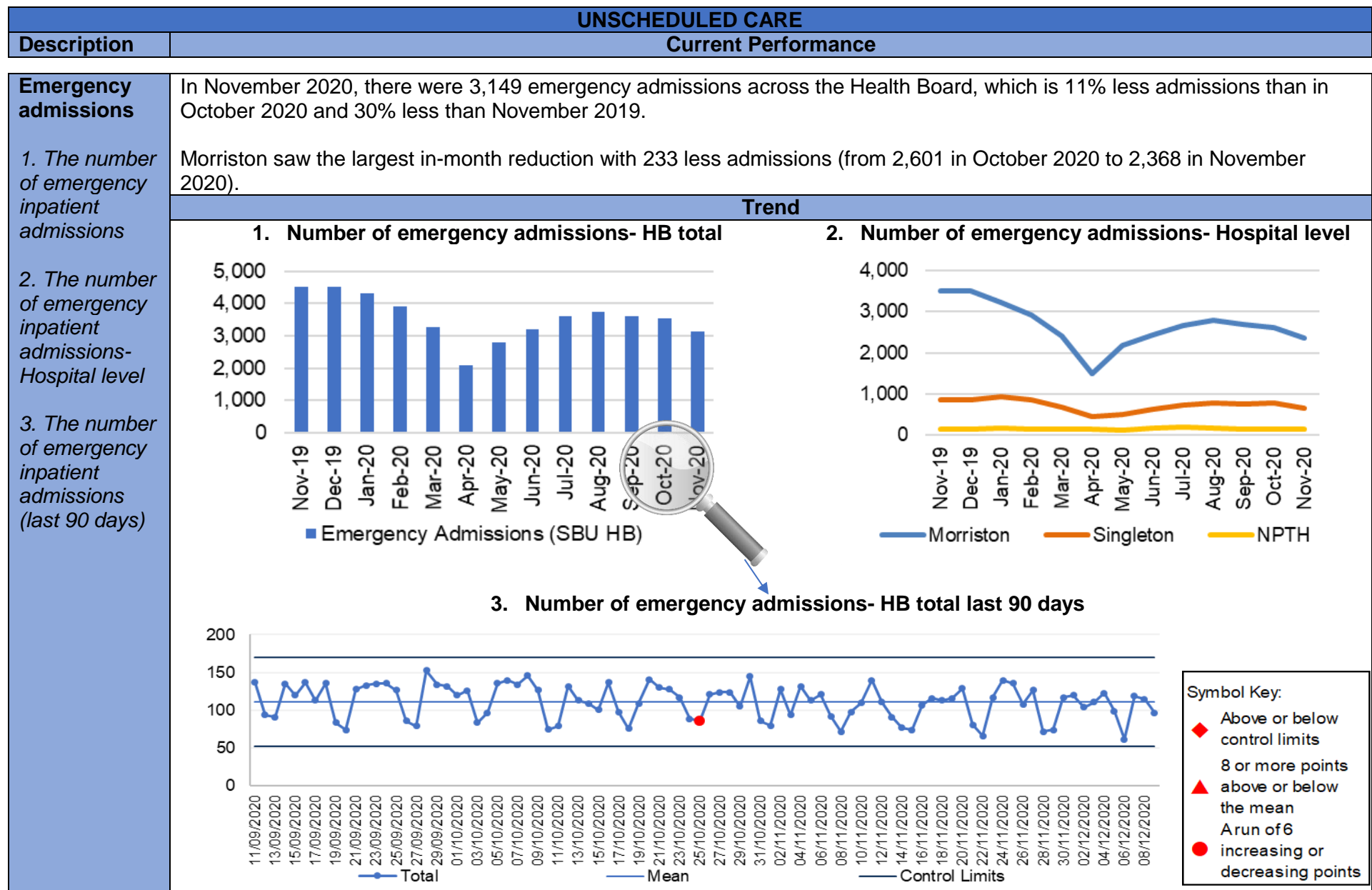


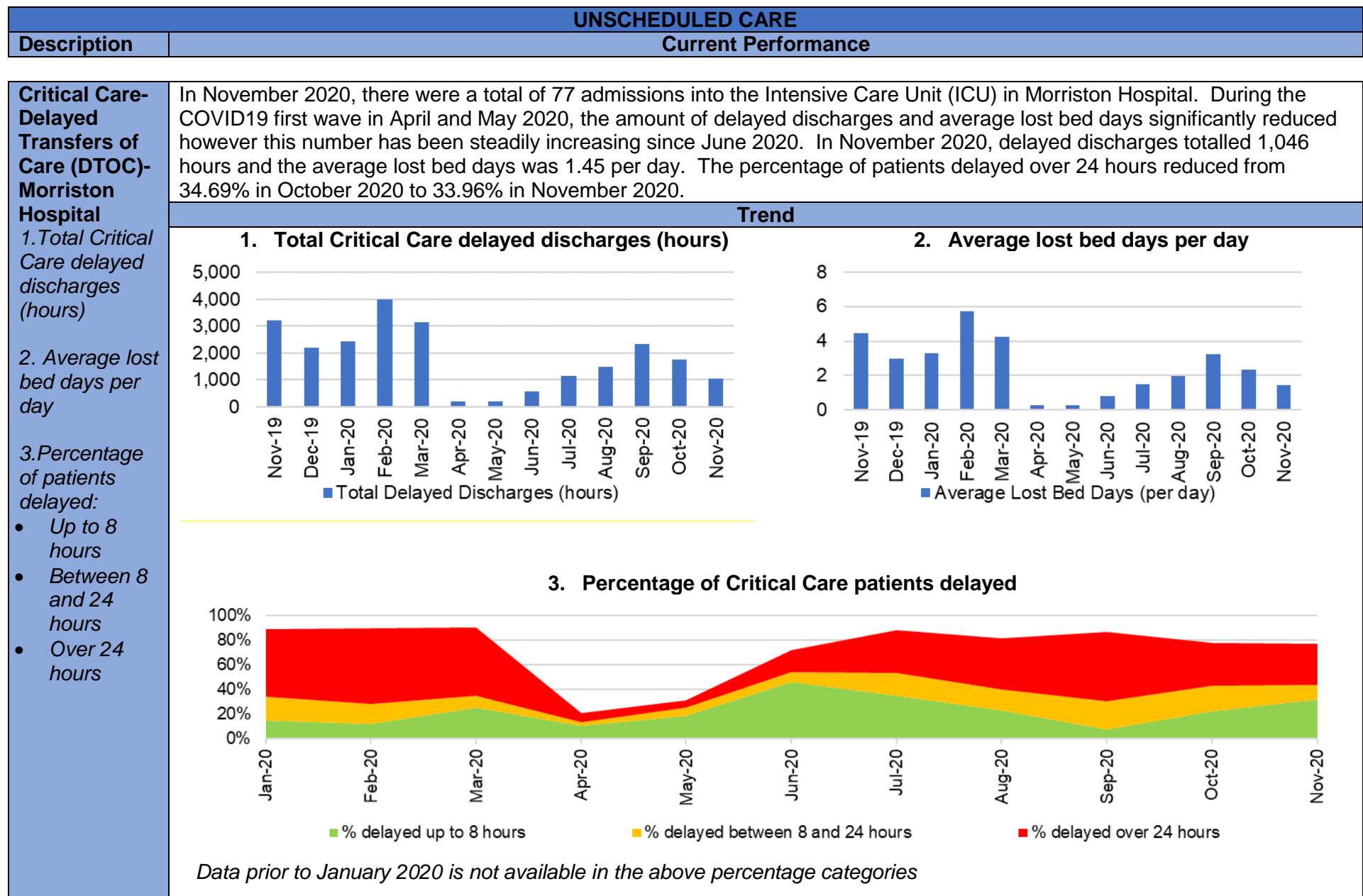










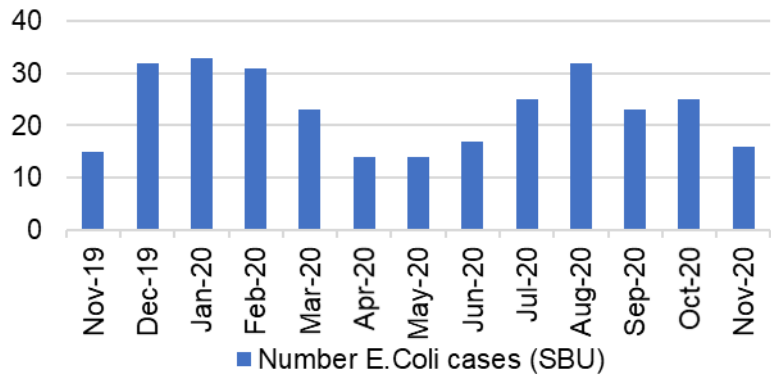
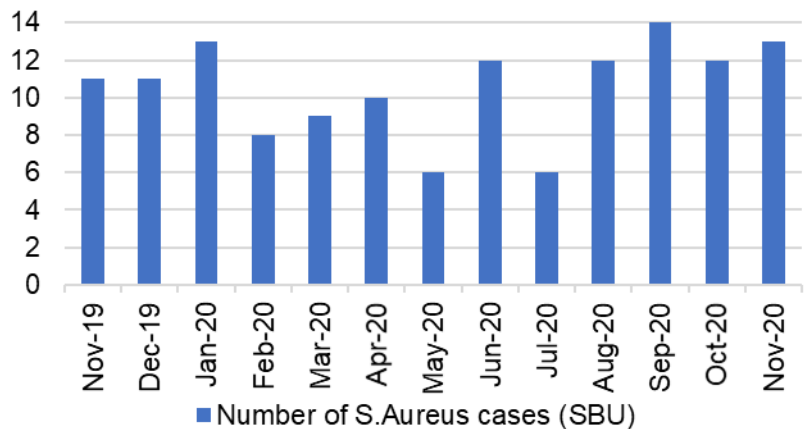


UNSCHEDULED CARE		
Description	Current Performance	Trend
<b>Medically Fit</b> <i>The number of patients waiting at each site in the Health Board that are deemed discharge/ medically fit</i>	<p>In November 2020, there were on average 139 patients who were deemed medically/ discharge fit but were still occupying a bed in the Health Board's Hospitals.</p> <p>The number of medically/ discharge fit patients has risen every month since June 2020, however November 2020 was the first month to see an in-month reduction (from 142 in October 2020 to 139 in November 2020).</p> <p>In November 2020, Morriston Hospital had the largest proportion of medically/ discharge fit patients with 61 out of 139 followed by Singleton with 40.</p>	<p><b>The number of discharge/ medically fit patients by site</b></p> <p>*Consistent data capture for Gorseinon not available before May 2020</p>
<b>Elective procedures cancelled due to lack of beds</b> <i>The number of elective procedure cancelled across the hospital where the main cancellation reasons was lack of beds</i>	<p>In November 2020, there were 5 elective procedures cancelled due to lack of beds on the day of surgery. This is 12 less cancellation than in October 2020 (from 17 to 5).</p> <p>In November 2020, all 5 cancelled procedures were attributed to Morriston Hospital.</p>	<p><b>Total number of elective procedures cancelled due to lack of beds</b></p>

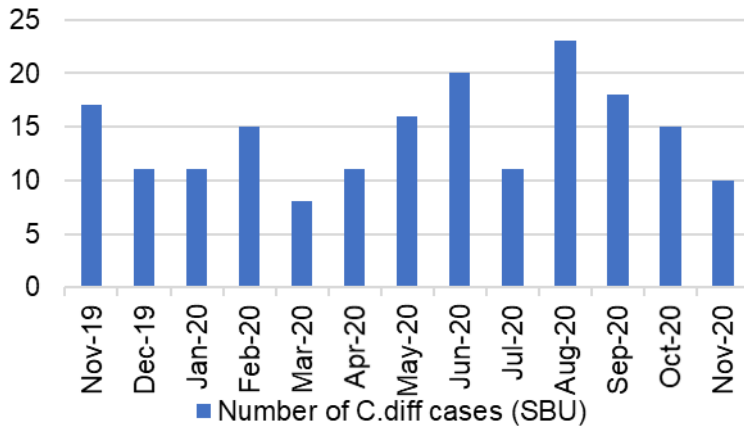
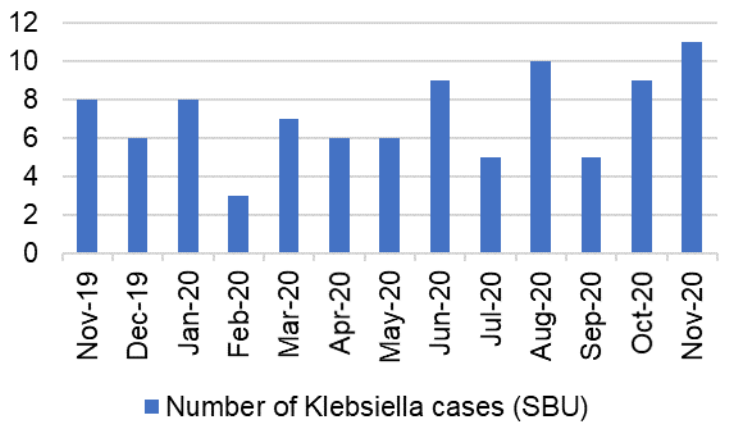
FRACTURED NECK OF FEMUR (#NOF)		
Description	Current Performance	Trend
<b>Fractured Neck of Femur (#NOF)</b> 1. Prompt orthogeriatric assessment- % patients receiving an assessment by a senior geriatrician within 72 hours of presentation  2. Prompt surgery - % patients undergoing surgery the day following presentation with hip fracture  3. NICE compliant surgery - % of operations consistent with the recommendations of NICE CG124  4. Prompt mobilisation after surgery - % patients out of bed (standing or hoisted) by the day after operation	<p><b>1. Prompt orthogeriatric assessment-</b> In September 2020, 84.4% of patients in Morriston hospital received an assessment by a senior geriatrician within 72 hours. This is 8.1% more than in September 2019.</p> <p><b>2. Prompt surgery-</b> In September 2020, 51.7% of patients had surgery the day following presentation with a hip fracture. This is a reduction from September 2019 which was 59.6%</p> <p><b>3. NICE compliant surgery-</b> 73.8% of operations were consistent with the NICE recommendations in September 2020. This is an improvement of 4.7% compared with September 2019 (from 69.1% to 73.8%). In September 2020, Morriston was above the all-Wales average of 67.0%.</p> <p><b>4. Prompt mobilisation-</b> In September 2020, 75.4% of patients were out of bed the day after surgery. This is an improvement of 4.3% compared with September 2019 and above the all-Wales average of 73.9%.</p>	<p><b>1. Prompt orthogeriatric assessment</b></p> <p><b>2. Prompt surgery</b></p> <p><b>3. NICE compliant Surgery</b></p> <p><b>4. Prompt mobilisation</b></p>

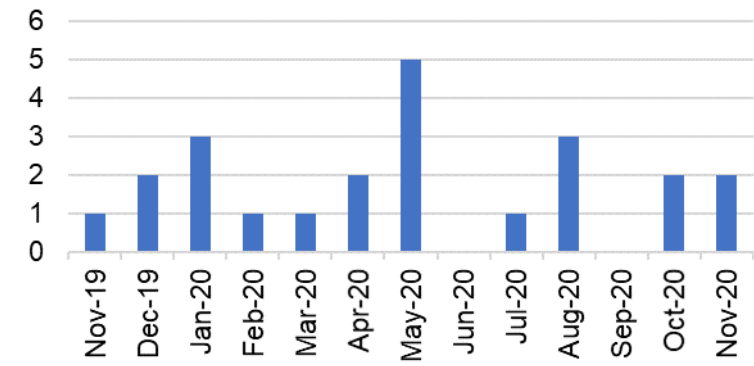
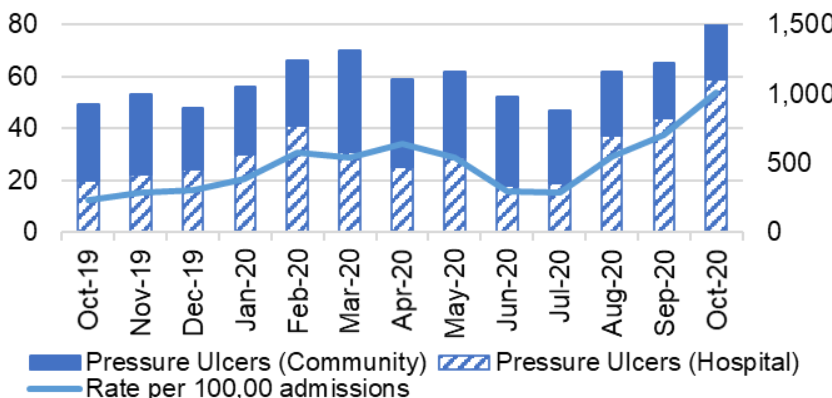


