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Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	23rd March 2021	Agenda Item	2.1
Report Title	Integrated Performance Report		
Report Author	Hannah Roan, Head of Performance & Commissioning (interim)		
Report Sponsor	Darren Griffiths, Director of Finance and Performance (interim)		
Presented by	Darren Griffiths, Director of Finance and Performance (interim)		
Freedom of Information	Open		
Purpose of the Report	The purpose of this report is to provide an update on the current performance of the Health Board across the national measures outlined in the 2020/21 NHS Wales Delivery Framework.		
Key Issues	<p>Key high level issues to highlight this month are as follows:</p> <p>COVID19- February 2021 had the lowest amount of new cases of COVID19 since September 2020. The occupancy rate in general medical beds remains high for recovering COVID patients in February 2021 however, the rate of admissions for new confirmed patients significantly reduced.</p> <p>Unscheduled Care- Demand for emergency department care within Swansea Bay University (SBU) Health Board increased in February 2021 resulting in a deterioration in the percentage of patients seen within 4 hours in A&E and ambulances handovers taking longer than one hour.</p> <p>Planned Care- January 2021 saw an in-month reduction in the number of patients waiting over 36 weeks for treatment. The number of patients waiting over 26 weeks appears to have stabilised. However, the total number of patients waiting is still increasing. Diagnostics and Therapy waiting times continue to reduce and some therapy services are now achieving a nil breach position (i.e. Occupational Therapy and Physiotherapy).</p> <p>Cancer- January 2021 saw an improvement in performance against the Single Cancer Pathway measure of patients receiving definitive treatment within 62 days. The backlog of patients waiting over 63 days reduced in February 2021 and was the best position so far in 2020/21. As is routine, February's figures are in the process of being validated.</p> <p>Mental Health- performance against the Mental Health Measures continues to be maintained. All targets were achieved in January 2021. Psychological therapies access times were 100% for the third month in a row in January 2021.</p>		

	Child and Adolescent Mental Health Services (CAMHS)- Access times for routine and specialist CAMHS continue to be a challenge and were below target again in January 2021. Crisis waiting times and access to therapeutic interventions are being maintained at 100%.			
Specific Action Required	Information	Discussion	Assurance	Approval
	✓		✓	✓
Recommendations	Members are asked to: <ul style="list-style-type: none"> • NOTE the Health Board performance against key measures and targets. • ENDORSE a revision of the performance report for quarter 1 21/22 in order to provide a focussed report to the Board utilising a suite of key measures that are aligned with the 2021/22 Annual Plan. • APPROVE amending the current performance reporting framework for the Health Board and it's sub-committees to streamline reporting and ensure that only key issues are escalated to Board level. • AGREE that performance trajectories linked to the Annual Plan will be included in the Health Board performance reports for 2021/22. • AGREE that the 2021/22 Health Board performance report will include actions being undertaken to address recovery of performance for priority areas. 			

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 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** the Health Board performance against key measures and targets.
- **ENDORSE** a revision of the performance report for quarter 1 21/22 in order to provide a focussed report to the Board utilising a suite of key measures that are aligned with the 2021/22 Annual Plan.
- **APPROVE** amending the current performance reporting framework for the Health Board and it's sub-committees to streamline reporting and ensure that only key issues are escalated to Board level.
- **AGREE** that performance trajectories linked to the Annual Plan will be included in the Health Board performance reports for 2021/22.
- **AGREE** that the 2021/22 Health Board performance report will include actions being undertaken to address recovery of performance for priority areas.

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)	
<p>The '5 Ways of Working' are demonstrated in the report as follows:</p> <ul style="list-style-type: none"> • Long term – Actions within this report are both long and short term in order to balance the immediate service issues with long term objectives. In addition, profiles have been included for the Targeted Intervention Priorities for 2019/20 which provides focus on the expected delivery for every month as well as the year end position in March 2020. • Prevention – the NHS Wales Delivery framework provides a measureable mechanism to evidence how the NHS is positively influencing the health and well-being of the citizens of Wales with a particular focus upon maximising people's physical and mental well-being. • Integration – this integrated performance report brings together key performance measures across the seven domains of the NHS Wales Delivery Framework, which identify the priority areas that patients, clinicians and stakeholders wanted the NHS to be measured against. The framework covers a wide spectrum of measures that are aligned with the Well-being of Future Generations (Wales) Act 2015. • Collaboration – in order to manage performance, the Corporate Functions within the Health Board liaise with leads from the Service Groups as well as key individuals from partner organisations including the Local Authorities, Welsh Ambulance Services Trust, Public Health Wales and external Health Boards. • Involvement – Corporate and Service Group leads are key in identifying performance issues and identifying actions to take forward. 	
Report History	The last iteration of the Integrated Performance Report was presented to Health Board in January 2021 and Performance & Finance Committee in February 2021. This is a routine monthly report.
Appendices	Appendix 1: Integrated Performance Report



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Appendix 1- Integrated Performance Report March 2021



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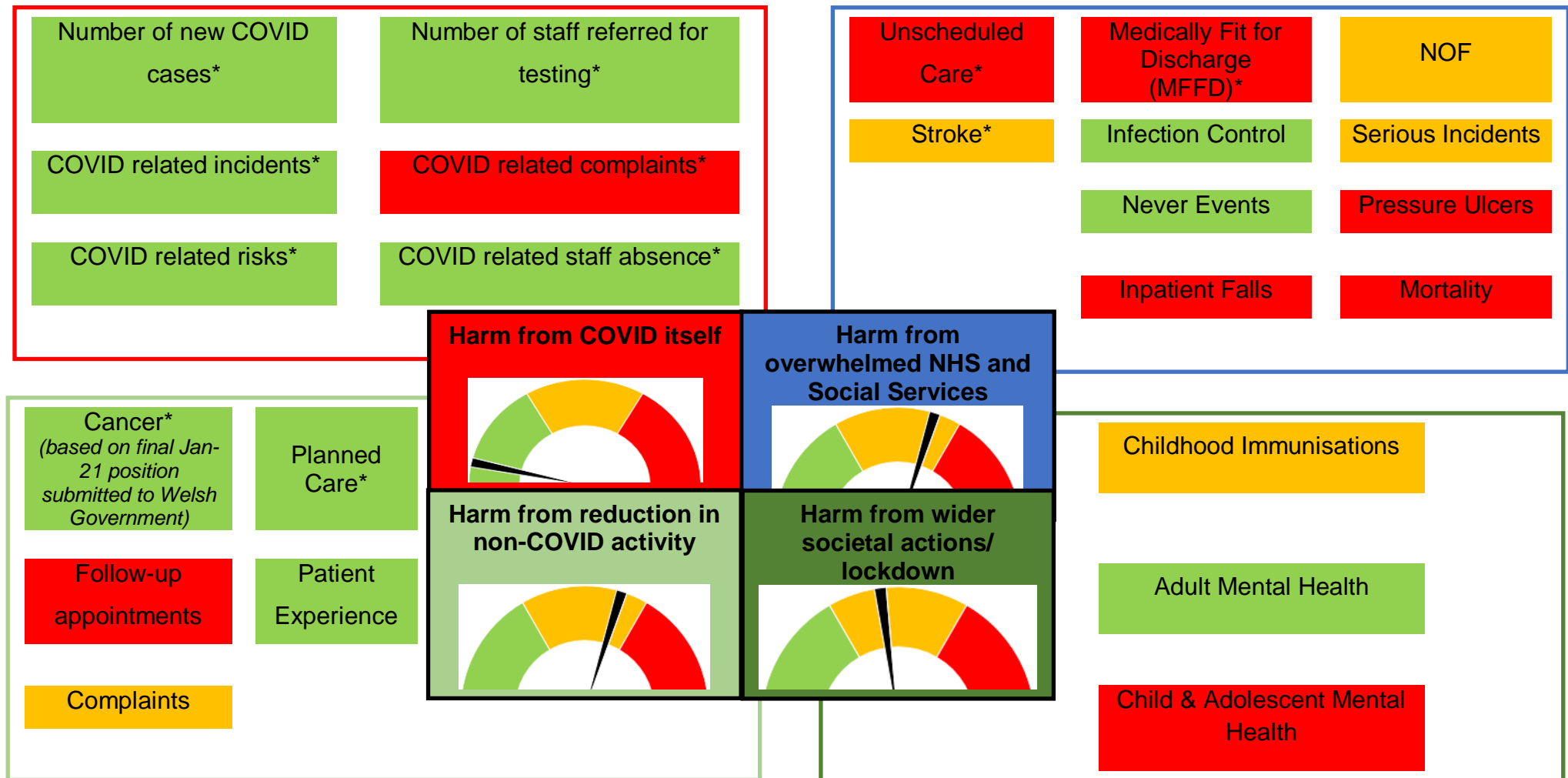
1. OVERVIEW

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

Successes	Priorities
<ul style="list-style-type: none"> Over three-quarters of healthcare staff have now received their 2nd dose and GPs have also started to offer second doses to care home residents. As at 10th March 2021 Swansea Bay had vaccinated administered a total of 147,551 (1st and 2nd doses) between the Mass Vaccination Centres and GP practices. Emergency care requiring hospital treatment continues to be delivered as well as aspects of urgent elective care. The number of patients waiting over target for Diagnostics continues to reduce and February 2021 delivered the best position since April 2020. Waiting times for Therapy services continues to reduce month on month. Occupational Therapy and Physiotherapy are maintaining a nil breach position. In February 2021, the number of patients waiting over 36 weeks for treatment reduced again for the third month in a row. Sustained achievement of the mental health measures access targets throughout 20/21 the COVID pandemic. Psychological therapy waiting times achieved 100% in January 2021. 	<ul style="list-style-type: none"> Submission of 2021/22 annual plan which concentrates on delivery of services through the continued pandemic and focuses on recovery for planned care. Retaining patient access and sustainability of Essential Primary Care Services across 240 contractors in line with National Escalation Framework. Ensure that cancer patients continue to be treated, backlog reduced and ensure that access to radiotherapy and chemotherapy is maintained. Maximise and grow elective care capacity to ensure that clinically urgent patients are treated within recommended timescales. Maximising staffing capacity and vaccination supply to ensure that the COVID vaccination programme is rolled out quickly and effectively. Encourage antigen testing for staff and patients with COVID19 symptoms. Address volume and length of wait for outpatient contacts
Opportunities	Risks & Threats
<ul style="list-style-type: none"> Expansion of list of symptoms for free COVID19 testing to help find hidden COVID19 cases in our communities, and drive down the numbers of onward transmissions Link in with all-Wales work on risk stratification of elective waiting lists and adoption of consistent methodology for the reviewing of patients on elective waiting lists. Digital Week takes place from 8th – 14th March across the UK and Swansea Bay University Health Board are running taster sessions and a one off seminar for all staff to find out more about the changes that have happened and what the future holds. 	<ul style="list-style-type: none"> The ongoing COVID pandemic continues to have a significant impact on the Health Board's ability to meet increasing demands. Extensive work continues to be undertaken in managing the outbreak. Key pressures include: <ul style="list-style-type: none"> Social distancing is limiting the rate at which staff can return to work and rota systems need to be considered alongside a continuation of remote working Number of staff self-isolating Reduction in capacity for elective treatments is increasing waiting times The health board's ability and pace to reintroduce and maintain essential services in the safest way for staff and patients

2. QUADRANTS OF HARM SUMMARY

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



NB- RAG status is against national or local target

** Data not available

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

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

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

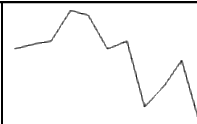





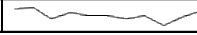




- The summary contains the measures that Welsh Government used to performance manage the Health Board when it was in Targeted Intervention. Even though the Health Board has been de-escalated to Enhanced Monitoring the measures will continue to be highlighted in this report in order to ensure that the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







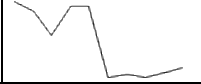
4. OPERATIONAL PLAN DASHBOARD

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

Harm from Covid itself														
		Trend <i>(from 1st Apr 20)</i>	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Comments
Covid Demand:														
•Number of new cases			1,381	303	57	53	66	787	4,663	5,525	11,973	3,759	1,207	Monthly totals are based on the last day of the month. Source: COVID19 dashboard
•Number of staff referred for the Testing (cumulative)			2,281	2,785	3,102	3,329	3,564	4,765	6,460	8,201	10,065	10,749	11,115	Cumulative total for each month. Source: COVID19 dashboard
Number of staff awaiting results			0	19	16	1	0	38 (as at 10/10/20)	21 (as at 06/11/20)	41 (as at 06/12/20)	99 (as at 05/01/21)	78 (as at 07/02/21)	69 (as at 06/03/21)	Source: COVID staff briefing (08/03/2021)
Contact tracing and antibody testing measures:														
Total number of people received an antibody test						15,524 <i>(as at 13.07.20)</i>	17,821 <i>(as at 09/09/20)</i>	18,414 <i>(as at 06/10/20)</i>	18,487 <i>(as at 02/11/20)</i>	18,546 <i>(as at 06/12/20)</i>	18,599 <i>(as at 05/10/21)</i>	18,868 <i>(as at 07/02/21)</i>	18,904 <i>(as at 07/03/21)</i>	Source: COVID staff briefing (08/03/2021)
Complaints, incidents and risks related to Covid:														
•Number of incidents			119	67	40	26	39	30	87	141	127	84	63	Source:COVID19 dashboard
•Number of serious incidents			1	0	2	0	11	1	1	1	0	0	0	
•Number of complaints			77	61	39	58	27	30	37	50	83	106	131	
•Number of risk			19	20	19	5	8	2	6	7	10	3	3	
Daily PPE Stock- amount of supply:														
•Mask – FFP3	Morriston		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	Snapshot taken on the last day of the month. Source:COVID19 dashboard
	Singleton		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
	NPTH		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
	PCC		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
	MH & LD		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
•Mask – FRSM Type 11R	Morriston		24-48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	Snapshot taken on the last day of the month. Source:COVID19 dashboard
	Singleton		24-48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
	NPTH		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
	PCC		24-48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
	MH & LD		24-48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
•Gloves	Morriston		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	Snapshot taken on the last day of the month. Source:COVID19 dashboard
	Singleton		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
	NPTH		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
	PCC		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
	MH & LD		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
•Gowns	Morriston		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	Snapshot taken on the last day of the month. Source:COVID19 dashboard
	Singleton		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
	NPTH		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
	PCC		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
	MH & LD		>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	>48hrs	
Staff absence levels due to:														
Number of staff self isolated (asymptomatic)	Medical		81	39	27	29	24	34	17	36	55	7	Data reported a month in arrears. Snapshots taken mid month Source: Workforce	
	Nursing Reg		270	166	145	133	142	149	106	93	152	61		
	Nursing Non Reg		148	105	112	97	96	77	95	56	81	57		
	Other		352	206	190	163	158	93	111	106	187	93		
Number of staff self isolated (symptomatic)	Medical		90	13	7	2	0	8	17	41	34	16		
	Nursing Reg		289	117	56	23	14	25	44	97	145	112		
	Nursing Non Reg		177	67	37	18	9	8	25	77	68	88		
	Other		304	95	41	27	13	31	46	79	147	100		
% sickness	Medical		14.9%	4.0%	3.0%	2.8%	2.5%	4.0%	3.2%	7.3%	8.3%	2.2%		
	Nursing Reg		14.2%	7.0%	5.1%	4.0%	4.0%	4.4%	3.8%	4.7%	7.4%	4.3%		
	Nursing Non Reg		16.6%	8.0%	7.2%	5.5%	5.2%	4.2%	6.0%	6.5%	7.3%	7.0%		
	Other		11.0%	5.0%	3.6%	2.9%	2.7%	2.0%	2.5%	3.0%	5.4%	3.1%		
	All		13.2%	6.0%	4.5%	3.6%	3.5%	3.2%	3.5%	4.4%	6.5%	4.0%		

Harm from overwhelmed NHS and social care system													
	Trend (from 1st Apr 20)	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Comments
NHS Wales Delivery Measures for unscheduled care:													
•% of patients seen and discharged from A&E within 4 hours		78.4%	83.5%	87.7%	80.1%	80.6%	76.4%	77.2%	75.4%	72.6%	76.8%	71.3%	Data includes Morriston Hospital and NPTH hospital. Source: Patient flow dashboard
•Number of patients waiting over 12 hours in A&E		131	97	81	223	286	537	494	626	776	570	534	Data includes Morriston Hospital and NPT hospital. Source: Patient flow dashboard
•Number of ambulance handovers taking over 1 hour		61	20	47	120	163	410	355	500	510	195	219	Data includes Morriston Hospital and Singleton hospital. Source: Patient flow dashboard
•% ambulance responses to red calls within 8 minutes		69.5%	75.0%	75.5%	73.8%	72.2%	69.2%	66.2%	67.3%	54.1%	67.3%	70.4%	Source: WAST Health Board Area Report
ED demand (attendances)		5,280	7,761	8,525	9,116	9,684	9,329	7,908	7,942	6,985	6,561	6,677	Data includes Morriston Hospital and NPTH hospital. Source: Patient flow dashboard
Healthcare Acquired Infections:													
•E.coli bacteraemia	Number of cases		14	14	17	25	32	23	25	16	12	18	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	36.29	54.43	
•Staph.Aueurs bacteraemia	Number of cases		10	6	12	6	12	14	12	13	9	9	
	Rate per 100k pop.		31.3	18.1	37.5	18.1	36.3	43.8	36.3	40.6	27.2	27.2	
•Clostridium Difficile	Number of cases		11	16	20	11	23	18	15	10	9	3	
	Rate per 100k pop.		34.4	51.4	62.5	33.3	69.6	56.2	45.4	34.4	27.2	9.1	
•Klebsiella spp. Bacteraemia	Number of cases		6	6	9	5	10	5	9	11	12	13	
	Rate per 100k pop.		18.8	18.1	28.1	15.1	30.2	15.6	27.2	34.4	36.3	39.3	
•Pseudomonas aeruginosa bacteraemia	Number of cases		2	5	0	1	3	0	2	2	1	1	
	Rate per 100k pop.		6.3	15.1	0.0	3.0	9.1	0.0	6.1	6.3	3.0	3.0	
Medically Fit for Discharge numbers		88	78	92	101	112	114	142	139	138	135	163	Snapshot taken on the last day of the month. Source: COVID19 dashboard
Number of mortuary spaces		72	161	233	188	170	164	158	140	89	146	156	Monthly totals are based on a snapshot of the number of vacant hospital mortuary spaces on the last day of the month. Source: COVID19 dashboard
Number of hospital deaths with positive COVID result		157	22	1	0	0	2	36	35	45	20	6	Source: COVID19 dashboard
Hospital bed occupancy (suspected and confirmed COVID19):													
•General bed		186	58	46	41	30	37	176	208	217	99	42	Snapshot taken on the last day of the month. Source: COVID19 dashboard
•Critical Care bed		19	5	4	1	0	3	11	15	15	6	2	Snapshot taken on the last day of the month. Source: COVID19 dashboard

Harm from reduction in non-Covid activity														
		Trend <i>(from 1st Apr 20)</i>	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Comments
NHS Wales Delivery Framework measures for cancer, RTT and diagnostics														
•Cancer	Single cancer pathway		70.9%	72.1%	73.0%	81.5%	80.0%	71.0%	73.0%	55.4%	61.0%	67.9%	50.0%	Data reported two months in arrears. Final February 2021 data will be available on 31/02/21 Source: SaFF report.
•RTT	% waiting under 26 weeks		72.3%	64.0%	59.4%	52.5%	43.7%	41.0%	44.8%	47.6%	48.0%	47.0%	47.9%	Snapshot taken on the last day of the month. Source: RTT and D&T monthly submission
	Number > 36 weeks		8,355	10,247	13,419	18,078	22,494	26,046	31,508	35,387	35,126	33,991	32,719	
•Diagnostics	Number > 8 weeks		5,788	8,346	8,033	7,510	8,070	7,666	6,645	6,610	6,579	6,239	5,087	
Patient Feedback:														
•Number of friends and family surveys completed			150	247	393	502	625	2,804	1,047	787	584	678	798	Source: Patient Feedback Team
•% of who would recommend and highly recommend			90%	92%	87%	91%	81%	93%	82%	84%	77%	79%	85%	
•% of All Wales surveys scoring 9 or 10 on overall satisfaction			95%	100%	79%	91%	83%	84%	79%	85%	65%	81%	94%	
Harm from wider societal actions/lockdown														
		Trend <i>(from 1st Apr 20)</i>	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Comments
Vaccination and Immunisation rates- % of children who received:														
•3 doses of the '6 in 1' vaccine by age 1					96.5%			96.5%			96.7%			Source: Public Health Wales COVER Report.
•MenB2 vaccine by age 1					96.8%			96.4%			96.6%			
•PCV2 vaccine by age 1					96.4%			96.2%			96.9%			
•Rotavirus vaccine by age 1					96.9%			94.8%			95.1%			
•MMR1 vaccine by age 2					94.4%			95.4%			94.6%			
•PCVf3 vaccine by age 2					94.1%			95.5%			94.7%			
•MenB4 vaccine by age 2					93.5%			95.6%			94.7%			
•Hib/MenC vaccine by age 2					93.6%			95.4%			94.4%			
•Up to date in schedule by age 4					88.7%			87.0%			87.2%			
•2 doses of the MMR vaccine by age 5					90.8%			91.7%			92.0%			
•4 in 1 vaccine by age 5					92.2%			92.8%			92.9%			
•MMR vaccination by age 16					95.1%			94.7%			94.5%			
•Teenage booster by age 16					90.9%			91.9%			92.4%			
•MenACWY vaccine by age 16					91.6%			92.8%			92.5%			
MHLD and Children's services activity														
Adult Mental Health Services	% of mental health assessments undertaken within (up to and including) 28 days from the date of receipt of referral		99%	99%	100%	99%	99%	97%	99.5%	98%	99%	96%		Reported two months in arrears. Source: Mental Health Measures monthly submission to Welsh Government
	% of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS		97%	100%	96%	96%	88%	94%	93%	98%	95%	95%		
	% patients waiting < 26 weeks to start a psychological therapy in Specialist Adult Mental Health		93%	89%	84%	89%	91%	99%	99.7%	100%	100%	100%		
	% residents in receipt of secondary MH services (all ages) who have a valid care and treatment plan (CTP)		93%	92%	92%	94%	92%	90%	91%	91%	89%	91%		

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

4.1 HARM FROM COVID ITSELF

Chart 1: Number of new COVID19 cases

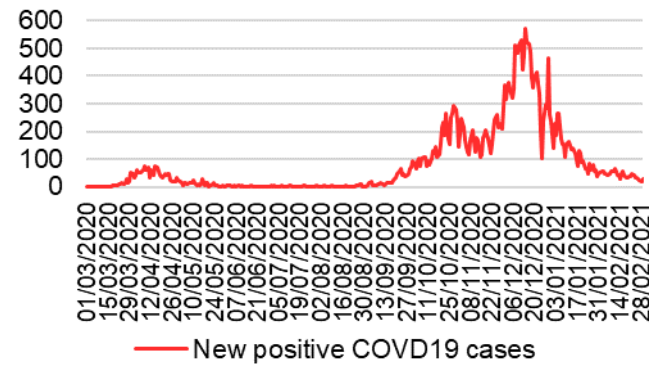


Chart 2: Number of new COVID19 cases (cumulative)

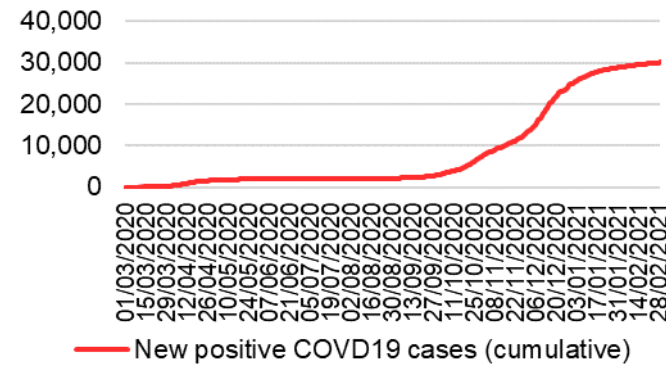


Chart 3: Number of COVID19 tests completed and positivity rate

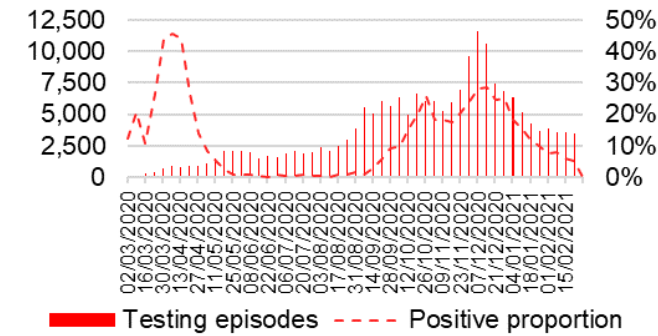


Chart 4: Number of staff referred for Antigen testing

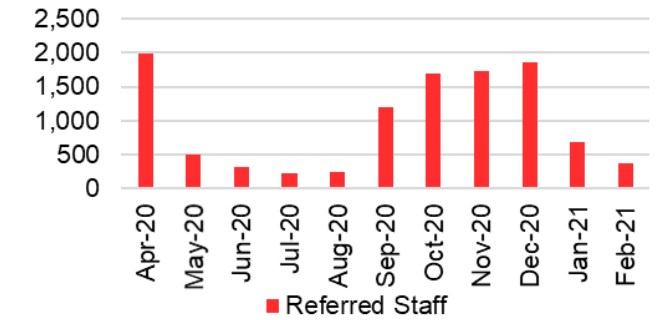


Chart 5: Outcome of staff COVID19/ antigen tests

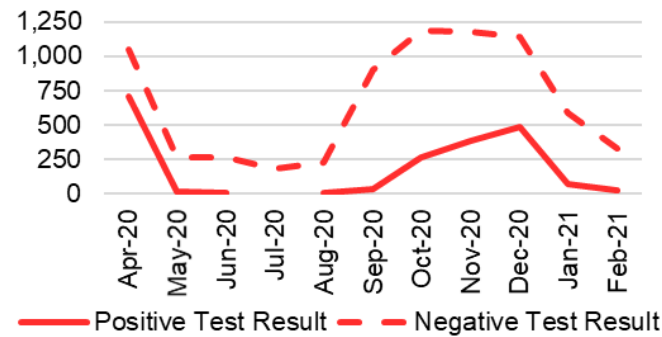


Chart 6: Number of COVID19 related incidents

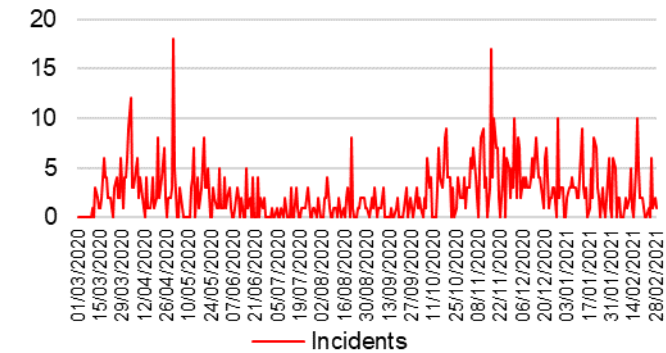


Chart 7: Number of COVID19 related serious incidents

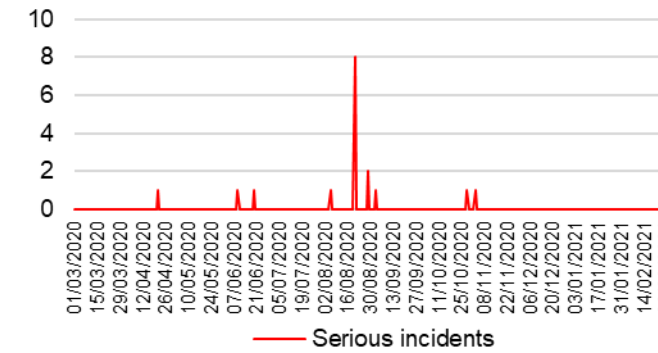


Chart 8: Number of COVID19 related complaints

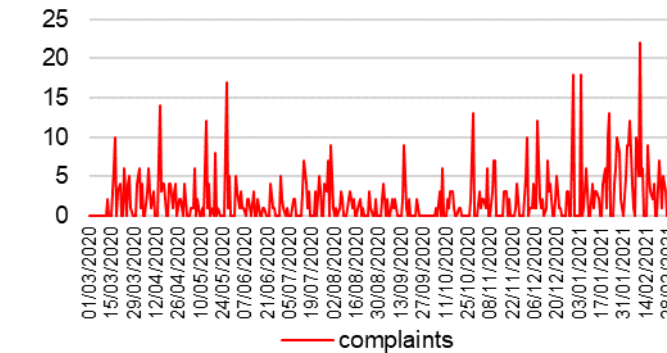


Chart 9: Number of COVID19 related risks

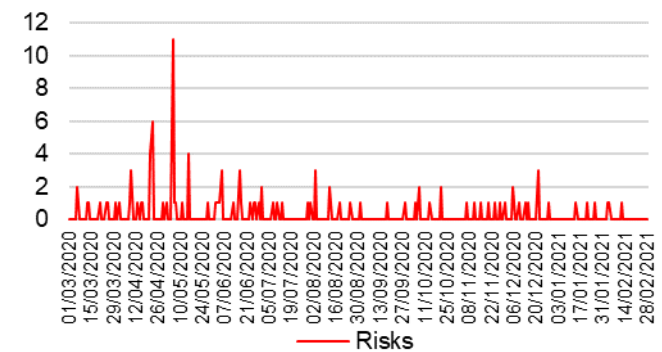


Chart 10: Number of staff self isolating (asymptomatic)