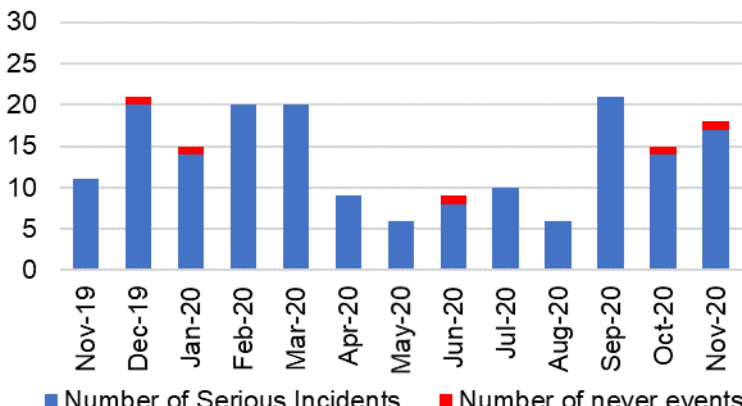
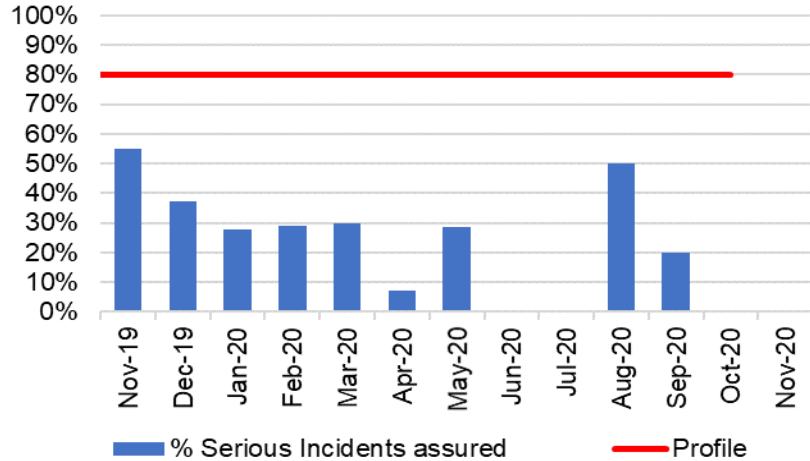
FRACTURED NECK OF FEMUR (#NOF)																																																										
Description	Current Performance	Trend																																																								
5. <i>Not delirious when tested- % patients (&lt;4 on 4AT test) when tested in the week after operation</i>	5. <b>Not delirious when tested-</b> 68.8% of patients were not delirious in the week after their operation in September 2020. This is an improvement of 33.6% compared with September 2019.	<p><b>5. Not delirious when tested</b></p> <table border="1"><thead><tr><th>Month</th><th>Morriston</th><th>All-Wales</th><th>Eng, Wal &amp; N. Ire</th></tr></thead><tbody><tr><td>Sep-19</td><td>35%</td><td>45%</td><td>75%</td></tr><tr><td>Oct-19</td><td>38%</td><td>48%</td><td>75%</td></tr><tr><td>Nov-19</td><td>40%</td><td>50%</td><td>75%</td></tr><tr><td>Dec-19</td><td>42%</td><td>52%</td><td>75%</td></tr><tr><td>Jan-20</td><td>45%</td><td>55%</td><td>75%</td></tr><tr><td>Feb-20</td><td>48%</td><td>58%</td><td>75%</td></tr><tr><td>Mar-20</td><td>50%</td><td>60%</td><td>75%</td></tr><tr><td>Apr-20</td><td>52%</td><td>62%</td><td>75%</td></tr><tr><td>May-20</td><td>55%</td><td>65%</td><td>75%</td></tr><tr><td>Jun-20</td><td>58%</td><td>68%</td><td>75%</td></tr><tr><td>Jul-20</td><td>60%</td><td>70%</td><td>75%</td></tr><tr><td>Aug-20</td><td>62%</td><td>72%</td><td>75%</td></tr><tr><td>Sep-20</td><td>69%</td><td>55%</td><td>75%</td></tr></tbody></table>	Month	Morriston	All-Wales	Eng, Wal & N. Ire	Sep-19	35%	45%	75%	Oct-19	38%	48%	75%	Nov-19	40%	50%	75%	Dec-19	42%	52%	75%	Jan-20	45%	55%	75%	Feb-20	48%	58%	75%	Mar-20	50%	60%	75%	Apr-20	52%	62%	75%	May-20	55%	65%	75%	Jun-20	58%	68%	75%	Jul-20	60%	70%	75%	Aug-20	62%	72%	75%	Sep-20	69%	55%	75%
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6. <i>Return to original residence- % patients discharged back to original residence, or in that residence at 120 day follow-up</i>	6. <b>Return to original residence-</b> 76.6% of patients in September 2020 were discharged back to their original residence. This was above the all-Wales average of 74.5%.	<p><b>6. Return to original residence</b></p> <table border="1"><thead><tr><th>Month</th><th>Morriston</th><th>All-Wales</th><th>Eng, Wal &amp; N. Ire</th></tr></thead><tbody><tr><td>Sep-19</td><td>68%</td><td>74%</td><td>71%</td></tr><tr><td>Oct-19</td><td>70%</td><td>75%</td><td>71%</td></tr><tr><td>Nov-19</td><td>72%</td><td>76%</td><td>71%</td></tr><tr><td>Dec-19</td><td>74%</td><td>75%</td><td>71%</td></tr><tr><td>Jan-20</td><td>76%</td><td>74%</td><td>71%</td></tr><tr><td>Feb-20</td><td>75%</td><td>73%</td><td>71%</td></tr><tr><td>Mar-20</td><td>76%</td><td>74%</td><td>71%</td></tr><tr><td>Apr-20</td><td>77%</td><td>73%</td><td>71%</td></tr><tr><td>May-20</td><td>76%</td><td>74%</td><td>71%</td></tr><tr><td>Jun-20</td><td>77%</td><td>75%</td><td>71%</td></tr><tr><td>Jul-20</td><td>77%</td><td>76%</td><td>71%</td></tr><tr><td>Aug-20</td><td>77%</td><td>76%</td><td>71%</td></tr><tr><td>Sep-20</td><td>77%</td><td>74.5%</td><td>71%</td></tr></tbody></table>	Month	Morriston	All-Wales	Eng, Wal & N. Ire	Sep-19	68%	74%	71%	Oct-19	70%	75%	71%	Nov-19	72%	76%	71%	Dec-19	74%	75%	71%	Jan-20	76%	74%	71%	Feb-20	75%	73%	71%	Mar-20	76%	74%	71%	Apr-20	77%	73%	71%	May-20	76%	74%	71%	Jun-20	77%	75%	71%	Jul-20	77%	76%	71%	Aug-20	77%	76%	71%	Sep-20	77%	74.5%	71%
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7. <i>30 day mortality rate</i>	7. <b>30 day mortality rate-</b> In August 2020 the mortality rate for Morriston Hospital was 7.0% which is 1.7% lower than August 2019. The mortality rate in Morriston Hospital in August 2020 is higher than the all-Wales average of 6.1% and the national average of 6.8%.	<p><b>7. 30 day mortality rate</b></p> <table border="1"><thead><tr><th>Month</th><th>Morriston</th><th>All-Wales</th><th>Eng, Wal &amp; N. Ire</th></tr></thead><tbody><tr><td>Aug-19</td><td>8.7%</td><td>8.0%</td><td>7.0%</td></tr><tr><td>Sep-19</td><td>8.5%</td><td>7.8%</td><td>7.0%</td></tr><tr><td>Oct-19</td><td>8.2%</td><td>7.6%</td><td>7.0%</td></tr><tr><td>Nov-19</td><td>8.0%</td><td>7.4%</td><td>7.0%</td></tr><tr><td>Dec-19</td><td>7.8%</td><td>7.2%</td><td>7.0%</td></tr><tr><td>Jan-20</td><td>7.6%</td><td>7.0%</td><td>7.0%</td></tr><tr><td>Feb-20</td><td>7.4%</td><td>6.8%</td><td>7.0%</td></tr><tr><td>Mar-20</td><td>7.2%</td><td>6.6%</td><td>7.0%</td></tr><tr><td>Apr-20</td><td>7.0%</td><td>6.4%</td><td>7.0%</td></tr><tr><td>May-20</td><td>6.8%</td><td>6.2%</td><td>7.0%</td></tr><tr><td>Jun-20</td><td>6.6%</td><td>6.0%</td><td>7.0%</td></tr><tr><td>Jul-20</td><td>6.4%</td><td>5.8%</td><td>7.0%</td></tr><tr><td>Aug-20</td><td>7.0%</td><td>6.1%</td><td>6.8%</td></tr></tbody></table>	Month	Morriston	All-Wales	Eng, Wal & N. Ire	Aug-19	8.7%	8.0%	7.0%	Sep-19	8.5%	7.8%	7.0%	Oct-19	8.2%	7.6%	7.0%	Nov-19	8.0%	7.4%	7.0%	Dec-19	7.8%	7.2%	7.0%	Jan-20	7.6%	7.0%	7.0%	Feb-20	7.4%	6.8%	7.0%	Mar-20	7.2%	6.6%	7.0%	Apr-20	7.0%	6.4%	7.0%	May-20	6.8%	6.2%	7.0%	Jun-20	6.6%	6.0%	7.0%	Jul-20	6.4%	5.8%	7.0%	Aug-20	7.0%	6.1%	6.8%
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HEALTHCARE ACQUIRED INFECTIONS																														
Description	Current Performance	Trend																												
<b>Healthcare Acquired Infections (HCAI) - E.coli bacteraemia-</b> <i>Number of laboratory confirmed E.coli bacteraemia cases</i>	<ul style="list-style-type: none"><li>16 cases of <i>E. coli</i> bacteraemia were identified in November 2020, of which 5 were hospital acquired and 11 were community acquired.</li><li>Cumulative cases from April to November 2020 are 16% less than the equivalent period in 2019/20.</li></ul>	<b>Number of healthcare acquired E.coli bacteraemia cases</b>  <table><caption>Number of healthcare acquired E.coli bacteraemia cases (SBU)</caption><thead><tr><th>Month</th><th>Number of cases</th></tr></thead><tbody><tr><td>Nov-19</td><td>15</td></tr><tr><td>Dec-19</td><td>32</td></tr><tr><td>Jan-20</td><td>33</td></tr><tr><td>Feb-20</td><td>31</td></tr><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></tbody></table>	Month	Number of cases	Nov-19	15	Dec-19	32	Jan-20	33	Feb-20	31	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
Month	Number of cases																													
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Aug-20	32																													
Sep-20	23																													
Oct-20	25																													
Nov-20	16																													
<b>Healthcare Acquired Infections (HCAI)- S.aureus bacteraemia-</b> <i>Number of laboratory confirmed S.aureus bacteraemias (MRSA &amp; MSSA) cases</i>	<ul style="list-style-type: none"><li>There were 13 cases of <i>Staph. aureus</i> bacteraemia in November 2020, of which 7 were hospital acquired and 6 were community acquired.</li><li>Cumulative cases from April to November 2020 are 8% less than the equivalent period in 2019/20.</li></ul>	<b>Number of healthcare acquired S.aureus bacteraemia cases</b>  <table><caption>Number of healthcare acquired S.aureus bacteraemia cases (SBU)</caption><thead><tr><th>Month</th><th>Number of cases</th></tr></thead><tbody><tr><td>Nov-19</td><td>11</td></tr><tr><td>Dec-19</td><td>11</td></tr><tr><td>Jan-20</td><td>13</td></tr><tr><td>Feb-20</td><td>8</td></tr><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></tbody></table>	Month	Number of cases	Nov-19	11	Dec-19	11	Jan-20	13	Feb-20	8	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
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HEALTHCARE ACQUIRED INFECTIONS																														
Description	Current Performance	Trend																												
<b>Healthcare Acquired Infections (HCAI)- C.difficile-</b> <i>Number of laboratory confirmed C.difficile cases</i>	<ul style="list-style-type: none"><li>There were 10 <i>Clostridium difficile</i> toxin positive cases in November 2020, of which 8 were hospital acquired and 2 were community acquired.</li><li>Cumulative cases from April to November 2020 are 33% more than the equivalent period of 2019/20 (124 in 2020/21 compared with 93 in 2019/20).</li></ul>	<p><b>Number of healthcare acquired C.difficile cases</b></p>  <table><tr><th>Month</th><th>Number of C.diff cases (SBU)</th></tr><tr><td>Nov-19</td><td>17</td></tr><tr><td>Dec-19</td><td>11</td></tr><tr><td>Jan-20</td><td>11</td></tr><tr><td>Feb-20</td><td>15</td></tr><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></table> <p>■ Number of C.diff cases (SBU)</p>	Month	Number of C.diff cases (SBU)	Nov-19	17	Dec-19	11	Jan-20	11	Feb-20	15	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
Month	Number of C.diff cases (SBU)																													
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Nov-20	10																													
<b>Healthcare Acquired Infections (HCAI)- Klebsiella sp-</b> <i>Number of laboratory confirmed Klebsiella sp cases</i>	<ul style="list-style-type: none"><li>There were 11 cases of Klebsiella sp in November 2020, of which 7 were hospital acquired and 4 were community acquired.</li><li>Cumulative cases from April to November are 5% more than the equivalent period in 2019/20.</li></ul>	<p><b>Number of healthcare acquired Klebsiella cases</b></p>  <table><tr><th>Month</th><th>Number of Klebsiella cases (SBU)</th></tr><tr><td>Nov-19</td><td>8</td></tr><tr><td>Dec-19</td><td>6</td></tr><tr><td>Jan-20</td><td>8</td></tr><tr><td>Feb-20</td><td>3</td></tr><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></table> <p>■ Number of Klebsiella cases (SBU)</p>	Month	Number of Klebsiella cases (SBU)	Nov-19	8	Dec-19	6	Jan-20	8	Feb-20	3	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
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HEALTHCARE ACQUIRED INFECTIONS		
Description	Current Performance	Trend
<b>Healthcare Acquired Infections (HCAI)- Aeruginosa-</b> <i>Number of laboratory confirmed Aeruginosa cases</i>	<ul style="list-style-type: none"> <li>There were 2 cases of <i>P.Aeruginosa</i> bacteraemia in November 2020, of which 1 was community acquired and 1 was hospital acquired.</li> <li>Cumulative cases from April to November 2020 are 29% less than the equivalent period in 2019/20.</li> </ul>	<b>Number of healthcare acquired Pseudomonas cases</b>  <p>■ Number of Pseudomonas cases (SBU)</p>
PRESSURE ULCERS		
Description	Current Performance	Trend
<b>Number of pressure ulcers</b> <i>1. Total number of pressure ulcers developed in hospital and in the community</i>  <i>2. Rate of pressure ulcers per 100,000 admissions</i>	<ol style="list-style-type: none"> <li>In October 2020 there were 93 cases of healthcare acquired pressure ulcers, of which 34 were community acquired and 59 were hospital acquired.</li> <li>There were 15 grade 3+ pressure ulcers in October 2020, of which 11 were community acquired and 4 were hospital acquired.</li> <li>The rate per 100,000 admissions increased from 705 in September 2020 to 1,006 in October 2020.</li> </ol>	<b>Total number of hospital and community acquired Pressure Ulcers (PU) and rate per 100,000 admissions</b>  <p>■ Pressure Ulcers (Community) ■ Pressure Ulcers (Hospital) — Rate per 100,00 admissions</p>

SERIOUS INCIDENTS																																												
Description	Current Performance	Trend																																										
<b>Serious Incidents-</b> <i>1. The number of serious incidents</i>  <i>2. The number of Never Events</i>  <i>3. Of the serious incidents due for assurance, the percentage which were assured within the agreed timescales</i>	<p>1. The Health Board reported 17 Serious Incidents for the month of November 2020 to Welsh Government. The breakdown of incidents in October 2020 are set out below:</p> <ul style="list-style-type: none"><li>• 7 in Mental Health and Learning Disabilities</li><li>• 5 in Morriston Hospital</li><li>• 3 in Singleton Hospital</li><li>• 1 in Primary, Community and Therapy Services</li><li>• 1 in Neath Port Talbot Hospital</li></ul>	<p><b>1. and 2. Number of serious incidents and never events</b></p>  <table><caption>1. and 2. Number of serious incidents and never events</caption><tr><th>Month</th><th>Number of Serious Incidents</th><th>Number of never events</th></tr><tr><td>Nov-19</td><td>11</td><td>0</td></tr><tr><td>Dec-19</td><td>21</td><td>1</td></tr><tr><td>Jan-20</td><td>14</td><td>1</td></tr><tr><td>Feb-20</td><td>20</td><td>0</td></tr><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>1</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>14</td><td>1</td></tr><tr><td>Nov-20</td><td>17</td><td>1</td></tr></table>	Month	Number of Serious Incidents	Number of never events	Nov-19	11	0	Dec-19	21	1	Jan-20	14	1	Feb-20	20	0	Mar-20	20	0	Apr-20	9	0	May-20	6	0	Jun-20	9	1	Jul-20	10	0	Aug-20	6	0	Sep-20	21	0	Oct-20	14	1	Nov-20	17	1
	Month	Number of Serious Incidents	Number of never events																																									
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Oct-20	14	1																																										
Nov-20	17	1																																										
<p>2. There was one new Never Event reported in November 2020 in Orthopaedics in Morriston Hospital involving utilisation of wrong screws.</p>	<p><b>3. % of serious incidents closed within 60 days</b></p>  <table><caption>3. % of serious incidents closed within 60 days</caption><tr><th>Month</th><th>% Serious Incidents assured</th><th>Profile</th></tr><tr><td>Nov-19</td><td>55%</td><td>80%</td></tr><tr><td>Dec-19</td><td>38%</td><td>80%</td></tr><tr><td>Jan-20</td><td>28%</td><td>80%</td></tr><tr><td>Feb-20</td><td>30%</td><td>80%</td></tr><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></table>	Month	% Serious Incidents assured	Profile	Nov-19	55%	80%	Dec-19	38%	80%	Jan-20	28%	80%	Feb-20	30%	80%	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%	
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Nov-20	0%	80%																																										
<p>3. In November 2020, performance against the 80% target of submitting closure forms within 60 working days was 0%. None of the seven closure forms due to be submitted to Welsh Government in November 2020 were submitted on time. Below is a breakdown of the seven outstanding forms:</p> <ul style="list-style-type: none"><li>• 5 for Mental Health &amp; Learning Disabilities</li><li>• 1 for Morriston Hospital</li><li>• 1 for Singleton Hospital (now submitted but after target date)</li></ul>	<p>* 0% compliance in June, July, October and November 2020</p>																																											

INPATIENT FALLS																														
Description	Current Performance	Trend																												
<b>Inpatient Falls</b> <i>The total number of inpatient falls</i>	<ul style="list-style-type: none"><li>The number of Falls reported via Datix web for Swansea Bay UHB was 247 in November 2020. This is an increase from 187 reported in October 2020.</li><li>The Health Board has agreed a targeted action to reduce Falls by 10%.</li></ul>	<p><b>Number of inpatient Falls</b></p> <table><caption>Number of inpatient Falls (SBU HB)</caption><thead><tr><th>Month</th><th>Falls</th></tr></thead><tbody><tr><td>Nov-19</td><td>240</td></tr><tr><td>Dec-19</td><td>290</td></tr><tr><td>Jan-20</td><td>250</td></tr><tr><td>Feb-20</td><td>210</td></tr><tr><td>Mar-20</td><td>220</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>230</td></tr><tr><td>Sep-20</td><td>220</td></tr><tr><td>Oct-20</td><td>187</td></tr><tr><td>Nov-20</td><td>247</td></tr></tbody></table> <p>■ Inpatient Falls (SBU HB)    — 10% reduction profile</p>	Month	Falls	Nov-19	240	Dec-19	290	Jan-20	250	Feb-20	210	Mar-20	220	Apr-20	190	May-20	200	Jun-20	190	Jul-20	200	Aug-20	230	Sep-20	220	Oct-20	187	Nov-20	247
Month	Falls																													
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DISCHARGE SUMMARIES																														
Description	Current Performance	Trend																												
<b>Discharge Summaries</b> <i>Percentage of discharge summaries approved and sent to patients' doctor following discharge</i>	<p>The latest data shows that in November 2020, the percentage of completed discharge summaries was 60%.</p> <p>In November 2020, compliance ranged from 62% in Singleton Hospital to 69% in Neath Port Talbot Hospital.</p>	<p><b>% discharge summaries approved and sent</b></p> <table><caption>% of completed discharge summaries</caption><thead><tr><th>Month</th><th>Percentage</th></tr></thead><tbody><tr><td>Nov-19</td><td>63%</td></tr><tr><td>Dec-19</td><td>65%</td></tr><tr><td>Jan-20</td><td>66%</td></tr><tr><td>Feb-20</td><td>67%</td></tr><tr><td>Mar-20</td><td>68%</td></tr><tr><td>Apr-20</td><td>61%</td></tr><tr><td>May-20</td><td>64%</td></tr><tr><td>Jun-20</td><td>67%</td></tr><tr><td>Jul-20</td><td>63%</td></tr><tr><td>Aug-20</td><td>66%</td></tr><tr><td>Sep-20</td><td>70%</td></tr><tr><td>Oct-20</td><td>68%</td></tr><tr><td>Nov-20</td><td>60%</td></tr></tbody></table> <p>■ % of completed discharge summaries</p>	Month	Percentage	Nov-19	63%	Dec-19	65%	Jan-20	66%	Feb-20	67%	Mar-20	68%	Apr-20	61%	May-20	64%	Jun-20	67%	Jul-20	63%	Aug-20	66%	Sep-20	70%	Oct-20	68%	Nov-20	60%
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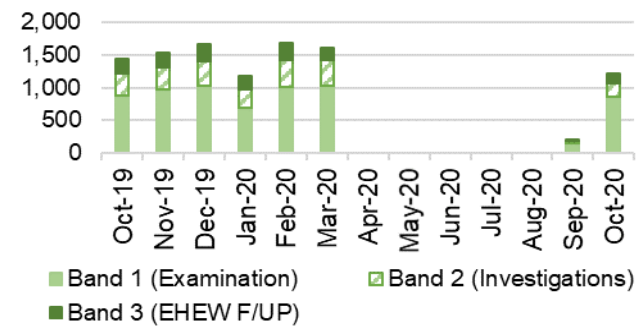
CRUDE MORTALITY																																																																								
Description	Current Performance	Trend																																																																						
Crude Mortality Rate	October 2020 reports the crude mortality rate for the Health Board at 0.97% compared with 0.93% in September 2020.	<b>Crude hospital mortality rate by Hospital (74 years of age or less)</b> <table><caption>Crude hospital mortality rate by Hospital (74 years of age or less)</caption><thead><tr><th>Month</th><th>Morriston Hospital</th><th>Singleton Hospital</th><th>NPT Hospital</th><th>HB Total</th></tr></thead><tbody><tr><td>Oct-19</td><td>1.3%</td><td>0.4%</td><td>0.1%</td><td>0.8%</td></tr><tr><td>Nov-19</td><td>1.3%</td><td>0.4%</td><td>0.1%</td><td>0.8%</td></tr><tr><td>Dec-19</td><td>1.3%</td><td>0.4%</td><td>0.1%</td><td>0.8%</td></tr><tr><td>Jan-20</td><td>1.4%</td><td>0.4%</td><td>0.1%</td><td>0.7%</td></tr><tr><td>Feb-20</td><td>1.3%</td><td>0.4%</td><td>0.1%</td><td>0.7%</td></tr><tr><td>Mar-20</td><td>1.3%</td><td>0.4%</td><td>0.1%</td><td>0.7%</td></tr><tr><td>Apr-20</td><td>1.6%</td><td>0.4%</td><td>0.1%</td><td>0.8%</td></tr><tr><td>May-20</td><td>1.5%</td><td>0.4%</td><td>0.1%</td><td>0.9%</td></tr><tr><td>Jun-20</td><td>1.5%</td><td>0.4%</td><td>0.1%</td><td>0.9%</td></tr><tr><td>Jul-20</td><td>1.6%</td><td>0.4%</td><td>0.1%</td><td>0.9%</td></tr><tr><td>Aug-20</td><td>1.6%</td><td>0.4%</td><td>0.1%</td><td>0.9%</td></tr><tr><td>Sep-20</td><td>1.6%</td><td>0.4%</td><td>0.1%</td><td>0.9%</td></tr><tr><td>Oct-20</td><td>1.7%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr></tbody></table>	Month	Morriston Hospital	Singleton Hospital	NPT Hospital	HB Total	Oct-19	1.3%	0.4%	0.1%	0.8%	Nov-19	1.3%	0.4%	0.1%	0.8%	Dec-19	1.3%	0.4%	0.1%	0.8%	Jan-20	1.4%	0.4%	0.1%	0.7%	Feb-20	1.3%	0.4%	0.1%	0.7%	Mar-20	1.3%	0.4%	0.1%	0.7%	Apr-20	1.6%	0.4%	0.1%	0.8%	May-20	1.5%	0.4%	0.1%	0.9%	Jun-20	1.5%	0.4%	0.1%	0.9%	Jul-20	1.6%	0.4%	0.1%	0.9%	Aug-20	1.6%	0.4%	0.1%	0.9%	Sep-20	1.6%	0.4%	0.1%	0.9%	Oct-20	1.7%	0.5%	0.2%	1.0%
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	A breakdown by Hospital for October 2020: <ul style="list-style-type: none"><li>• Morriston – 1.66%</li><li>• Singleton – 0.48%</li><li>• NPT – 0.22%</li></ul>																																																																							