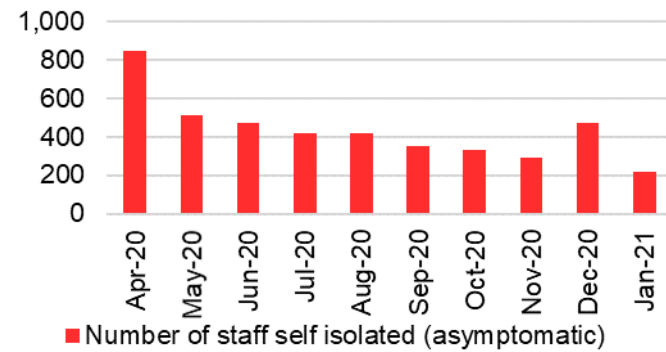


Chart 11: Number of staff self isolating (symptomatic)

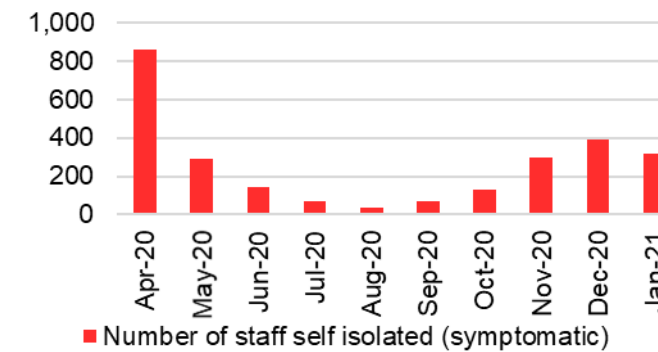


Chart 12: % staff sickness

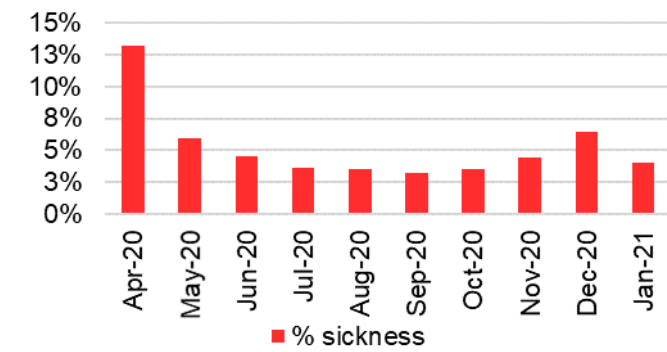


Chart 13: Bed Occupancy for suspected and confirmed COVID19 cases

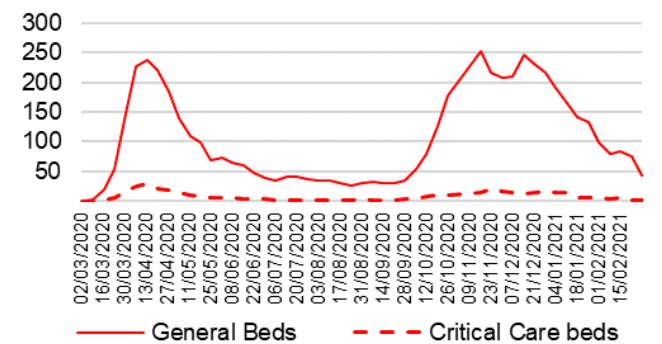


Chart 14: Number of hospital deaths with any mention of COVID19

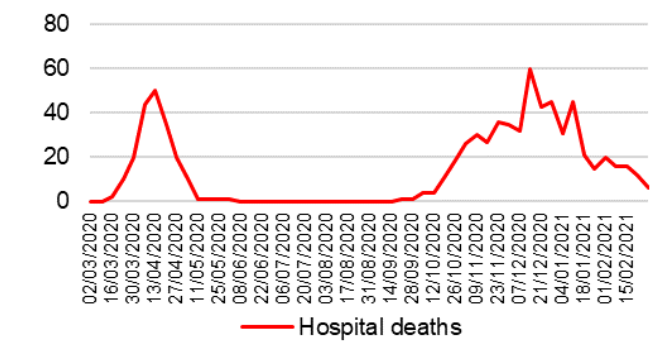


Chart 15: Number of weekly registered deaths with any mention of COVID19 (ONS data)

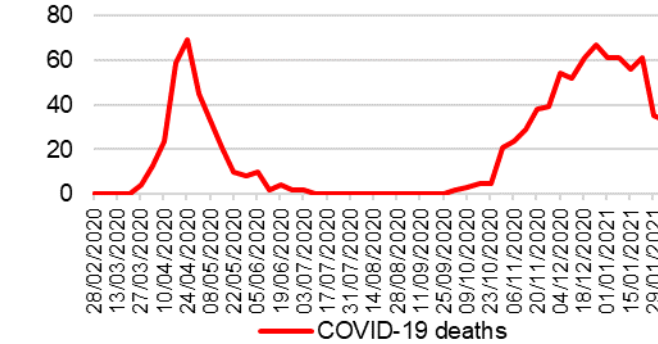
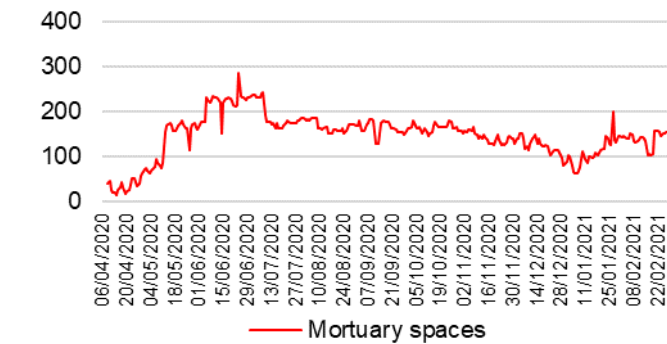
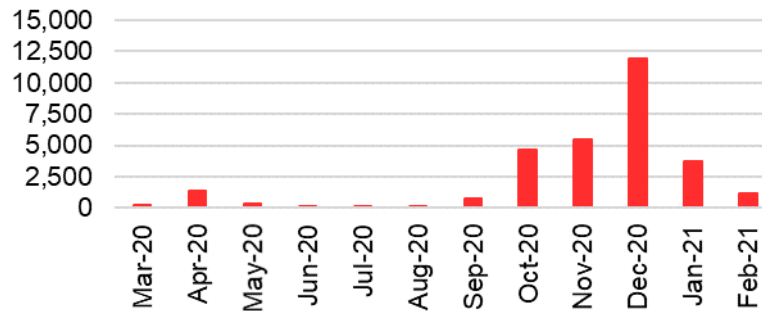
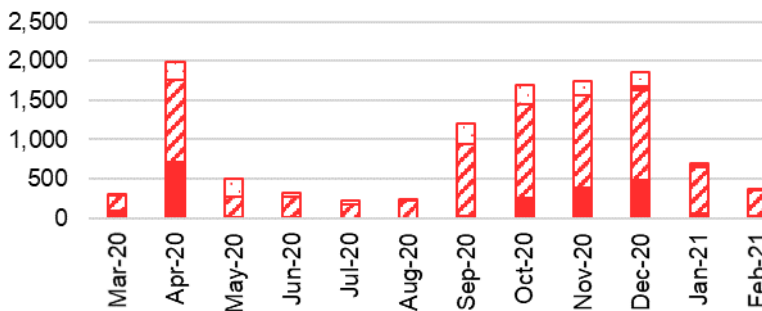
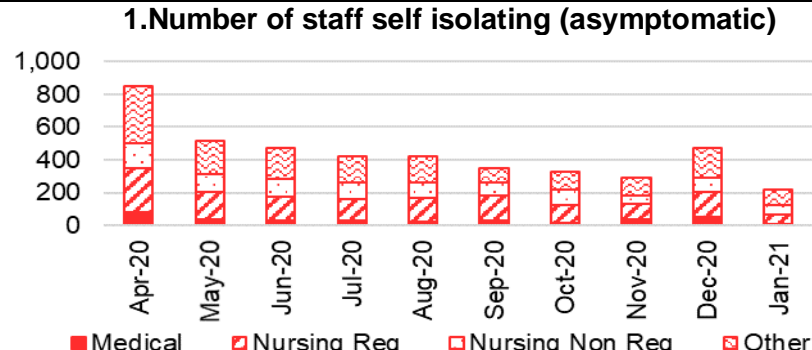
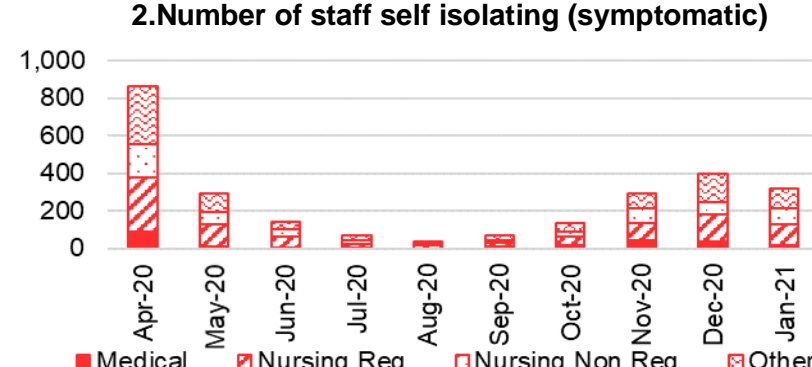


Chart 16: Number of mortuary spaces



4.1 Updates on key measures

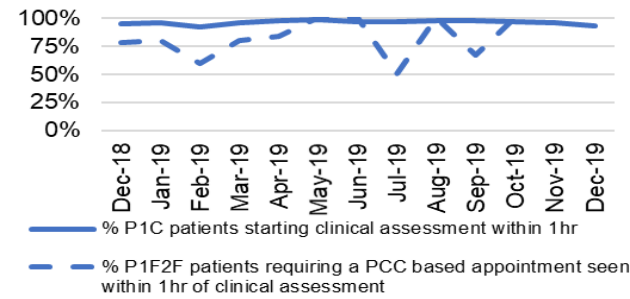
COVID TESTING																																																																			
Description	Current Performance	Trend																																																																	
1. Number of new COVID19 cases in Swansea Bay population area	1. Number of new COVID cases In February 2021, there were an additional 1,207 positive cases recorded bringing the cumulative total to 30,036 in Swansea Bay since March 2020. In February 2021, 27,641 tests were carried out of which 4% (1,207) were positive. This is the lowest positivity rate since September 2020.	1.Number of new COVID19 cases for Swansea Bay population  <table border="1"><caption>1. Number of new COVID19 cases for Swansea Bay population</caption><thead><tr><th>Month</th><th>New positive COVID19 cases</th></tr></thead><tbody><tr><td>Mar-20</td><td>~100</td></tr><tr><td>Apr-20</td><td>~1,000</td></tr><tr><td>May-20</td><td>~500</td></tr><tr><td>Jun-20</td><td>~200</td></tr><tr><td>Jul-20</td><td>~100</td></tr><tr><td>Aug-20</td><td>~100</td></tr><tr><td>Sep-20</td><td>~500</td></tr><tr><td>Oct-20</td><td>~4,500</td></tr><tr><td>Nov-20</td><td>~5,500</td></tr><tr><td>Dec-20</td><td>~11,500</td></tr><tr><td>Jan-21</td><td>~4,000</td></tr><tr><td>Feb-21</td><td>~1,000</td></tr></tbody></table>	Month	New positive COVID19 cases	Mar-20	~100	Apr-20	~1,000	May-20	~500	Jun-20	~200	Jul-20	~100	Aug-20	~100	Sep-20	~500	Oct-20	~4,500	Nov-20	~5,500	Dec-20	~11,500	Jan-21	~4,000	Feb-21	~1,000																																							
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2. Number of staff referred for Antigen testing	2. Staff referred for Antigen testing The cumulative number of staff referred for COVID testing between March 2020 and February 2021 is 11,115 of which 2,092 have had a positive COVID test result (19%).	2.Outcome of staff referred for Antigen testing  <table border="1"><caption>2. Outcome of staff referred for Antigen testing</caption><thead><tr><th>Month</th><th>Positive</th><th>Negative</th><th>In Progress</th><th>Unknown/blank</th></tr></thead><tbody><tr><td>Mar-20</td><td>~200</td><td>~100</td><td>~100</td><td>~100</td></tr><tr><td>Apr-20</td><td>~1,800</td><td>~100</td><td>~100</td><td>~100</td></tr><tr><td>May-20</td><td>~400</td><td>~100</td><td>~100</td><td>~100</td></tr><tr><td>Jun-20</td><td>~200</td><td>~100</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>~1,100</td><td>~100</td><td>~100</td><td>~100</td></tr><tr><td>Oct-20</td><td>~1,600</td><td>~100</td><td>~100</td><td>~100</td></tr><tr><td>Nov-20</td><td>~1,600</td><td>~100</td><td>~100</td><td>~100</td></tr><tr><td>Dec-20</td><td>~1,800</td><td>~100</td><td>~100</td><td>~100</td></tr><tr><td>Jan-21</td><td>~600</td><td>~100</td><td>~100</td><td>~100</td></tr><tr><td>Feb-21</td><td>~300</td><td>~100</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	~100	~100	~100	May-20	~400	~100	~100	~100	Jun-20	~200	~100	~100	~100	Jul-20	~100	~100	~100	~100	Aug-20	~100	~100	~100	~100	Sep-20	~1,100	~100	~100	~100	Oct-20	~1,600	~100	~100	~100	Nov-20	~1,600	~100	~100	~100	Dec-20	~1,800	~100	~100	~100	Jan-21	~600	~100	~100	~100	Feb-21	~300	~100	~100	~100
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Feb-21	~300	~100	~100	~100																																																															
3. Number of staff waiting results of Antigen test	3. Number of staff awaiting results of Antigen test Occupational Health has implemented a new reporting system that is now integrated with the Health Board's internal COVID dashboard. The new data is reported on a weekly rather than daily basis. The latest figures as at 6 th March 2021 show that 69 members of staff awaiting their antigen test result.																																																																		

COVID RELATED STAFF ABSENCE																																																																												
Description	Current Performance	Trend																																																																										
Staff absence due to COVID19 <i>1.Number of staff self-isolating (asymptomatic)</i> <i>2.Number of staff self isolating (symptomatic)</i> <i>3.% staff sickness</i>	<p>The following data is based on the mid-month position and broken down into the categories requested by Welsh Government.</p> <p>1. & 2. Number of staff self-isolating (asymptomatic and symptomatic) Between December 2020 and January 2021, the number of staff self-isolating (asymptomatic) significantly reduced from 475 to 218 and the number of staff self-isolating (symptomatic) reduced from 394 to 316. In January 2021, “other” staff had the largest number of self-isolating staff who are asymptomatic and Registered Nursing had the largest number of self-isolating staff who are symptomatic.</p> <p>3. % Staff sickness The percentage of staff sickness absence due to COVID19 has significantly reduced from 13.2% in April 2020 to 4.0% in January 2021.</p> <p>January 2021 saw the lowest level of COVID19 related sickness since October 2020.</p>	<p>1.Number of staff self isolating (asymptomatic)</p>  <p>2.Number of staff self isolating (symptomatic)</p>  <p>3.% staff sickness</p> <table><thead><tr><th></th><th>Apr-20</th><th>May-20</th><th>Jun-20</th><th>Jul-20</th><th>Aug-20</th><th>Sep-20</th><th>Oct-20</th><th>Nov-20</th><th>Dec-20</th><th>Jan-21</th></tr></thead><tbody><tr><td>Medical</td><td>14.9%</td><td>4.0%</td><td>3.0%</td><td>2.8%</td><td>2.5%</td><td>4.0%</td><td>3.2%</td><td>7.3%</td><td>8.3%</td><td>2.2%</td></tr><tr><td>Nursing Reg</td><td>14.2%</td><td>7.0%</td><td>5.1%</td><td>4.0%</td><td>4.0%</td><td>4.4%</td><td>3.8%</td><td>4.7%</td><td>7.4%</td><td>4.3%</td></tr><tr><td>Nursing Non Reg</td><td>16.6%</td><td>8.0%</td><td>7.2%</td><td>5.5%</td><td>5.2%</td><td>4.2%</td><td>6.0%</td><td>6.5%</td><td>7.3%</td><td>7.0%</td></tr><tr><td>Other</td><td>11.0%</td><td>5.0%</td><td>3.6%</td><td>2.9%</td><td>2.7%</td><td>2.0%</td><td>2.5%</td><td>3.0%</td><td>5.4%</td><td>3.1%</td></tr><tr><td>All</td><td>13.2%</td><td>6.0%</td><td>4.5%</td><td>3.6%</td><td>3.5%</td><td>3.2%</td><td>3.5%</td><td>4.4%</td><td>6.5%</td><td>4.0%</td></tr></tbody></table>										Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Medical	14.9%	4.0%	3.0%	2.8%	2.5%	4.0%	3.2%	7.3%	8.3%	2.2%	Nursing Reg	14.2%	7.0%	5.1%	4.0%	4.0%	4.4%	3.8%	4.7%	7.4%	4.3%	Nursing Non Reg	16.6%	8.0%	7.2%	5.5%	5.2%	4.2%	6.0%	6.5%	7.3%	7.0%	Other	11.0%	5.0%	3.6%	2.9%	2.7%	2.0%	2.5%	3.0%	5.4%	3.1%	All	13.2%	6.0%	4.5%	3.6%	3.5%	3.2%	3.5%	4.4%	6.5%	4.0%
			Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21																																																																
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All	13.2%	6.0%	4.5%	3.6%	3.5%	3.2%	3.5%	4.4%	6.5%	4.0%																																																																		

HARM FROM OVERWHELMED NHS AND SOCIAL CARE SYSTEM

5.1 Unscheduled Care- Overview

Chart 1: GP Out of Hours/ 111



Service continues to experience issues with data reporting. It is anticipated that up to date accurate data will be available shortly.

Chart 2: % red calls responded to within 8 minutes

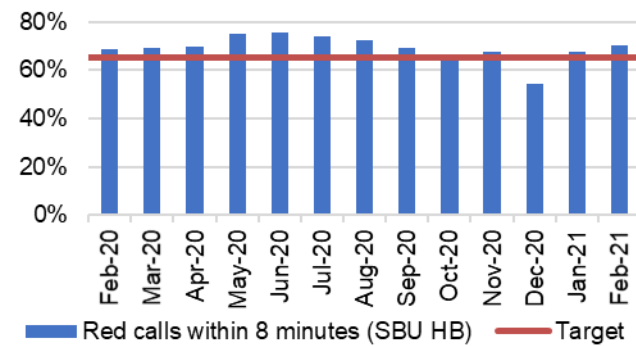


Chart 3: Number of ambulance handovers over 1 hour

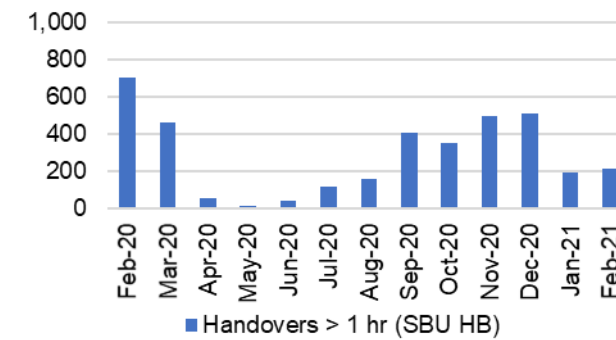


Chart 4: Lost hours- notification to ambulance handover over 15 minutes

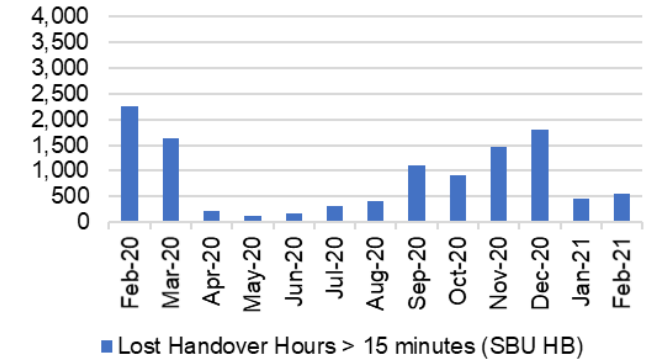


Chart 5: A&E Attendances

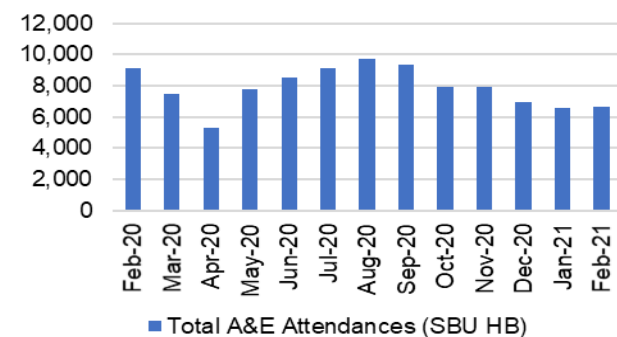


Chart 6: % patients who spend less than 4 hours in A&E

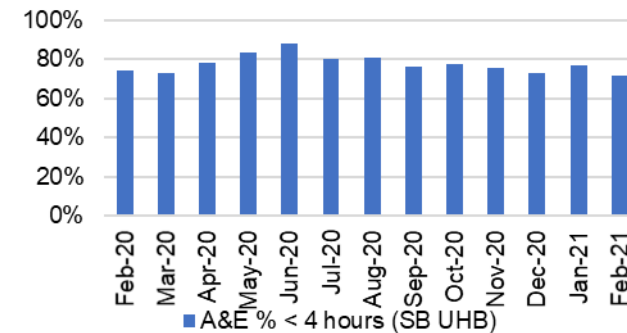


Chart 7: Number of patients waiting over 12 hours in A&E

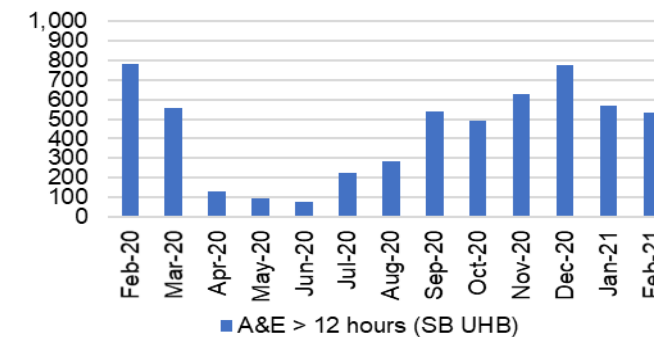


Chart 8: Number of emergency admissions

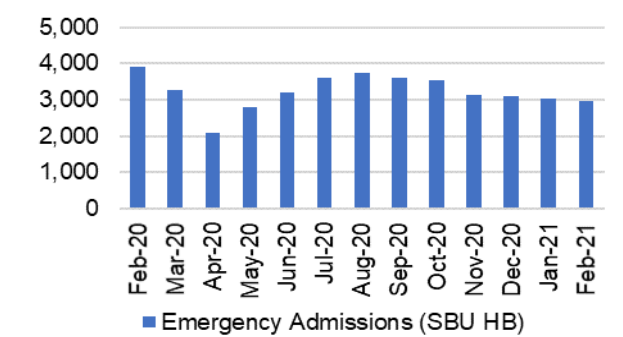


Chart 9: Elective procedures cancelled due to lack of beds

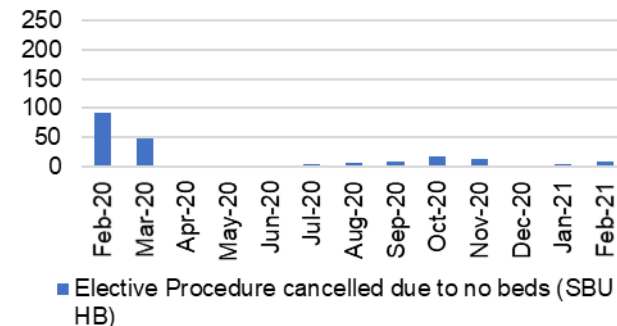


Chart 10: Number of Medically Fit For Discharge (MFFD) patients

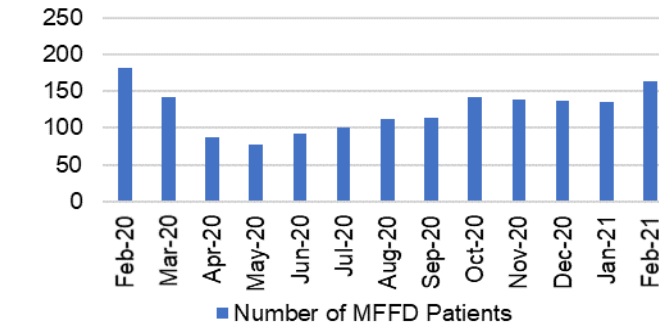
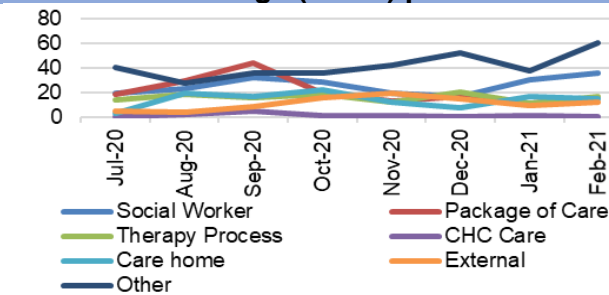


Chart 11: Delay reason for Medically Fit For Discharge (MFFD) patients



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

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

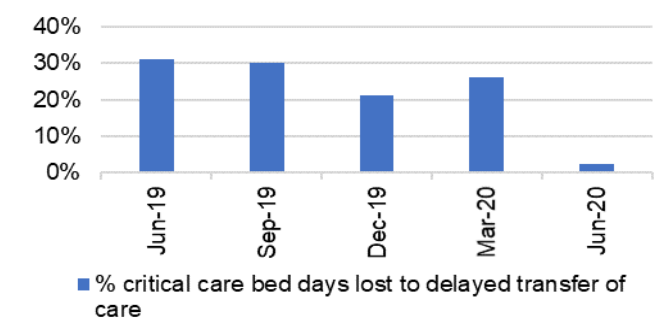


Chart 12: % of patients (> 60 years) who presented with a hip fracture that received an orthogeriatrician assessment within 72 hours

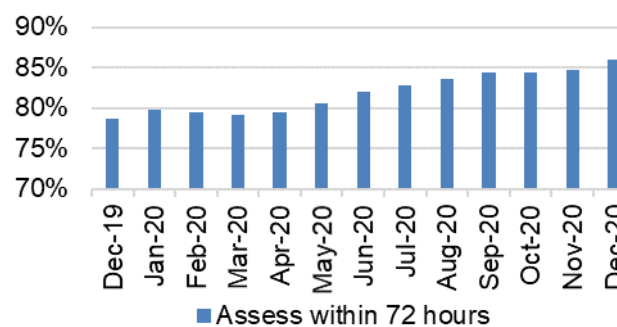
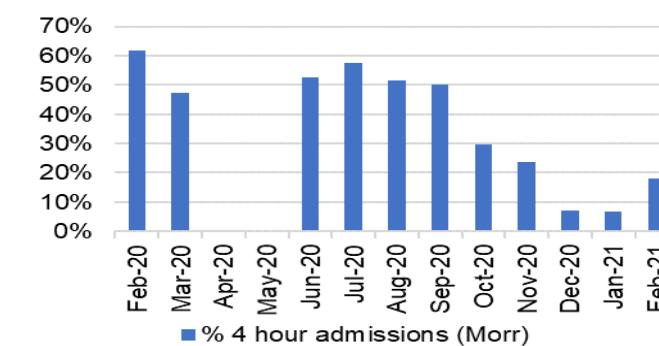
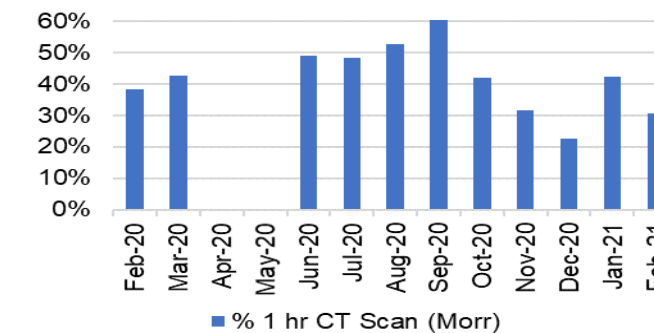