WORKFORCE																																												
Description	Current Performance	Trend																																										
<b>Staff sickness rates-</b> <i>Percentage of sickness absence rate of staff</i>	<ul style="list-style-type: none"><li>Our in-month performance has deteriorated from 6.30% in September 2020 to 6.96% in October 2020.</li><li>The 12-month rolling performance to the end of October 2020 deteriorated from 7.03% in September 2020 to 7.07% in October 2020.</li><li>The following table provides the top 5 absence reasons by full time equivalent (FTE) days lost in October 2020.</li></ul>	<p><b>% of full time equivalent (FTE) days lost to sickness absence (12 month rolling)</b></p> <table><caption>Approximate data from the sickness absence trend graph</caption><thead><tr><th>Month</th><th>% sickness rate (12 month rolling)</th><th>% sickness rate (in-month)</th></tr></thead><tbody><tr><td>Oct-19</td><td>6.0%</td><td>6.3%</td></tr><tr><td>Nov-19</td><td>6.0%</td><td>6.5%</td></tr><tr><td>Dec-19</td><td>6.1%</td><td>6.8%</td></tr><tr><td>Jan-20</td><td>6.1%</td><td>7.0%</td></tr><tr><td>Feb-20</td><td>6.1%</td><td>6.5%</td></tr><tr><td>Mar-20</td><td>6.2%</td><td>6.8%</td></tr><tr><td>Apr-20</td><td>6.5%</td><td>10.0%</td></tr><tr><td>May-20</td><td>6.8%</td><td>8.5%</td></tr><tr><td>Jun-20</td><td>7.0%</td><td>7.0%</td></tr><tr><td>Jul-20</td><td>7.0%</td><td>6.5%</td></tr><tr><td>Aug-20</td><td>7.0%</td><td>6.3%</td></tr><tr><td>Sep-20</td><td>7.0%</td><td>6.3%</td></tr><tr><td>Oct-20</td><td>7.1%</td><td>6.9%</td></tr></tbody></table>	Month	% sickness rate (12 month rolling)	% sickness rate (in-month)	Oct-19	6.0%	6.3%	Nov-19	6.0%	6.5%	Dec-19	6.1%	6.8%	Jan-20	6.1%	7.0%	Feb-20	6.1%	6.5%	Mar-20	6.2%	6.8%	Apr-20	6.5%	10.0%	May-20	6.8%	8.5%	Jun-20	7.0%	7.0%	Jul-20	7.0%	6.5%	Aug-20	7.0%	6.3%	Sep-20	7.0%	6.3%	Oct-20	7.1%	6.9%
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	<table><thead><tr><th>Absence Reason</th><th>FTE Days Lost</th><th>%</th></tr></thead><tbody><tr><td>Anxiety/ stress/ depression/ other psychiatric illnesses</td><td>8,664.72</td><td>34.7%</td></tr><tr><td>Chest &amp; respiratory problems</td><td>3,374.03</td><td>13.5%</td></tr><tr><td>Other musculoskeletal problems</td><td>1,897.93</td><td>7.6%</td></tr><tr><td>Other known causes - not elsewhere classified</td><td>1,857.23</td><td>7.4%</td></tr><tr><td>Infectious diseases</td><td>1,590.05</td><td>6.4%</td></tr></tbody></table>	Absence Reason	FTE Days Lost	%	Anxiety/ stress/ depression/ other psychiatric illnesses	8,664.72	34.7%	Chest & respiratory problems	3,374.03	13.5%	Other musculoskeletal problems	1,897.93	7.6%	Other known causes - not elsewhere classified	1,857.23	7.4%	Infectious diseases	1,590.05	6.4%																									
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## HARM FROM REDUCTION IN NON-COVID ACTIVITY

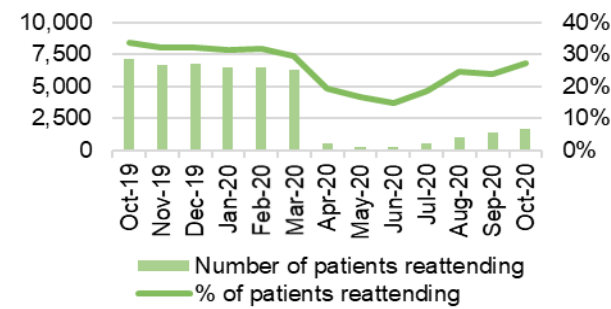
### 6.1 Primary and Community Care Overview

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

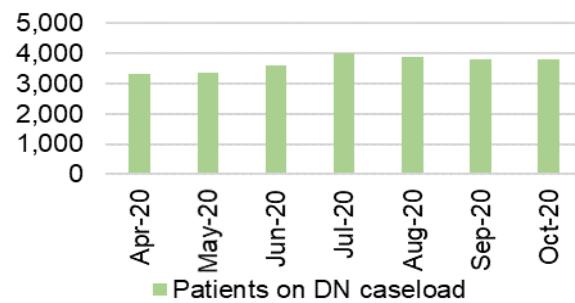


No claims submitted between April and August 2020

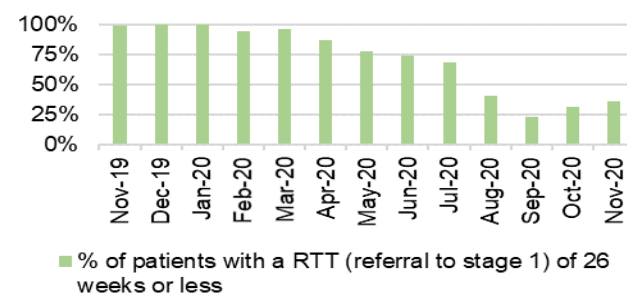
**Chart 5: Number and percentage of adult dental patients re-attending NHS Primary Dental Care between 6-9 months**



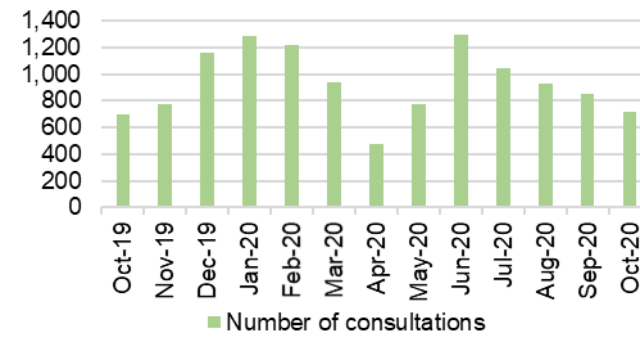
**Chart 9: District Nursing- Number of patients on caseload**



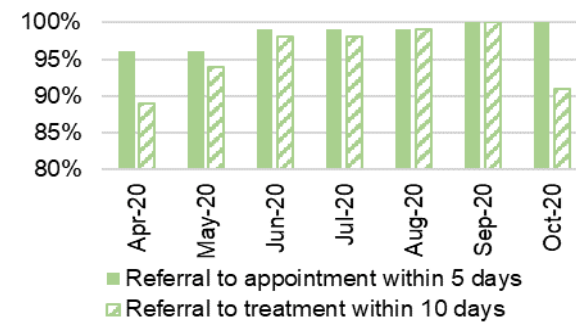
**Chart 13: % of patients with a RTT (referral to stage 1) of 26 weeks or less for Restorative Dentistry**



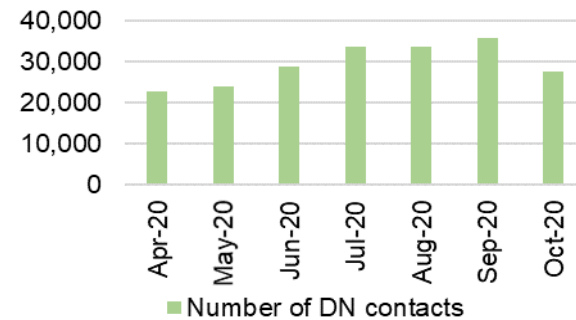
**Chart 2: Common Ailment Scheme - Number of consultations provided**



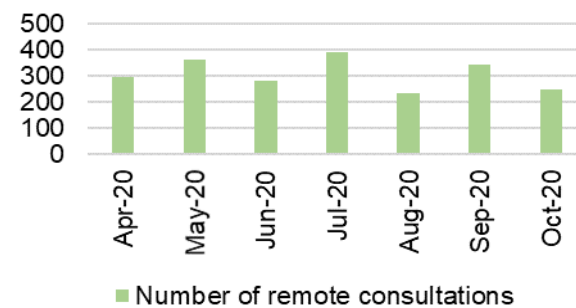
**Chart 6: Pregnancy Advisory Service- Referral to appointment within 5 days and treatment within 10 days**



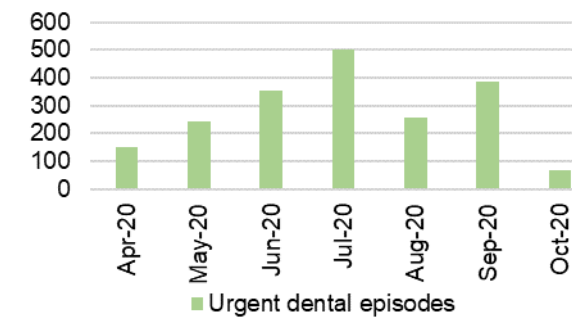
**Chart 10: District Nursing- Total number of contacts**



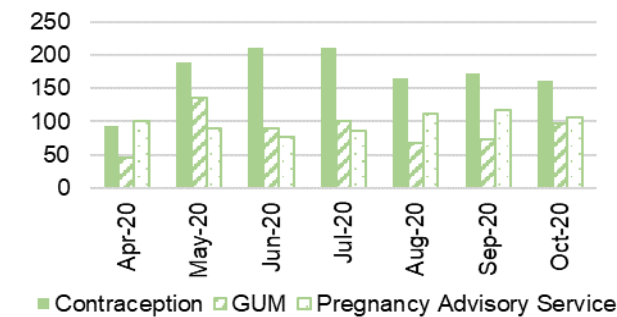
**Chart 14: Audiology- Number of remote consultations**



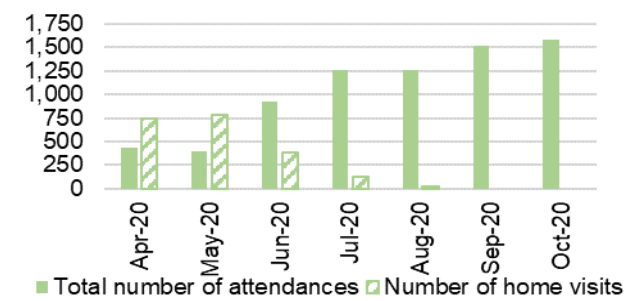
**Chart 3: Urgent Dental Centre- Total episodes of patient care**



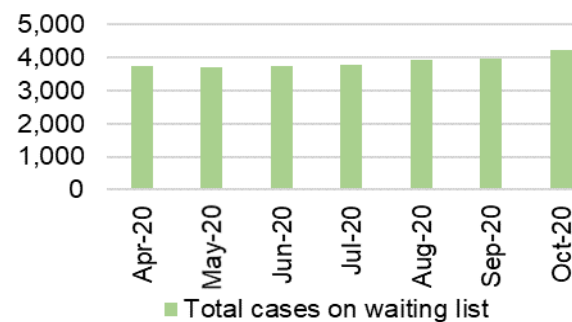
**Chart 7: Sexual health services- Attendances at sexual health ambulance**



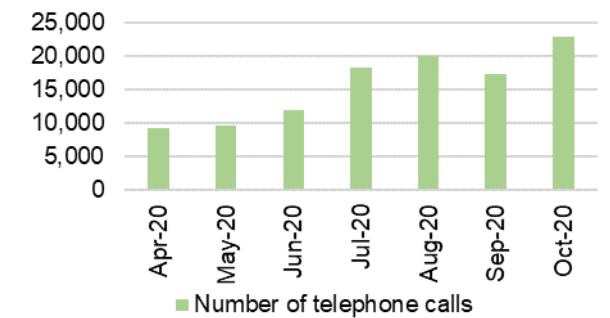
**Chart 11: Community wound clinic- Number of attendances and number of home visits**



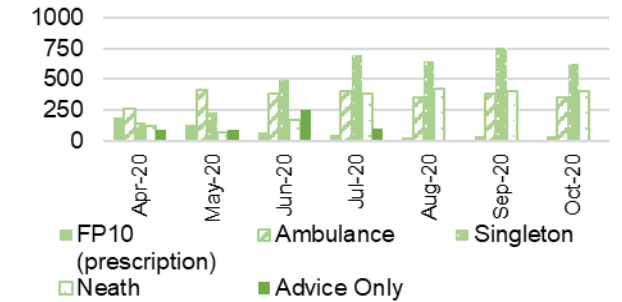
**Chart 15: Audiology- Total number of patients on the waiting list**



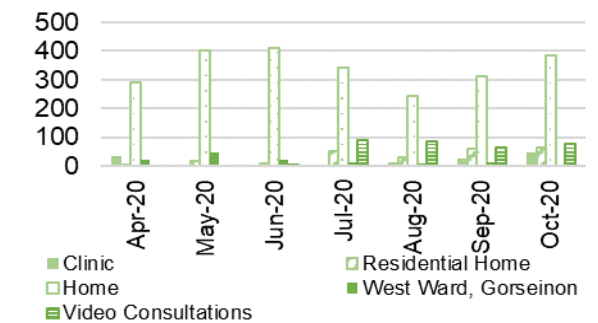
**Chart 4: General Dental Practice activity- Total number of telephone calls received**



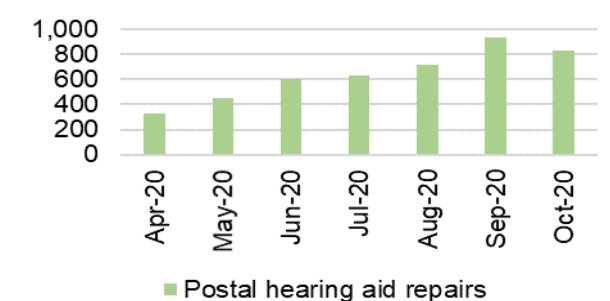
**Chart 8: Sexual health services- Patient outcomes**



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



**Chart 16: Audiology- Number of postal hearing aid repairs**

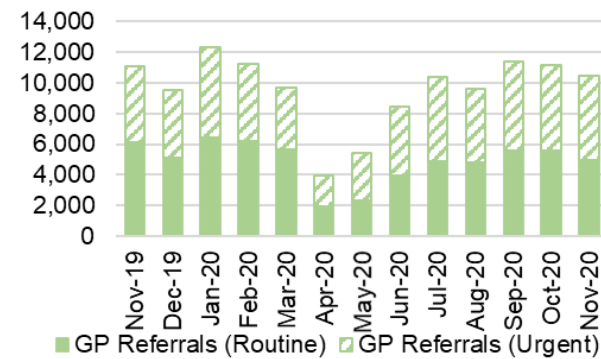




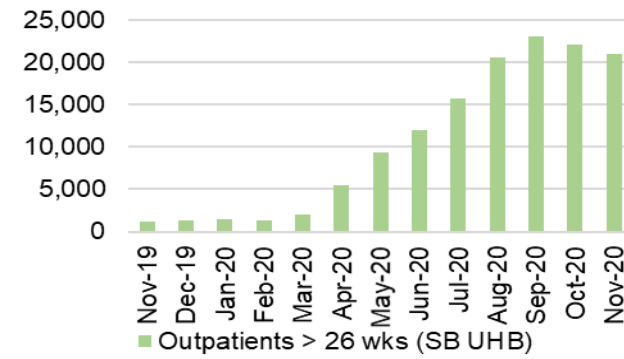
## Harm from reduction in non-Covid activity

### 6.2 Planned Care Overview

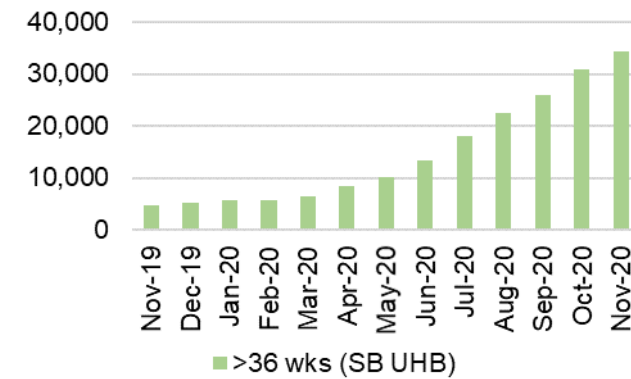
**Chart 1: Number of GP Referrals into secondary care**



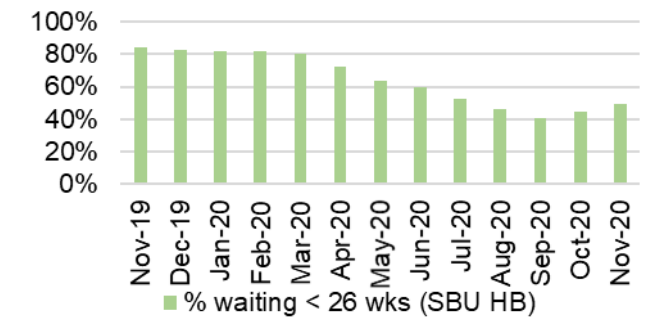
**Chart 2: Number of patients waiting over 26 weeks for an outpatient appointment**



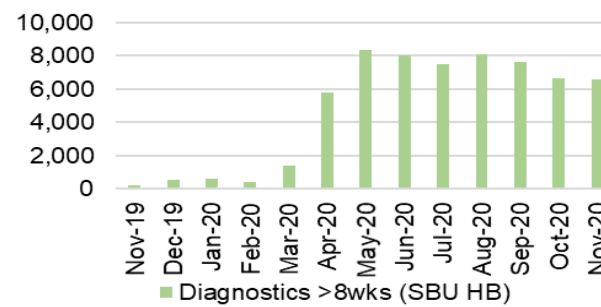
**Chart 3: Number of patients waiting over 36 weeks for treatment**



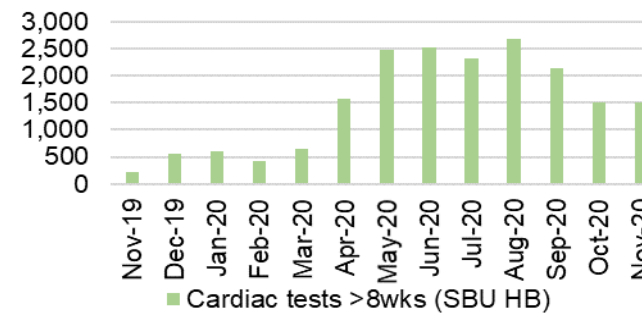
**Chart 4: % patients waiting less than 26 weeks from referral to treatment**



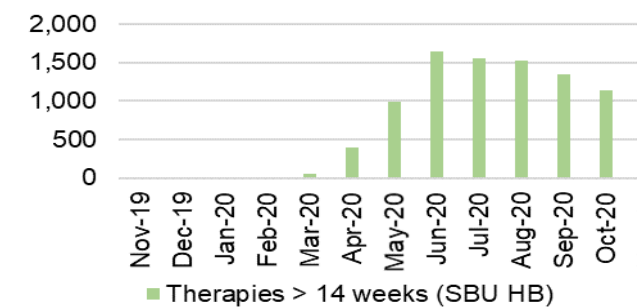
**Chart 5: Number of patients waiting for reportable diagnostics over 8 weeks**



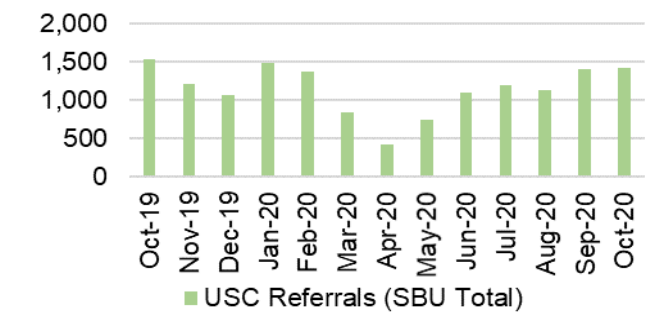
**Chart 6: Number of patients waiting for reportable Cardiac diagnostics over 8 weeks**