Chart 13: Direct admission to Acute Stroke Unit within 4 hours



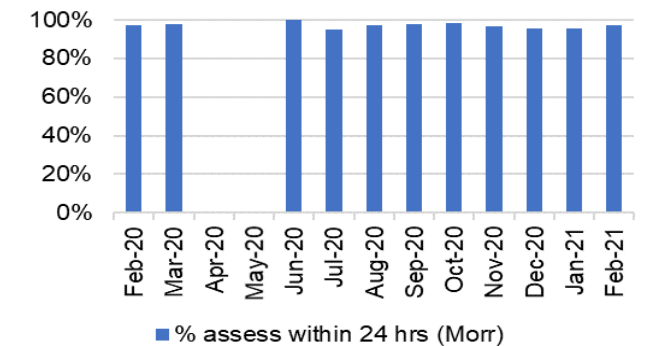
* No data available for April and May 2020

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



* No data available for April and May 2020

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



* No data available for April and May 2020

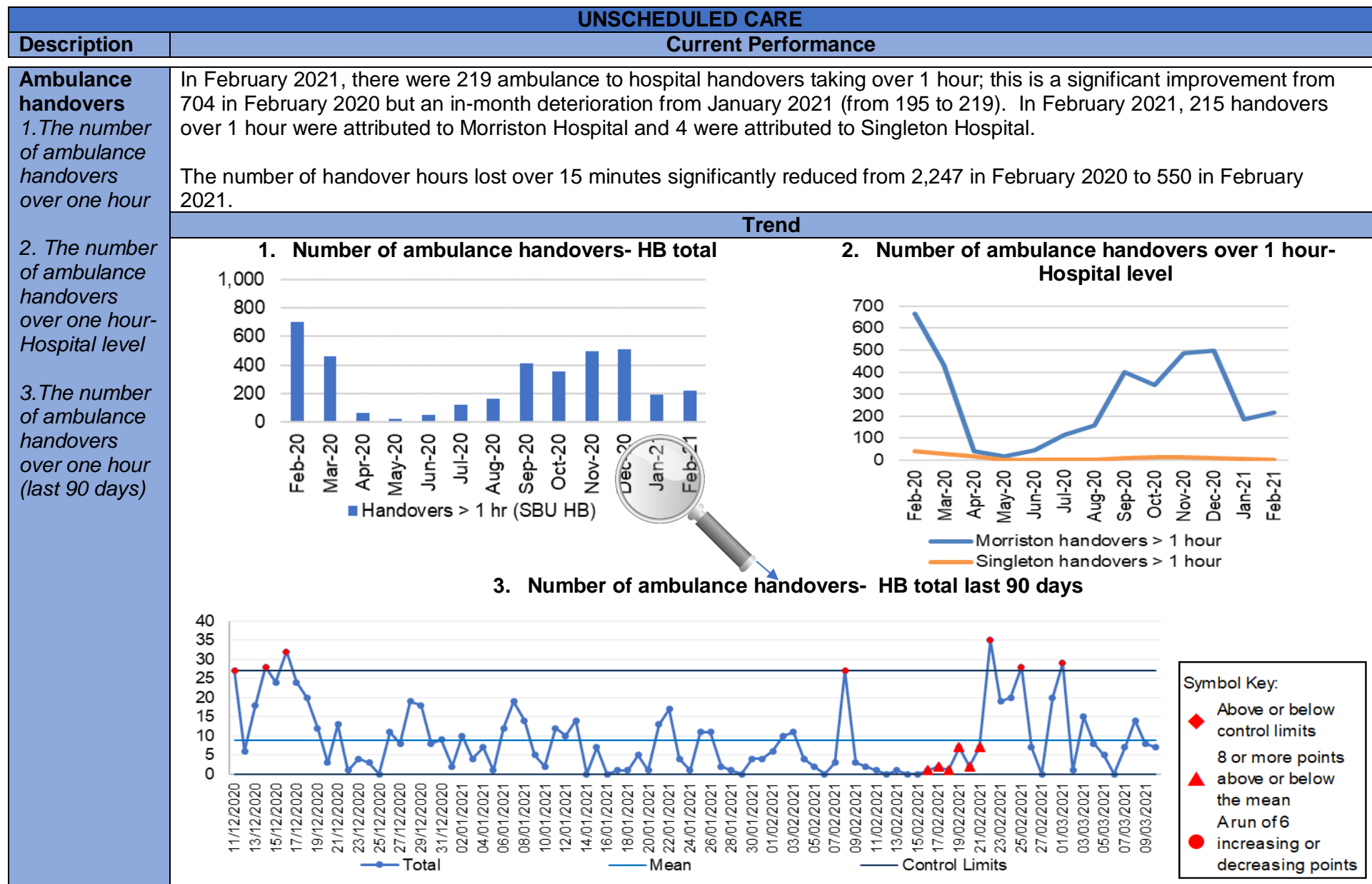
Unscheduled Care Overview (February 2021)

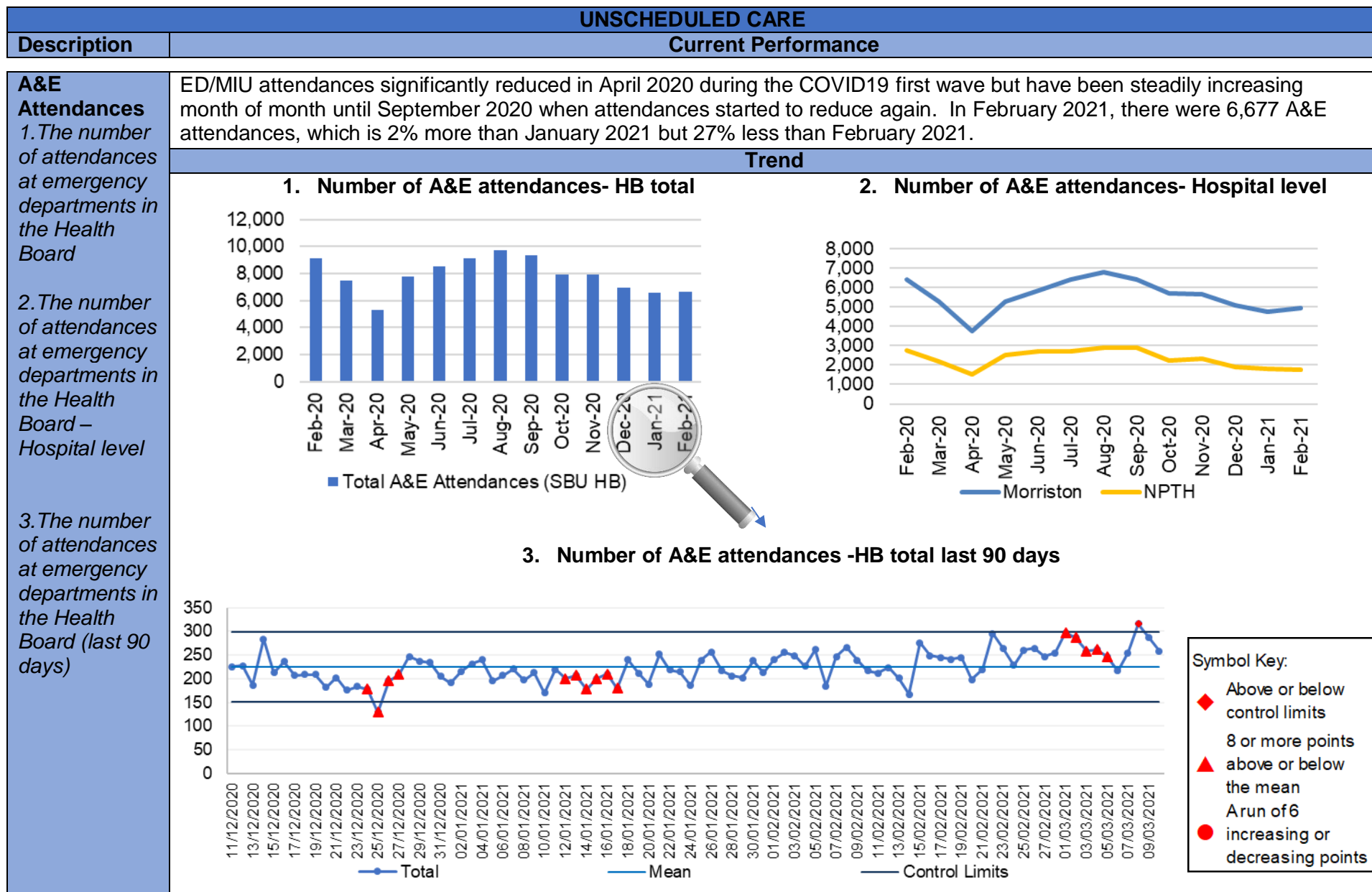
Primary Care Access		Ambulance	Emergency Department	
97% (→) GP practices open during daily core hours	88% (→) GP practices offering appointments between 5pm-6:30pm	70.4% (3%↑) Red calls responded to within 8 minutes	6,677 (2%↑) A&E attendances	71.25% (5.6%↓) Waits in A&E under 4 hours
93% (3%↓) % of Out of Hours (OoH)/111 patients prioritised as P1CH that started their definitive clinical assessment within 1 hour of their initial call being answered (<i>July-19</i>)	100% (33%↑) % of Out of Hours (OOH)/111 patients prioritised as P1F2F requiring a Primary Care Centre (PCC) based appointment seen within 1 hour following completion of their definitive clinical assessment (<i>Oct-19</i>)	219 (12%↑) Ambulance handovers over 1 hour	534 (6%↓) Waits in A&E over 12 hours	1,554 (40%↑) Patients admitted from A&E
		2,840 (0.5%↓) Amber calls		
		287 (3%↓) Red calls		
Emergency Activity		Patient Flow		
2,979 (2%↓) Emergency Inpatient Admissions	255 (21%↓) Emergency Theatre Cases	13 (19%↓) (Mar-20) Mental Health DTOCs * Data collection temporarily suspended	60 (13%↓) (Mar-20) Non-Mental Health DTOCs * Data collection temporarily suspended	
275 (6%↑) Trauma theatre cases	9 (200%↑) Elective procedures cancelled due to no beds		163 (21%↑) Medically fit patients	

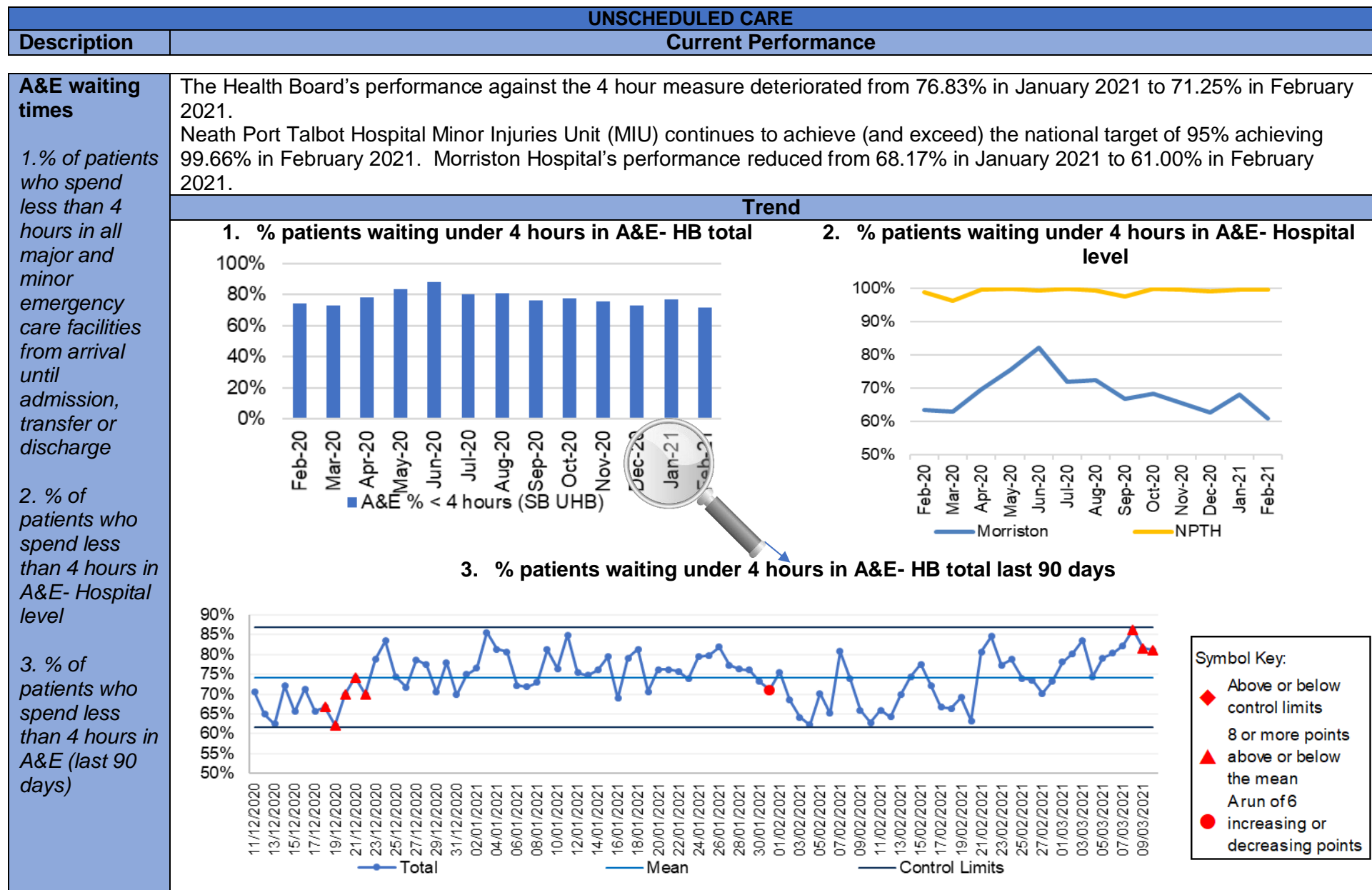
*RAG status and trend is based on in month-movement

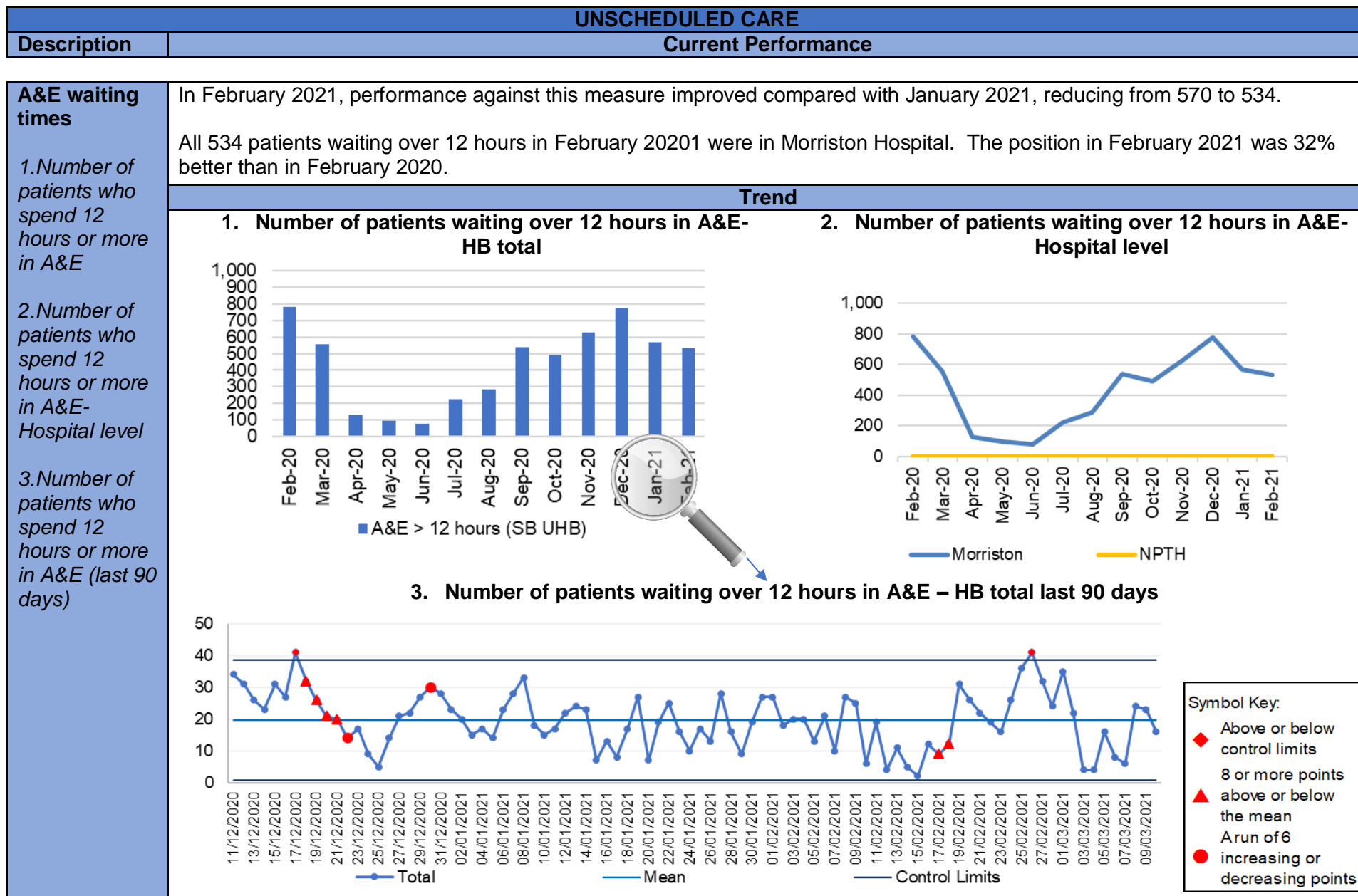
5.2 Updates on key measures

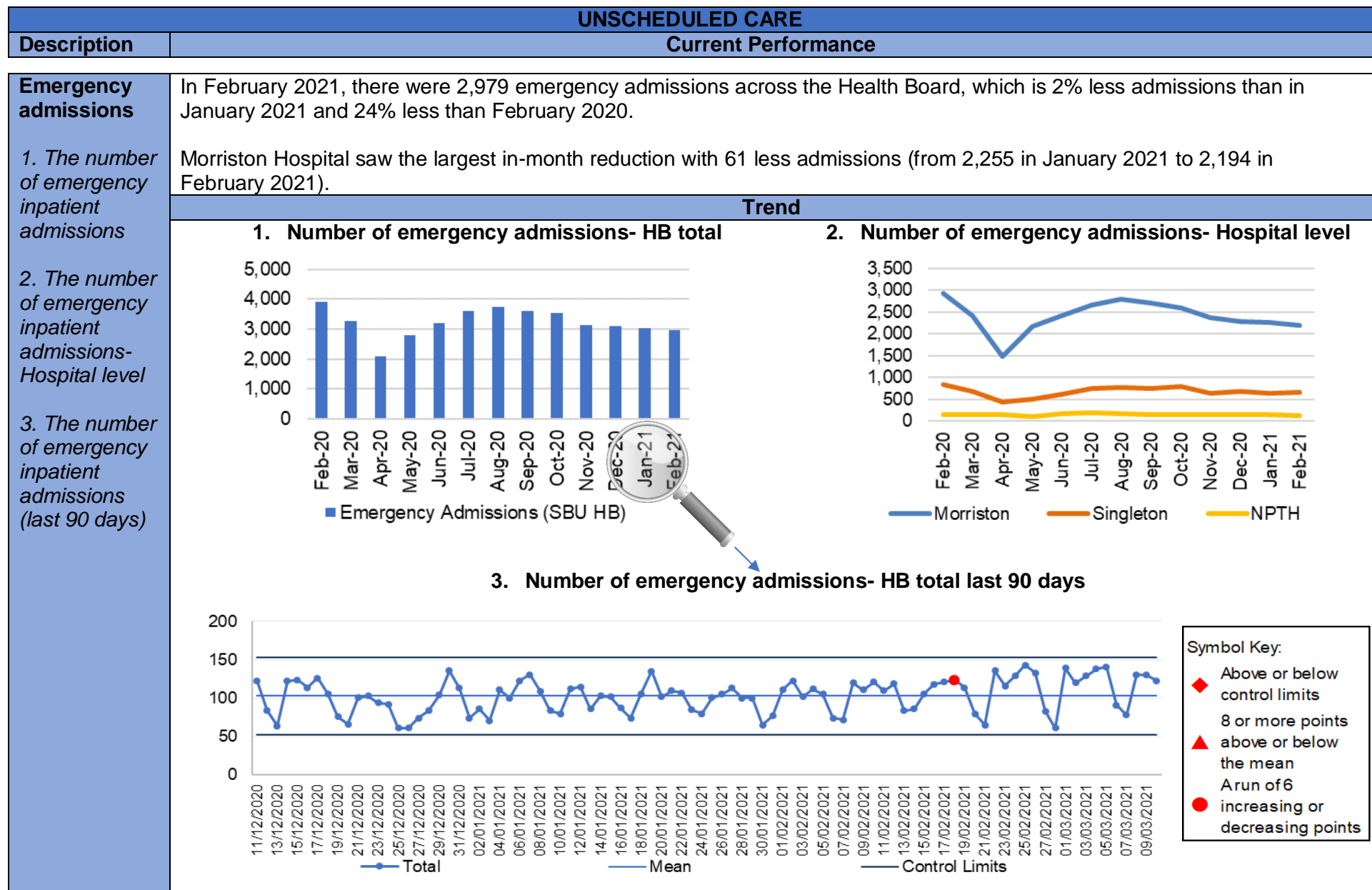
UNSCHEDULED CARE	
Description	Current Performance
Ambulance responses 1. The percentage of emergency responses to red calls arriving within (up to and including) 8 minutes. 2. The number of ambulance calls by category. 3. The percentage of emergency responses to red calls arriving within 8 minutes (last 90 days)	<p>Ambulance response times have consistently been above 65% in 2020/21 with the exception of December 2020 where performance reduced to 54.1%. In February 2021, performance significantly improved to 70.4% and was above the 65% target.</p> <p>In February 2021, the number of green calls reduced by 19%, amber calls reduced by 0.5% and red calls reduced by 3% compared with January 2021.</p>
	Trend
	<div> <div> 1. % of red calls responded to within 8 minutes <p>Feb-20 Mar-20 Apr-20 May-20 Jun-20 Jul-20 Aug-20 Sep-20 Oct-20 Nov-20 Dec-20 Jan-21 Feb-21</p> <p>Red calls within 8 minutes (SBU HB) Target</p> </div> <div> 2. Number of ambulance call responses <p>Feb-20 Mar-20 Apr-20 May-20 Jun-20 Jul-20 Aug-20 Sep-20 Oct-20 Nov-20 Dec-20 Jan-21 Feb-21</p> <p>Red calls Amber calls Green calls</p> </div> <div> 3. % of red calls responded to within 8 minutes – HB total last 90 days <p>11/12/2020 13/12/2020 15/12/2020 17/12/2020 19/12/2020 21/12/2020 23/12/2020 25/12/2020 27/12/2020 29/12/2020 31/12/2020 02/01/2021 04/01/2021 06/01/2021 08/01/2021 10/01/2021 12/01/2021 14/01/2021 16/01/2021 18/01/2021 20/01/2021 22/01/2021 24/01/2021 26/01/2021 28/01/2021 30/01/2021 01/02/2021 03/02/2021 05/02/2021 07/02/2021 09/02/2021 11/02/2021 13/02/2021 15/02/2021 17/02/2021 19/02/2021 21/02/2021 23/02/2021 25/02/2021 27/02/2021 01/03/2021 03/03/2021 05/03/2021 07/03/2021 09/03/2021</p> <p>Total Mean Control Limits</p> </div> <div> Symbol Key: <ul style="list-style-type: none"> ◆ Above or below control limits 8 or more points above or below the mean ▲ Arun of 6 ● increasing or decreasing points </div> </div>

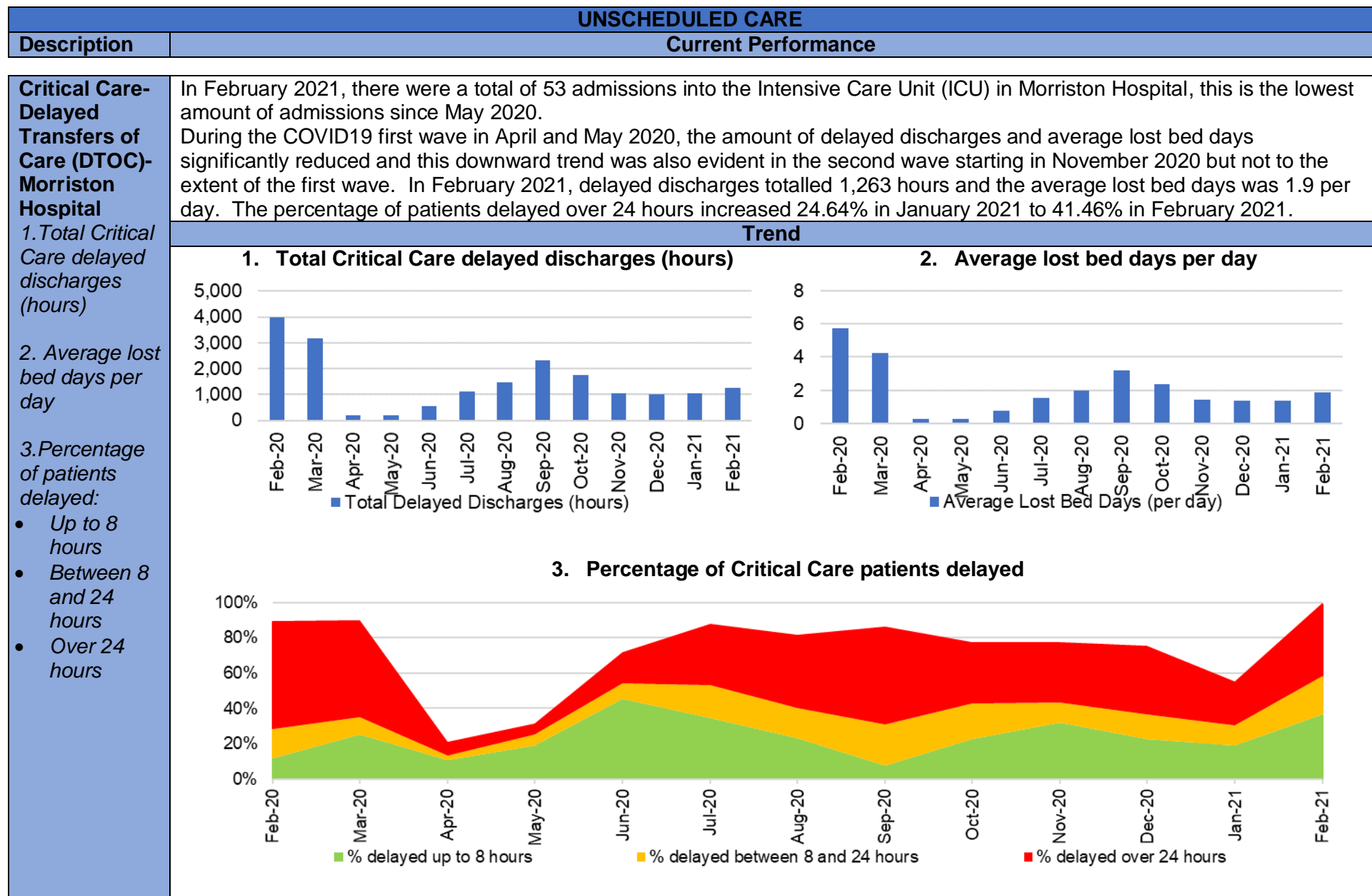








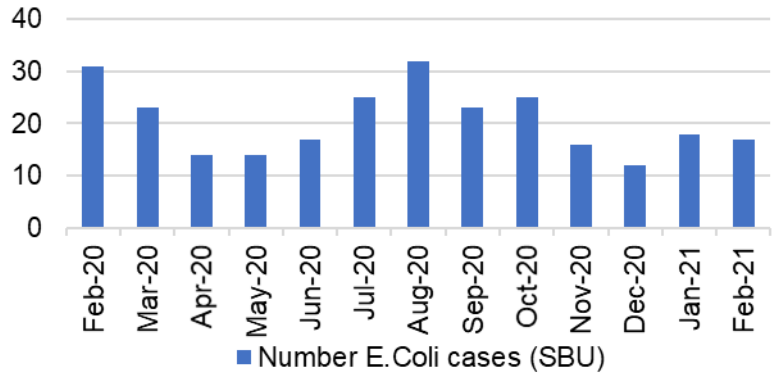
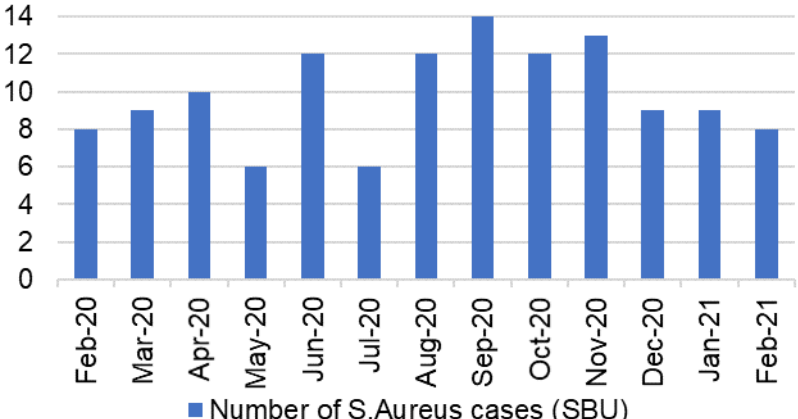