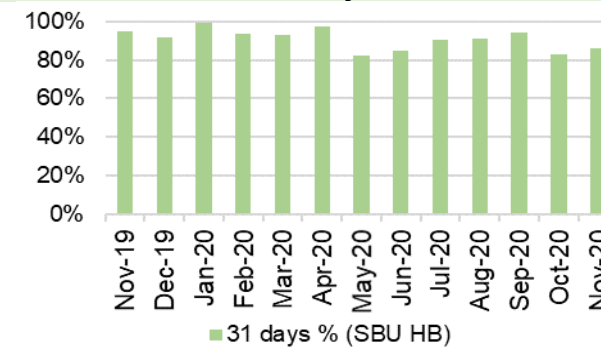
**Chart 7: Number of patients waiting less than 14 weeks for Therapies**



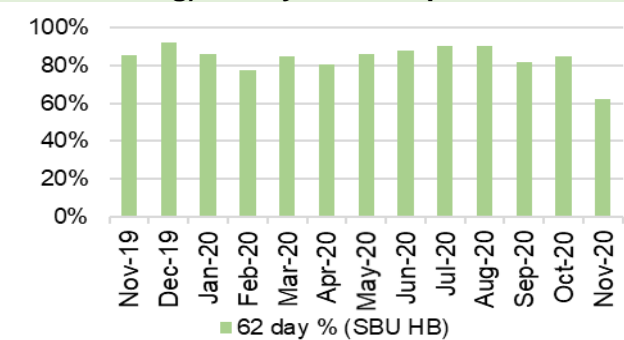
**Chart 8: Cancer referrals**



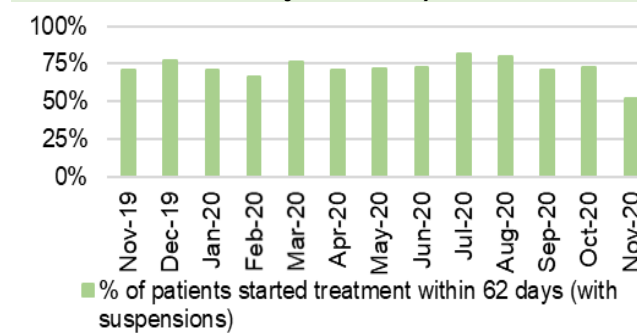
**Chart 9: % patients newly diagnosed with cancer, not via the urgent route, that started definitive treatment within (up to & including) 31 days**



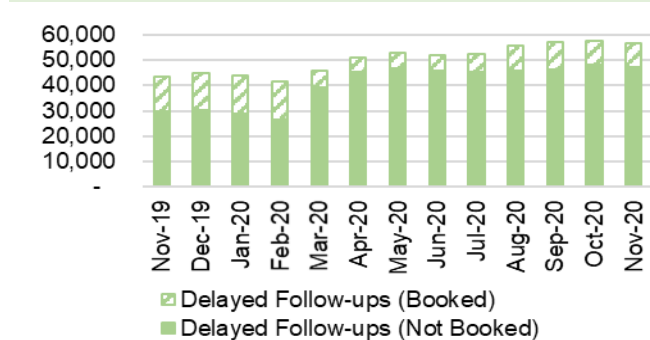
**Chart 10: % patients newly diagnosed with cancer, via the urgent suspected cancer route, that started definitive treatment within (up to & including) 62 days of receipt of referral**



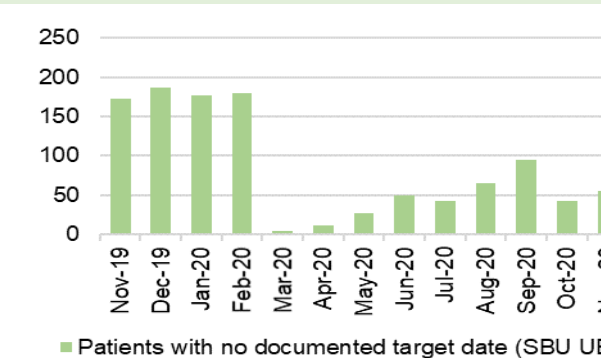
**Chart 11: Single Cancer Pathway- % of patients starting definitive treatment within 62 days from point of suspicion (with adjustments)**



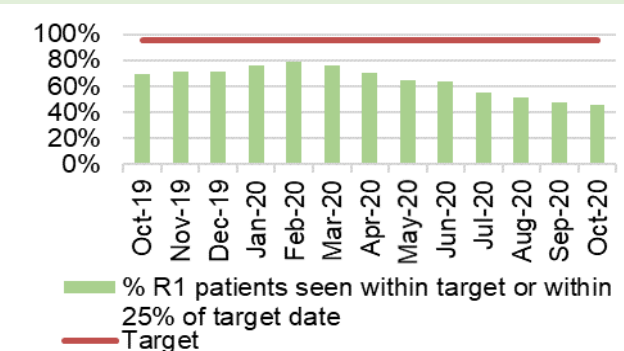
**Chart 12: Number of patients waiting for an outpatient follow-up who are delayed past their target date**



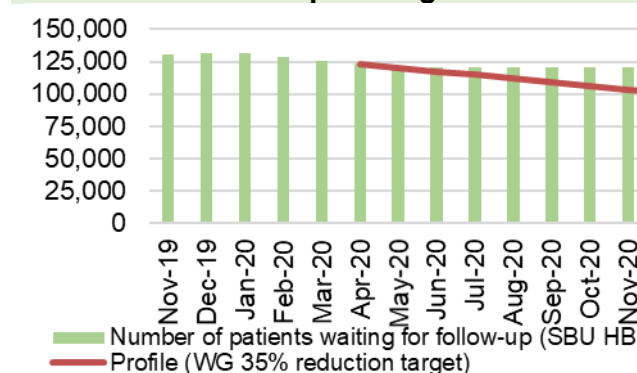
**Chart 13: Number of patients without a documented clinical review date**



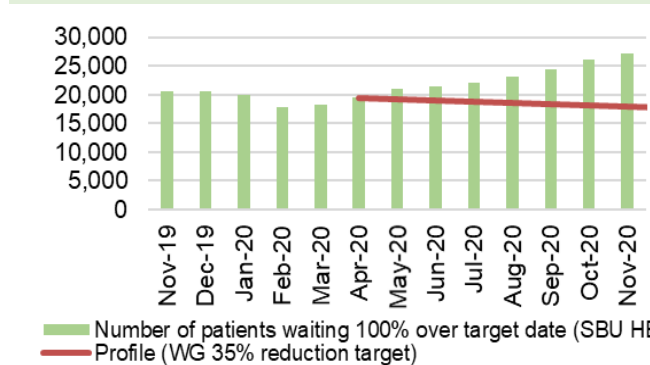
**Chart 14: Ophthalmology patients without an allocated health risk factor**



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



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





## Planned Care- Overview (November 2020)

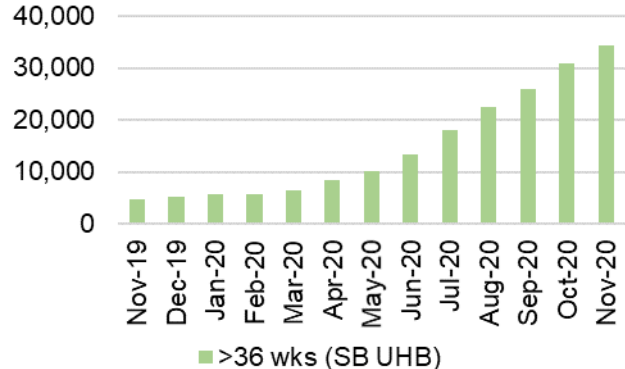
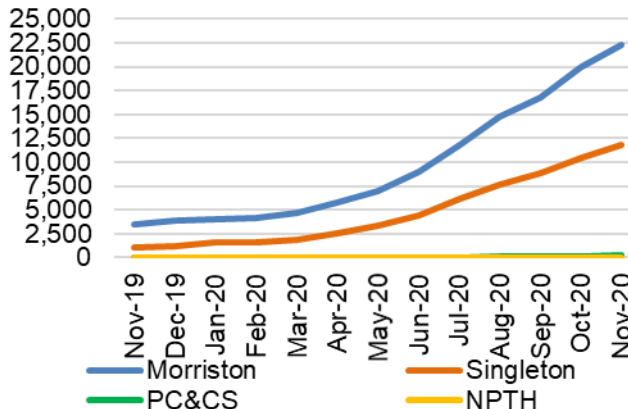
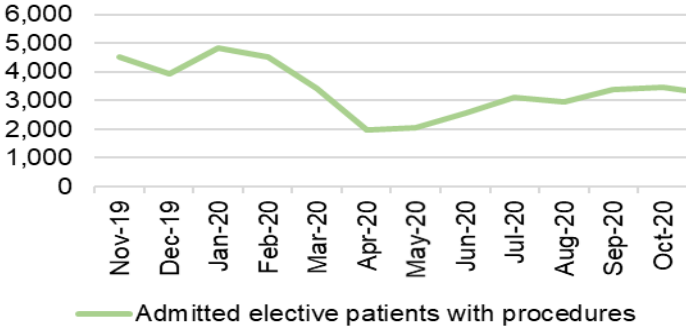
Demand		Waiting Times	
<b>10,442 (6%↓)</b> Total GP referrals	<b>21,005 (5%↓)</b> Patients waiting over 26 weeks for a new outpatient appointment	<b>34,431 (12%↑)</b> Patients waiting over 36 weeks for treatment	<b>16,259 (25%↑)</b> Patients waiting over 52 weeks for treatment
<b>4,986 (10%↓)</b> Routine GP referrals	<b>49.2% (4.4%↑)</b> Patients waiting under 26 weeks from referral to treatment	<b>6,610 (1%↓)</b> Patients waiting over 8 weeks for all reportable diagnostics	<b>1,509 (0.3%↓)</b> Patients waiting over 8 weeks for Cardiac diagnostics only
<b>5,456 (2%↓)</b> Urgent GP referrals	<b>817 (28%↓)</b> Patients waiting over 14 weeks for reportable therapies	<b>120,874 (0.1%↓)</b> Patients waiting for a follow-up outpatient appointment	<b>27,156 (3.6%↑)</b> Patients waiting for a follow-up outpatients appointment who are delayed over 100%
Cancer		Theatre Efficiencies	
<b>1,418 (1.4%↑)</b> Number of USC referrals received	<b>284 (0.7%↓)</b> USC backlog over 52 days	<b>74% (1%↓)</b> Theatre utilisation rate	<b>50% (11%↑)</b> % of theatres sessions finishing early
<b>86% (2.9%↑) draft</b> NUSC patients receiving treatment within 31 days	<b>62% (23%↓) draft</b> USC patients receiving treatment within 62 days	<b>39% (5%↓)</b> % of theatres sessions starting late	<b>36% (7%↓)</b> 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
<b>Referrals and shape of the waiting list</b>	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. However, since September 2020 the number of referrals and additions to the waiting list appear to have stabilised. Chart 4 shows the shape of the waiting list and the second wave that has formed at the beginning of the waiting list as GP referrals start to pick back up.
<b>1. GP Referrals</b> <i>The number of Stage 1 additions per week</i>	<b>Trend</b>
<b>2. Stage 1 additions</b> <i>The number of new patients that have been added to the outpatient waiting list</i>	
<b>3. Size of the waiting list</b> <i>Total number of patients on the waiting list by stage as at December 2019</i>	<p><b>1. Number of GP referrals received by SBU Health Board</b></p> <p><b>2. Number of stage 1 additions per week</b></p> <p><b>3. Total size of the waiting list and movement (December 2019)</b></p> <p><b>4. Total size of the waiting list and movement (November 2020)</b></p>
<b>4. Size of the waiting list</b> <i>Total number of patients on the waiting list by stage as at August 2020</i>	

PLANNED CARE	
Description	Current Performance
<b>Outpatient waiting times</b>  1. Number of patients waiting more than 26 weeks for an outpatient appointment (stage 1)- Health Board Total  2. Number of patients waiting more than 26 weeks for an outpatient appointment (stage 1)- Hospital Level  3. Patients waiting over 26 weeks for an outpatient appointment by specialty  4. Outpatient activity undertaken	<p>The number of patients waiting over 26 weeks for a first outpatient appointment is a challenge. November 2020, saw an in-month reduction in the number of patients waiting over 26 weeks for an outpatient appointment. The number of breaches reduced from 22,050 in October 2020 to 21,005 in November 2020. 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, however chart 4 shows that the number of attendances has started to increase from May 2020. 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>
	<b>Trend</b>
	<p><b>1. Number of stage 1 over 26 weeks- HB total</b></p> <p><b>2. Number of stage 1 over 26 weeks- Hospital level</b></p> <p><b>3. Patients waiting over 26 weeks for an outpatient appointment by specialty as at November 2020</b></p> <p><b>4. Outpatient activity undertaken</b></p>

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<b>Patients waiting over 36 weeks for treatment</b>  1. Number of patients waiting more than 36 weeks for treatment and the number of elective patients admitted for treatment- Health Board Total  2. Number of patients waiting more than 36 weeks for treatment and the number of elective patients admitted for treatment- Hospital level  3. Number of elective admissions	<p>The number of patients waiting longer than 36 weeks from referral to treatment continues to increase. In November 2020, there were 34,431 patients waiting over 36 weeks compared with 30,776 in October 2020. 16,259 of the 34,431 patients in November 2020 were waiting over 52 weeks, this is an increase from 13,039 in October 2020. Orthopaedics/ Spinal accounted for 22% of the breaches, followed by Ophthalmology with 14%.</p> <p>The number of patients receiving a procedure (and subsequently removed from the waiting list) significantly reduced since March 2020 which is resulting in the increase in waiting times.</p>																																																																																																																											
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<b>Total waiting times</b> <i>Percentage of patients waiting less than 26 weeks from referral to treatment</i>	<p>Throughout 2019/20 the overall percentage of patients waiting less than 26 weeks from referral to treatment ranged between 80% and 88%.</p> <p>The percentage has consistently fallen during 2020/21 however, October was the first month to see and in-month improvement with an increase from 41.0% in September to 44.8% in October 2020. This trend continued into November 2020 with an in-month improvement of 4.4% (from 44.8% in October to 49.2% in November 2020).</p>	<p><b>Percentage of patient waiting less than 26 weeks</b></p> <table><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>PC&amp;CS</th><th>NPTH</th></tr></thead><tbody><tr><td>Nov-19</td><td>80%</td><td>80%</td><td>80%</td><td>100%</td></tr><tr><td>Dec-19</td><td>78%</td><td>78%</td><td>78%</td><td>100%</td></tr><tr><td>Jan-20</td><td>78%</td><td>78%</td><td>78%</td><td>100%</td></tr><tr><td>Feb-20</td><td>78%</td><td>78%</td><td>78%</td><td>100%</td></tr><tr><td>Mar-20</td><td>78%</td><td>78%</td><td>78%</td><td>100%</td></tr><tr><td>Apr-20</td><td>65%</td><td>65%</td><td>65%</td><td>95%</td></tr><tr><td>May-20</td><td>55%</td><td>55%</td><td>55%</td><td>95%</td></tr><tr><td>Jun-20</td><td>45%</td><td>45%</td><td>45%</td><td>90%</td></tr><tr><td>Jul-20</td><td>35%</td><td>35%</td><td>35%</td><td>85%</td></tr><tr><td>Aug-20</td><td>30%</td><td>30%</td><td>30%</td><td>75%</td></tr><tr><td>Sep-20</td><td>30%</td><td>30%</td><td>30%</td><td>70%</td></tr><tr><td>Oct-20</td><td>35%</td><td>40%</td><td>35%</td><td>85%</td></tr><tr><td>Nov-20</td><td>40%</td><td>45%</td><td>40%</td><td>90%</td></tr></tbody></table>	Month	Morriston	Singleton	PC&CS	NPTH	Nov-19	80%	80%	80%	100%	Dec-19	78%	78%	78%	100%	Jan-20	78%	78%	78%	100%	Feb-20	78%	78%	78%	100%	Mar-20	78%	78%	78%	100%	Apr-20	65%	65%	65%	95%	May-20	55%	55%	55%	95%	Jun-20	45%	45%	45%	90%	Jul-20	35%	35%	35%	85%	Aug-20	30%	30%	30%	75%	Sep-20	30%	30%	30%	70%	Oct-20	35%	40%	35%	85%	Nov-20	40%	45%	40%	90%
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<b>Ophthalmology waiting times</b> <i>Percentage of ophthalmology R1 patients who are waiting within their clinical target date or within 25% in excess of their clinical target date for their care or treatments</i>	<p>In October 2020, 45.2% 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 so far in 2020/21.</p> <p><i>NB. November 2020 figures were not available at the time of writing this report</i></p>	<p><b>Percentage of ophthalmology R1 patients who are waiting within their clinical target date or within 25% in excess of their clinical target date for their care or treatments</b></p> <table><thead><tr><th>Month</th><th>% R1 patients seen within target or within 25% of target date</th><th>Target</th></tr></thead><tbody><tr><td>Oct-19</td><td>70%</td><td>95%</td></tr><tr><td>Nov-19</td><td>70%</td><td>95%</td></tr><tr><td>Dec-19</td><td>70%</td><td>95%</td></tr><tr><td>Jan-20</td><td>75%</td><td>95%</td></tr><tr><td>Feb-20</td><td>75%</td><td>95%</td></tr><tr><td>Mar-20</td><td>75%</td><td>95%</td></tr><tr><td>Apr-20</td><td>70%</td><td>95%</td></tr><tr><td>May-20</td><td>65%</td><td>95%</td></tr><tr><td>Jun-20</td><td>65%</td><td>95%</td></tr><tr><td>Jul-20</td><td>55%</td><td>95%</td></tr><tr><td>Aug-20</td><td>50%</td><td>95%</td></tr><tr><td>Sep-20</td><td>45%</td><td>95%</td></tr><tr><td>Oct-20</td><td>45.2%</td><td>95%</td></tr></tbody></table>	Month	% R1 patients seen within target or within 25% of target date	Target	Oct-19	70%	95%	Nov-19	70%	95%	Dec-19	70%	95%	Jan-20	75%	95%	Feb-20	75%	95%	Mar-20	75%	95%	Apr-20	70%	95%	May-20	65%	95%	Jun-20	65%	95%	Jul-20	55%	95%	Aug-20	50%	95%	Sep-20	45%	95%	Oct-20	45.2%	95%																												
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<b>Diagnostics waiting times</b> <i>The number of patients waiting more than 8 weeks for specified diagnostics</i>	<p>In November 2020, there was a reduction in the number of patients waiting over 8 weeks for specified diagnostics. It reduced from 6,645 in October 2020 to 6,610 in November 2020.</p> <p>The following is a breakdown for the 8 week breaches by diagnostic test for October 2020:</p> <ul style="list-style-type: none"><li>• Radiology= 2,167</li><li>• Endoscopy= 2,051</li><li>• Cardiac tests= 1,509</li><li>• Neurophysiology= 774</li><li>• Fluoroscopy= 51</li><li>• Physiological measurement= 36</li><li>• Cystoscopy= 22</li></ul>	<p><b>Number of patients waiting longer than 8 weeks for diagnostics</b></p> <table><caption>Estimated 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>Nov-19</td><td>200</td><td>0</td><td>0</td></tr><tr><td>Dec-19</td><td>500</td><td>0</td><td>0</td></tr><tr><td>Jan-20</td><td>500</td><td>0</td><td>0</td></tr><tr><td>Feb-20</td><td>400</td><td>0</td><td>0</td></tr><tr><td>Mar-20</td><td>800</td><td>0</td><td>800</td></tr><tr><td>Apr-20</td><td>1,500</td><td>500</td><td>4,000</td></tr><tr><td>May-20</td><td>2,500</td><td>1,200</td><td>4,800</td></tr><tr><td>Jun-20</td><td>2,500</td><td>1,300</td><td>4,200</td></tr><tr><td>Jul-20</td><td>2,300</td><td>1,400</td><td>4,000</td></tr><tr><td>Aug-20</td><td>2,600</td><td>1,500</td><td>4,000</td></tr><tr><td>Sep-20</td><td>2,200</td><td>1,800</td><td>3,800</td></tr><tr><td>Oct-20</td><td>1,500</td><td>2,000</td><td>3,000</td></tr><tr><td>Nov-20</td><td>1,500</td><td>2,000</td><td>3,000</td></tr></tbody></table>	Month	Cardiac tests	Endoscopy	Other diagnostics (inc. radiology)	Nov-19	200	0	0	Dec-19	500	0	0	Jan-20	500	0	0	Feb-20	400	0	0	Mar-20	800	0	800	Apr-20	1,500	500	4,000	May-20	2,500	1,200	4,800	Jun-20	2,500	1,300	4,200	Jul-20	2,300	1,400	4,000	Aug-20	2,600	1,500	4,000	Sep-20	2,200	1,800	3,800	Oct-20	1,500	2,000	3,000	Nov-20	1,500	2,000	3,000																																																								
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<b>Therapy waiting times</b> <i>The number of patients waiting more than 14 weeks for specified therapies</i>	<p>In November 2020 there were 817 patients waiting over 14 weeks for specified Therapies.</p> <p>The breakdown for the breaches in October 2020 are:</p> <ul style="list-style-type: none"><li>• Podiatry= 180</li><li>• Audiology= 410</li><li>• Speech &amp; Language Therapy= 128</li><li>• Dietetics= 99</li></ul>	<p><b>Number of patients waiting longer than 14 weeks for therapies</b></p> <table><caption>Estimated 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 &amp; Language</th><th>Dietetics</th><th>Phsyio</th><th>Podiatry</th></tr></thead><tbody><tr><td>Nov-19</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Dec-19</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Jan-20</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Feb-20</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Mar-20</td><td>0</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>0</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>0</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>0</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>0</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>0</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>0</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>0</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>0</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	Nov-19	0	0	0	0	0	0	0	Dec-19	0	0	0	0	0	0	0	Jan-20	0	0	0	0	0	0	0	Feb-20	0	0	0	0	0	0	0	Mar-20	0	0	0	0	0	0	0	Apr-20	0	0	0	0	0	0	0	May-20	0	0	0	0	0	0	0	Jun-20	0	0	0	0	0	0	0	Jul-20	0	0	0	0	0	0	0	Aug-20	0	0	0	0	0	0	0	Sep-20	0	0	0	0	0	0	0	Oct-20	0	0	0	0	0	0	0	Nov-20	0	0	0	0	0	0	0
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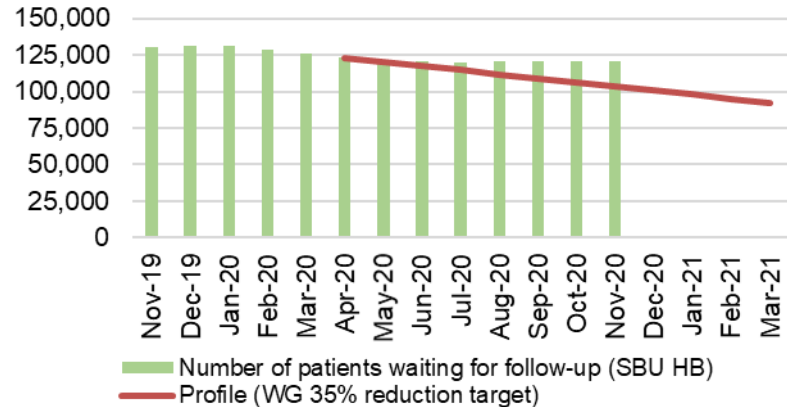
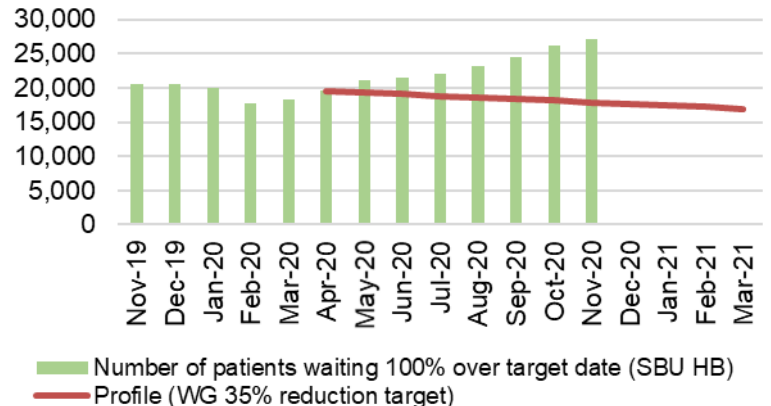
CANCER	
Description	Current Performance
<b>Cancer demand and shape of the waiting list</b>  1. Number of Urgent Suspected Cancer (USC) referrals received  2. Backlog of USC patients with a wait status of more than 53 days  3. Volume of USC patients by stage and adjusted wait December 2019  4. Volume of USC patients by stage and adjusted wait Start of September 2020	<p>The number of Urgent Suspected Cancer (USC) referrals significantly reduced between March and April 2020, however there has been a constant increase every month since May 2020. The number of USC patients waiting over 53 days significantly increased in May 2020 and started to reduce over the summer months but subsequently increased in September 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 that there are more patients waiting at the tail end of the waiting list when compared with December 2019.</p>
	Trend
	<div> <div> <p><b>1. Number of USC referrals</b></p> </div> <div> <p><b>2. Backlog of USC patients with a wait status of more than 53 days</b></p> </div> <div> <p><b>3. Volume of patients by stage and adjusted wait (December 2019)</b></p> </div> <div> <p><b>4. Volume of patients by stage and adjusted wait (November 2020)</b></p> </div> </div>



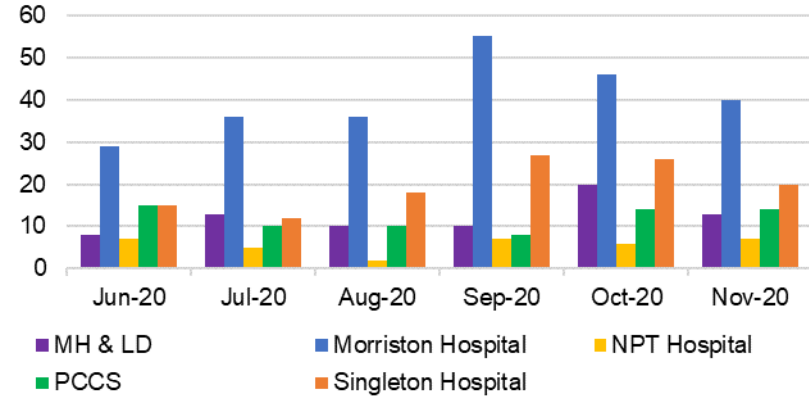
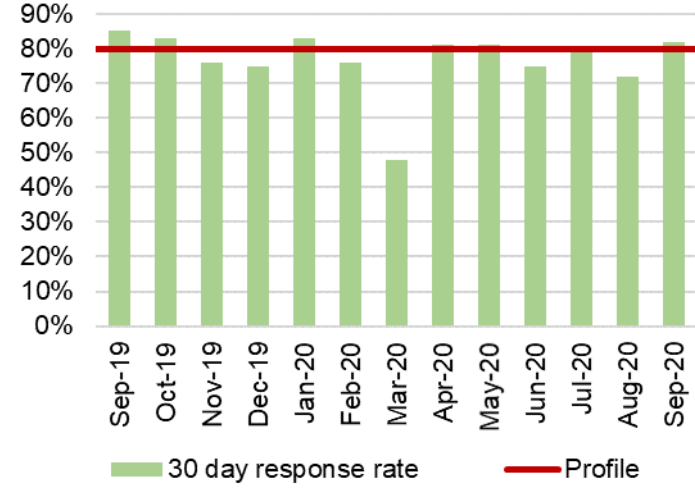
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<b>Cancer- NUSC waiting times-</b> <i>Percentage of patients newly diagnosed with cancer, not via urgent route that started definitive treatment within 31 days of diagnosis</i>	<p>November 2020 figures will be finalised on the 31<sup>st</sup> December 2020. Draft figures indicate a possible achievement of 86% of patients starting treatment within 31 days. At the time of writing this report there are 11 breaches* across the Health Board for November 2020:</p> <ul style="list-style-type: none"><li>• Urological – 5</li><li>• Lower GI – 3</li><li>• Head &amp; Neck – 1</li><li>• Gynaecological – 1</li><li>• Breast - 1</li></ul> <p><i>*Breach validation is ongoing.</i></p>	<p><b>Percentage of NUSC patients starting treatment within 31 days of diagnosis</b></p> <table><caption>Percentage of NUSC patients starting treatment within 31 days of diagnosis</caption><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>NPTH</th></tr></thead><tbody><tr><td>Nov-19</td><td>95%</td><td>95%</td><td>95%</td></tr><tr><td>Dec-19</td><td>90%</td><td>95%</td><td>95%</td></tr><tr><td>Jan-20</td><td>95%</td><td>95%</td><td>95%</td></tr><tr><td>Feb-20</td><td>95%</td><td>95%</td><td>95%</td></tr><tr><td>Mar-20</td><td>95%</td><td>95%</td><td>95%</td></tr><tr><td>Apr-20</td><td>95%</td><td>95%</td><td>95%</td></tr><tr><td>May-20</td><td>65%</td><td>90%</td><td>95%</td></tr><tr><td>Jun-20</td><td>70%</td><td>90%</td><td>95%</td></tr><tr><td>Jul-20</td><td>80%</td><td>95%</td><td>95%</td></tr><tr><td>Aug-20</td><td>85%</td><td>95%</td><td>95%</td></tr><tr><td>Sep-20</td><td>85%</td><td>95%</td><td>95%</td></tr><tr><td>Oct-20</td><td>75%</td><td>90%</td><td>95%</td></tr><tr><td>Nov-20</td><td>40%</td><td>90%</td><td>95%</td></tr></tbody></table>	Month	Morriston	Singleton	NPTH	Nov-19	95%	95%	95%	Dec-19	90%	95%	95%	Jan-20	95%	95%	95%	Feb-20	95%	95%	95%	Mar-20	95%	95%	95%	Apr-20	95%	95%	95%	May-20	65%	90%	95%	Jun-20	70%	90%	95%	Jul-20	80%	95%	95%	Aug-20	85%	95%	95%	Sep-20	85%	95%	95%	Oct-20	75%	90%	95%	Nov-20	40%	90%	95%
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<b>Cancer- USC waiting times-</b> <i>Percentage of patients newly diagnosed with cancer, via the urgent suspected cancer route, that started definitive treatment within 62 days of receipt of referral</i>	<p>November 2020 figures will be finalised on the 31<sup>st</sup> December 2020. Draft figures indicate a possible achievement of 62% of patients starting treatment within 62 days. At the time of writing this report there are 38 breaches* in total across the Health Board for November 2020:</p> <ul style="list-style-type: none"><li>• Lower GI - 6</li><li>• Gynaecological – 4</li><li>• Head &amp; Neck – 4</li><li>• Sarcoma – 4</li><li>• Skin - 3</li><li>• Breast – 1</li><li>• Haematological – 1</li><li>• Lung – 1</li><li>• Upper GI -5</li><li>• Urological – 9</li></ul> <p><i>*Breach validation is ongoing.</i></p>	<p><b>Percentage of USC patients starting treatment within 62 days of receipt of referral</b></p> <table><caption>Percentage of USC patients starting treatment within 62 days of receipt of referral</caption><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>NPTH</th></tr></thead><tbody><tr><td>Nov-19</td><td>85%</td><td>90%</td><td>95%</td></tr><tr><td>Dec-19</td><td>90%</td><td>95%</td><td>95%</td></tr><tr><td>Jan-20</td><td>95%</td><td>85%</td><td>65%</td></tr><tr><td>Feb-20</td><td>85%</td><td>75%</td><td>95%</td></tr><tr><td>Mar-20</td><td>85%</td><td>85%</td><td>75%</td></tr><tr><td>Apr-20</td><td>80%</td><td>85%</td><td>95%</td></tr><tr><td>May-20</td><td>75%</td><td>85%</td><td>95%</td></tr><tr><td>Jun-20</td><td>85%</td><td>90%</td><td>95%</td></tr><tr><td>Jul-20</td><td>85%</td><td>95%</td><td>95%</td></tr><tr><td>Aug-20</td><td>75%</td><td>95%</td><td>95%</td></tr><tr><td>Sep-20</td><td>75%</td><td>85%</td><td>95%</td></tr><tr><td>Oct-20</td><td>80%</td><td>90%</td><td>65%</td></tr><tr><td>Nov-20</td><td>40%</td><td>75%</td><td>95%</td></tr></tbody></table>	Month	Morriston	Singleton	NPTH	Nov-19	85%	90%	95%	Dec-19	90%	95%	95%	Jan-20	95%	85%	65%	Feb-20	85%	75%	95%	Mar-20	85%	85%	75%	Apr-20	80%	85%	95%	May-20	75%	85%	95%	Jun-20	85%	90%	95%	Jul-20	85%	95%	95%	Aug-20	75%	95%	95%	Sep-20	75%	85%	95%	Oct-20	80%	90%	65%	Nov-20	40%	75%	95%
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<b>Single Cancer Pathway</b> <i>Percentage of patients starting first definitive cancer treatment within 62 days from point of suspicion (regardless of the referral route)</i>	<p>November 2020 figures will be finalised on the 31<sup>st</sup> December 2020. Draft figures indicate a possible achievement of 43% of patients starting treatment within 62 days of the suspicion of cancer first being raised (unadjusted pathway). At the time of writing this report, 92 patients did not receive their treatment within the time frame.</p> <p>Both adjusted and unadjusted waits are provided as per current reporting requirements to Welsh Government. (52% adjusted with 76 breaches).</p>	<p><b>Percentage of patients starting first definitive cancer treatment within 62 days from point of suspicion (regardless of the referral route)</b></p> <table border="1"> <caption>Percentage of patients starting first definitive cancer treatment within 62 days from point of suspicion (regardless of the referral route)</caption> <thead> <tr> <th>Month</th> <th>% of patients started treatment within 62 days (with suspensions)</th> <th>% of patients started treatment within 62 days (without suspensions)</th> </tr> </thead> <tbody> <tr><td>Nov-19</td><td>70%</td><td>55%</td></tr> <tr><td>Dec-19</td><td>75%</td><td>60%</td></tr> <tr><td>Jan-20</td><td>70%</td><td>50%</td></tr> <tr><td>Feb-20</td><td>65%</td><td>45%</td></tr> <tr><td>Mar-20</td><td>75%</td><td>55%</td></tr> <tr><td>Apr-20</td><td>70%</td><td>55%</td></tr> <tr><td>May-20</td><td>70%</td><td>60%</td></tr> <tr><td>Jun-20</td><td>70%</td><td>60%</td></tr> <tr><td>Jul-20</td><td>80%</td><td>65%</td></tr> <tr><td>Aug-20</td><td>75%</td><td>65%</td></tr> <tr><td>Sep-20</td><td>70%</td><td>60%</td></tr> <tr><td>Oct-20</td><td>70%</td><td>60%</td></tr> <tr><td>Nov-20</td><td>50%</td><td>45%</td></tr> </tbody> </table>	Month	% of patients started treatment within 62 days (with suspensions)	% of patients started treatment within 62 days (without suspensions)	Nov-19	70%	55%	Dec-19	75%	60%	Jan-20	70%	50%	Feb-20	65%	45%	Mar-20	75%	55%	Apr-20	70%	55%	May-20	70%	60%	Jun-20	70%	60%	Jul-20	80%	65%	Aug-20	75%	65%	Sep-20	70%	60%	Oct-20	70%	60%	Nov-20	50%	45%																																							
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<b>USC First Outpatient Appointments</b> <i>The number of patients at first outpatient appointment stage by days waiting</i>	Week to week through November 2020 the percentage of patients seen within 14 days to first appointment ranged between 9% and 16%.	<b>The number of patients waiting for a first outpatient appointment (by total days waiting) - End of November 2020</b> <table><tr><th></th><th>≤10</th><th>11-20</th><th>21-30</th><th>&gt;31</th><th>Total</th></tr><tr><td>Breast</td><td>0</td><td>3</td><td>77</td><td>25</td><td>105</td></tr><tr><td>Children Cancer</td><td>0</td><td>1</td><td>0</td><td>0</td><td>1</td></tr><tr><td>Gynaecological</td><td>1</td><td>7</td><td>81</td><td>15</td><td>104</td></tr><tr><td>Haematological</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Head&amp;Neck</td><td>10</td><td>2</td><td>1</td><td>3</td><td>16</td></tr><tr><td>LGI</td><td>0</td><td>10</td><td>3</td><td>45</td><td>58</td></tr><tr><td>Lung</td><td>1</td><td>0</td><td>0</td><td>0</td><td>1</td></tr><tr><td>Other</td><td>1</td><td>14</td><td>2</td><td>3</td><td>20</td></tr><tr><td>Sarcoma</td><td>0</td><td>0</td><td>1</td><td>0</td><td>1</td></tr><tr><td>Skin</td><td>21</td><td>36</td><td>14</td><td>3</td><td>74</td></tr><tr><td>UGI</td><td>0</td><td>11</td><td>4</td><td>0</td><td>15</td></tr><tr><td>Urological</td><td>1</td><td>14</td><td>1</td><td>0</td><td>16</td></tr><tr><td>Total</td><td>35</td><td>98</td><td>184</td><td>94</td><td>411</td></tr></table>		≤10	11-20	21-30	>31	Total	Breast	0	3	77	25	105	Children Cancer	0	1	0	0	1	Gynaecological	1	7	81	15	104	Haematological	0	0	0	0	0	Head&Neck	10	2	1	3	16	LGI	0	10	3	45	58	Lung	1	0	0	0	1	Other	1	14	2	3	20	Sarcoma	0	0	1	0	1	Skin	21	36	14	3	74	UGI	0	11	4	0	15	Urological	1	14	1	0	16	Total	35	98	184	94	411
	≤10	11-20	21-30	>31	Total																																																																																	
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<b>Radiotherapy waiting times</b>  <i>The percentage of patients receiving radiotherapy treatment</i>	Radiotherapy waiting times are challenging however the provision of emergency radiotherapy within 1 and 2 days has been maintained at 100% throughout the COVID19 outbreak. <table><tr><th>Measure</th><th>Target</th><th>Nov-20</th></tr><tr><td>Scheduled (21 Day Target)</td><td>80%</td><td>58%</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>31%</td></tr><tr><td>Urgent SC (14 Day Target)</td><td>100%</td><td>100%</td></tr><tr><td>Emergency (within 1 day)</td><td>80%</td><td>100%</td></tr><tr><td>Emergency (within 2 days)</td><td>100%</td><td>100%</td></tr><tr><td>Elective Delay (21 Day Target)</td><td>80%</td><td>56%</td></tr><tr><td>Elective Delay (28 Day Target)</td><td>100%</td><td>73%</td></tr></table>	Measure	Target	Nov-20	Scheduled (21 Day Target)	80%	58%	Scheduled (28 Day Target)	100%	85%	Urgent SC (7 Day Target)	80%	31%	Urgent SC (14 Day Target)	100%	100%	Emergency (within 1 day)	80%	100%	Emergency (within 2 days)	100%	100%	Elective Delay (21 Day Target)	80%	56%	Elective Delay (28 Day Target)	100%	73%	<b>Radiotherapy waiting times</b> 																																																									
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FOLLOW-UP APPOINTMENTS		
Description	Current Performance	Trend
<p><b>Follow-up appointments</b></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 November 2020, the overall size of the follow-up waiting list reduced by 94 patients compared with October 2020 (from 120,968 to 120,874).</p> <p>In November 2020, there was a total of 56,647 patients waiting for a follow-up past their target date. This is an in-month reduction of 1.3% (from 57,380 in October 2020 to 56,647 in November 2020).</p> <p>Of the 56,647 delayed follow-ups in November 2020, 9,363 had appointment dates and 47,284 were still waiting for an appointment.</p> <p>In addition, 27,156 patients were waiting 100%+ over target date in November 2020. This is a 3.6% increase when compared with October 2020.</p>	<p><b>1. Total number of patients waiting for a follow-up</b></p>  <p><b>2. Delayed follow-ups: Number of patients waiting 100% over target</b></p> 

PATIENT EXPERIENCE		
Description	Current Performance	Trend
<p><b>Patient experience</b></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"> <li>Health Board Friends &amp; Family patient satisfaction level in November 2020 was 84% and 787 surveys were completed:             <ul style="list-style-type: none"> <li>➤ Neath Port Talbot Hospital (NPTH) completed 24 surveys in November 2020, with a recommended score of 75%.</li> <li>➤ Singleton Hospital completed 377 surveys for November, with a recommended score of 87%.</li> <li>➤ Morriston Hospital completed 155 surveys in November 2020, with a recommended score of 86%.</li> <li>➤ Mental Health &amp; Learning Disabilities completed 82 surveys for November 2020, with a recommended score of 41%.</li> <li>➤ Primary &amp; Community Care completed 231 surveys for November, with a recommended score of 80%.</li> </ul> </li> </ul>	<p><b>1. Number of friends and family surveys completed</b></p> <p><b>2. % of patients/ service users who would recommend and highly recommend</b></p>