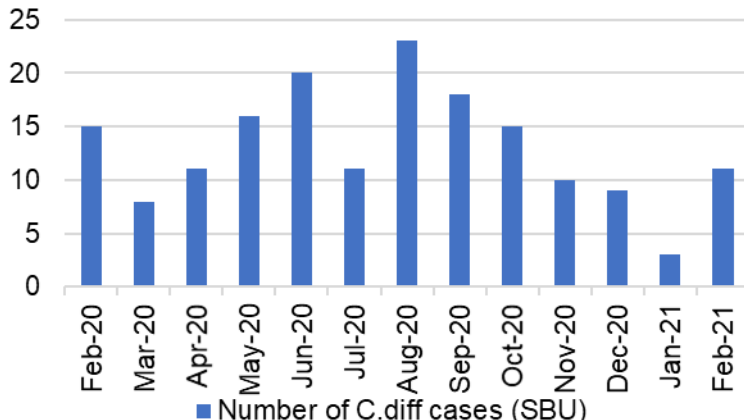
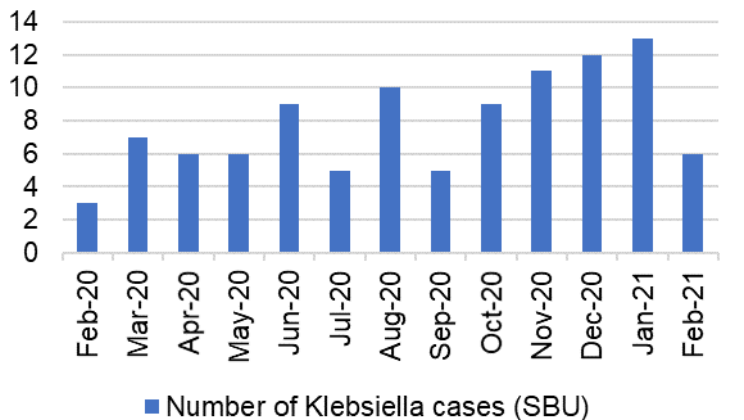


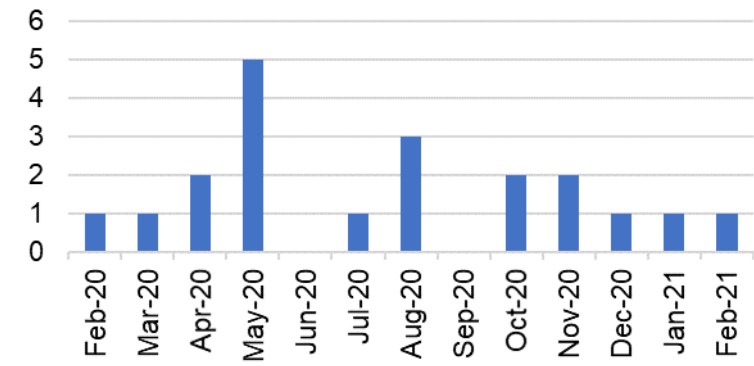
UNSCHEDULED CARE		
Description	Current Performance	Trend
Medically Fit <i>The number of patients waiting at each site in the Health Board that are deemed discharge/medically fit</i>	<p>In February 2021, there were on average 163 patients who were deemed medically/ discharge fit but were still occupying a bed in one of the Health Board's Hospitals.</p> <p>The number of medically/ discharge fit patients has steadily reduced every month since November 2020 however, February 2021 saw the highest number of medically/ discharge fit patients since February 2020.</p> <p>In February 2021, Morriston Hospital had the largest proportion of medically/ discharge fit patients with 64 out of the 163 followed by Singleton Hospital and Neath Port Talbot Hospital both with 47.</p>	<p>The number of discharge/ medically fit patients by site</p> <p>*Consistent data capture for Gorseinon not available before April 2020</p>
Elective procedures cancelled due to lack of beds <i>The number of elective procedure cancelled across the hospital where the main cancellation reasons was lack of beds</i>	<p>In February 2021, there were 9 elective procedures cancelled due to lack of beds on the day of surgery. This is 83 less cancellation than in February 2020 and 6 more than January 2021.</p> <p>In February 2021, all 9 cancelled procedures were attributed to Morriston Hospital.</p>	<p>Total number of elective procedures cancelled due to lack of beds</p>

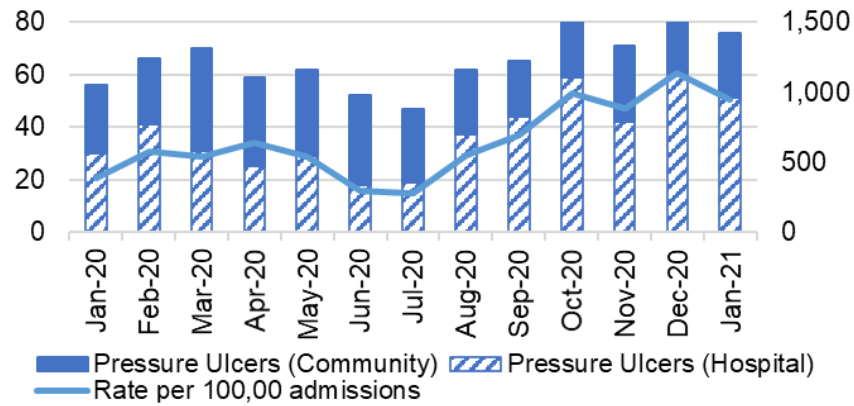
FRACTURED NECK OF FEMUR (#NOF)		
Description	Current Performance	Trend
Fractured Neck of Femur (#NOF) 1. Prompt orthogeriatric assessment- % patients receiving an assessment by a senior geriatrician within 72 hours of presentation 2. Prompt surgery - % patients undergoing surgery the day following presentation with hip fracture 3. NICE compliant surgery - % of operations consistent with the recommendations of NICE CG124 4. Prompt mobilisation after surgery - % patients out of bed (standing or hoisted) by the day after operation	<p>1. Prompt orthogeriatric assessment- In December 2020, 86% of patients in Morriston hospital received an assessment by a senior geriatrician within 72 hours. This is 7.3% more than in December 2019.</p> <p>2. Prompt surgery- In December 2020, 54.1% of patients had surgery the day following presentation with a hip fracture. This is a reduction from December 2019 which was 57.3%</p> <p>3. NICE compliant surgery- 68.5% of operations were consistent with the NICE recommendations in December 2020. This is 2.7% less than in December 2019. In December 2020, Morriston was below the all-Wales average of 72.5%.</p> <p>4. Prompt mobilisation- In December 2020, 74.3% of patients were out of bed the day after surgery. This is in line with performance in December 2020.</p>	<p>1. Prompt orthogeriatric assessment</p> <p>2. Prompt surgery</p> <p>3. NICE compliant Surgery</p> <p>4. Prompt mobilisation</p>

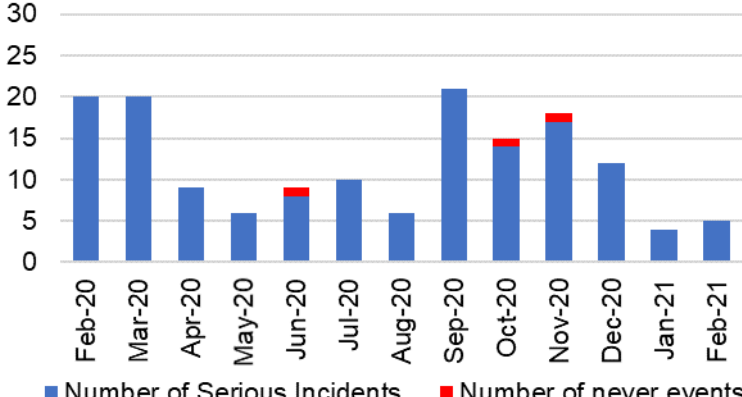
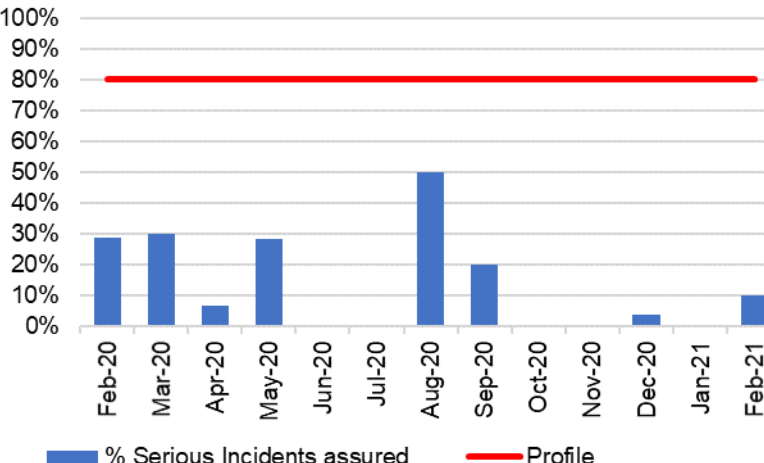
FRACTURED NECK OF FEMUR (#NOF)																																																										
Description	Current Performance	Trend																																																								
5. <i>Not delirious when tested- % patients (<4 on 4AT test) when tested in the week after operation</i>	5. Not delirious when tested- 73.5% of patients were not delirious in the week after their operation in December 2020. This is an improvement of 28.2% compared with December 2019.	<p>5. Not delirious when tested</p> <table><caption>5. Not delirious when tested (Estimated Data)</caption><thead><tr><th>Month</th><th>Morriston (%)</th><th>All-Wales (%)</th><th>Eng, Wal & N. Ire (%)</th></tr></thead><tbody><tr><td>Dec-19</td><td>45</td><td>55</td><td>60</td></tr><tr><td>Jan-20</td><td>48</td><td>55</td><td>60</td></tr><tr><td>Feb-20</td><td>50</td><td>55</td><td>60</td></tr><tr><td>Mar-20</td><td>52</td><td>55</td><td>60</td></tr><tr><td>Apr-20</td><td>55</td><td>55</td><td>60</td></tr><tr><td>May-20</td><td>58</td><td>55</td><td>60</td></tr><tr><td>Jun-20</td><td>60</td><td>55</td><td>60</td></tr><tr><td>Jul-20</td><td>62</td><td>55</td><td>60</td></tr><tr><td>Aug-20</td><td>65</td><td>55</td><td>60</td></tr><tr><td>Sep-20</td><td>68</td><td>55</td><td>60</td></tr><tr><td>Oct-20</td><td>70</td><td>55</td><td>60</td></tr><tr><td>Nov-20</td><td>72</td><td>55</td><td>60</td></tr><tr><td>Dec-20</td><td>73.5</td><td>55</td><td>60</td></tr></tbody></table>	Month	Morriston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)	Dec-19	45	55	60	Jan-20	48	55	60	Feb-20	50	55	60	Mar-20	52	55	60	Apr-20	55	55	60	May-20	58	55	60	Jun-20	60	55	60	Jul-20	62	55	60	Aug-20	65	55	60	Sep-20	68	55	60	Oct-20	70	55	60	Nov-20	72	55	60	Dec-20	73.5	55	60
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Aug-20	65	55	60																																																							
Sep-20	68	55	60																																																							
Oct-20	70	55	60																																																							
Nov-20	72	55	60																																																							
Dec-20	73.5	55	60																																																							
6. <i>Return to original residence- % patients discharged back to original residence, or in that residence at 120 day follow-up</i>	6. Return to original residence- 75.6% of patients in December 2020 were discharged back to their original residence. This was above the all-Wales average of 73.7%.	<p>6. Return to original residence</p> <table><caption>6. Return to original residence (Estimated Data)</caption><thead><tr><th>Month</th><th>Morriston (%)</th><th>All-Wales (%)</th><th>Eng, Wal & N. Ire (%)</th></tr></thead><tbody><tr><td>Dec-19</td><td>72</td><td>75</td><td>70</td></tr><tr><td>Jan-20</td><td>73</td><td>75</td><td>70</td></tr><tr><td>Feb-20</td><td>74</td><td>75</td><td>70</td></tr><tr><td>Mar-20</td><td>75</td><td>75</td><td>70</td></tr><tr><td>Apr-20</td><td>76</td><td>75</td><td>70</td></tr><tr><td>May-20</td><td>77</td><td>75</td><td>70</td></tr><tr><td>Jun-20</td><td>78</td><td>75</td><td>70</td></tr><tr><td>Jul-20</td><td>79</td><td>75</td><td>70</td></tr><tr><td>Aug-20</td><td>80</td><td>75</td><td>70</td></tr><tr><td>Sep-20</td><td>81</td><td>75</td><td>70</td></tr><tr><td>Oct-20</td><td>82</td><td>75</td><td>70</td></tr><tr><td>Nov-20</td><td>83</td><td>75</td><td>70</td></tr><tr><td>Dec-20</td><td>75.6</td><td>73.7</td><td>70</td></tr></tbody></table>	Month	Morriston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)	Dec-19	72	75	70	Jan-20	73	75	70	Feb-20	74	75	70	Mar-20	75	75	70	Apr-20	76	75	70	May-20	77	75	70	Jun-20	78	75	70	Jul-20	79	75	70	Aug-20	80	75	70	Sep-20	81	75	70	Oct-20	82	75	70	Nov-20	83	75	70	Dec-20	75.6	73.7	70
Month	Morriston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)																																																							
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Jul-20	79	75	70																																																							
Aug-20	80	75	70																																																							
Sep-20	81	75	70																																																							
Oct-20	82	75	70																																																							
Nov-20	83	75	70																																																							
Dec-20	75.6	73.7	70																																																							
7. <i>30 day mortality rate</i>	7. 30 day mortality rate- In November 2020 the mortality rate for Morriston Hospital was 7.6% which is 0.4% lower than November 2019. The mortality rate in Morriston Hospital in November 2020 is higher than the all-Wales average of 7.3% but lower than the national average of 7.9%.	<p>7. 30 day mortality rate</p> <table><caption>7. 30 day mortality rate (Estimated Data)</caption><thead><tr><th>Month</th><th>Morriston (%)</th><th>All-Wales (%)</th><th>Eng, Wal & N. Ire (%)</th></tr></thead><tbody><tr><td>Nov-19</td><td>8.5</td><td>7.5</td><td>7.9</td></tr><tr><td>Dec-19</td><td>8.2</td><td>7.5</td><td>7.9</td></tr><tr><td>Jan-20</td><td>8.0</td><td>7.5</td><td>7.9</td></tr><tr><td>Feb-20</td><td>8.5</td><td>7.5</td><td>7.9</td></tr><tr><td>Mar-20</td><td>8.8</td><td>7.5</td><td>7.9</td></tr><tr><td>Apr-20</td><td>8.5</td><td>7.5</td><td>7.9</td></tr><tr><td>May-20</td><td>8.2</td><td>7.5</td><td>7.9</td></tr><tr><td>Jun-20</td><td>8.0</td><td>7.5</td><td>7.9</td></tr><tr><td>Jul-20</td><td>8.0</td><td>7.5</td><td>7.9</td></tr><tr><td>Aug-20</td><td>7.8</td><td>7.5</td><td>7.9</td></tr><tr><td>Sep-20</td><td>7.5</td><td>7.5</td><td>7.9</td></tr><tr><td>Oct-20</td><td>7.8</td><td>7.5</td><td>7.9</td></tr><tr><td>Nov-20</td><td>7.6</td><td>7.3</td><td>7.9</td></tr></tbody></table>	Month	Morriston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)	Nov-19	8.5	7.5	7.9	Dec-19	8.2	7.5	7.9	Jan-20	8.0	7.5	7.9	Feb-20	8.5	7.5	7.9	Mar-20	8.8	7.5	7.9	Apr-20	8.5	7.5	7.9	May-20	8.2	7.5	7.9	Jun-20	8.0	7.5	7.9	Jul-20	8.0	7.5	7.9	Aug-20	7.8	7.5	7.9	Sep-20	7.5	7.5	7.9	Oct-20	7.8	7.5	7.9	Nov-20	7.6	7.3	7.9
Month	Morriston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)																																																							
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HEALTHCARE ACQUIRED INFECTIONS																														
Description	Current Performance	Trend																												
Healthcare Acquired Infections (HCAI) - E.coli bacteraemia- <i>Number of laboratory confirmed E.coli bacteraemia cases</i>	<ul style="list-style-type: none">17 cases of <i>E. coli</i> bacteraemia were identified in February 2021, of which 6 were hospital acquired and 11 were community acquired.Cumulative cases from April 2020 to February 2021 are 28% less than the equivalent period in 2019/20.	<p>Number of healthcare acquired E.coli bacteraemia cases</p>  <table><caption>Number of healthcare acquired E.coli bacteraemia cases (SBU)</caption><thead><tr><th>Month</th><th>Number of cases</th></tr></thead><tbody><tr><td>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><tr><td>Dec-20</td><td>12</td></tr><tr><td>Jan-21</td><td>18</td></tr><tr><td>Feb-21</td><td>17</td></tr></tbody></table>	Month	Number of cases	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	Dec-20	12	Jan-21	18	Feb-21	17
Month	Number of cases																													
Feb-20	31																													
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Oct-20	25																													
Nov-20	16																													
Dec-20	12																													
Jan-21	18																													
Feb-21	17																													
Healthcare Acquired Infections (HCAI)- S.aureus bacteraemia- <i>Number of laboratory confirmed S.aureus bacteraemias (MRSA & MSSA) cases</i>	<ul style="list-style-type: none">There were 8 cases of <i>Staph. aureus</i> bacteraemia in February 2021, of which 6 were hospital acquired and 2 were community acquired.Cumulative cases from April 2020 to February 2021 are 10% less than the equivalent period in 2019/20.	<p>Number of healthcare acquired S.aureus bacteraemia cases</p>  <table><caption>Number of healthcare acquired S.aureus bacteraemia cases (SBU)</caption><thead><tr><th>Month</th><th>Number of cases</th></tr></thead><tbody><tr><td>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><tr><td>Dec-20</td><td>9</td></tr><tr><td>Jan-21</td><td>9</td></tr><tr><td>Feb-21</td><td>8</td></tr></tbody></table>	Month	Number of cases	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	Dec-20	9	Jan-21	9	Feb-21	8
Month	Number of cases																													
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Dec-20	9																													
Jan-21	9																													
Feb-21	8																													

HEALTHCARE ACQUIRED INFECTIONS																														
Description	Current Performance	Trend																												
Healthcare Acquired Infections (HCAI)- C.difficile- <i>Number of laboratory confirmed C.difficile cases</i>	<ul style="list-style-type: none">There were 11 <i>Clostridium difficile</i> toxin positive cases in February 2021, of which 9 were hospital acquired and 2 were community acquired.Cumulative cases from April 2020 to February 2021 are 13% more than the equivalent period of 2019/20 (147 in 2020/21 compared with 130 in 2019/20).	<p>Number of healthcare acquired C.difficile cases</p>  <table><caption>Number of healthcare acquired C.difficile cases (SBU)</caption><thead><tr><th>Month</th><th>Number of C.diff cases (SBU)</th></tr></thead><tbody><tr><td>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><tr><td>Dec-20</td><td>9</td></tr><tr><td>Jan-21</td><td>3</td></tr><tr><td>Feb-21</td><td>11</td></tr></tbody></table>	Month	Number of C.diff cases (SBU)	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	Dec-20	9	Jan-21	3	Feb-21	11
Month	Number of C.diff cases (SBU)																													
Feb-20	15																													
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Nov-20	10																													
Dec-20	9																													
Jan-21	3																													
Feb-21	11																													
Healthcare Acquired Infections (HCAI)- Klebsiella sp- <i>Number of laboratory confirmed Klebsiella sp cases</i>	<ul style="list-style-type: none">There were 6 cases of Klebsiella sp in February 2021, of which 4 were hospital acquired and 2 were community acquired.Cumulative cases from April 2020 to February 2021 are 23% more than the equivalent period in 2019/20.	<p>Number of healthcare acquired Klebsiella cases</p>  <table><caption>Number of healthcare acquired Klebsiella cases (SBU)</caption><thead><tr><th>Month</th><th>Number of Klebsiella cases (SBU)</th></tr></thead><tbody><tr><td>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><tr><td>Dec-20</td><td>12</td></tr><tr><td>Jan-21</td><td>13</td></tr><tr><td>Feb-21</td><td>6</td></tr></tbody></table>	Month	Number of Klebsiella cases (SBU)	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	Dec-20	12	Jan-21	13	Feb-21	6
Month	Number of Klebsiella cases (SBU)																													
Feb-20	3																													
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HEALTHCARE ACQUIRED INFECTIONS		
Description	Current Performance	Trend
Healthcare Acquired Infections (HCAI)- Aeruginosa- <i>Number of laboratory confirmed Aeruginosa cases</i>	<ul style="list-style-type: none"> There was 1 community acquired case of <i>P.Aeruginosa</i> bacteraemia in February 2021. Cumulative cases from April 2020 to February 2021 are 33% less than the equivalent period in 2019/20. 	Number of healthcare acquired Pseudomonas cases  <p>■ Number of Pseudomonas cases (SBU)</p>

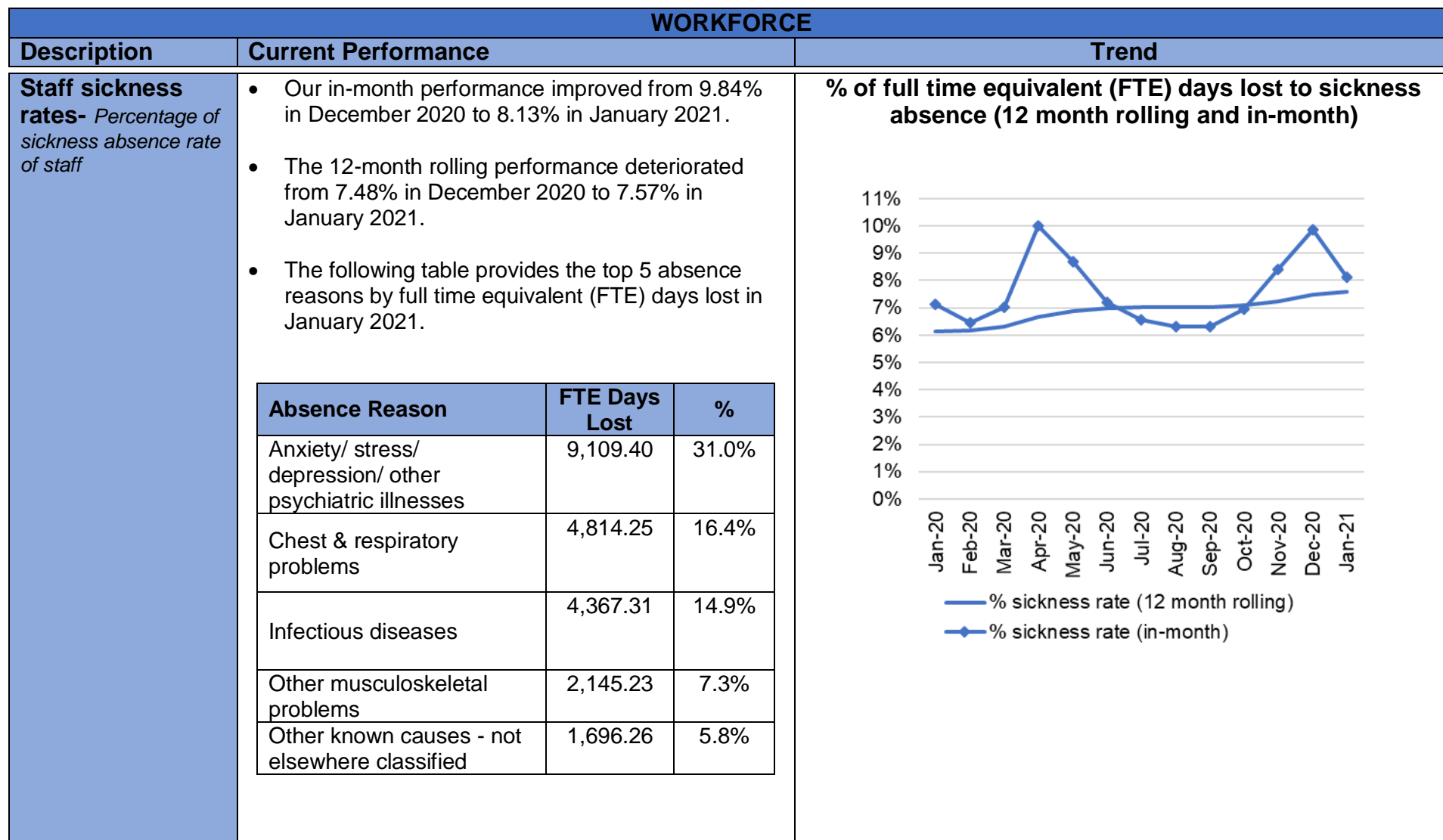
PRESSURE ULCERS		
Description	Current Performance	Trend
Number of pressure ulcers <i>1. Total number of pressure ulcers developed in hospital and in the community</i> <i>2. Rate of pressure ulcers per 100,000 admissions</i>	<ol style="list-style-type: none"> In January 2021 there were 76 cases of healthcare acquired pressure ulcers, of which 25 were community acquired and 51 were hospital acquired. There were 7 grade 3+ pressure ulcers in January 2021, of which 5 were community acquired and 2 were hospital acquired. The rate per 100,000 admissions reduced from 1,133 in December 2020 to 948 in January 2021. 	Total number of hospital and community acquired Pressure Ulcers (PU) and rate per 100,000 admissions  <p>■ Pressure Ulcers (Community) ■ Pressure Ulcers (Hospital) — Rate per 100,00 admissions</p>