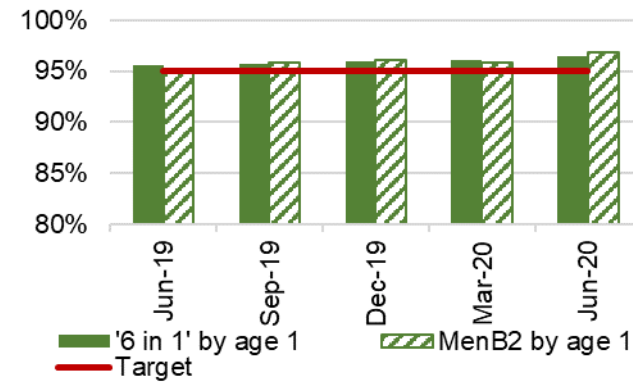
COMPLAINTS																																																																																						
Description	Current Performance	Trend																																																																																				
<b>Patient concerns</b>  <i>1. Number of formal complaints received</i>          <i>2. Percentage of concerns that have received a final reply or an interim reply up to and including 30 working days from the date the concern was first received by the organisation</i>	<p>1. In November 2020, the Health Board received 103 formal complaints; this is a 25% reduction when compared with November 2019 (from 137 to 103). 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.</p>	<p><b>1. Number of formal complaints received</b></p>  <table><caption>1. Number of formal complaints received</caption><thead><tr><th>Month</th><th>MH &amp; LD</th><th>PCCS</th><th>Morriston Hospital</th><th>NPT Hospital</th><th>Singleton Hospital</th></tr></thead><tbody><tr><td>Jun-20</td><td>8</td><td>15</td><td>28</td><td>5</td><td>15</td></tr><tr><td>Jul-20</td><td>12</td><td>10</td><td>35</td><td>5</td><td>12</td></tr><tr><td>Aug-20</td><td>10</td><td>10</td><td>35</td><td>2</td><td>18</td></tr><tr><td>Sep-20</td><td>10</td><td>8</td><td>55</td><td>5</td><td>28</td></tr><tr><td>Oct-20</td><td>20</td><td>15</td><td>45</td><td>5</td><td>25</td></tr><tr><td>Nov-20</td><td>12</td><td>15</td><td>40</td><td>5</td><td>20</td></tr></tbody></table> <p><b>2. Response rate for concerns within 30 days</b></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>Sep-19</td><td>85%</td><td>80%</td></tr><tr><td>Oct-19</td><td>82%</td><td>80%</td></tr><tr><td>Nov-19</td><td>75%</td><td>80%</td></tr><tr><td>Dec-19</td><td>72%</td><td>80%</td></tr><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></tbody></table>	Month	MH & LD	PCCS	Morriston Hospital	NPT Hospital	Singleton Hospital	Jun-20	8	15	28	5	15	Jul-20	12	10	35	5	12	Aug-20	10	10	35	2	18	Sep-20	10	8	55	5	28	Oct-20	20	15	45	5	25	Nov-20	12	15	40	5	20	Month	30 day response rate	Profile	Sep-19	85%	80%	Oct-19	82%	80%	Nov-19	75%	80%	Dec-19	72%	80%	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%
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	<p>2. The overall Health Board rate for responding to concerns within 30 working days was 82% in September 2020 against the Welsh Government target of 75% and Health Board target of 80%.</p> <p>Performance in September 2020 ranged from 63% in Singleton Hospital to 100% in Neath Port Talbot Hospital.</p>																																																																																					



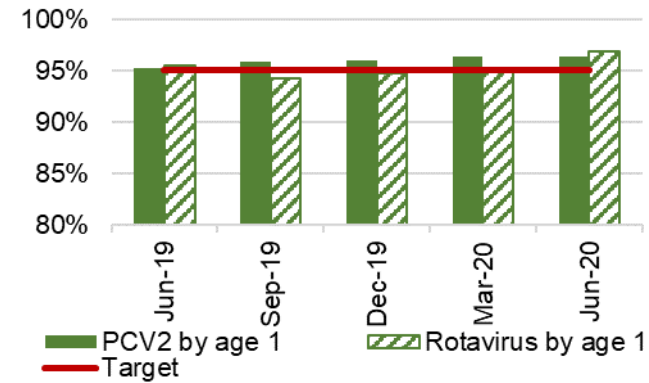
## HARM FROM WIDER SOCIETAL ACTIONS/LOCKDOWN

### 7.1 Vaccinations and Immunisations

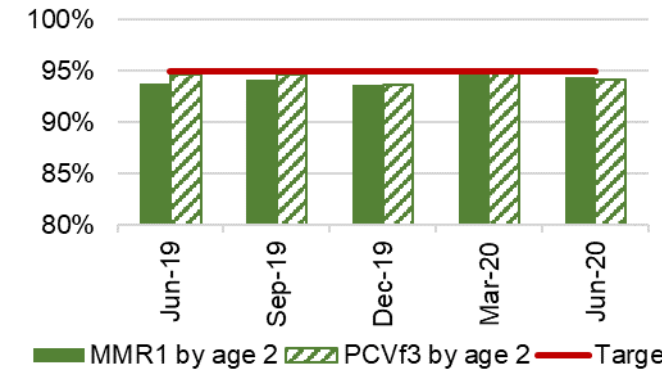
**Chart 1: % children who received 3 doses of the hexavalent '6 in 1' vaccine and MenB2 vaccine by age 1**



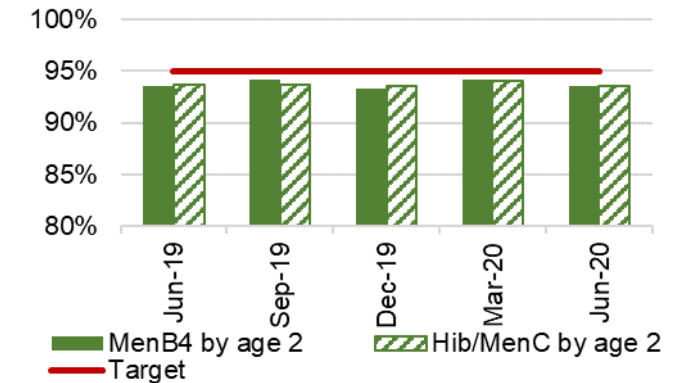
**Chart 2: % children who received PCV2 vaccine and Rotavirus vaccine by age 1**



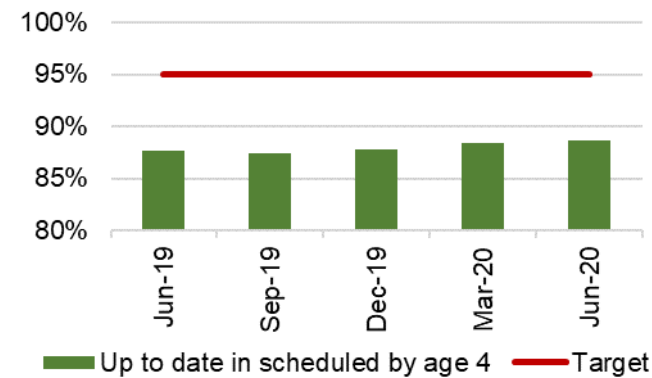
**Chart 3: % children who received MMR1 vaccine and PCVf3 vaccine by age 2**



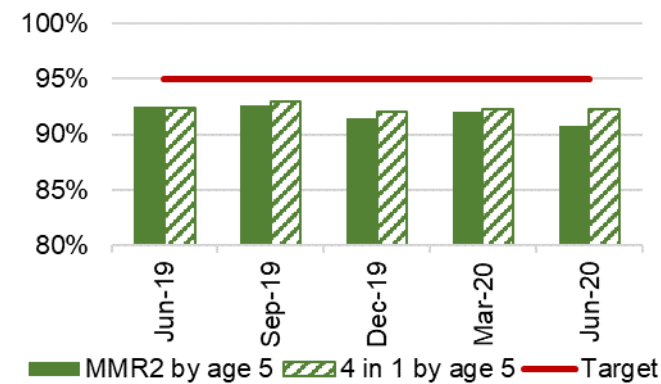
**Chart 4: % children who received MenB4 vaccine and Hib/MenC vaccine by age 2**



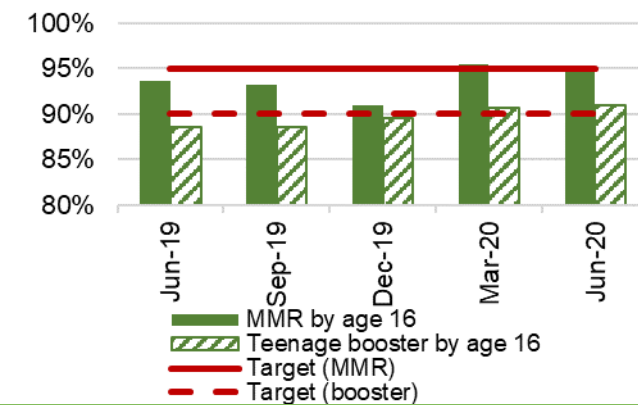
**Chart 5: % children who are up to date in schedule by age 4**



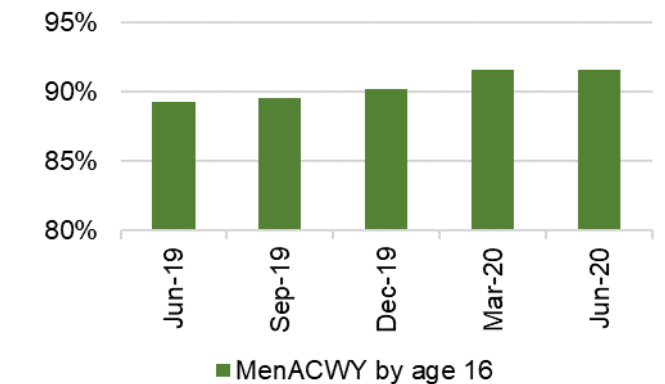
**Chart 6: % children who received 2 doses of the MMR vaccine and 4 in 1 vaccine by age 5**



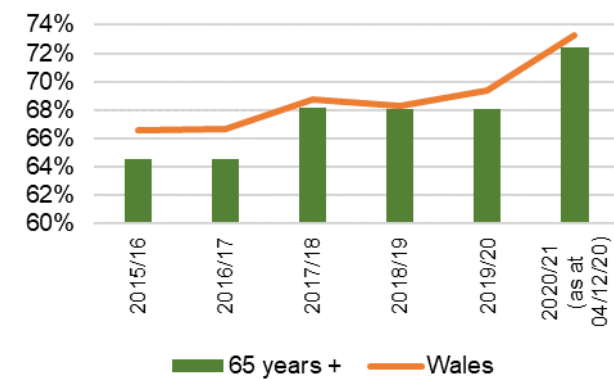
**Chart 7: % children who received MMR vaccine and teenage booster by age 16**



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

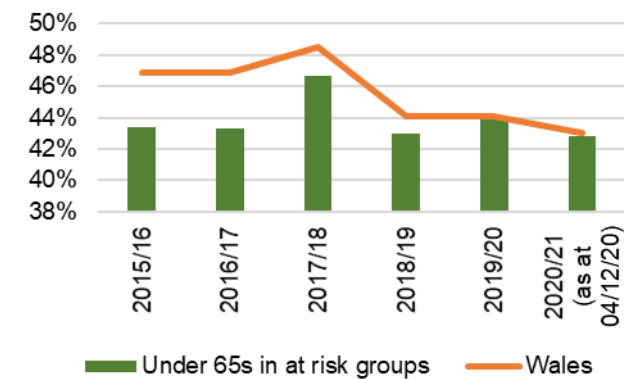


**Chart 9: Influenza uptake for amongst 65 year olds and over**



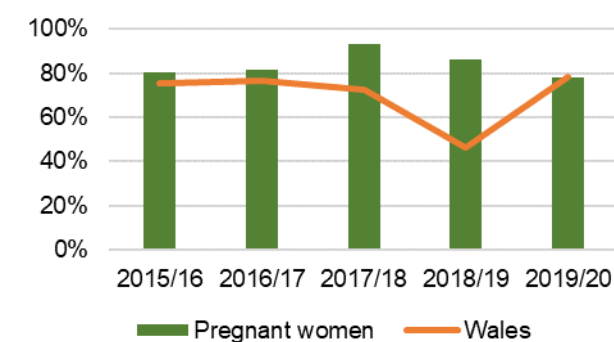
Data prior to April 2019 relates to Abertawe Bro Morgannwg University Health Board

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



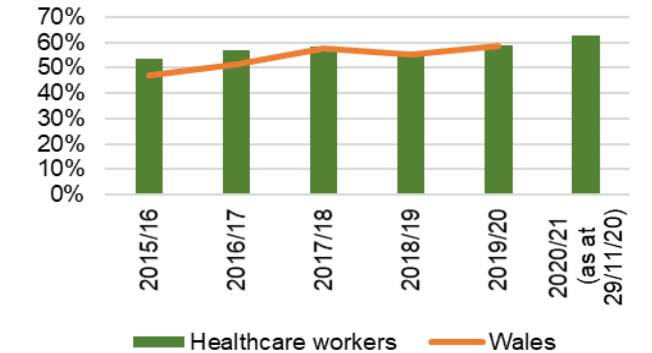
Data prior to April 2019 relates to Abertawe Bro Morgannwg University Health Board

**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**

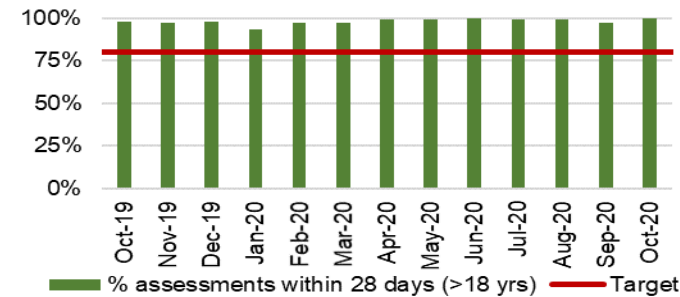


Data prior to April 2019 relates to Abertawe Bro Morgannwg University Health Board.  
2020/21 all-Wales data not yet available

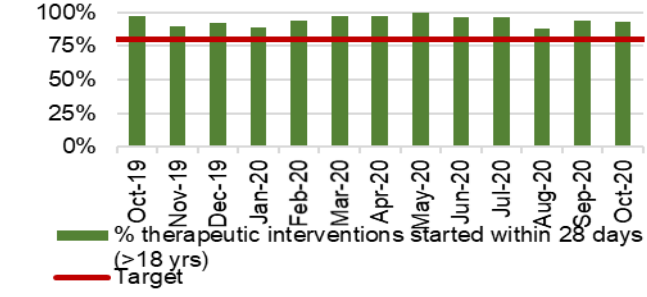
## HARM FROM WIDER SOCIETAL ACTIONS/LOCKDOWN

### 7.2 Mental Health Overview

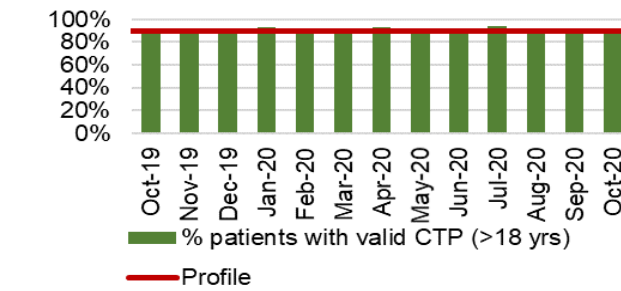
**Chart 1: % of mental health assessments undertaken within (up to and including) 28 days from the date of receipt of referral**



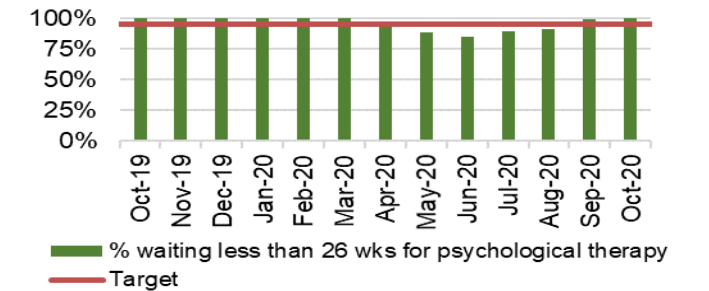
**Chart 2: % of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS**



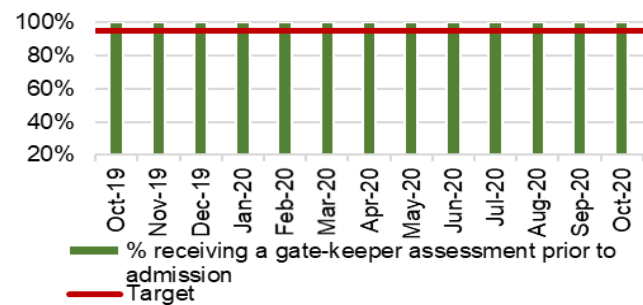
**Chart 3: % of health board residents in receipt of secondary mental health services (all ages) who have a valid care and treatment plan**



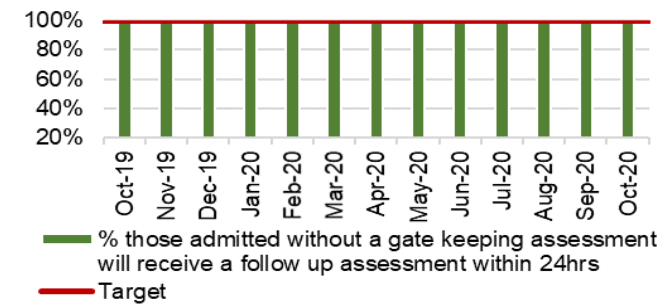
**Chart 4: % of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health**



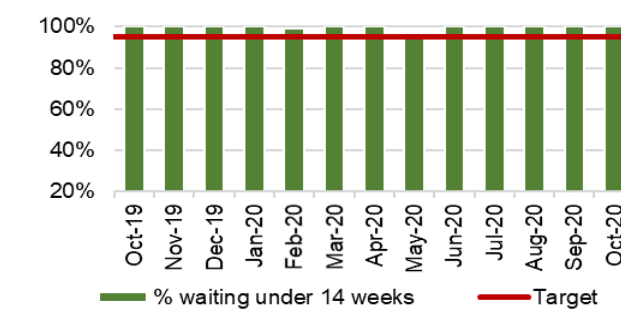
**Chart 5: 95% of those admitted 0900-2100 will receive a gate-keeping assessment by the CRHTS prior to admission**



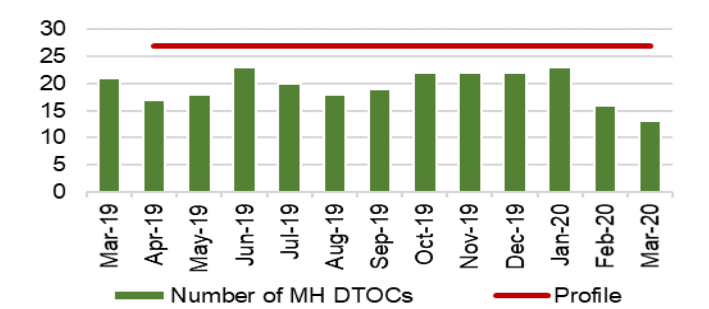
**Chart 6: 100% of those admitted without a gate keeping assessment will receive a follow up assessment by CRHTS within 24hrs of admission**



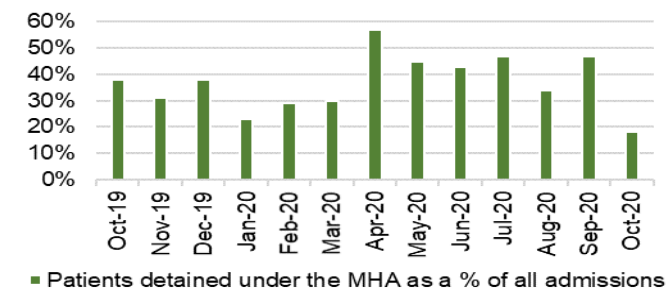
**Chart 7: % of patients waiting under 14 weeks for Therapies**



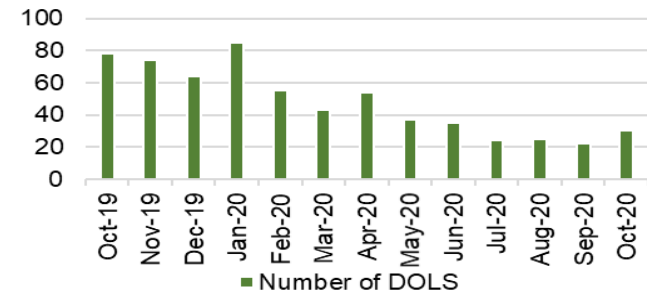
**Chart 8: Number of Mental Health Delayed Transfers of Care (DTOCs)**



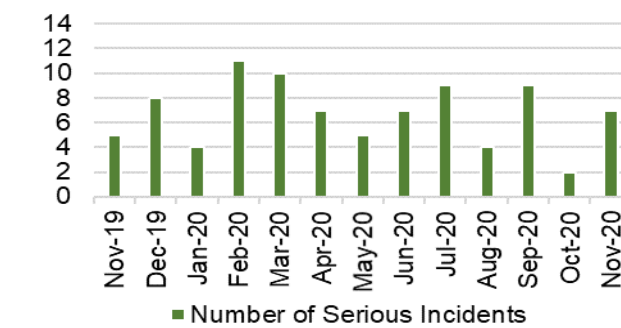
**Chart 9: Number of patients detained under the Mental Health Act as a percentage of all admissions**



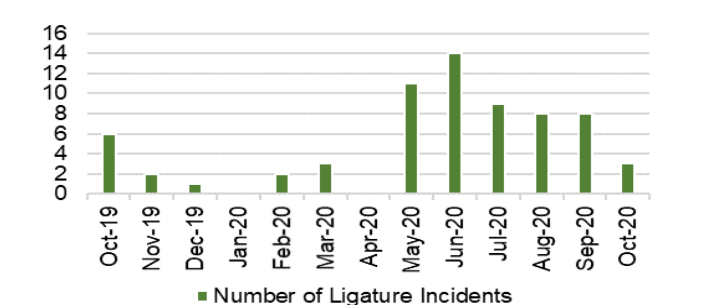
**Chart 10: Number of patients subject to Deprivation of Liberty Safeguards (DOLS)**



**Chart 11: Number of Serious Incidents**

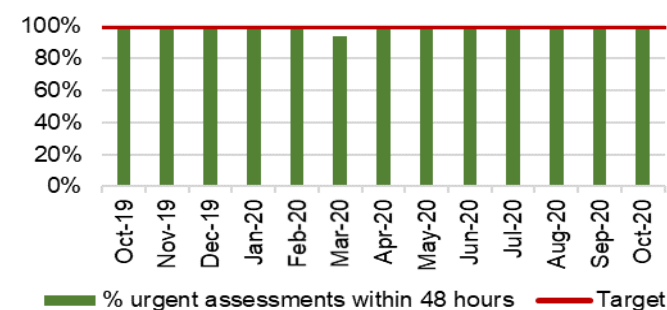


**Chart 12: Number of ligature incidents**

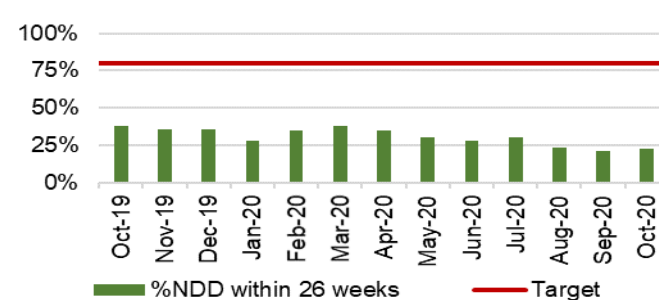


### Child & Adolescent Mental Health Services (CAMHS)

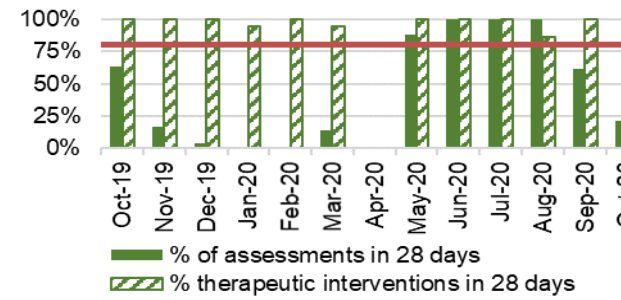
**Chart 13: Urgent assessments undertaken within 24 hours from receipt of referral**



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

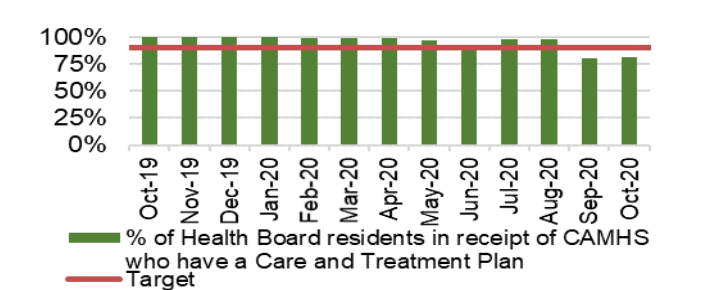


**Chart 15: Assessment and intervention within 28 days**



\* Apr-20 data not available

**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 October 2020, 99.5% of assessments were undertaken within 28 days of referral for patients 18 years and over.</p> <p>2. In October 2020, the percentage of therapeutic interventions started within 28 days following an assessment by the Local Primary Mental Health Support Service (LPMHSS) was 93%.</p> <p>3. 91% of residents in receipt of secondary care mental health services had a valid Care and Treatment Plan in October 2020.</p> <p>4. In October 2020, 99.7% of patients waited less than 26 weeks for psychological therapy. This was below the national target of 95%.</p>	<p><b>1. % Mental Health assessments undertaken within 28 days from receipt of referral</b></p> <table border="1"> <caption>Data for Measure 1: % Mental Health assessments undertaken within 28 days from receipt of referral</caption> <thead> <tr> <th>Month</th> <th>% assessments within 28 days (&gt;18 yrs)</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>Oct-19</td><td>99.5%</td><td>80%</td></tr> <tr><td>Nov-19</td><td>98.5%</td><td>80%</td></tr> <tr><td>Dec-19</td><td>98.5%</td><td>80%</td></tr> <tr><td>Jan-20</td><td>90.5%</td><td>80%</td></tr> <tr><td>Feb-20</td><td>98.5%</td><td>80%</td></tr> <tr><td>Mar-20</td><td>98.5%</td><td>80%</td></tr> <tr><td>Apr-20</td><td>98.5%</td><td>80%</td></tr> <tr><td>May-20</td><td>98.5%</td><td>80%</td></tr> <tr><td>Jun-20</td><td>98.5%</td><td>80%</td></tr> <tr><td>Jul-20</td><td>98.5%</td><td>80%</td></tr> <tr><td>Aug-20</td><td>98.5%</td><td>80%</td></tr> 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CHILD & ADOLESCENT MENTAL HEALTH (CAMHS)		
Description	Current Performance	Trend
<p>1. Crisis - % Urgent Assessment by CAMHS undertaken within 48 Hours from receipt of referral</p> <p>2. Primary CAMHS (P-CAMHS) - % Routine Assessment by CAMHS undertaken within 28 days from receipt of referral</p> <p>3. Primary CAMHS (P-CAMHS) - % Therapeutic interventions started within 28 days following assessment by LPMHSS</p> <p>4. NDD - % Neurodevelopmental Disorder patients receiving a Diagnostic Assessment within 26 weeks</p> <p>5. Specialist CAMHS (S-CAMHS) - % Routine Assessment by SCAMHS undertaken within 28 days from receipt of referral</p>	<p>1. In October 2020, 100% of CAMHS patients received an assessment within 48 hours.</p> <p>2. 21% of routine assessments were undertaken with 28 days from referral in October 2020 against a target of 80%.</p> <p>3. 100% of therapeutic interventions were started within 28 days following assessment in October 2020.</p> <p>4. 22% of NDD patients received a diagnostic assessment within 26 weeks in October 2020 against a target of 80%.</p> <p>5. 79% of routine assessments by SCAMHS were undertaken within 28 days in October 2020.</p>	<p><b>1. Crisis- assessment within 48 hours</b></p> <p><b>2. and 3. P-CAMHS % assessments and therapeutic interventions within 28 days</b></p> <p><b>4. NDD- assessment within 26 weeks</b></p> <p><b>5. S-CAMHS % assessments within 28 days</b></p> <p><i>*Data for April 2020 not available for measures 2 and 3</i></p>



## 8. FINANCE UPDATES

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

Description	Current Performance	Trend																																				
Revenue Financial Position – expenditure incurred against revenue resource limit	<ul style="list-style-type: none"><li>The reported revenue financial position for November 2020 is an in-month overspend of £1.911m, resulting in a cumulative overspend of £16.726m.</li><li>The in-month position broadly reflects the HB operational plan deficit, with COVID costs and savings broadly covered by WG funding allocations.</li><li>The application of this funding provides coverage for the additional costs of incurred and the savings delivery impact of the pandemic.</li><li>The remaining cumulative overspend is made up of :<ul style="list-style-type: none"><li>The planned operational deficit for 2020/21, which to October is £16.3m,</li><li>The impact of additional TAVI demand and activity, which is being managed by the Health Board which is £0.7m for the year to date.</li><li>Slippage on planned expenditure which is supported by WG income.</li></ul></li></ul>	<div><p>HEALTH BOARD FINANCIAL PERFORMANCE 2020/21</p><table><thead><tr><th>Month</th><th>Operational Position (£'000)</th><th>Savings Delivery (£'000)</th><th>Net COVID Impact (£'000)</th></tr></thead><tbody><tr><td>M1</td><td>1,529</td><td>1,749</td><td>2,118</td></tr><tr><td>M2</td><td>1,480</td><td>2,101</td><td>6,652</td></tr><tr><td>M3</td><td>1,476</td><td>1,930</td><td>-2,707</td></tr><tr><td>M4</td><td>1,187</td><td>1,467</td><td>2,147</td></tr><tr><td>M5</td><td>3,914</td><td>1,310</td><td>2,358</td></tr><tr><td>M6</td><td>1,394</td><td>2,018</td><td>-19,315</td></tr><tr><td>M7</td><td>1,364</td><td>1,528</td><td>-876</td></tr><tr><td>M8</td><td>1,190</td><td>1,790</td><td>-1,310</td></tr></tbody></table></div>	Month	Operational Position (£'000)	Savings Delivery (£'000)	Net COVID Impact (£'000)	M1	1,529	1,749	2,118	M2	1,480	2,101	6,652	M3	1,476	1,930	-2,707	M4	1,187	1,467	2,147	M5	3,914	1,310	2,358	M6	1,394	2,018	-19,315	M7	1,364	1,528	-876	M8	1,190	1,790	-1,310
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Description	Current Performance	Trend
<b>Capital Financial Position –</b> expenditure incurred against capital resource limit	<ul style="list-style-type: none"> <li>The forecast outturn capital position for 2020/21 is an overspend of £2.187m. Allocations on 3 schemes are anticipated from WG which will balance this position.</li> <li>The forecast outturn includes latest estimates for COVID expenditure across our surge capacity, Field Hospitals and new ways of working, including home working.</li> </ul>	<p><b>Capital - Cumulative Performance to Plan</b></p> <p>£'000</p> <p>Forecast Actual/Revised Forecast</p>
<b>Workforce Spend –</b> workforce expenditure profile	<ul style="list-style-type: none"> <li>The total workforce costs were broadly aligned with forecast planned spend in November.</li> <li>Variable pay costs have increased by around £0.7m in November, which reflects the increasing operational pressures, resulting in utilising all funded beds and the use of surge capacity.</li> </ul>	<p><b>Variable Pay Expenditure This Year and Last Year</b></p> <p>Variable Pay - Last Year Average Variable Pay - Last Year Irregular Sessions W/L Agency - Medical Agency - Non Medical Overtime Bank</p>



Description	Current Performance	Trend																											
<p><b>PSPP</b> – pay 95% of Non-NHS invoices within 30 days of receipt of goods or valid invoice</p>	<ul style="list-style-type: none"> <li>The number of invoices paid within 30 days in November was again below the 95% target, with in month performance being 94.52%. This represented a significant improvement on the October figure of 89.99%. with a reduction in the number of nurse agency invoices paid after 30 days from 1,359 on October to 171 in November. The in month failure to achieve the 95% target was also as a result of delays in authorisation of NHS invoices and delays in receipting of goods.</li> <li>The November performance has increased the cumulative compliance for the year to date from 92.86% at the end of October to 93.04% at the end of November, but performance will need to be above 95% for the remainder of the financial year in order to reach 95% cumulative compliance by financial year end.</li> </ul>	<p><b>Percentage of non-NHS invoices paid within 30 days of receipt of goods or valid invoice</b></p> <table border="1"> <thead> <tr> <th>Month</th> <th>In Month PSPP (%)</th> <th>Cumulative PSPP (%)</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>90.00</td> </tr> <tr> <td>June</td> <td>96.93</td> <td>92.69</td> </tr> <tr> <td>July</td> <td>94.27</td> <td>93.04</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>92.86</td> </tr> <tr> <td>November</td> <td>94.52</td> <td>93.04</td> </tr> </tbody> </table>	Month	In Month PSPP (%)	Cumulative PSPP (%)	April	87.86	87.86	May	94.33	90.00	June	96.93	92.69	July	94.27	93.04	August	94.27	93.39	September	93.39	93.39	October	89.99	92.86	November	94.52	93.04
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APPENDIX 2: INTEGRATED PERFORMANCE DASHBOARD

The following dashboard provides an overview of the Health Board’s performance against all NHS Wales Delivery Framework measures and key local measures.

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		Performance Trend	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20
COVID19 related measures	Number of new COVID19 cases	Local	Nov-20	5,523		Reduce										1,381	303	57	53	66	787	4,662	5,523
	Number of staff referred for Antigen Testing	Local	Nov-20	8,199		Reduce										2,281	2,785	3,102	3,329	3,564	4,765	6,459	8,199
	Number of staff awaiting results of COVID19 test	Local	Nov-20	41		Reduce										0	19	16	1	0	38 (as at 10/10/20)	21 (as at 06/11/20)	41 (as at 06/12/20)
	Number of COVID19 related incidents	Local	Nov-20	137		Reduce										119	67	40	26	39	30	87	137
	Number of COVID19 related serious incidents	Local	Nov-20	1		Reduce										1	0	2	0	11	1	1	1
	Number of COVID19 related complaints	Local	Nov-20	48		Reduce										77	61	39	58	27	30	37	48
	Number of COVID19 related risks	Local	Nov-20	7		Reduce										19	20	19	5	8	2	6	7
	Number of staff self isolated (asymptomatic)	Local	Aug-20	420		Reduce										851	516	474	422	420	353	329	
Number of staff self isolated (symptomatic)	Local	Aug-20	36		Reduce										860	292	141	70	36	72	132		
% sickness	Local	Aug-20	3.5%		Reduce											13.2%	6.0%	4.5%	3.6%	3.5%	3.2%	3.5%	