SERIOUS INCIDENTS																																												
Description	Current Performance	Trend																																										
Serious Incidents- <i>1. The number of serious incidents</i> <i>2. The number of Never Events</i> <i>3. Of the serious incidents due for assurance, the percentage which were assured within the agreed timescales</i>	<p>1. The Health Board reported 5 Serious Incidents for the month of February 2021 to Welsh Government. The breakdown of incidents in February 2021 are set out below:</p> <ul style="list-style-type: none">• 2 in Primary, Community and Therapy Services• 1 in Mental Health and Learning Disabilities• 1 in Morriston Hospital• 1 in Singleton Hospital	<p>1. and 2. Number of serious incidents and never events</p>  <table><caption>1. and 2. Number of serious incidents and never events</caption><thead><tr><th>Month</th><th>Number of Serious Incidents</th><th>Number of never events</th></tr></thead><tbody><tr><td>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>8</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><tr><td>Dec-20</td><td>12</td><td>0</td></tr><tr><td>Jan-21</td><td>4</td><td>0</td></tr><tr><td>Feb-21</td><td>5</td><td>0</td></tr></tbody></table> <p>■ Number of Serious Incidents ■ Number of never events</p>	Month	Number of Serious Incidents	Number of never events	Feb-20	20	0	Mar-20	20	0	Apr-20	9	0	May-20	6	0	Jun-20	8	1	Jul-20	10	0	Aug-20	6	0	Sep-20	21	0	Oct-20	14	1	Nov-20	17	1	Dec-20	12	0	Jan-21	4	0	Feb-21	5	0
	Month	Number of Serious Incidents	Number of never events																																									
	Feb-20	20	0																																									
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May-20	6	0																																										
Jun-20	8	1																																										
Jul-20	10	0																																										
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Sep-20	21	0																																										
Oct-20	14	1																																										
Nov-20	17	1																																										
Dec-20	12	0																																										
Jan-21	4	0																																										
Feb-21	5	0																																										
<p>2. There was no new Never Event reported in February 2021.</p>																																												
<p>3. In February 2021, performance against the 80% target of submitting closure forms within 60 working days was 10%. One of the ten closure forms due to be submitted to Welsh Government in February 2021 was submitted on time. Below is a breakdown of the nine outstanding forms:</p> <ul style="list-style-type: none">• 2 in Morriston Hospital• 3 in Singleton Hospital• 3 in Mental Health and Learning Disabilities• 1 in Primary, Community and Therapy Services	<p>3. % of serious incidents closed within 60 days</p>  <table><caption>3. % of serious incidents closed within 60 days</caption><thead><tr><th>Month</th><th>% Serious Incidents assured</th><th>Profile</th></tr></thead><tbody><tr><td>Feb-20</td><td>28%</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><tr><td>Dec-20</td><td>5%</td><td>80%</td></tr><tr><td>Jan-21</td><td>0%</td><td>80%</td></tr><tr><td>Feb-21</td><td>10%</td><td>80%</td></tr></tbody></table> <p>■ % Serious Incidents assured ■ Profile</p> <p><i>* 0% compliance in June, July, October and November 2020 and January 2021</i></p>	Month	% Serious Incidents assured	Profile	Feb-20	28%	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%	Dec-20	5%	80%	Jan-21	0%	80%	Feb-21	10%	80%	
Month	% Serious Incidents assured	Profile																																										
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INPATIENT FALLS																																												
Description	Current Performance	Trend																																										
Inpatient Falls <i>The total number of inpatient falls</i>	<ul style="list-style-type: none">The number of Falls reported via Datix web for Swansea Bay UHB was 177 in February 2021. This is 14% less than February 2020 where 207 falls were recorded.The Health Board has agreed a targeted action to reduce Falls by 10%.	<div><p>Number of inpatient Falls</p><table><thead><tr><th>Month</th><th>Inpatient Falls (SBU HB)</th><th>10% reduction profile</th></tr></thead><tbody><tr><td>Feb-20</td><td>207</td><td>207</td></tr><tr><td>Mar-20</td><td>210</td><td>205</td></tr><tr><td>Apr-20</td><td>195</td><td>202</td></tr><tr><td>May-20</td><td>205</td><td>200</td></tr><tr><td>Jun-20</td><td>195</td><td>198</td></tr><tr><td>Jul-20</td><td>205</td><td>195</td></tr><tr><td>Aug-20</td><td>225</td><td>192</td></tr><tr><td>Sep-20</td><td>215</td><td>190</td></tr><tr><td>Oct-20</td><td>185</td><td>188</td></tr><tr><td>Nov-20</td><td>245</td><td>185</td></tr><tr><td>Dec-20</td><td>245</td><td>183</td></tr><tr><td>Jan-21</td><td>200</td><td>180</td></tr><tr><td>Feb-21</td><td>177</td><td>178</td></tr></tbody></table><p>■ Inpatient Falls (SBU HB) — 10% reduction profile</p></div>	Month	Inpatient Falls (SBU HB)	10% reduction profile	Feb-20	207	207	Mar-20	210	205	Apr-20	195	202	May-20	205	200	Jun-20	195	198	Jul-20	205	195	Aug-20	225	192	Sep-20	215	190	Oct-20	185	188	Nov-20	245	185	Dec-20	245	183	Jan-21	200	180	Feb-21	177	178
Month	Inpatient Falls (SBU HB)	10% reduction profile																																										
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Oct-20	185	188																																										
Nov-20	245	185																																										
Dec-20	245	183																																										
Jan-21	200	180																																										
Feb-21	177	178																																										

DISCHARGE SUMMARIES																														
Description	Current Performance	Trend																												
Discharge Summaries <i>Percentage of discharge summaries approved and sent to patients' doctor following discharge</i>	The latest data shows that in February 2021, the percentage of completed discharge summaries was 63%.	<p>% discharge summaries approved and sent</p> <table><tr><th>Month</th><th>Percentage</th></tr><tr><td>Feb-20</td><td>65%</td></tr><tr><td>Mar-20</td><td>68%</td></tr><tr><td>Apr-20</td><td>60%</td></tr><tr><td>May-20</td><td>62%</td></tr><tr><td>Jun-20</td><td>65%</td></tr><tr><td>Jul-20</td><td>62%</td></tr><tr><td>Aug-20</td><td>65%</td></tr><tr><td>Sep-20</td><td>68%</td></tr><tr><td>Oct-20</td><td>67%</td></tr><tr><td>Nov-20</td><td>65%</td></tr><tr><td>Dec-20</td><td>58%</td></tr><tr><td>Jan-21</td><td>65%</td></tr><tr><td>Feb-21</td><td>63%</td></tr></table> <p>■ % of completed discharge summaries</p>	Month	Percentage	Feb-20	65%	Mar-20	68%	Apr-20	60%	May-20	62%	Jun-20	65%	Jul-20	62%	Aug-20	65%	Sep-20	68%	Oct-20	67%	Nov-20	65%	Dec-20	58%	Jan-21	65%	Feb-21	63%
	Month		Percentage																											
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Oct-20	67%																													
Nov-20	65%																													
Dec-20	58%																													
Jan-21	65%																													
Feb-21	63%																													
	In February 2021, compliance ranged from 54% in Singleton Hospital to 83% in Mental Health & Learning Disabilities.																													

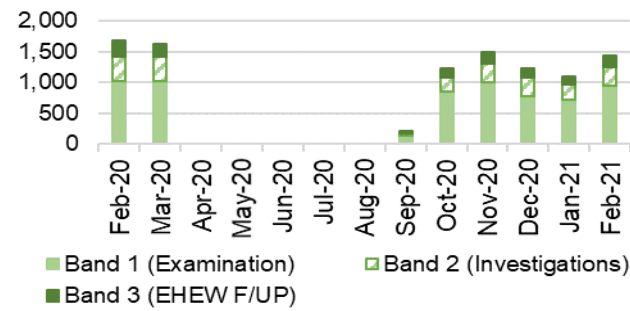
CRUDE MORTALITY																																																																								
Description	Current Performance	Trend																																																																						
Crude Mortality Rate	December 2020 reports the crude mortality rate for the Health Board at 1.08% compared with 1.01% in November 2020.	Crude hospital mortality rate by Hospital (74 years of age or less) <table><caption>Crude hospital mortality rate by Hospital (74 years of age or less)</caption><thead><tr><th>Month</th><th>Morriston Hospital</th><th>Singleton Hospital</th><th>NPT Hospital</th><th>HB Total</th></tr></thead><tbody><tr><td>Dec-19</td><td>1.30%</td><td>0.40%</td><td>0.20%</td><td>0.80%</td></tr><tr><td>Jan-20</td><td>1.35%</td><td>0.40%</td><td>0.20%</td><td>0.75%</td></tr><tr><td>Feb-20</td><td>1.30%</td><td>0.40%</td><td>0.20%</td><td>0.75%</td></tr><tr><td>Mar-20</td><td>1.30%</td><td>0.40%</td><td>0.20%</td><td>0.75%</td></tr><tr><td>Apr-20</td><td>1.45%</td><td>0.45%</td><td>0.20%</td><td>0.80%</td></tr><tr><td>May-20</td><td>1.50%</td><td>0.45%</td><td>0.20%</td><td>0.85%</td></tr><tr><td>Jun-20</td><td>1.50%</td><td>0.45%</td><td>0.20%</td><td>0.85%</td></tr><tr><td>Jul-20</td><td>1.55%</td><td>0.45%</td><td>0.20%</td><td>0.85%</td></tr><tr><td>Aug-20</td><td>1.55%</td><td>0.45%</td><td>0.20%</td><td>0.85%</td></tr><tr><td>Sep-20</td><td>1.55%</td><td>0.45%</td><td>0.20%</td><td>0.85%</td></tr><tr><td>Oct-20</td><td>1.65%</td><td>0.45%</td><td>0.20%</td><td>0.90%</td></tr><tr><td>Nov-20</td><td>1.75%</td><td>0.45%</td><td>0.20%</td><td>0.95%</td></tr><tr><td>Dec-20</td><td>1.86%</td><td>0.54%</td><td>0.20%</td><td>1.08%</td></tr></tbody></table>	Month	Morriston Hospital	Singleton Hospital	NPT Hospital	HB Total	Dec-19	1.30%	0.40%	0.20%	0.80%	Jan-20	1.35%	0.40%	0.20%	0.75%	Feb-20	1.30%	0.40%	0.20%	0.75%	Mar-20	1.30%	0.40%	0.20%	0.75%	Apr-20	1.45%	0.45%	0.20%	0.80%	May-20	1.50%	0.45%	0.20%	0.85%	Jun-20	1.50%	0.45%	0.20%	0.85%	Jul-20	1.55%	0.45%	0.20%	0.85%	Aug-20	1.55%	0.45%	0.20%	0.85%	Sep-20	1.55%	0.45%	0.20%	0.85%	Oct-20	1.65%	0.45%	0.20%	0.90%	Nov-20	1.75%	0.45%	0.20%	0.95%	Dec-20	1.86%	0.54%	0.20%	1.08%
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	<p>A breakdown by Hospital for December 2020:</p> <ul style="list-style-type: none">• Morriston – 1.86%• Singleton – 0.54%• NPT – 0.20% <p>* January 2021 data was not available at the time of writing this report.</p>																																																																							



HARM FROM REDUCTION IN NON-COVID ACTIVITY

6.1 Primary and Community Care Overview

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



No claims submitted between April and August 2020

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

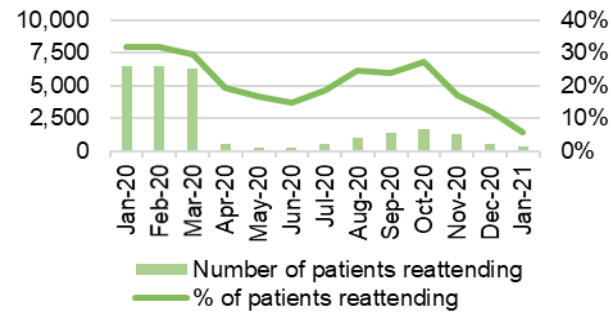


Chart 9: District Nursing- Number of patients on caseload

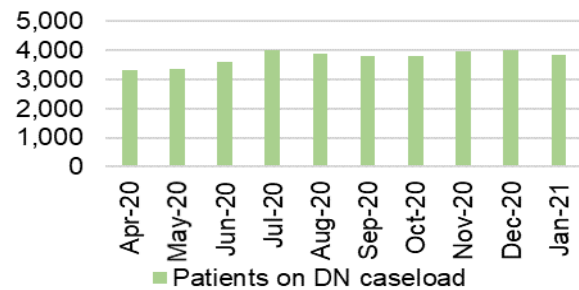


Chart 13: % of patients with a RTT (referral to stage 1) of 26 weeks or less for Restorative Dentistry

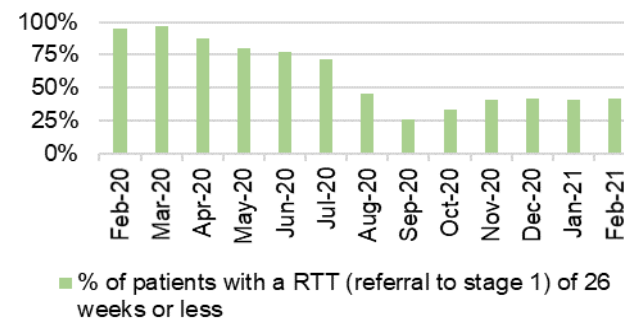


Chart 2: Common Ailment Scheme - Number of consultations provided

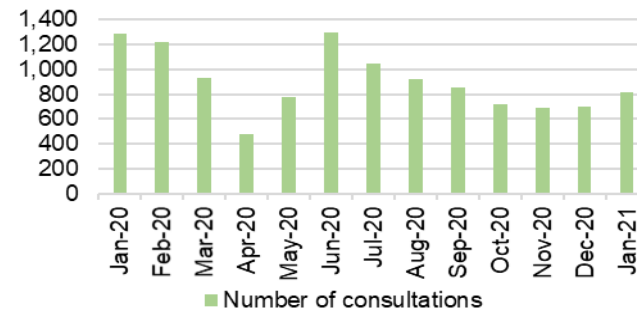


Chart 6: Pregnancy Advisory Service- Referral to appointment within 5 days and treatment within 10 days

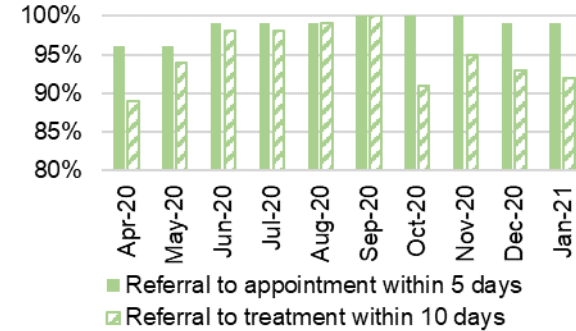


Chart 10: District Nursing- Total number of contacts

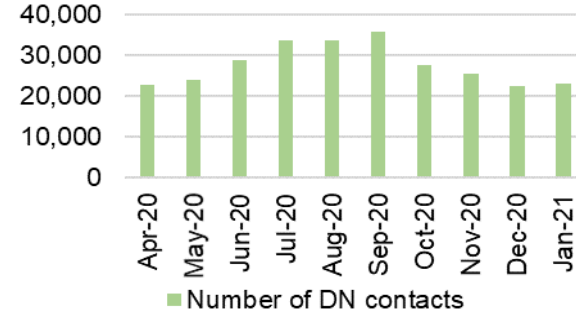
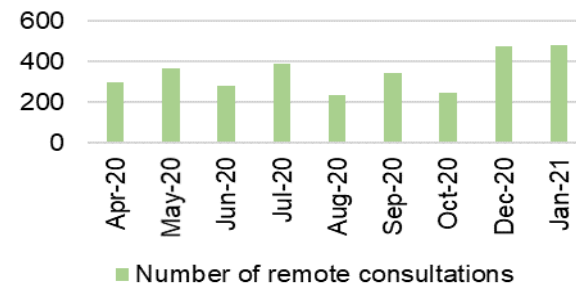


Chart 14: Audiology- Number of remote consultations



Nov-20 data not available

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

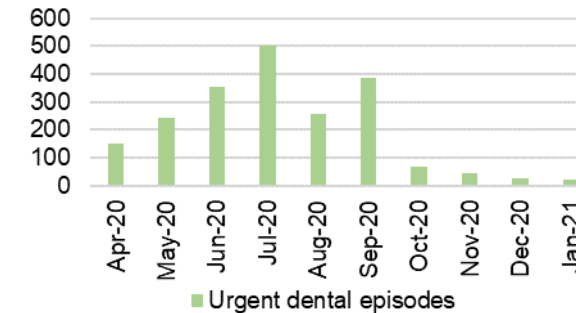


Chart 7: Sexual health services- Attendances at sexual health ambulance

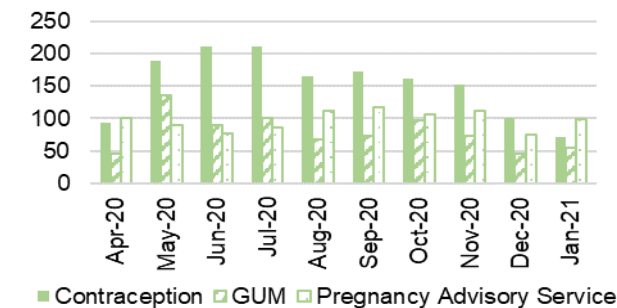


Chart 11: Community wound clinic- Number of attendances and number of home visits

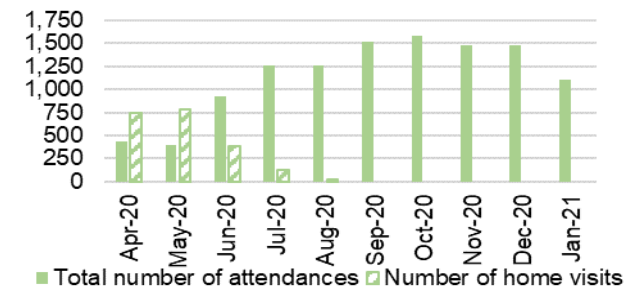
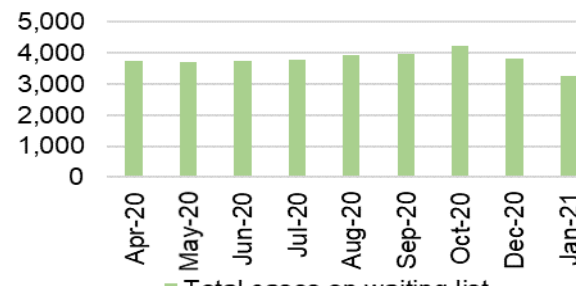


Chart 15: Audiology- Total number of patients on the waiting list



Nov-20 data not available

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

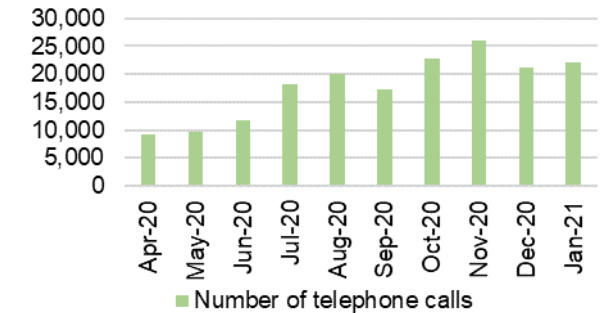


Chart 8: Sexual health services- Patient outcomes

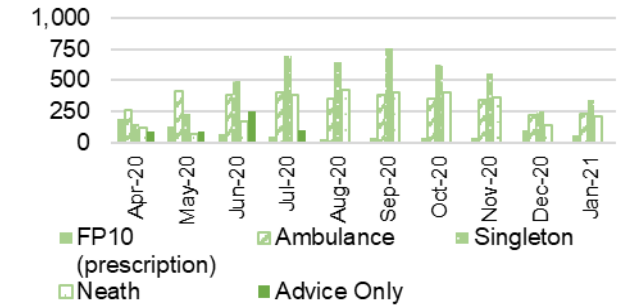


Chart 12: Community wound clinic- Number of assessments by location

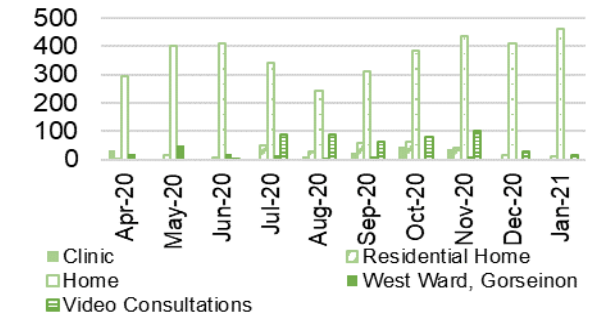
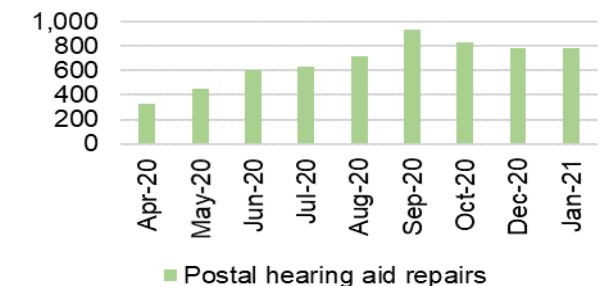


Chart 16: Audiology- Number of postal hearing aid repairs



Nov-20 data not available

Harm from reduction in non-Covid activity

6.2 Planned Care Overview

Chart 1: Number of GP Referrals into secondary care

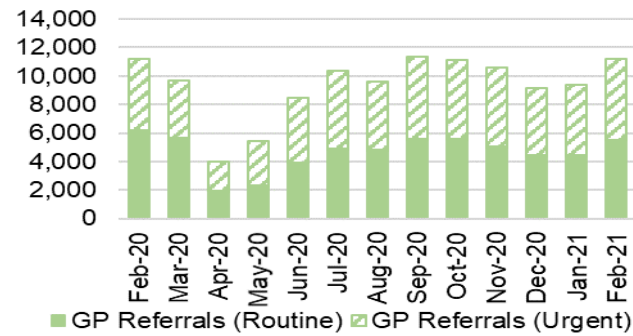


Chart 2: Number of patients waiting over 26 weeks for an outpatient appointment

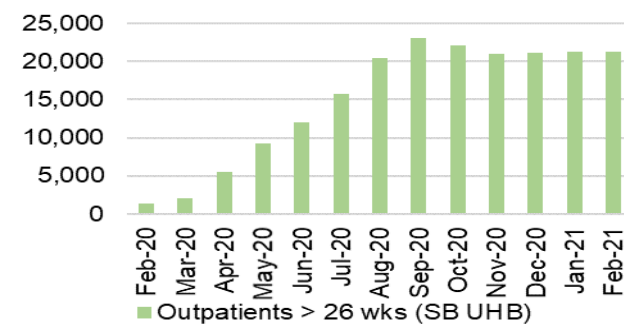


Chart 3: Number of patients waiting over 36 weeks for treatment

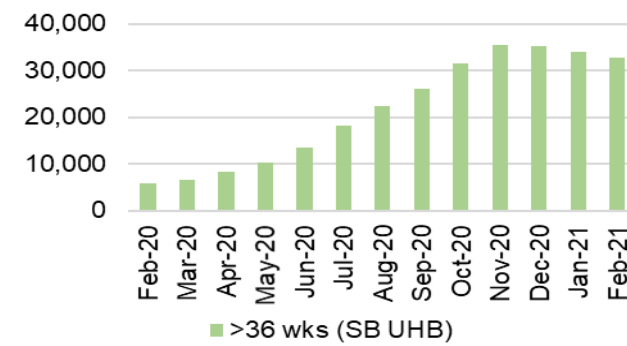


Chart 4: % patients waiting less than 26 weeks from referral to treatment

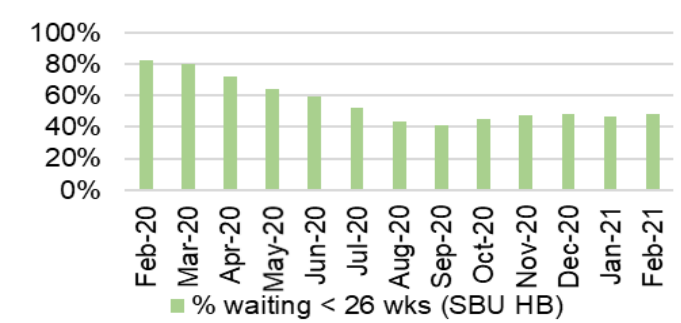


Chart 5: Number of patients waiting for reportable diagnostics over 8 weeks

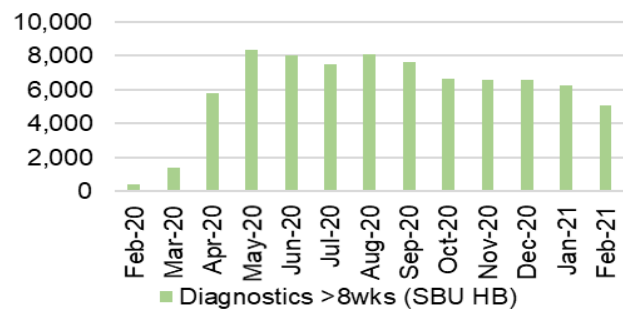


Chart 6: Number of patients waiting for reportable Cardiac diagnostics over 8 weeks

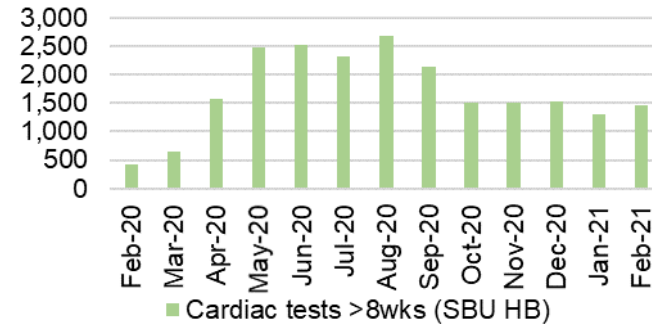


Chart 7: Number of patients waiting less than 14 weeks for Therapies

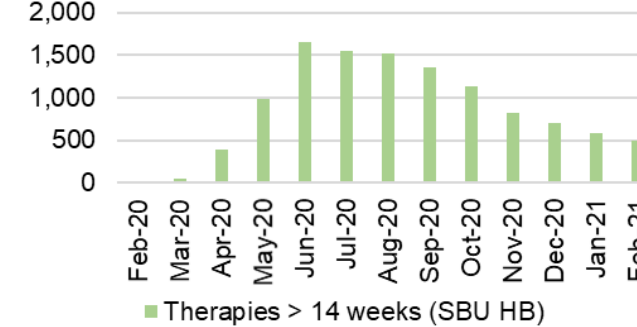


Chart 8: Cancer referrals

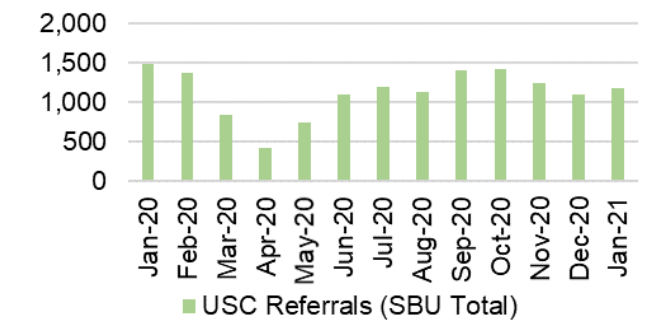


Chart 9: Single Cancer Pathway- % of patients starting definitive treatment within 62 days from point of suspicion

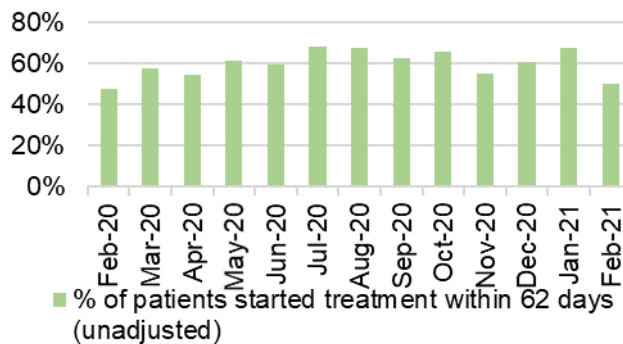


Chart 10: Number of new cancer patients starting definitive treatment

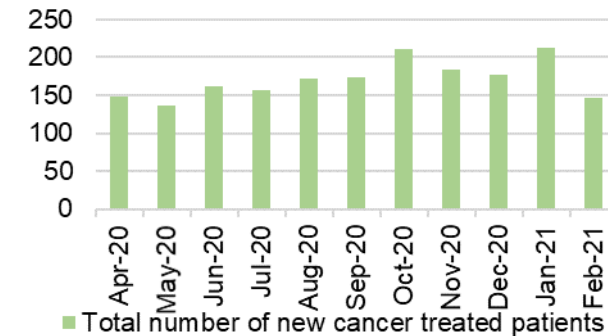


Chart 11: Single Cancer Pathway backlog- patients waiting over 63 days

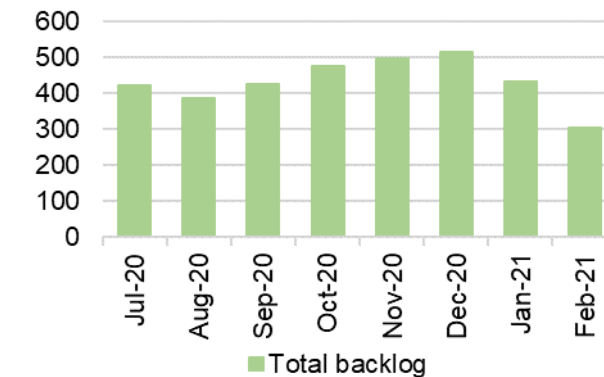


Chart 12: Number of patients waiting for an outpatient follow-up who are delayed past their target date