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		Performance Trend	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	
Unscheduled Care	% 111 patients prioritised as P1CH that started their definitive clinical assessment within 1 hour of their initial call being answered	National	Jun-19	97%	90%																			
	% of emergency responses to red calls arriving within (up to and including) 8 minutes	National	Nov-20	67%	65%	65%	✔	60.8% (Oct-20)	2nd (Oct-20)		59%	62%	67%	69%	69%	70%	75%	76%	74%	72%	69%	66%	67%	
	Number of ambulance handovers over one hour	National	Nov-20	500	0			3,131 (Oct-20)	3rd (Oct-20)		821	868	848	704	462	61	20	47	120	163	410	355	500	
	Handover hours lost over 15 minutes	Local	Nov-20	1,474							3,212	3,361	3,545	2,247	1,623	209	125	178	315	418	1,100	916	1,474	
	% of patients who spend less than 4 hours in all major and minor emergency care (i.e. A&E) facilities from arrival until admission, transfer or discharge	National	Nov-20	75.4%	95%			75.1% (Oct-20)	5th (Oct-20)		73.2%	70.9%	71.6%	74.1%	72.8%	78.4%	83.5%	87.7%	80.1%	80.6%	76.4%	77.2%	75.4%	
	Number of patients who spend 12 hours or more in all hospital major and minor care facilities from arrival until admission, transfer or discharge	National	Nov-20	626	0			4,360 (Oct-20)	4th (Oct-20)		927	1,018	1,038	783	557	131	97	81	223	286	537	494	626	
NOF	% of survival within 30 days of emergency admission for a hip fracture	National	Aug-20	93.6%	12 month ↑			84.8% (Aug-20)	2nd (Aug-20)		77.6%	84.4%	78.6%	87.5%	75.0%	78.9%	77.1%	95.5%	93.3%	93.6%				
	% of patients (age 60 years and over) who presented with a hip fracture that received an orthogeriatrician assessment within 72 hours	National	Sep-20	84.0%	12 month ↑			60% (Sep-20)	2nd (Sep-20)		77.0%	78.0%	80.0%	79.0%	79.0%	79.0%	80.0%	82.0%	83.0%	83.0%	84.0%			
Stroke	Direct admission to Acute Stroke Unit (<4 hrs)	National	Nov-20	23.7%	54.0%			37.2% (Sep-20)	2nd (Aug-20)		55%	39%	24%	62%	47.4%	Data not available			52.7%	57.4%	51.4%	50.0%	29.8%	23.7%
	CT Scan (<1 hrs) (local)	Local	Nov-20	31.7%							49%	44%	43%	38%	42.5%				49.1%	48.2%	52.8%	62.5%	42.1%	31.7%
	Assessed by a Stroke Specialist Consultant Physician (< 24 hrs)	National	Nov-20	96.7%	85.3%			83.8% (Sep-20)	1st (Sep-20)		98%	100%	90%	97%	97.5%				100.0%	94.6%	97.2%	97.5%	98.2%	96.7%
	Thrombolysis door to needle <= 45 mins	Local	Nov-20	28.6%	12 month ↑						0%	20%	0%	0%	0.0%				30.0%	25.0%	0.0%	12.5%	11.1%	28.6%
	% compliance against the therapy target of an average of 16.1 minutes if speech and language therapist input per stroke patient	National	Nov-20	65.1%	12 month ↑			50.2% (Sep-20)	2nd (Sep-20)		45%	38%	33%	28%	32.8%				30.7%	44.3%	61.7%	80.1%	86.5%	65.1%
	% 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)			49.6%												
DTOCs	Number of mental health HB DToCs	National	Mar-20	13	12 month ↓	27	✔				22	22	23	16	13	DTOC reporting temporarily suspended								
	Number of non-mental health HB DToCs	National	Mar-20	60	12 month ↓	50	✘				61	53	52	69	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)			21.3%			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		Performance Trend	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	
Infection control	Cumulative cases of E.coli bacteraemias per 100k pop	National	Nov-20	63.8	<67		✓	62.28 (Oct-20)	4th (Oct-20)		76.3	78.6	80.8	82.5	81.4	43.8	43.0	46.4	53.8	62.5	64.0	65.7	63.8	
	Number of E.Coli bacteraemia cases (Hospital)		Nov-20	5							5	12	15	15	8	6	6	3	8	8	7	14	5	
	Number of E.Coli bacteraemia cases (Community)			11							10	20	18	16	15	8	8	14	17	24	16	11	11	
	Total number of E.Coli bacteraemia cases			16							15	32	33	31	23	14	14	17	25	32	23	25	16	
	Cumulative cases of S.aureus bacteraemias per 100k pop		Nov-20	32.7	<20		✗	23.69 (Oct-20)	6th (Oct-20)		35.4	35.2	35.6	34.8	34.2	31.5	24.7	28.8	26.1	28.2	30.7	31.5	32.7	
	Number of S.aureus bacteraemias cases (Hospital)		Nov-20	7							8	7	6	6	4	4	2	4	3	5	7	6	7	
	Number of S.aureus bacteraemias cases (Community)			6							3	4	7	2	5	6	4	8	3	7	7	6	6	
	Total number of S.aureus bacteraemias cases			13							11	11	13	8	9	10	6	12	6	12	14	12	13	
	Cumulative cases of C.difficile per 100k pop		Nov-20	48.4	<26		✗	30.65 (Oct-20)	6th (Oct-20)		35.8	35.6	35.3	36.5	35.4	34.4	42.9	49.5	45.3	50.2	51.2	50.4	48.4	
	Number of C.difficile cases (Hospital)		Nov-20	8							13	7	6	11	5	9	6	14	7	9	12	12	8	
	Number of C.difficile cases (Community)			2							4	4	5	4	3	2	10	6	4	14	6	3	2	
	Total number of C.difficile cases			10							17	11	11	15	8	11	16	20	11	23	18	15	10	
	Cumulative cases of Klebsiella per 100k pop		Nov-20	23.4							22.3	21.9	22.1	21.0	21.1	18.8	18.4	21.6	20.0	22.1	21.0	21.9	23.4	
	Number of Klebsiella cases (Hospital)		Nov-20	7							4	4	7	2	4	1	4	4	3	6	3	7	7	
	Number of Klebsiella cases (Community)			4							4	2	1	1	3	5	2	5	2	4	2	2	4	
	Total number of Klebsiella cases			11				44 (Oct-20)	3rd (Oct-20)		8	6	8	3	7	6	6	9	5	10	5	9	11	
	Cumulative cases of Aeruginosa per 100k pop		Nov-20	5.8							8.1	7.9	8.0	7.6	7.2	6.3	10.7	7.2	6.2	6.7	5.6	5.7	5.8	
	Number of Aeruginosa cases (Hospital)		Nov-20	1							1	1	2	1	1	2	3	0	0	0	0	1	1	
	Number of Aeruginosa cases (Community)			1							0	1	1	0	0	0	2	0	1	3	0	1	1	
	Total number of Aeruginosa cases			2				17 (Oct-20)	1st (Oct-20)		1	2	3	1	1	2	5	0	1	3	0	2	2	
Hand Hygiene Audits - compliance with WHO 5 moments	Local	Nov-20	97%		95%	✓				97%	96%	97%	93%	99%	98%	99%	98%	98%	98%	94%	96%	97%	97%	
Serious incidents and risks	Of the serious incidents due for assurance, the % which were assured within the agreed timescales	National	Nov-20	0%	90%	80%	✗				55%	38%	28%	29%	30%	7%	29%	0%	0%	50%	20%	0%	0%	
	Number of new Never Events	National	Nov-20	1	0	0	✗				0	1	1	0	0	0	0	1	0	0	0	1	1	
	Number of risks with a score greater than 20	Local	Nov-20	138		12 month ↓	✗				105	109	111	114	108	109	101	110	115	121	117	130	138	
	Number of risks with a score greater than 16	Local	Nov-20	224		12 month ↓	✗				200	202	205	204	198	202	193	204	210	206	224	224		
Pressure Ulcers	Number of pressure ulcers acquired in hospital	Local	Sep-20	44		12 month ↓	✗				22	24	30	41	31	25	29	18	19	37	44	59		
	Number of pressure ulcers developed in the community		Sep-20	21		12 month ↓	✓				31	24	26	25	39	34	33	34	28	25	21	34		
	Total number of pressure ulcers		Sep-20	65		12 month ↓	✗				53	48	56	66	70	59	62	52	47	62	65	93		
	Number of grade 3+ pressure ulcers acquired in hospital		Sep-20	0		12 month ↓	✓				2	2	2	3	1	2	0	1	0	4	0	4		
	Number of grade 3+ pressure ulcers acquired in community		Sep-20	5		12 month ↓	✗				8	3	5	8	8	4	6	9	4	5	5	11		
	Total number of grade 3+ pressure ulcers		Sep-20	5		12 month ↓	✓				10	5	7	11	9	6	6	10	4	9	5	15		
Inpatient Falls	Number of Inpatient Falls	Local	Nov-20	247		12 month ↓	✓				240	297	249	207	210	193	209	196	208	227	219	187	247	
Mortality	% of universal mortality reviews (UMRs) undertaken within 28 days of a death	Local	Oct-20	100%	95%	95%	✓				100.0%	98.5%	98.4%	100.0%	95.7%	95.6%	99.3%	100.0%	95.5%	96.6%	99.2%	100.0%		
	Stage 2 mortality reviews required	Local	Oct-20	11							9	15	16	8	9	10	11	10	10	10	11			
	% stage 2 mortality reviews completed	Local	Aug-20	50%		100%	✗				78.0%	67.0%	75.0%	44.4%	0.0%	30.0%	27.3%	50.0%	90.0%	50.0%				
	Crude hospital mortality rate (74 years of age or less)	National	Oct-20	0.97%	12 month ↓			1.24% (Sep-20)	3rd (Sep-20)		0.78%	0.79%	0.71%	0.72%	0.75%	0.80%	0.88%	0.89%	0.92%	0.90%	0.93%	0.97%		
	% 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	Nov-20	95%		98%	✗				93.7%	96.4%	97.7%	95.17%	91.9%	92.0%	93.9%	91.6%	96.6%	92.4%	93.6%	93.9%	94.6%	
Coding	% of episodes clinically coded within 1 month of discharge	Local	Oct-20	95%	95%	95%	✓				93%	95%	96%	95%	94%	94%	97%	97%	96%	96%	96%	95%		
	% of clinical coding accuracy attained in the NWS national clinical coding accuracy audit programme	National	2019/20	91%	Annual ↑			93.9% (2019/20)	7th (2019/20)		2019/20= 91.4%													
E-TOC	% of completed discharge summaries (total signed and sent)	Local	Nov-20	66%		100%	✗				63.0%	65.0%	66.0%	67.0%	68%	61%	63%	67%	63%	66%	70%	68%	66%	
Workforce	Agency spend as a % of the total pay bill	National	Jul-20	2.81%	12 month ↓			3.83% (Jul-20)	4th out of 10 organisations (Jul-20)		4.31%	4.07%	4.95%	4.69%	4.46%	4.04%	3.21%	4.32%	2.81%					
	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	Nov-20	56%	85%	85%	✗	61.7% (Jul-20)	7th out of 10 organisations (Jul-20)		69%	70%	72%	74%	72%	68%	63%	60%	59%	58%	58%	58%	56%	
	% 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	Nov-20	81%	85%	85%	✗	80.0% (Jul-20)	7th out of 10 organisations (Jul-20)		80%	80%	81%	82%	83%	82%	79%	79%	80%	80%	80%	80%	81%	
	% workforce sickness absence (12 month rolling)	National	Oct-20	7.07%	12 month ↓			5.97% (Jul-20)	10th out of 10 organisations (Jul-20)		6.05%	6.09%	6.15%	6.18%	6.31%	6.65%	6.88%	6.98%	7.03%	7.03%	7.03%	7.07%		
	% 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		Performance Trend	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20
Primary Care	% of GP practices offering daily appointments between 17:00 and 18:30 hours	Local	Nov-20	88%	Annual ↑	95%	✗	86.2%			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	Nov-20	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 population regularly accessing NHS primary dental care	Local	Q4 19/20	60.6%	4 quarter ↑			54.8% (Q4 19/20)	2nd (Q4 19/20)	.		61%			61%								
	% of children regularly accessing NHS primary dental care within 24 months	National	Q4 19/20	78.7%	4 quarter ↑			68.3% (Q4 19/20)	1st (Q4 19/20)	.		79%			79%								
	% adult dental patients in the health board population re-attending NHS primary dental care between 6 and 9 months	National	Oct-20	27.2%	4 quarter ↓			32.2% (Q3 19/20)	2nd (Q3 19/20)		32.1%	32.3%	31.6%	31.8%	29.4%	19.2%	16.8%	14.7%	18.6%	24.7%	23.8%	27.2%	
Cancer	% of patients newly diagnosed with cancer, not via the urgent route, that started definitive treatment within (up to and including) 31 days of diagnosis (regardless of referral route)	National	Nov-20 (draft)	86.0%	98%			94.1% (Sep-20)	3rd out of 6 organisations (Sep-20)		95%	92%	99%	93%	93%	97%	82%	85%	90%	91%	94%	83%	86%
	% of patients newly diagnosed with cancer, via the urgent suspected cancer route, that started definitive treatment within (up to and including) 62 days receipt of referral	National	Nov-20 (draft)	62.0%	95%			73.6% (Sep-20)	2nd out of 6 organisations (Sep-20)		86%	92%	86%	78%	85%	81%	86%	88%	91%	91%	82%	85%	62%
	% of patients starting definitive treatment within 62 days from point of suspicion (with adjustments)	National	Nov-20 (draft)	52.0%	12 month ↑			71.3% (Sep-20)	4th out of 6 organisations		71.0%	77.0%	71%	66%	76%	71%	72%	73%	82%	80%	71%	73%	52%
Radiotherapy waiting times	Scheduled (21 Day Target)	Local	Nov-20	58%	80%		✗				50%	43%	34%	28%	56%	49%	46%	57%	71%	63%	60%	75%	58%
	Scheduled (28 Day Target)	Local	Nov-20	85%	100%		✗				75%	63%	60%	58%	77%	86%	84%	93%	97%	92%	86%	90%	85%
	Urgent SC (7 Day Target)	Local	Nov-20	31%	80%		✗				56%	53%	50%	52%	48%	45%	33%	65%	57%	57%	54%	43%	31%
	Urgent SC (14 Day Target)	Local	Nov-20	100%	100%		✓				88%	79%	79%	92%	89%	91%	83%	90%	97%	91%	92%	86%	100%
	Emergency (within 1 day)	Local	Nov-20	100%	80%		✓				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
	Emergency (within 2 days)	Local	Nov-20	100%	100%		✓				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
	Elective Delay (21 Day Target)	Local	Nov-20	56%	80%		✗				38%	35%	58%	56%	84%	76%	83%	92%	52%	46%	58%	58%	56%
	Elective Delay (28 Day Target)	Local	Nov-20	73%	100%		✗				44%	58%	68%	73%	94%	88%	100%	100%	97%	75%	60%	75%	73%
Planned Care	Number of patients waiting > 8 weeks for a specified diagnostics	National	Nov-20	6,610	0			60,967 (Sep-20)	3rd (Sep-20)		226	569	628	424	1,407	5,788	8,346	8,033	7,510	8,070	7,666	6,645	6,610
	Number of patients waiting > 14 weeks for a specified therapy	National	Nov-20	817	0			9,072 (Sep-20)	5th (Sep-20)		0	0	0	1	51	387	982	1,646	1,554	1,518	1,350	1,135	817
	% of patients waiting < 26 weeks for treatment	National	Nov-20	49%	95%			44.8% (Sep-20)	7th (Sep-20)		84.1%	82.6%	81.8%	82.3%	80.2%	72.3%	64.0%	59.5%	52.4%	46.5%	41.0%	44.8%	49.2%
	Number of patients waiting > 26 weeks for outpatient appointment	Local	Nov-20	21,005	0						1,120	1,305	1,453	1,306	2,055	5,499	9,300	11,964	15,721	20,497	23,069	22,050	21,005
	Number of patients waiting > 36 weeks for treatment	National	Nov-20	34,431	0			168,944 (Sep-20)	3rd (Sep-20)		4,587	5,141	5,623	5,729	6,509	8,355	10,248	13,419	18,078	22,494	26,046	30,776	34,431
	The number of patients waiting for a follow-up outpatient appointment	National	Nov-20	120,874	35% reduction by March 2021	103,498	✗	775,019 (Sep-20)	5th (Sep-20)		130,648	131,263	131,090	128,674	125,708	123,082	121,434	120,468	120,062	120,969	120,962	120,968	120,874
	The number of patients waiting for a follow-up outpatients appointment who are delayed over 100%	National	Nov-20	27,156		17,892	✗	199,111 (Sep-20)	5th (Sep-20)		20,498	20,579	19,969	17,747	18,258	19,538	21,026	21,448	22,101	23,209	24,472	26,217	27,156
	% of R1 ophthalmology patient pathways waiting within target date or within 25% beyond target date for an outpatient appointment	National	Oct-20	45.2%	95%			45.7% (Sep-20)	4th (Sep-20)		70.8%	71.6%	75.9%	78.5%	76.2%	69.9%	64.1%	63.4%	55.5%	50.9%	47.7%	45.2%	
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	Nov-20	6.8%	12 month ↓						6.7%	7.4%	6.5%	6.0%	5.6%	5.2%	3.7%	4.5%	4.4%	5.0%	6.2%	6.4%	6.8%
	% of patients who did not attend a follow-up outpatient appointment	Local	Nov-20	6.9%	12 month ↓						7.5%	8.0%	7.7%	6.9%	6.5%	4.7%	3.3%	4.4%	4.9%	6.1%	6.6%	6.6%	6.9%
Theatre Efficiencies	Theatre Utilisation rates	Local	Nov-20	74.0%		90%	✗				70%	56%	63%	66%	35%	6%	11%	16%	42%	90%	75%	75%	74%
	% of theatre sessions starting late	Local	Nov-20	38.9%		<25%	✗				51%	46%	44%	43%	38%	45%	43%	46%	51%	46%	49%	44%	39%
	% of theatre sessions finishing early	Local	Nov-20	49.6%		<20%	✗				41%	43%	41%	42%	40%	43%	45%	36%	37%	28%	39%	38%	50%
Postponed operations	Number of procedures postponed either on the day or the day before for specified non-clinical reasons	National	Aug-20	2,273	> 5% annual ↓			12,055 (Aug-20)	6th (Aug-20)		3,318	3,331	3,375	3,252	3,228	3,084	2,862	2,652	2,383	2,273			
Treatment Fund	All new medicines must be made available no later than 2 months after NICE and AWMMSG appraisals	National	Q1 20/21	98.7%	100%	100%	✗	98.1% (Q1 20/21)	3rd out of 6 organisations (Q1 20/21)	.		98.6%			98.7%			98.7%					

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		Performance Trend	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20
Prescribing	Total antibacterial items per 1,000 STAR-PUs	National	Q1 20/21	243.8	4 quarter ↓			226.8 (Q1 20/21)	6th (Q1 20/21)			336.5			323.9			243.8					
	Patients aged 65 years or over prescribed an antipsychotic	National	Q1 20/21	1,464	Quarter on quarter ↓			9,936 (Q1 20/21)	5th (Q1 20/21)			1,474			1,476			1,464					
	Number of women of child bearing age prescribed valproate as a % of all women of child bearing age	National	Q1 20/21	0.23%	Quarter on quarter ↓			0.17% (Q1 20/21)	7th (Q1 20/21)									0.23%					
	Opioid average daily quantities per 1,000 patients	National	Q1 20/21	4,308	4 quarter ↓			4,382.9 (Q1 20/21)	3rd (Q1 20/21)			4,409			4,329			4,308					
	Biosimilar medicines prescribed as % of total 'reference' product plus biosimilar	National	Q1 20/21	80.2%	Quarter on quarter ↑			80.9% (Q1 20/21)	4th (Q1 20/21)			80.2%			80.7%			80.2%					
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%												
	Number of friends and family surveys completed	Local	Nov-20	787		12 month ↑	✖				3,564	2,476	3,187	3,014	1,720	150	247	393	502	625	2,804	1,047	787
	% of who would recommend and highly recommend	Local	Nov-20	84%		90%	✖				95%	95%	95%	95%	95%	90%	92%	87%	91%	83%	93%	82%	84%
	% of all-Wales surveys scoring 9 out 10 on overall satisfaction	Local	Nov-20	85%		90%	✖				83%	83%	86%	81%	90%	95%	100%	79%	91%	83%	84%	79%	85%
Complaints	Number of new formal complaints received	Local	Nov-20	103		12 month trend ↓	✖				137	87	142	113	92	37	54	77	79	81	114	121	103
	% concerns that had final reply (Reg 24)/interim reply (Reg 26) within 30 working days of concern received	National	Sep-20	82%	75%	80%	✔	58.6% (Q1 20/21)	2nd (Q1 20/21)		76%	75%	83%	76%	48%	81%	81%	75%	79%	72%	82%		
	% of acknowledgements sent within 2 working days	Local	Nov-20	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 20/21	210	10% annual ↑	1,651	✖	3,486 (Q1 20/21)	6th out of 10 organisations (Q1 20/21)			1,109			1,505			210					
	Number of patients recruited in Health and Care Research Wales commercially sponsored studies		Q1 20/21	2	5% annual ↑	215	✖	19 (Q1 20/21)	3rd out of 10 organisations (Q1 20/21)			179			205			2					



Harm from wider societal actions/lockdown																									
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20		
Early years measures	% of babies who are exclusively breastfed at 10 days old	National	2019/20	34.2%	Annual ↑			35.3%	5th (2019/20)		2019/20= 34.2%														
	% children who received 3 doses of the hexavalent '6 in 1' vaccine by age 1	National	Q1 20/21	96.5%	95%			96.2% (Q1 20/21)	3rd (Q1 20/21)			96%			96%			96.5%							
	% of children who received 2 doses of the MMR vaccine by age 5	National	Q1 20/21	90.8%	95%			92.4% (Q1 20/21)	6th (Q1 20/21)			92%			92%			90.8%							
Smoking cessation	% of adult smokers who make a quit attempt via smoking cessation services	National	Q4 19/20	2.87%	5% annual target	4.2%	✖	3.34% (Q4 19/20)	6th (Q4 19/20)		1.9%	2.1%	2.4%		2.87%										
	% of those smokers who are co-validated as quit at 4 weeks	National	Q3 19/20	52.6%	40% annual target	40.0%	✔	41.6% (Q4 19/20)	2nd (Q4 19/20)			55%			52.6%										
Alcohol	European age standardised rate of alcohol attributed hospital admissions for individuals resident in Wales	National	Q1 20/21	27870%	4 quarter ↓			280.3 (Q1 20/21)	5th (Q1 20/21)			404.4			390.5			278.7							
	% of people who have been referred to health board services who have completed treatment for alcohol abuse	National	Q1 20/21	49%	4 quarter ↑			59.9% (20/21)	5th (Q1 20/21)			27.4%			48.7%			49.0%							
Influenza	% uptake of influenza among 65 year olds and over	National	Nov-20	72.4%	75%			73.3% (Nov-20)	3rd (Nov-20)		62.0%	66.2%	68.7%	68.0%	68.1%	Data collection restarts October 2020						65.6%	72.4%		
	% uptake of influenza among under 65s in risk groups	National	Nov-20	42.8%	55%			43.0% (Nov-20)	5th (Nov-20)		32.0%	39.2%	42.8%	43.4%	44.0%							34.4%	42.8%		
	% uptake of influenza among pregnant women	National	2019/20	86.1%	75%			78.5% (2019/20)	5th (2019/20)					78.2%	Data not available										
	% uptake of influenza among children 2 to 3 years old	Local	Nov-20	48.8%	50%			50.2% (Nov-20)	5th (Nov-20)		24.0%	42.1%	48.2%	50.3%	50.3%							35.7%	48.8%		
	% uptake of influenza among healthcare workers	National	Nov-20	62.9%	60%			58.7% (2019/20)	7th out of 10 organisations (2019/20)		55.0%	56.0%	58.7%	58.7%	58.7%							56.2%	62.9%		
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% (data relates to ABMU, awaiting disaggregation of SBU data)														
	Uptake of screening for breast cancer	National	2018/19	73.6%	70%			72.8% (2018/19)	2nd (2018/19)		2018/19= 73.6% (data relates to ABMU, awaiting disaggregation of SBU data)														
	Uptake of screening for cervical cancer	National	2018/19	72.1%	80%			73.2% (2018/19)	5th (2018/19)		2018/19= 72.1% (data relates to ABMU, awaiting disaggregation of SBU data)														
CAMHS	% of urgent assessments undertaken within 48 hours from receipt of referral (Crisis)	Local	Oct-20	100%		100%	✔				98%	100%	100%	100%	94%	100%	100%	100%	100%	100%	100%	100%			
	% Patients with Neurodevelopmental Disorders (NDD) receiving a Diagnostic Assessment within 26 weeks	National	Oct-20	22%	80%	80%	✖	25.7% (Sep-20)	5th (Sep-20)		36%	36%	28%	35%	38%	35%	30%	28%	30%	24%	21%	22%			
	% Patients waiting less than 28 days for a first outpatient appointment for CAMHS	National	Oct-20	90%	80%	80%	✔	74.0% (Sep-20)	3rd (Sep-20)		77%	69%	87%	93%	67%	44%	78%	100%	100%	100%	98%	90%			
	P-CAMHS - % of Routine Assessment by CAMHS undertaken within 28 days from receipt of referral	National	Oct-20	21%		80%	✖	74.2% (Sep-20)	5th (Sep-20)		17%	4%	0%	0%	14%		88%	100%	100%	100%	62%	21%			
	P-CAMHS - % of therapeutic interventions started within 28 days following assessment by LPMHSS	National	Oct-20	100%		80%	✔	88.3% (Sep-20)	1st (Sep-20)		100%	100%	94%	100%	94%		100%	100%	100%	86%	100%	100%			
	S-CAMHS - % of Routine Assessment by SCAMHS undertaken within 28 days from receipt of referral	Local	Oct-20	79%		80%	✖				82%	69%	87%	93%	75%	46%	72%	100%	100%	100%	98%	79%			
	% residents in receipt of CAMHS to have a valid Care and Treatment Plan (CTP)	National	Oct-20	82%		90%	✖	78.6% (Sep-20)	3rd (Sep-20)		100%	100%	100%	99%	99%	99%	97%	91%	98%	98%	81%	82%			
Mental Health	% of mental health assessments undertaken within (up to and including) 28 days from the date of receipt of referral (over 18 years of age)	National	Oct-20	99.5%	80%	80%	✔	82.4% (Sep-20)	2nd (Sep-20)		97%	98%	93%	97%	97%	99%	99%	100%	99%	99%	97%	99.5%			
	% of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS (over 18 years of age)	National	Oct-20	93%	80%	80%	✔	89.7% (Sep-20)	2nd (Sep-20)		90%	92%	89%	94%	97%	97%	100%	96%	96%	88%	94%	93%			
	% patients waiting < 26 weeks to start a psychological therapy in Specialist Adult Mental Health	National	Oct-20	99.7%	95%	95%	✔	56.0% (Sep-20)	1st (Sep-20)		100%	100%	100%	100%	100%	93%	89%	84%	89%	91%	99%	99.7%			
	% residents in receipt of secondary MH services (all ages) who have a valid care and treatment plan (CTP)	National	Oct-20	91%	90%	90%	✔	85.3% (Sep-20)	2nd (Sep-20)		92%	91%	93%	92%	91%	93%	92%	92%	94%	92%	90%	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 ↑			54.7% (2018/19)	2nd (2018/19)		2018/19= 59.4%														