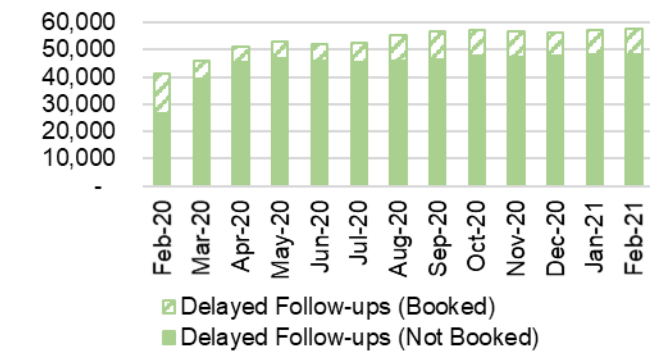


Chart 13: Number of patients without a documented clinical review date

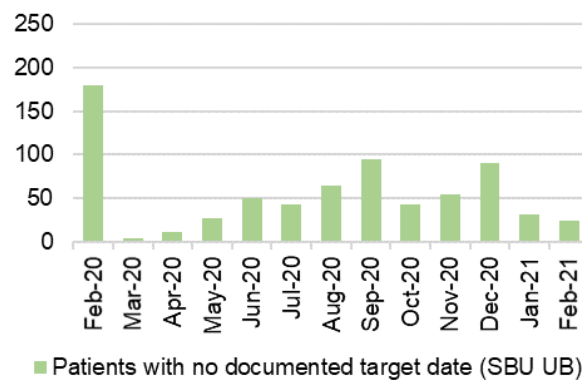


Chart 14: Ophthalmology patients without an allocated health risk factor

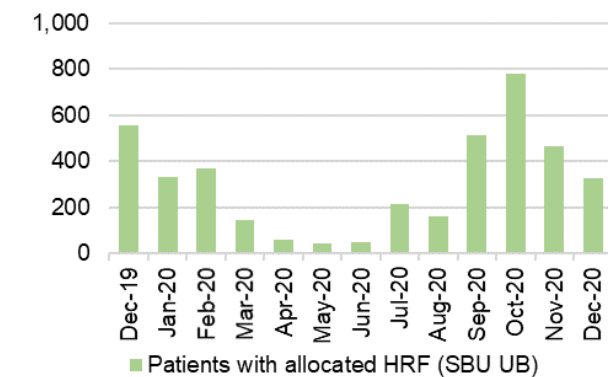


Chart 15: Total number of patients on the follow-up waiting list

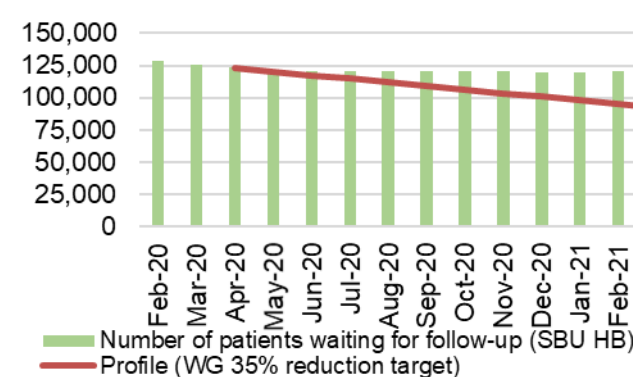
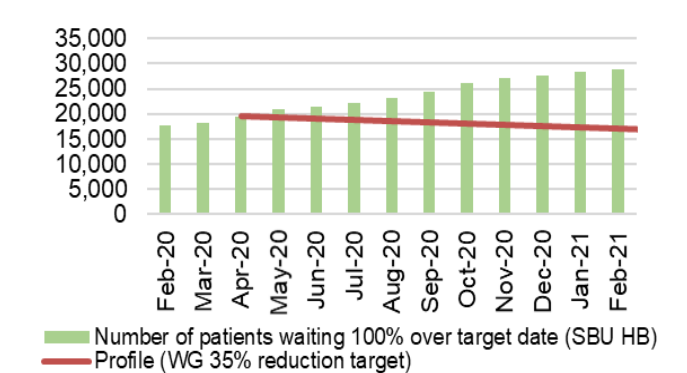


Chart 16: Number of patients delayed by over 100%



Planned Care- Overview (February 2021)

Demand		Waiting Times	
11,204 (19%↑) Total GP referrals	21,225 (0.1%↑) Patients waiting over 26 weeks for a new outpatient appointment	32,719 (4%↓) Patients waiting over 36 weeks for treatment	25,177 (12%↑) Patients waiting over 52 weeks for treatment
5,494 (24%↑) Routine GP referrals	47.9% (0.9%↑) Patients waiting under 26 weeks from referral to treatment	5,087 (18%↓) Patients waiting over 8 weeks for all reportable diagnostics	1,454 (11%↑) Patients waiting over 8 weeks for Cardiac diagnostics only
5,710 (15%↑) Urgent GP referrals	491 (16%↓) Patients waiting over 14 weeks for reportable therapies	120,882 (0.7%↑) Patients waiting for a follow-up outpatient appointment	28,862 (1.6%↑) Patients waiting for a follow-up outpatients appointment who are delayed over 100%
Cancer		Theatre Efficiencies	
1,179 (8.4%↑) Number of USC referrals received	305 (29.4%↓) USC backlog over 63 days	73% (8%↑) Theatre utilisation rate	44% (-) % of theatres sessions finishing early
50% (17.9%↓) draft Patients starting first definitive cancer treatment within 62 days		42% (2%↑) % of theatres sessions starting late	125 (6%↓) Operations cancelled on the day

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

6.3 Updates on key measures

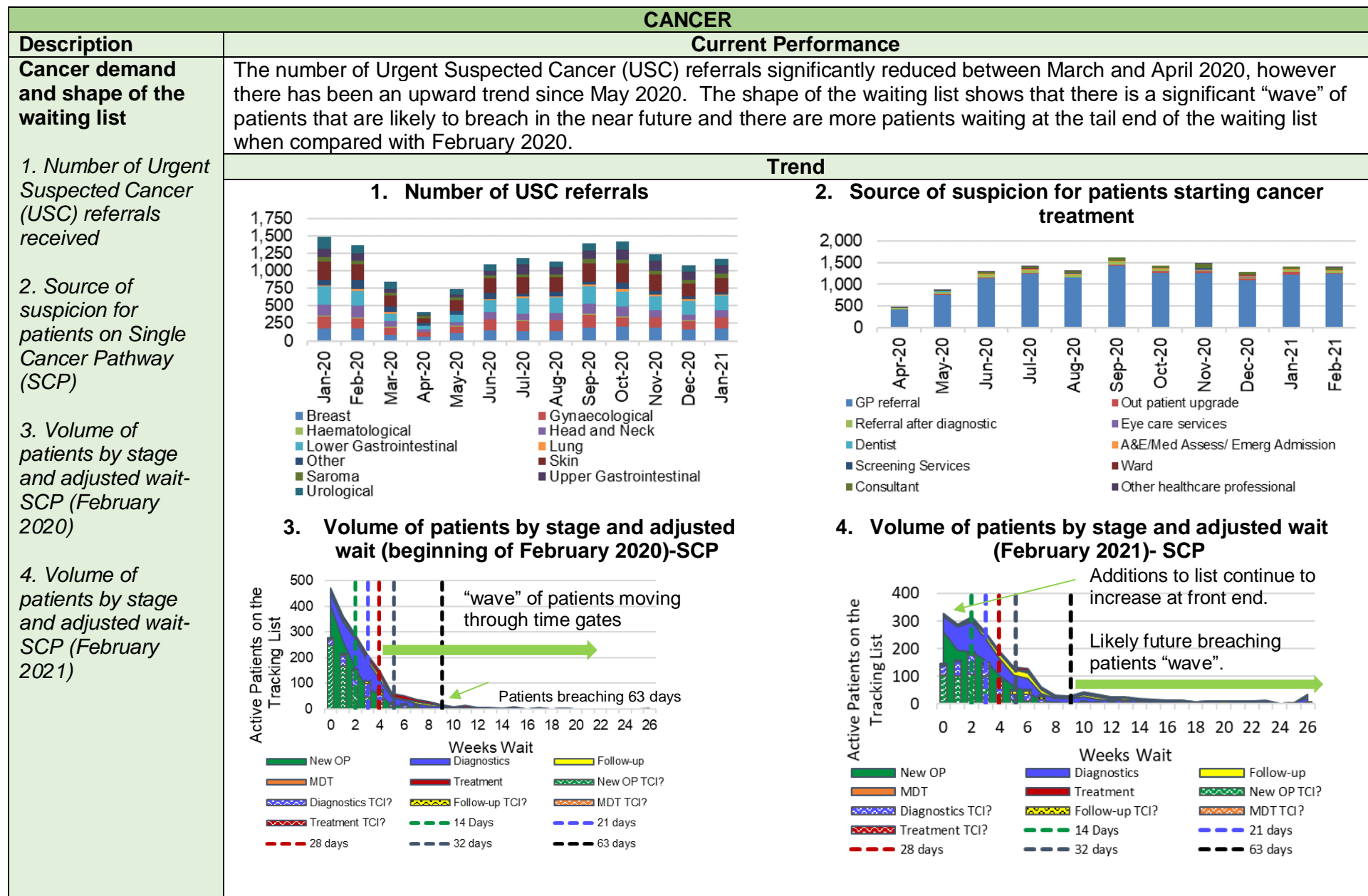
PLANNED CARE	
Description	Current Performance
Referrals and shape of the waiting list	The number of GP referrals and additions to the outpatient waiting list increased each month since May 2020, this is reflected in the reduction in the size of the waiting list in April 2020 and subsequent increase every month since May 2020. 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.
1. GP Referrals <i>The number of Stage 1 additions per week</i>	Trend
2. Stage 1 additions <i>The number of new patients that have been added to the outpatient waiting list</i>	
3. Size of the waiting list <i>Total number of patients on the waiting list by stage as at December 2019</i>	<div> <div> 1. Number of GP referrals received by SBU Health Board </div> <div> 2. Number of stage 1 additions per week </div> </div>
4. Size of the waiting list <i>Total number of patients on the waiting list by stage as at February 2021</i>	<div> <div> 3. Total size of the waiting list and movement (December 2019) </div> <div> 4. Total size of the waiting list and movement (February 2021) </div> </div>

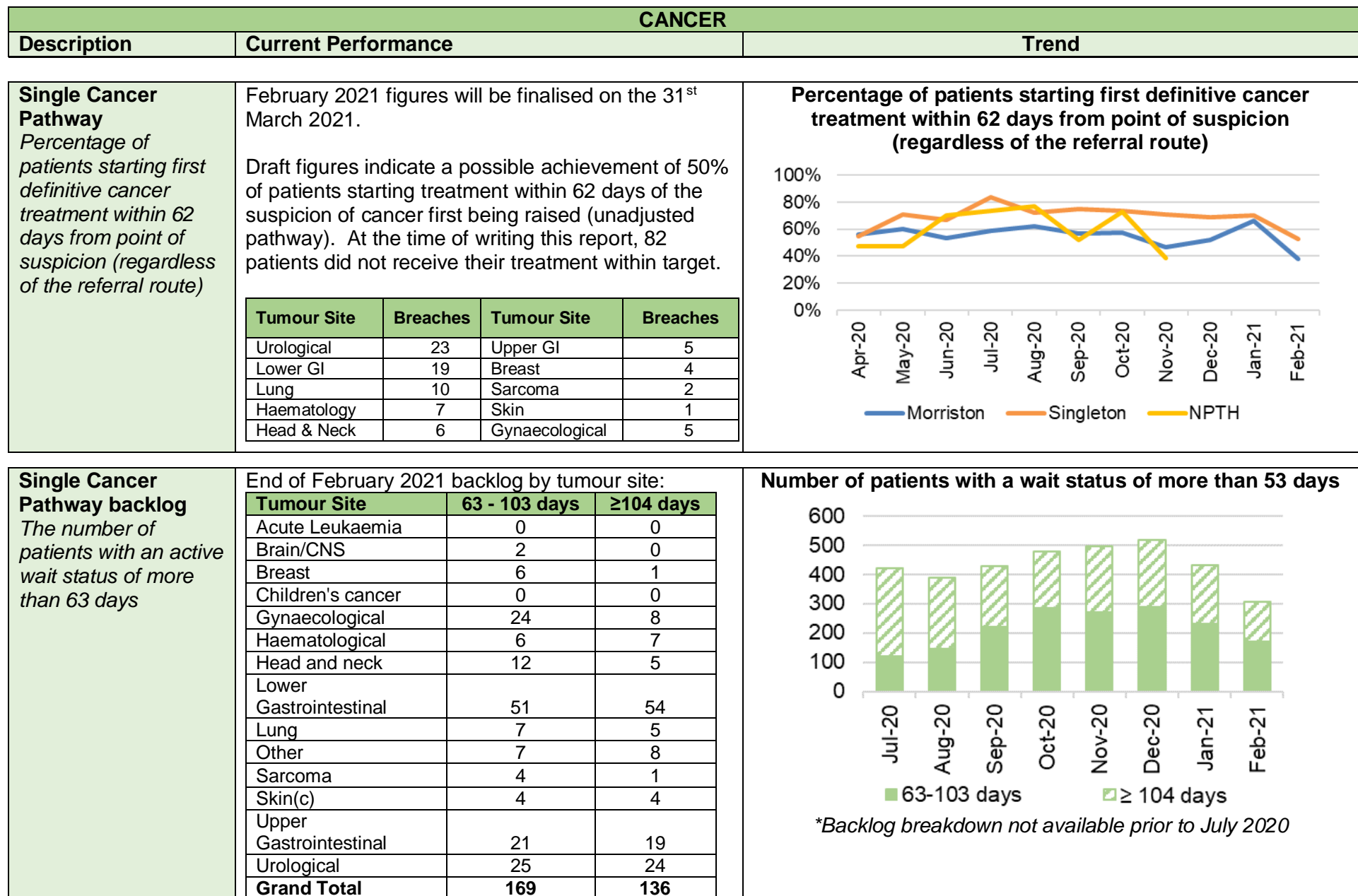
PLANNED CARE	
Description	Current Performance
Outpatient waiting times 1. Number of patients waiting more than 26 weeks for an outpatient appointment (stage 1)- Health Board Total 2. Number of patients waiting more than 26 weeks for an outpatient appointment (stage 1)- Hospital Level 3. Patients waiting over 26 weeks for an outpatient appointment by specialty 4. Outpatient activity undertaken	<p>The number of patients waiting over 26 weeks for a first outpatient appointment is a challenge. February 2021 saw a slight in-month increase in the number of patients waiting over 26 weeks for an outpatient appointment. The number of breaches increased from 21,179 in January 2021 to 21,225 in February 2021. Orthopaedics has the largest proportion of patients waiting over 26 weeks for an outpatient appointment closely followed by Ophthalmology and ENT. The number of outpatient attendances has significantly reduced since February 2020 due to COVID19. Chart 4 shows that the number of attendances started to increase from May 2020 but has plateaued from December 2020 onwards. Work continues to be undertaken to accurately record the split between face-to-face and virtual attendances and will be reported through a new Outpatient dashboard.</p>
	Trend
	<div>1. Number of stage 1 over 26 weeks- HB total</div> <p>■ Outpatients > 26 wks (SB UHB)</p>
	<div>2. Number of stage 1 over 26 weeks- Hospital level</div> <p>— Morriston — Singleton — PC&CS — NPTH</p>
	<div>3. Patients waiting over 26 weeks for an outpatient appointment by specialty as at February 2021</div>
	<div>4. Outpatient activity undertaken</div> <p>— New outpatient attendances - - Follow-up attendances</p>

PLANNED CARE																																																																																																																														
Description	Current Performance																																																																																																																													
Patients waiting over 36 weeks for treatment 1. Number of patients waiting more than 36 weeks for treatment and the number of elective patients admitted for treatment- Health Board Total 2. Number of patients waiting more than 36 weeks for treatment and the number of elective patients admitted for treatment- Hospital level 3. Number of elective admissions	<p>The number of patients waiting longer than 36 weeks from referral to treatment has increased every month since the first wave of COVID19 in March 2020. However, December 2020 was the first in 2020 that saw an in-month reduction and this trend continued into January and February 2021. In February 2021, there was 32,719 patient waiting over 36 weeks which is a 4% in-month reduction from January 2021. 25,177 of the 32,719 were waiting over 52 weeks in February 2021. Orthopaedics/ Spinal accounted for 23% of the breaches, followed by Ophthalmology with 13%.</p> <p>The number of patients receiving a procedure (and subsequently removed from the waiting list) has significantly reduced since March 2020 which is resulting in the increase in waiting times.</p>																																																																																																																													
	Trend																																																																																																																													
	<div><div><p>1. Number of patients waiting over 36 weeks- HB total</p><table><caption>1. Number of patients waiting over 36 weeks- HB total</caption><thead><tr><th>Month</th><th>Number of patients</th></tr></thead><tbody><tr><td>Feb-20</td><td>5,000</td></tr><tr><td>Mar-20</td><td>6,000</td></tr><tr><td>Apr-20</td><td>7,000</td></tr><tr><td>May-20</td><td>8,000</td></tr><tr><td>Jun-20</td><td>10,000</td></tr><tr><td>Jul-20</td><td>12,000</td></tr><tr><td>Aug-20</td><td>15,000</td></tr><tr><td>Sep-20</td><td>18,000</td></tr><tr><td>Oct-20</td><td>22,000</td></tr><tr><td>Nov-20</td><td>25,000</td></tr><tr><td>Dec-20</td><td>23,000</td></tr><tr><td>Jan-21</td><td>22,000</td></tr><tr><td>Feb-21</td><td>21,000</td></tr></tbody></table><p>■ >36 wks (SB UHB)</p></div><div><p>2. Number of patients waiting over 36 weeks- Hospital level</p><table><caption>2. Number of patients waiting over 36 weeks- Hospital level</caption><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>PC&CS</th><th>NPTH</th></tr></thead><tbody><tr><td>Feb-20</td><td>4,000</td><td>1,000</td><td>500</td><td>200</td></tr><tr><td>Mar-20</td><td>5,000</td><td>1,500</td><td>500</td><td>200</td></tr><tr><td>Apr-20</td><td>6,000</td><td>2,000</td><td>500</td><td>200</td></tr><tr><td>May-20</td><td>7,000</td><td>3,000</td><td>500</td><td>200</td></tr><tr><td>Jun-20</td><td>8,000</td><td>4,000</td><td>500</td><td>200</td></tr><tr><td>Jul-20</td><td>10,000</td><td>5,000</td><td>500</td><td>200</td></tr><tr><td>Aug-20</td><td>12,000</td><td>6,000</td><td>500</td><td>200</td></tr><tr><td>Sep-20</td><td>14,000</td><td>7,000</td><td>500</td><td>200</td></tr><tr><td>Oct-20</td><td>16,000</td><td>8,000</td><td>500</td><td>200</td></tr><tr><td>Nov-20</td><td>18,000</td><td>9,000</td><td>500</td><td>200</td></tr><tr><td>Dec-20</td><td>17,000</td><td>8,000</td><td>500</td><td>200</td></tr><tr><td>Jan-21</td><td>16,000</td><td>7,000</td><td>500</td><td>200</td></tr><tr><td>Feb-21</td><td>15,000</td><td>6,000</td><td>500</td><td>200</td></tr></tbody></table><p>— Morriston — Singleton — PC&CS — NPTH</p></div><div><p>3. Number of elective admissions</p><table><caption>3. Number of elective admissions</caption><thead><tr><th>Month</th><th>Admitted elective patients</th></tr></thead><tbody><tr><td>Feb-20</td><td>4,500</td></tr><tr><td>Mar-20</td><td>3,500</td></tr><tr><td>Apr-20</td><td>2,000</td></tr><tr><td>May-20</td><td>2,000</td></tr><tr><td>Jun-20</td><td>2,500</td></tr><tr><td>Jul-20</td><td>3,000</td></tr><tr><td>Aug-20</td><td>2,500</td></tr><tr><td>Sep-20</td><td>3,000</td></tr><tr><td>Oct-20</td><td>3,000</td></tr><tr><td>Nov-20</td><td>2,500</td></tr><tr><td>Dec-20</td><td>3,000</td></tr><tr><td>Jan-21</td><td>3,500</td></tr><tr><td>Feb-21</td><td>3,500</td></tr></tbody></table><p>— Admitted elective patients</p></div></div>	Month	Number of patients	Feb-20	5,000	Mar-20	6,000	Apr-20	7,000	May-20	8,000	Jun-20	10,000	Jul-20	12,000	Aug-20	15,000	Sep-20	18,000	Oct-20	22,000	Nov-20	25,000	Dec-20	23,000	Jan-21	22,000	Feb-21	21,000	Month	Morriston	Singleton	PC&CS	NPTH	Feb-20	4,000	1,000	500	200	Mar-20	5,000	1,500	500	200	Apr-20	6,000	2,000	500	200	May-20	7,000	3,000	500	200	Jun-20	8,000	4,000	500	200	Jul-20	10,000	5,000	500	200	Aug-20	12,000	6,000	500	200	Sep-20	14,000	7,000	500	200	Oct-20	16,000	8,000	500	200	Nov-20	18,000	9,000	500	200	Dec-20	17,000	8,000	500	200	Jan-21	16,000	7,000	500	200	Feb-21	15,000	6,000	500	200	Month	Admitted elective patients	Feb-20	4,500	Mar-20	3,500	Apr-20	2,000	May-20	2,000	Jun-20	2,500	Jul-20	3,000	Aug-20	2,500	Sep-20	3,000	Oct-20	3,000	Nov-20	2,500	Dec-20	3,000	Jan-21	3,500	Feb-21
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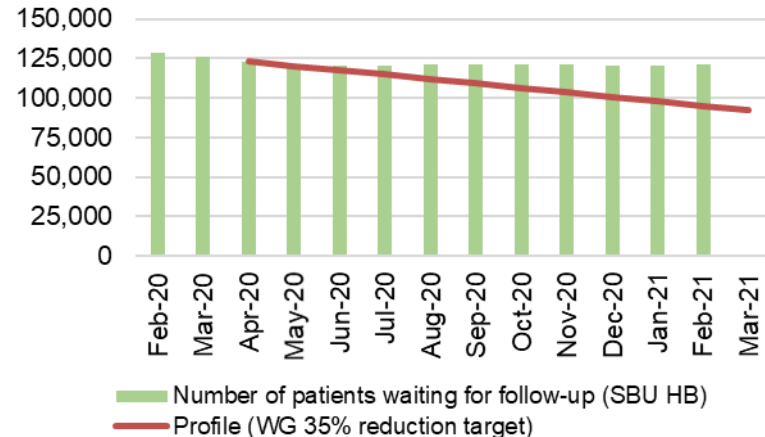
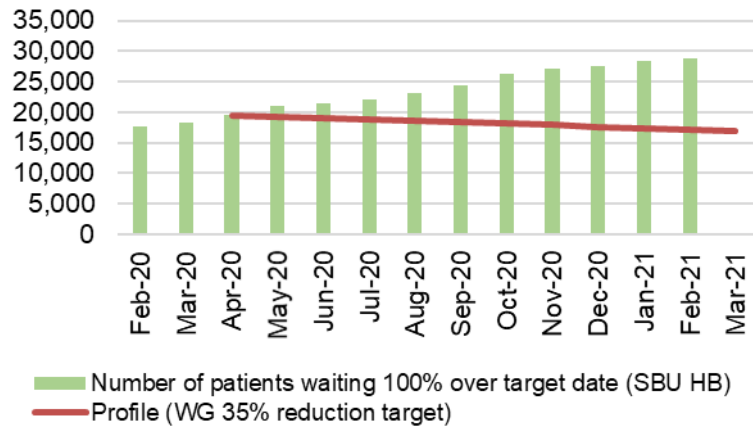
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Description	Current Performance																																																																							
Total waiting times <i>Percentage of patients waiting less than 26 weeks from referral to treatment</i>	<p>Throughout 2019/20 the overall percentage of patients waiting less than 26 weeks from referral to treatment ranged between 80% and 88%.</p> <p>The percentage consistently fell every month between April and September 2020, but has started to increase again. In February 2021, 47.9% of patients were waiting under 26 weeks from referral to treatment. This is an in-month improvement of 0.9% from 47.0% in January 2021 to 47.9% in February 2021.</p>	<p>Percentage of patient waiting less than 26 weeks</p> <table><caption>Estimated data for Percentage of patient waiting less than 26 weeks</caption><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>PC&CS</th><th>NPTH</th></tr></thead><tbody><tr><td>Feb-20</td><td>80%</td><td>85%</td><td>95%</td><td>100%</td></tr><tr><td>Mar-20</td><td>78%</td><td>82%</td><td>95%</td><td>100%</td></tr><tr><td>Apr-20</td><td>75%</td><td>78%</td><td>90%</td><td>100%</td></tr><tr><td>May-20</td><td>65%</td><td>68%</td><td>85%</td><td>98%</td></tr><tr><td>Jun-20</td><td>58%</td><td>60%</td><td>78%</td><td>95%</td></tr><tr><td>Jul-20</td><td>50%</td><td>55%</td><td>70%</td><td>90%</td></tr><tr><td>Aug-20</td><td>40%</td><td>45%</td><td>45%</td><td>80%</td></tr><tr><td>Sep-20</td><td>30%</td><td>40%</td><td>35%</td><td>75%</td></tr><tr><td>Oct-20</td><td>35%</td><td>45%</td><td>40%</td><td>85%</td></tr><tr><td>Nov-20</td><td>40%</td><td>48%</td><td>42%</td><td>90%</td></tr><tr><td>Dec-20</td><td>40%</td><td>48%</td><td>42%</td><td>95%</td></tr><tr><td>Jan-21</td><td>40%</td><td>48%</td><td>42%</td><td>95%</td></tr><tr><td>Feb-21</td><td>42%</td><td>48%</td><td>45%</td><td>90%</td></tr></tbody></table>	Month	Morriston	Singleton	PC&CS	NPTH	Feb-20	80%	85%	95%	100%	Mar-20	78%	82%	95%	100%	Apr-20	75%	78%	90%	100%	May-20	65%	68%	85%	98%	Jun-20	58%	60%	78%	95%	Jul-20	50%	55%	70%	90%	Aug-20	40%	45%	45%	80%	Sep-20	30%	40%	35%	75%	Oct-20	35%	45%	40%	85%	Nov-20	40%	48%	42%	90%	Dec-20	40%	48%	42%	95%	Jan-21	40%	48%	42%	95%	Feb-21	42%	48%	45%	90%
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Ophthalmology waiting times <i>Percentage of ophthalmology R1 patients who are waiting within their clinical target date or within 25% in excess of their clinical target date for their care or treatments</i>	<p>In December 2020, 47.3% of Ophthalmology R1 patients were waiting within their clinical target date or within 25% of the target date.</p> <p>There was an upward trend in performance in 2019/20 however, there has been a continuous downward trend in performance in 2020/21.</p> <p><i>NB. January and February 2021 figures were not available at the time of writing this report</i></p>	<p>Percentage of ophthalmology R1 patients who are waiting within their clinical target date or within 25% in excess of their clinical target date for their care or treatments</p> <table><caption>Estimated data for Percentage of ophthalmology R1 patients</caption><thead><tr><th>Month</th><th>% R1 patients seen within target or within 25% of target date</th></tr></thead><tbody><tr><td>Dec-19</td><td>75%</td></tr><tr><td>Jan-20</td><td>78%</td></tr><tr><td>Feb-20</td><td>80%</td></tr><tr><td>Mar-20</td><td>78%</td></tr><tr><td>Apr-20</td><td>72%</td></tr><tr><td>May-20</td><td>68%</td></tr><tr><td>Jun-20</td><td>65%</td></tr><tr><td>Jul-20</td><td>60%</td></tr><tr><td>Aug-20</td><td>55%</td></tr><tr><td>Sep-20</td><td>50%</td></tr><tr><td>Oct-20</td><td>48%</td></tr><tr><td>Nov-20</td><td>50%</td></tr><tr><td>Dec-20</td><td>47.3%</td></tr></tbody></table>	Month	% R1 patients seen within target or within 25% of target date	Dec-19	75%	Jan-20	78%	Feb-20	80%	Mar-20	78%	Apr-20	72%	May-20	68%	Jun-20	65%	Jul-20	60%	Aug-20	55%	Sep-20	50%	Oct-20	48%	Nov-20	50%	Dec-20	47.3%																																										
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PLANNED CARE		
Description	Current Performance	Trend
Diagnostics waiting times <i>The number of patients waiting more than 8 weeks for specified diagnostics</i>	<p>In February 2021, there was a reduction in the number of patients waiting over 8 weeks for specified diagnostics. It reduced from 6,239 in January 2021 to 5,087 in February 2021.</p> <p>The following is a breakdown for the 8 week breaches by diagnostic test for February 2021:</p> <ul style="list-style-type: none"> • Endoscopy= 2,109 • Cardiac tests= 1,454 • Neurophysiology= 901 • Radiology= 550 • Fluoroscopy= 38 • Cystoscopy= 21 • Physiological measurement= 14 	<p>Number of patients waiting longer than 8 weeks for diagnostics</p> <p>Cardiac tests Endoscopy Other diagnostics (inc. radiology)</p>
Therapy waiting times <i>The number of patients waiting more than 14 weeks for specified therapies</i>	<p>In February 2021 there were 491 patients waiting over 14 weeks for specified Therapies.</p> <p>The breakdown for the breaches in February 2021 are:</p> <ul style="list-style-type: none"> • Audiology=225 • Dietetics= 129 • Speech & Language Therapy= 128 • Podiatry= 9 	<p>Number of patients waiting longer than 14 weeks for therapies</p> <p>Occ Therapy/ LD (MH) Occ Therapy (exc. MH) Audiology Speech & Language Dietetics Phsyio Podiatry</p>

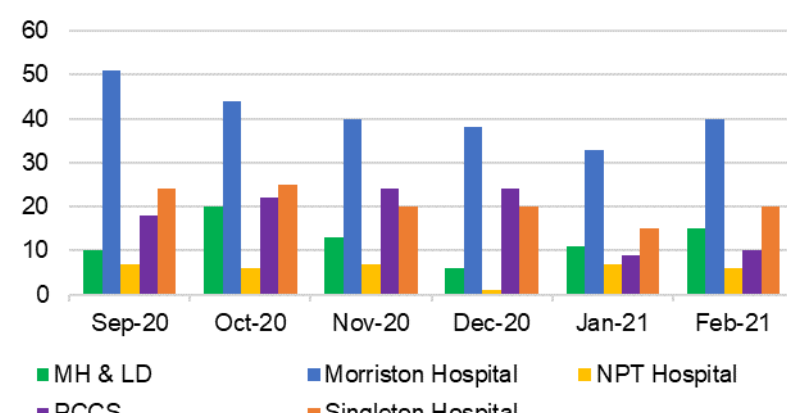
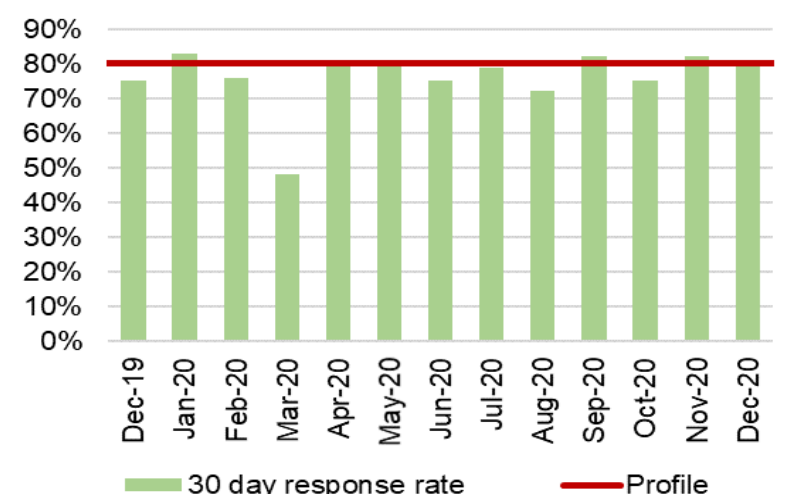




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Description	Current Performance	Trend																																																																																																																																																									
USC First Outpatient Appointments <i>The number of patients at first outpatient appointment stage by days waiting</i>	Week to week through February 2021 the percentage of patients seen within 14 days to first appointment ranged between 12% and 19%.	The number of patients waiting for a first outpatient appointment (by total days waiting) - End of February 2021 <table><tr><th></th><th>≤10</th><th>11-20</th><th>21-30</th><th>>31</th><th>Total</th></tr><tr><td>Breast</td><td>0</td><td>2</td><td>111</td><td>25</td><td>138</td></tr><tr><td>Children Cancer</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Gynaecological</td><td>0</td><td>2</td><td>68</td><td>12</td><td>82</td></tr><tr><td>Haematological</td><td>0</td><td>0</td><td>1</td><td>0</td><td>1</td></tr><tr><td>Head&Neck</td><td>8</td><td>10</td><td>1</td><td>0</td><td>19</td></tr><tr><td>LGI</td><td>2</td><td>1</td><td>3</td><td>28</td><td>34</td></tr><tr><td>Lung</td><td>0</td><td>0</td><td>1</td><td>0</td><td>1</td></tr><tr><td>Other</td><td>5</td><td>5</td><td>1</td><td>0</td><td>11</td></tr><tr><td>Sarcoma</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Skin</td><td>6</td><td>5</td><td>8</td><td>6</td><td>25</td></tr><tr><td>UGI</td><td>3</td><td>2</td><td>0</td><td>0</td><td>5</td></tr><tr><td>Urological</td><td>0</td><td>13</td><td>4</td><td>2</td><td>19</td></tr><tr><td>Total</td><td>24</td><td>40</td><td>198</td><td>73</td><td>335</td></tr></table>		≤10	11-20	21-30	>31	Total	Breast	0	2	111	25	138	Children Cancer	0	0	0	0	0	Gynaecological	0	2	68	12	82	Haematological	0	0	1	0	1	Head&Neck	8	10	1	0	19	LGI	2	1	3	28	34	Lung	0	0	1	0	1	Other	5	5	1	0	11	Sarcoma	0	0	0	0	0	Skin	6	5	8	6	25	UGI	3	2	0	0	5	Urological	0	13	4	2	19	Total	24	40	198	73	335																																																																					
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Radiotherapy waiting times <i>The percentage of patients receiving radiotherapy treatment</i>	Radiotherapy waiting times are challenging however the provision of emergency radiotherapy within 1 and 2 days has been maintained at 100% throughout the COVID19 outbreak. <table><tr><th>Measure</th><th>Target</th><th>Feb-21</th></tr><tr><td>Scheduled (21 Day Target)</td><td>80%</td><td>35%</td></tr><tr><td>Scheduled (28 Day Target)</td><td>100%</td><td>80%</td></tr><tr><td>Urgent SC (7 Day Target)</td><td>80%</td><td>23%</td></tr><tr><td>Urgent SC (14 Day Target)</td><td>100%</td><td>91%</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>61%</td></tr><tr><td>Elective Delay (28 Day Target)</td><td>100%</td><td>75%</td></tr></table>	Measure	Target	Feb-21	Scheduled (21 Day Target)	80%	35%	Scheduled (28 Day Target)	100%	80%	Urgent SC (7 Day Target)	80%	23%	Urgent SC (14 Day Target)	100%	91%	Emergency (within 1 day)	80%	100%	Emergency (within 2 days)	100%	100%	Elective Delay (21 Day Target)	80%	61%	Elective Delay (28 Day Target)	100%	75%	Radiotherapy waiting times <table><caption>Radiotherapy waiting times (Estimated Data)</caption><thead><tr><th>Month</th><th>Scheduled (21 Day Target)</th><th>Scheduled (28 Day Target)</th><th>Urgent SC (7 Day Target)</th><th>Urgent SC (14 Day Target)</th><th>Emergency (within 1 day)</th><th>Emergency (within 2 days)</th><th>Elective Delay (21 Day Target)</th><th>Elective Delay (28 Day Target)</th></tr></thead><tbody><tr><td>Feb-20</td><td>30%</td><td>55%</td><td>50%</td><td>95%</td><td>100%</td><td>100%</td><td>55%</td><td>75%</td></tr><tr><td>Mar-20</td><td>55%</td><td>80%</td><td>45%</td><td>95%</td><td>100%</td><td>100%</td><td>85%</td><td>95%</td></tr><tr><td>Apr-20</td><td>45%</td><td>85%</td><td>40%</td><td>95%</td><td>100%</td><td>100%</td><td>75%</td><td>95%</td></tr><tr><td>May-20</td><td>40%</td><td>95%</td><td>30%</td><td>95%</td><td>100%</td><td>100%</td><td>85%</td><td>100%</td></tr><tr><td>Jun-20</td><td>60%</td><td>95%</td><td>65%</td><td>95%</td><td>100%</td><td>100%</td><td>95%</td><td>95%</td></tr><tr><td>Jul-20</td><td>70%</td><td>95%</td><td>55%</td><td>95%</td><td>100%</td><td>100%</td><td>50%</td><td>95%</td></tr><tr><td>Aug-20</td><td>65%</td><td>85%</td><td>55%</td><td>95%</td><td>100%</td><td>100%</td><td>45%</td><td>75%</td></tr><tr><td>Sep-20</td><td>60%</td><td>85%</td><td>55%</td><td>95%</td><td>100%</td><td>100%</td><td>55%</td><td>85%</td></tr><tr><td>Oct-20</td><td>55%</td><td>75%</td><td>55%</td><td>95%</td><td>100%</td><td>100%</td><td>55%</td><td>75%</td></tr><tr><td>Nov-20</td><td>55%</td><td>75%</td><td>30%</td><td>100%</td><td>100%</td><td>100%</td><td>55%</td><td>75%</td></tr><tr><td>Dec-20</td><td>70%</td><td>85%</td><td>50%</td><td>95%</td><td>100%</td><td>100%</td><td>70%</td><td>85%</td></tr><tr><td>Jan-21</td><td>45%</td><td>85%</td><td>50%</td><td>95%</td><td>100%</td><td>100%</td><td>65%</td><td>85%</td></tr><tr><td>Feb-21</td><td>35%</td><td>80%</td><td>23%</td><td>91%</td><td>100%</td><td>100%</td><td>61%</td><td>75%</td></tr></tbody></table>	Month	Scheduled (21 Day Target)	Scheduled (28 Day Target)	Urgent SC (7 Day Target)	Urgent SC (14 Day Target)	Emergency (within 1 day)	Emergency (within 2 days)	Elective Delay (21 Day Target)	Elective Delay (28 Day Target)	Feb-20	30%	55%	50%	95%	100%	100%	55%	75%	Mar-20	55%	80%	45%	95%	100%	100%	85%	95%	Apr-20	45%	85%	40%	95%	100%	100%	75%	95%	May-20	40%	95%	30%	95%	100%	100%	85%	100%	Jun-20	60%	95%	65%	95%	100%	100%	95%	95%	Jul-20	70%	95%	55%	95%	100%	100%	50%	95%	Aug-20	65%	85%	55%	95%	100%	100%	45%	75%	Sep-20	60%	85%	55%	95%	100%	100%	55%	85%	Oct-20	55%	75%	55%	95%	100%	100%	55%	75%	Nov-20	55%	75%	30%	100%	100%	100%	55%	75%	Dec-20	70%	85%	50%	95%	100%	100%	70%	85%	Jan-21	45%	85%	50%	95%	100%	100%	65%	85%	Feb-21	35%	80%	23%	91%	100%	100%	61%	75%
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Nov-20	55%	75%	30%	100%	100%	100%	55%	75%																																																																																																																																																			
Dec-20	70%	85%	50%	95%	100%	100%	70%	85%																																																																																																																																																			
Jan-21	45%	85%	50%	95%	100%	100%	65%	85%																																																																																																																																																			
Feb-21	35%	80%	23%	91%	100%	100%	61%	75%																																																																																																																																																			

FOLLOW-UP APPOINTMENTS		
Description	Current Performance	Trend
Follow-up appointments 1. The total number of patients on the follow-up waiting list 2. The number of patients waiting 100% over target for a follow-up appointment	<p>In February 2021, the overall size of the follow-up waiting list increased by 883 patients compared with January 2021 (from 119,999 to 120,882).</p> <p>In February 2021, there was a total of 57,458 patients waiting for a follow-up past their target date. This is an in-month increase of 0.3% (from 57,297 in January 2021 to 57,458 in February 2021).</p> <p>Of the 57,458 delayed follow-ups in February 2021, 9,357 had appointment dates and 48,101 were still waiting for an appointment.</p> <p>In addition, 28,862 patients were waiting 100%+ over target date in February 2021. This is a 1.6% increase when compared with January 2021.</p>	<p>1. Total number of patients waiting for a follow-up</p>  <p>2. Delayed follow-ups: Number of patients waiting 100% over target</p> 

PATIENT EXPERIENCE		
Description	Current Performance	Trend
<p>Patient experience</p> <p>1. Number of friends and family surveys completed</p> <p>2. Percentage of patients/ service users who would recommend and highly recommend</p>	<ul style="list-style-type: none"> Health Board Friends & Family patient satisfaction level in February 2021 was 85% and 798 surveys were completed: <ul style="list-style-type: none"> Neath Port Talbot Hospital (NPTH) completed 31 surveys in February 2021, with a recommended score of 32%. Singleton Hospital completed 459 surveys for February 2021, with a recommended score of 92%. Morrison Hospital completed 211 surveys in February 2021, with a recommended score of 82%. Mental Health & Learning Disabilities completed 8 surveys for February 2021, with a recommended score of 88%. Primary & Community Care completed 97 surveys for February 2021, with a recommended score of 77%. 	<p>1. Number of friends and family surveys completed</p> <p>2. % of patients/ service users who would recommend and highly recommend</p>

COMPLAINTS																																												
Description	Current Performance	Trend																																										
Patient concerns																																												
<i>1. Number of formal complaints received</i>	<p>1. In February 2021, the Health Board received 94 formal complaints; this is a 17% reduction when compared with February 2020 (from 113 to 94).</p> <p>The monthly number of complaints received has been significantly lower since the COVID19 outbreak in March 2020 however, the numbers have gradually increased month on month since April 2020 until December 2020 when numbers started to reduce again.</p>	<p>1. Number of formal complaints received</p>  <table><caption>1. Number of formal complaints received</caption><thead><tr><th>Month</th><th>MH & LD</th><th>Morriston Hospital</th><th>NPT Hospital</th><th>PCCS</th><th>Singleton Hospital</th></tr></thead><tbody><tr><td>Sep-20</td><td>10</td><td>50</td><td>5</td><td>18</td><td>24</td></tr><tr><td>Oct-20</td><td>20</td><td>44</td><td>5</td><td>22</td><td>25</td></tr><tr><td>Nov-20</td><td>13</td><td>40</td><td>5</td><td>24</td><td>20</td></tr><tr><td>Dec-20</td><td>5</td><td>38</td><td>1</td><td>24</td><td>20</td></tr><tr><td>Jan-21</td><td>11</td><td>33</td><td>5</td><td>10</td><td>15</td></tr><tr><td>Feb-21</td><td>15</td><td>40</td><td>5</td><td>10</td><td>20</td></tr></tbody></table>	Month	MH & LD	Morriston Hospital	NPT Hospital	PCCS	Singleton Hospital	Sep-20	10	50	5	18	24	Oct-20	20	44	5	22	25	Nov-20	13	40	5	24	20	Dec-20	5	38	1	24	20	Jan-21	11	33	5	10	15	Feb-21	15	40	5	10	20
Month	MH & LD	Morriston Hospital	NPT Hospital	PCCS	Singleton Hospital																																							
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Oct-20	20	44	5	22	25																																							
Nov-20	13	40	5	24	20																																							
Dec-20	5	38	1	24	20																																							
Jan-21	11	33	5	10	15																																							
Feb-21	15	40	5	10	20																																							
<i>2. Percentage of concerns that have received a final reply or an interim reply up to and including 30 working days from the date the concern was first received by the organisation</i>	<p>2. The overall Health Board rate for responding to concerns within 30 working days was 80% in December 2020 against the Welsh Government target of 75% and Health Board target of 80%.</p> <p>Performance in December 2020 ranged from 0% in Neath Port Talbot Hospital to 91% in Morriston Hospital.</p> <p>* In December 2020, Neath Port Talbot Hospital achieved 0% as the one complaint was not closed within timeframe.</p>	<p>2. Response rate for concerns within 30 days</p>  <table><caption>2. Response rate for concerns within 30 days</caption><thead><tr><th>Month</th><th>30 day response rate</th><th>Profile</th></tr></thead><tbody><tr><td>Dec-19</td><td>75%</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><tr><td>Oct-20</td><td>75%</td><td>80%</td></tr><tr><td>Nov-20</td><td>82%</td><td>80%</td></tr><tr><td>Dec-20</td><td>80%</td><td>80%</td></tr></tbody></table>	Month	30 day response rate	Profile	Dec-19	75%	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%	Oct-20	75%	80%	Nov-20	82%	80%	Dec-20	80%	80%
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Dec-19	75%	80%																																										
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Dec-20	80%	80%																																										

HARM FROM WIDER SOCIETAL ACTIONS/LOCKDOWN

7.1 Vaccinations and Immunisations

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



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

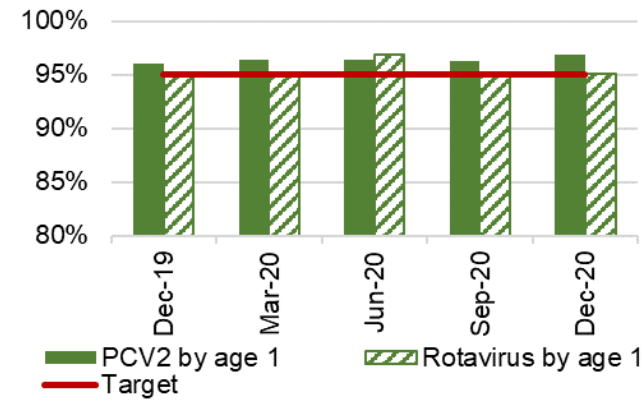


Chart 3: % children who received MMR1 vaccine and PCVf3 vaccine by age 2

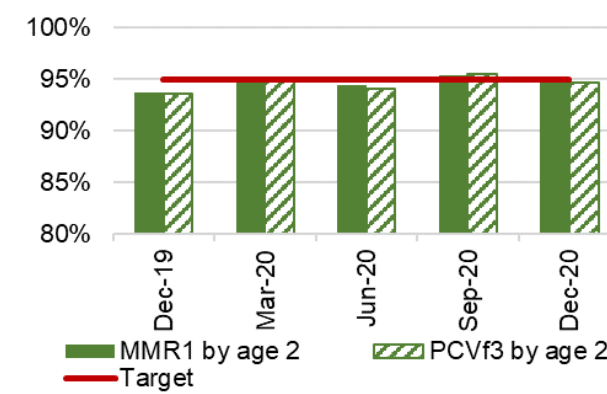


Chart 4: % children who received MenB4 vaccine and Hib/MenC vaccine by age 2

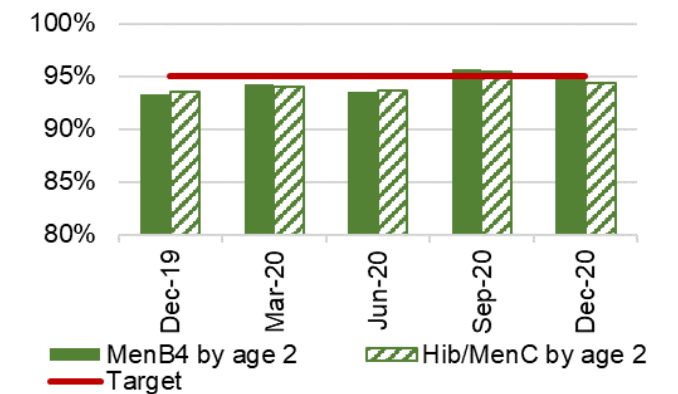


Chart 5: % children who are up to date in schedule by age 4

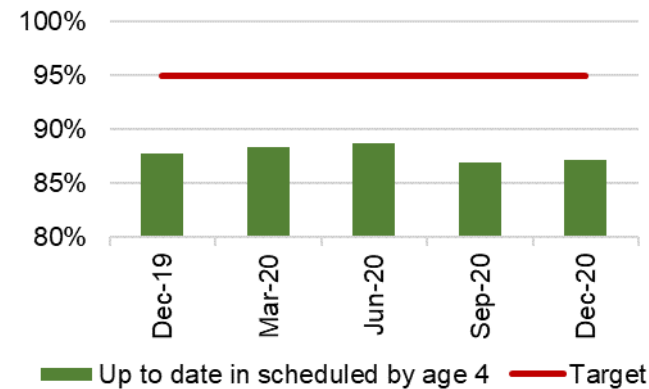


Chart 6: % children who received 2 doses of the MMR vaccine and 4 in 1 vaccine by age 5

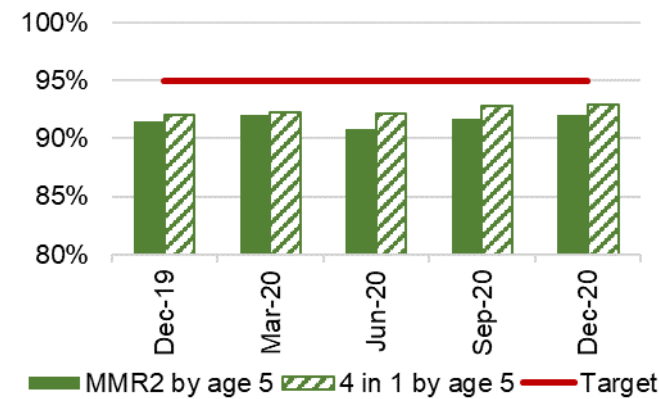


Chart 7: % children who received MMR vaccine and teenage booster by age 16

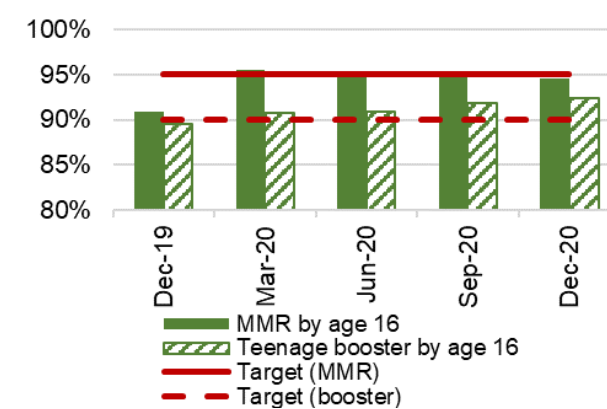


Chart 8: % children who received MenACWY vaccine by age 16

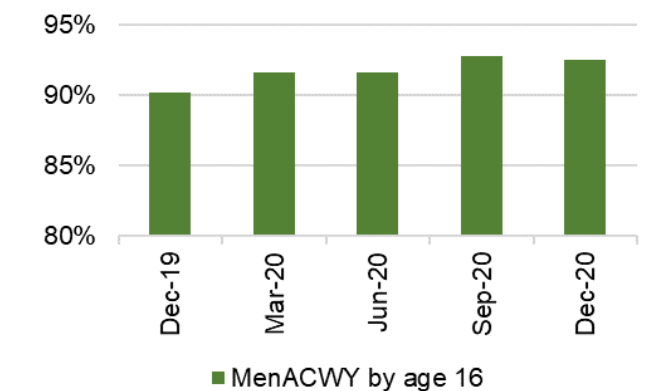
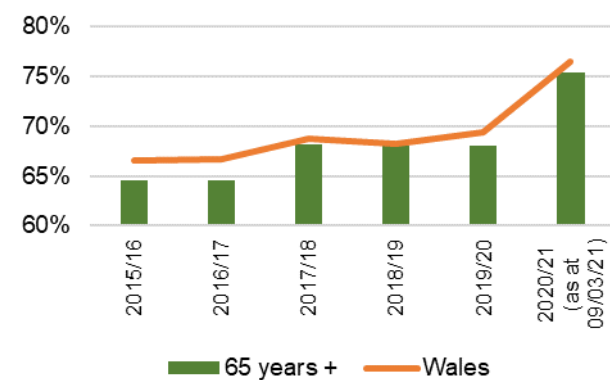
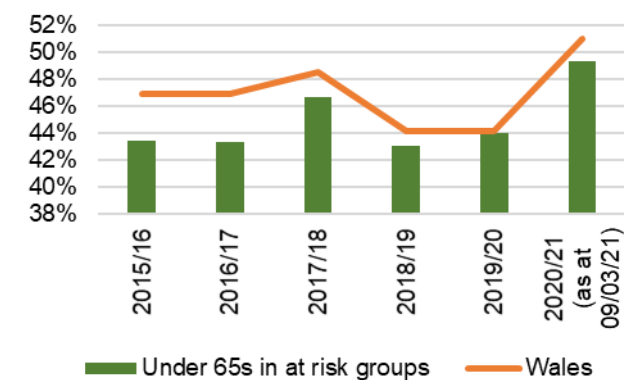


Chart 9: Influenza uptake for amongst 65 year olds and over



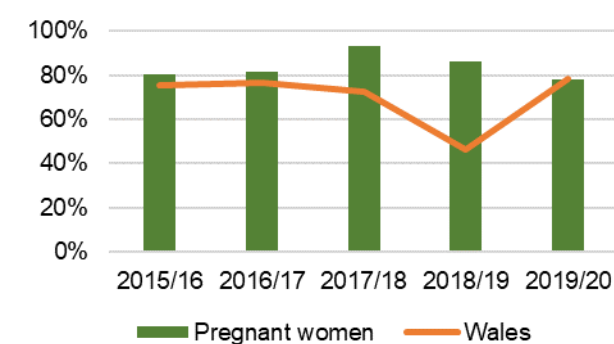
Data prior to April 2019 relates to Abertawe Bro Morgannwg University Health Board

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



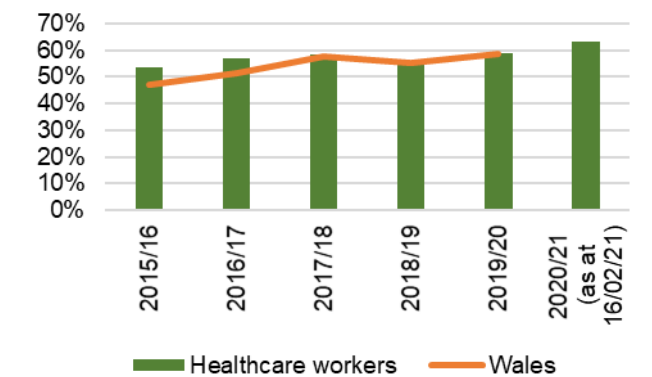
Data prior to April 2019 relates to Abertawe Bro Morgannwg University Health Board

Chart 11: Influenza uptake for amongst pregnant women



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

Chart 12: Influenza uptake for amongst healthcare workers



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

HARM FROM WIDER SOCIETAL ACTIONS/LOCKDOWN

7.2 Mental Health Overview

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

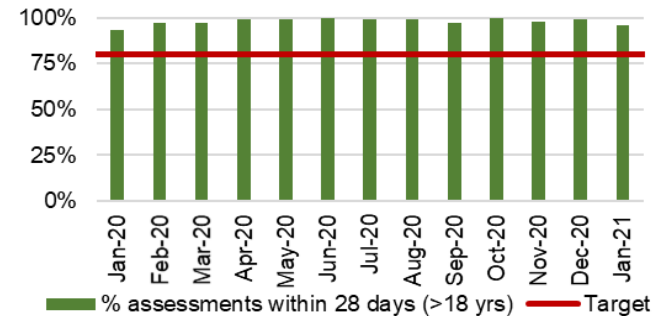


Chart 2: % of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS

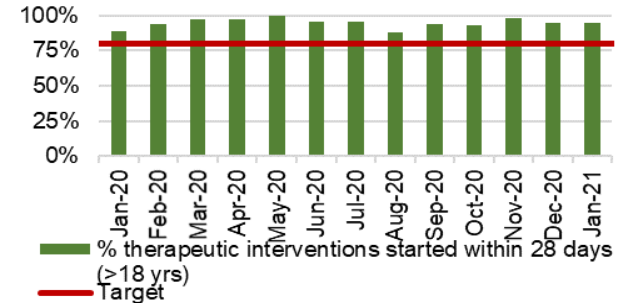


Chart 3: % of health board residents in receipt of secondary mental health services (all ages) who have a valid care and treatment plan

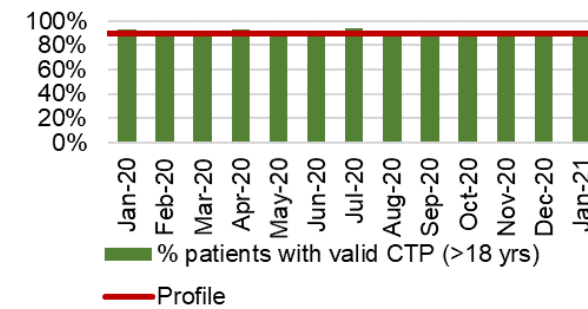


Chart 4: % of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health

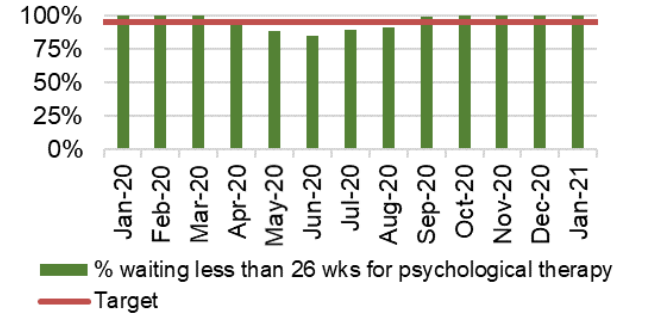


Chart 5: 95% of those admitted 0900-2100 will receive a gate-keeping assessment by the CRHTS prior to admission

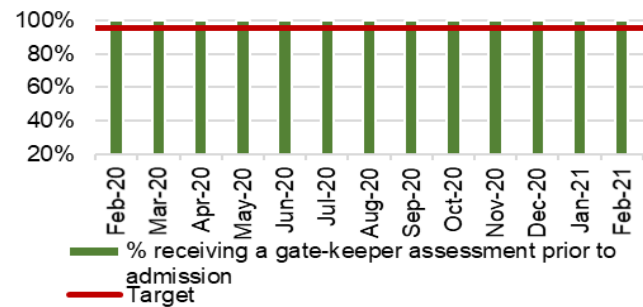


Chart 6: 100% of those admitted without a gate keeping assessment will receive a follow up assessment by CRHTS within 24hrs of admission

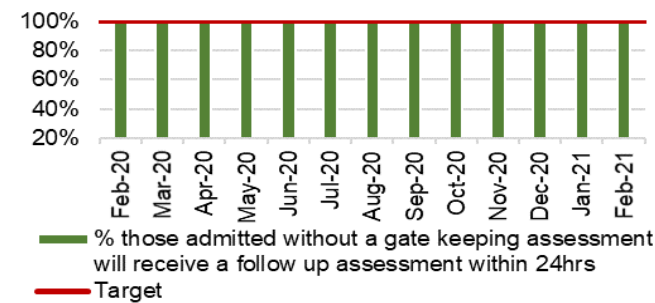


Chart 7: % of patients waiting under 14 weeks for Therapies

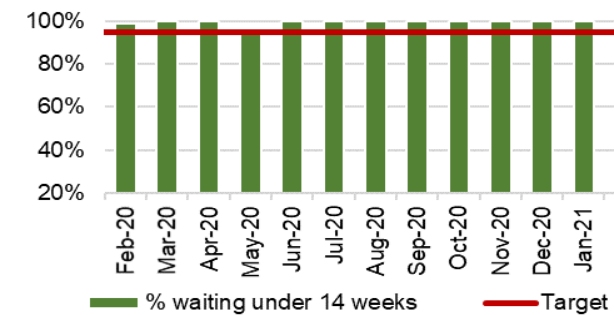


Chart 8: Number of Mental Health Delayed Transfers of Care (DTOCs)

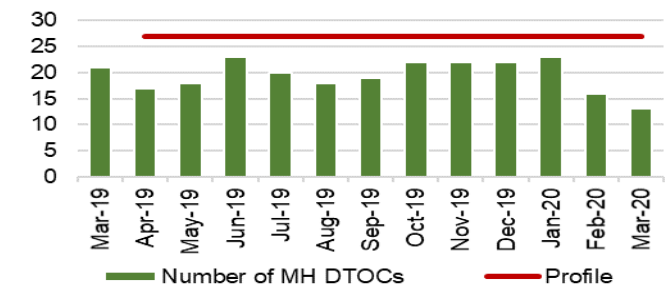


Chart 9: Number of patients detained under the Mental Health Act as a percentage of all admissions

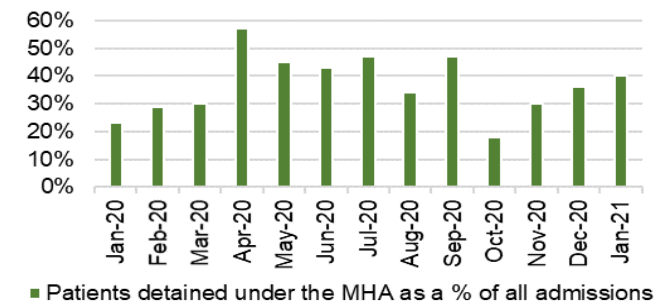


Chart 10: Number of patients subject to Deprivation of Liberty Safeguards (DOLS)

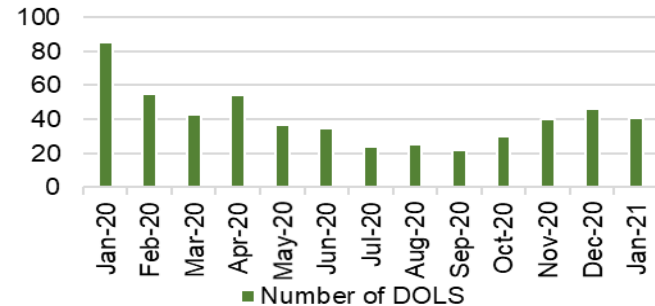


Chart 11: Number of Serious Incidents

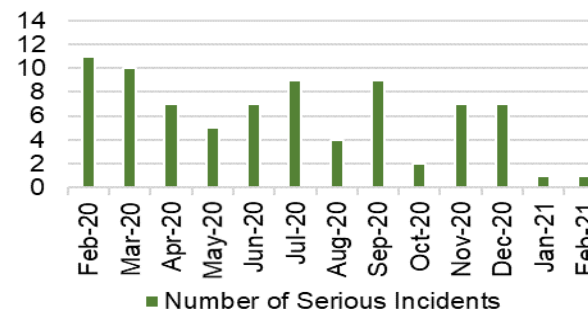
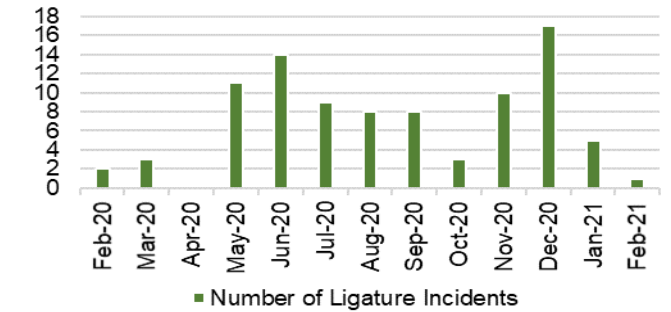


Chart 12: Number of ligature incidents



Child & Adolescent Mental Health Services (CAMHS)

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

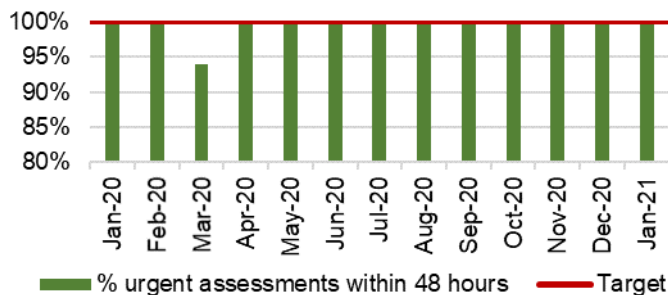


Chart 14: Neuro-developmental disorder assessment and intervention received within 26 weeks

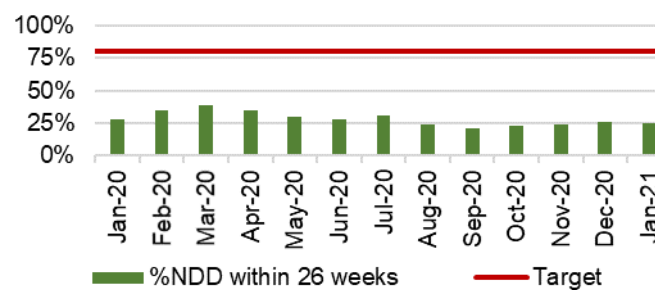


Chart 15: Assessment and intervention within 28 days

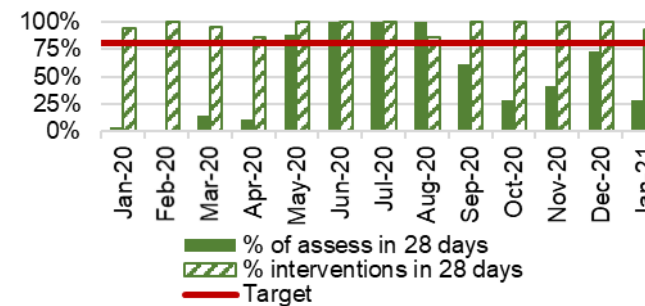
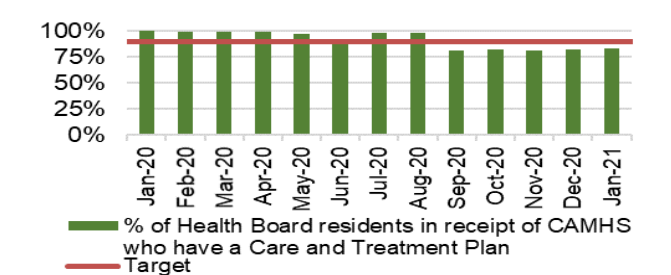


Chart 16: % of residents with a Care and Treatment Plan



7.3 Updates on key measures

ADULT MENTAL HEALTH																																																																																																																																																																										
Description	Current Performance	Trend																																																																																																																																																																								
<p>Adult Mental Health Measures:</p> <p>1. % of MH assessments undertaken within 28 days from the date of receipt of referral (18 years and over)</p> <p>2. % of therapeutic interventions started within 28 days following an assessment by LPMHSS (18 years and over)</p> <p>3. % of health board residents in receipt of secondary mental health services who have a valid Care and Treatment Plan (CTP) (18 years and over)</p> <p>4. % of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health</p>	<p>1. In January 2021, 96% of assessments were undertaken within 28 days of referral for patients 18 years and over.</p> <p>2. In January 2021, the percentage of therapeutic interventions started within 28 days following an assessment by the Local Primary Mental Health Support Service (LPMHSS) was 95%.</p> <p>3. 91% of residents in receipt of secondary care mental health services had a valid Care and Treatment Plan in January 2021.</p> <p>4. In January 2021, 100% of patients waited less than 26 weeks for psychological therapy. This was below the national target of 95%.</p>	<p>1. % Mental Health assessments undertaken within 28 days from receipt of referral</p> <table border="1"> <caption>1. % Mental Health assessments undertaken within 28 days from receipt of referral</caption> <thead> <tr> <th>Month</th> <th>% assessments within 28 days (>18 yrs)</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>Jan-20</td><td>96%</td><td>95%</td></tr> <tr><td>Feb-20</td><td>96%</td><td>95%</td></tr> <tr><td>Mar-20</td><td>96%</td><td>95%</td></tr> <tr><td>Apr-20</td><td>96%</td><td>95%</td></tr> <tr><td>May-20</td><td>96%</td><td>95%</td></tr> <tr><td>Jun-20</td><td>96%</td><td>95%</td></tr> <tr><td>Jul-20</td><td>96%</td><td>95%</td></tr> <tr><td>Aug-20</td><td>96%</td><td>95%</td></tr> <tr><td>Sep-20</td><td>96%</td><td>95%</td></tr> <tr><td>Oct-20</td><td>96%</td><td>95%</td></tr> <tr><td>Nov-20</td><td>96%</td><td>95%</td></tr> <tr><td>Dec-20</td><td>96%</td><td>95%</td></tr> <tr><td>Jan-21</td><td>96%</td><td>95%</td></tr> </tbody> </table> <p>2. % Mental Health therapeutic interventions started within 28 days following LPMHSS assessment</p> <table border="1"> <caption>2. % Mental Health therapeutic interventions started within 28 days following LPMHSS assessment</caption> <thead> <tr> <th>Month</th> <th>% therapeutic interventions started within 28 days (>18 yrs)</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>Jan-20</td><td>95%</td><td>95%</td></tr> <tr><td>Feb-20</td><td>95%</td><td>95%</td></tr> <tr><td>Mar-20</td><td>95%</td><td>95%</td></tr> <tr><td>Apr-20</td><td>95%</td><td>95%</td></tr> <tr><td>May-20</td><td>95%</td><td>95%</td></tr> <tr><td>Jun-20</td><td>95%</td><td>95%</td></tr> <tr><td>Jul-20</td><td>95%</td><td>95%</td></tr> <tr><td>Aug-20</td><td>95%</td><td>95%</td></tr> <tr><td>Sep-20</td><td>95%</td><td>95%</td></tr> <tr><td>Oct-20</td><td>95%</td><td>95%</td></tr> <tr><td>Nov-20</td><td>95%</td><td>95%</td></tr> <tr><td>Dec-20</td><td>95%</td><td>95%</td></tr> <tr><td>Jan-21</td><td>95%</td><td>95%</td></tr> </tbody> </table> <p>3. % residents with a valid Care and Treatment Plan (CTP)</p> <table border="1"> <caption>3. % residents with a valid Care and Treatment Plan (CTP)</caption> <thead> <tr> <th>Month</th> <th>% patients with valid CTP (>18 yrs)</th> <th>Profile</th> </tr> </thead> <tbody> <tr><td>Jan-20</td><td>91%</td><td>91%</td></tr> <tr><td>Feb-20</td><td>91%</td><td>91%</td></tr> <tr><td>Mar-20</td><td>91%</td><td>91%</td></tr> <tr><td>Apr-20</td><td>91%</td><td>91%</td></tr> <tr><td>May-20</td><td>91%</td><td>91%</td></tr> <tr><td>Jun-20</td><td>91%</td><td>91%</td></tr> <tr><td>Jul-20</td><td>91%</td><td>91%</td></tr> <tr><td>Aug-20</td><td>91%</td><td>91%</td></tr> <tr><td>Sep-20</td><td>91%</td><td>91%</td></tr> <tr><td>Oct-20</td><td>91%</td><td>91%</td></tr> <tr><td>Nov-20</td><td>91%</td><td>91%</td></tr> <tr><td>Dec-20</td><td>91%</td><td>91%</td></tr> <tr><td>Jan-21</td><td>91%</td><td>91%</td></tr> </tbody> </table> <p>4. % waiting less than 26 weeks for Psychology Therapy</p> <table border="1"> <caption>4. % waiting less than 26 weeks for Psychology Therapy</caption> <thead> <tr> <th>Month</th> <th>% waiting less than 26 wks for psychological therapy</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>Jan-20</td><td>100%</td><td>95%</td></tr> <tr><td>Feb-20</td><td>100%</td><td>95%</td></tr> <tr><td>Mar-20</td><td>100%</td><td>95%</td></tr> <tr><td>Apr-20</td><td>100%</td><td>95%</td></tr> <tr><td>May-20</td><td>100%</td><td>95%</td></tr> <tr><td>Jun-20</td><td>100%</td><td>95%</td></tr> <tr><td>Jul-20</td><td>100%</td><td>95%</td></tr> <tr><td>Aug-20</td><td>100%</td><td>95%</td></tr> <tr><td>Sep-20</td><td>100%</td><td>95%</td></tr> <tr><td>Oct-20</td><td>100%</td><td>95%</td></tr> <tr><td>Nov-20</td><td>100%</td><td>95%</td></tr> <tr><td>Dec-20</td><td>100%</td><td>95%</td></tr> <tr><td>Jan-21</td><td>100%</td><td>95%</td></tr> </tbody> </table>	Month	% assessments within 28 days (>18 yrs)	Target	Jan-20	96%	95%	Feb-20	96%	95%	Mar-20	96%	95%	Apr-20	96%	95%	May-20	96%	95%	Jun-20	96%	95%	Jul-20	96%	95%	Aug-20	96%	95%	Sep-20	96%	95%	Oct-20	96%	95%	Nov-20	96%	95%	Dec-20	96%	95%	Jan-21	96%	95%	Month	% therapeutic interventions started within 28 days (>18 yrs)	Target	Jan-20	95%	95%	Feb-20	95%	95%	Mar-20	95%	95%	Apr-20	95%	95%	May-20	95%	95%	Jun-20	95%	95%	Jul-20	95%	95%	Aug-20	95%	95%	Sep-20	95%	95%	Oct-20	95%	95%	Nov-20	95%	95%	Dec-20	95%	95%	Jan-21	95%	95%	Month	% patients with valid CTP (>18 yrs)	Profile	Jan-20	91%	91%	Feb-20	91%	91%	Mar-20	91%	91%	Apr-20	91%	91%	May-20	91%	91%	Jun-20	91%	91%	Jul-20	91%	91%	Aug-20	91%	91%	Sep-20	91%	91%	Oct-20	91%	91%	Nov-20	91%	91%	Dec-20	91%	91%	Jan-21	91%	91%	Month	% waiting less than 26 wks for psychological therapy	Target	Jan-20	100%	95%	Feb-20	100%	95%	Mar-20	100%	95%	Apr-20	100%	95%	May-20	100%	95%	Jun-20	100%	95%	Jul-20	100%	95%	Aug-20	100%	95%	Sep-20	100%	95%	Oct-20	100%	95%	Nov-20	100%	95%	Dec-20	100%	95%	Jan-21	100%	95%
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CHILD & ADOLESCENT MENTAL HEALTH (CAMHS)																																																										
Description	Current Performance	Trend																																																								
1. Crisis - % Urgent Assessment by CAMHS undertaken within 48 Hours from receipt of referral	1. In January 2021, 100% of CAMHS patients received an assessment within 48 hours.	<div><div>1. Crisis- assessment within 48 hours</div><table><thead><tr><th>Month</th><th>% urgent assessments within 48 hours</th><th>Target</th></tr></thead><tbody><tr><td>Jan-20</td><td>100%</td><td>100%</td></tr><tr><td>Feb-20</td><td>100%</td><td>100%</td></tr><tr><td>Mar-20</td><td>95%</td><td>100%</td></tr><tr><td>Apr-20</td><td>100%</td><td>100%</td></tr><tr><td>May-20</td><td>100%</td><td>100%</td></tr><tr><td>Jun-20</td><td>100%</td><td>100%</td></tr><tr><td>Jul-20</td><td>100%</td><td>100%</td></tr><tr><td>Aug-20</td><td>100%</td><td>100%</td></tr><tr><td>Sep-20</td><td>100%</td><td>100%</td></tr><tr><td>Oct-20</td><td>100%</td><td>100%</td></tr><tr><td>Nov-20</td><td>100%</td><td>100%</td></tr><tr><td>Dec-20</td><td>100%</td><td>100%</td></tr><tr><td>Jan-21</td><td>100%</td><td>100%</td></tr></tbody></table></div>	Month	% urgent assessments within 48 hours	Target	Jan-20	100%	100%	Feb-20	100%	100%	Mar-20	95%	100%	Apr-20	100%	100%	May-20	100%	100%	Jun-20	100%	100%	Jul-20	100%	100%	Aug-20	100%	100%	Sep-20	100%	100%	Oct-20	100%	100%	Nov-20	100%	100%	Dec-20	100%	100%	Jan-21	100%	100%														
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2. Primary CAMHS (P-CAMHS) - % Routine Assessment by CAMHS undertaken within 28 days from receipt of referral	2. 29% of routine assessments were undertaken within 28 days from referral in January 2021 against a target of 80%.	<div><div>2. and 3. P-CAMHS % assessments and therapeutic interventions within 28 days</div><table><thead><tr><th>Month</th><th>% of assess in 28 days</th><th>% interventions in 28 days</th><th>Target</th></tr></thead><tbody><tr><td>Jan-20</td><td>80%</td><td>80%</td><td>80%</td></tr><tr><td>Feb-20</td><td>80%</td><td>80%</td><td>80%</td></tr><tr><td>Mar-20</td><td>10%</td><td>80%</td><td>80%</td></tr><tr><td>Apr-20</td><td>80%</td><td>80%</td><td>80%</td></tr><tr><td>May-20</td><td>80%</td><td>80%</td><td>80%</td></tr><tr><td>Jun-20</td><td>80%</td><td>80%</td><td>80%</td></tr><tr><td>Jul-20</td><td>80%</td><td>80%</td><td>80%</td></tr><tr><td>Aug-20</td><td>80%</td><td>80%</td><td>80%</td></tr><tr><td>Sep-20</td><td>60%</td><td>80%</td><td>80%</td></tr><tr><td>Oct-20</td><td>10%</td><td>80%</td><td>80%</td></tr><tr><td>Nov-20</td><td>40%</td><td>80%</td><td>80%</td></tr><tr><td>Dec-20</td><td>80%</td><td>80%</td><td>80%</td></tr><tr><td>Jan-21</td><td>29%</td><td>93%</td><td>80%</td></tr></tbody></table><p><i>*Data for April 2020 not available for measures 2 and 3</i></p></div>	Month	% of assess in 28 days	% interventions in 28 days	Target	Jan-20	80%	80%	80%	Feb-20	80%	80%	80%	Mar-20	10%	80%	80%	Apr-20	80%	80%	80%	May-20	80%	80%	80%	Jun-20	80%	80%	80%	Jul-20	80%	80%	80%	Aug-20	80%	80%	80%	Sep-20	60%	80%	80%	Oct-20	10%	80%	80%	Nov-20	40%	80%	80%	Dec-20	80%	80%	80%	Jan-21	29%	93%	80%
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3. Primary CAMHS (P-CAMHS) - % Therapeutic interventions started within 28 days following assessment by LPMHSS	3. 93% of therapeutic interventions were started within 28 days following assessment by LPMHSS in January 2021.																																																									
4. NDD - % Neurodevelopmental Disorder patients receiving a Diagnostic Assessment within 26 weeks	4. 24% of NDD patients received a diagnostic assessment within 26 weeks in January 2021 against a target of 80%.	<div><div>4. NDD- assessment within 26 weeks</div><table><thead><tr><th>Month</th><th>%NDD within 26 weeks</th><th>Target</th></tr></thead><tbody><tr><td>Jan-20</td><td>24%</td><td>80%</td></tr><tr><td>Feb-20</td><td>30%</td><td>80%</td></tr><tr><td>Mar-20</td><td>35%</td><td>80%</td></tr><tr><td>Apr-20</td><td>30%</td><td>80%</td></tr><tr><td>May-20</td><td>25%</td><td>80%</td></tr><tr><td>Jun-20</td><td>25%</td><td>80%</td></tr><tr><td>Jul-20</td><td>25%</td><td>80%</td></tr><tr><td>Aug-20</td><td>20%</td><td>80%</td></tr><tr><td>Sep-20</td><td>15%</td><td>80%</td></tr><tr><td>Oct-20</td><td>15%</td><td>80%</td></tr><tr><td>Nov-20</td><td>15%</td><td>80%</td></tr><tr><td>Dec-20</td><td>20%</td><td>80%</td></tr><tr><td>Jan-21</td><td>24%</td><td>80%</td></tr></tbody></table></div>	Month	%NDD within 26 weeks	Target	Jan-20	24%	80%	Feb-20	30%	80%	Mar-20	35%	80%	Apr-20	30%	80%	May-20	25%	80%	Jun-20	25%	80%	Jul-20	25%	80%	Aug-20	20%	80%	Sep-20	15%	80%	Oct-20	15%	80%	Nov-20	15%	80%	Dec-20	20%	80%	Jan-21	24%	80%														
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5. Specialist CAMHS (S-CAMHS) - % Routine Assessment by SCAMHS undertaken within 28 days from receipt of referral	5. 60% of routine assessments by SCAMHS were undertaken within 28 days in January 2021.	<div><div>5. S-CAMHS % assessments within 28 days</div><table><thead><tr><th>Month</th><th>% S-CAMHS assessments in 28 days</th><th>Target</th></tr></thead><tbody><tr><td>Jan-20</td><td>80%</td><td>80%</td></tr><tr><td>Feb-20</td><td>80%</td><td>80%</td></tr><tr><td>Mar-20</td><td>75%</td><td>80%</td></tr><tr><td>Apr-20</td><td>40%</td><td>80%</td></tr><tr><td>May-20</td><td>75%</td><td>80%</td></tr><tr><td>Jun-20</td><td>80%</td><td>80%</td></tr><tr><td>Jul-20</td><td>80%</td><td>80%</td></tr><tr><td>Aug-20</td><td>80%</td><td>80%</td></tr><tr><td>Sep-20</td><td>80%</td><td>80%</td></tr><tr><td>Oct-20</td><td>75%</td><td>80%</td></tr><tr><td>Nov-20</td><td>60%</td><td>80%</td></tr><tr><td>Dec-20</td><td>60%</td><td>80%</td></tr><tr><td>Jan-21</td><td>60%</td><td>80%</td></tr></tbody></table></div>	Month	% S-CAMHS assessments in 28 days	Target	Jan-20	80%	80%	Feb-20	80%	80%	Mar-20	75%	80%	Apr-20	40%	80%	May-20	75%	80%	Jun-20	80%	80%	Jul-20	80%	80%	Aug-20	80%	80%	Sep-20	80%	80%	Oct-20	75%	80%	Nov-20	60%	80%	Dec-20	60%	80%	Jan-21	60%	80%														
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8. FINANCE UPDATES

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

Description	Current Performance	Trend																																																
Revenue Financial Position – expenditure incurred against revenue resource limit	<ul style="list-style-type: none">The reported revenue financial position for February is an in-month overspend of £1.757m, resulting in a cumulative overspend of £22.333m.The in-month position broadly reflects the HB operational plan deficit, with COVID costs and savings broadly covered by WG funding allocations.The application of this funding provides coverage for the additional costs of incurred and the savings delivery impact of the pandemic.The cumulative overspend compares with the planned operational deficit for 2020/21, which to February is £22.4m.	<div>HEALTH BOARD FINANCIAL PERFORMANCE 2020/21</div> <table border="1"><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>1,749</td><td>1,529</td><td>2,118</td></tr><tr><td>M2</td><td>1,480</td><td>1,480</td><td>2,101</td></tr><tr><td>M3</td><td>1,476</td><td>1,476</td><td>-2,707</td></tr><tr><td>M4</td><td>1,467</td><td>1,467</td><td>2,147</td></tr><tr><td>M5</td><td>1,310</td><td>1,310</td><td>2,358</td></tr><tr><td>M6</td><td>1,394</td><td>1,394</td><td>-19,315</td></tr><tr><td>M7</td><td>1,364</td><td>1,364</td><td>-876</td></tr><tr><td>M8</td><td>1,311</td><td>1,311</td><td>-1,631</td></tr><tr><td>M9</td><td>1,418</td><td>1,418</td><td>-1,418</td></tr><tr><td>M10</td><td>1,307</td><td>1,307</td><td>-1,307</td></tr><tr><td>M11</td><td>1,384</td><td>1,384</td><td>-1,384</td></tr></tbody></table>	Month	Operational Position (£'000)	Savings Delivery (£'000)	Net COVID Impact (£'000)	M1	1,749	1,529	2,118	M2	1,480	1,480	2,101	M3	1,476	1,476	-2,707	M4	1,467	1,467	2,147	M5	1,310	1,310	2,358	M6	1,394	1,394	-19,315	M7	1,364	1,364	-876	M8	1,311	1,311	-1,631	M9	1,418	1,418	-1,418	M10	1,307	1,307	-1,307	M11	1,384	1,384	-1,384
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Description	Current Performance	Trend
Capital Financial Position – expenditure incurred against capital resource limit	<ul style="list-style-type: none"> The forecast outturn capital position for 2020/21 is an overspend of £2.101m. Allocations on 5 schemes are anticipated from WG which will balance this position. The forecast outturn includes latest estimates for COVID expenditure across our surge capacity, Field Hospitals and new ways of working, including home working. 	<p>Capital - Cumulative Performance to Plan</p> <p>£'000</p> <p>Forecast Actual/Revised Forecast</p>
Workforce Spend – workforce expenditure profile	<ul style="list-style-type: none"> The overall pay spend in Month 11 is around £0.76m lower. Across the two months enhancement levels are broadly consistent and this is as expected. There has been a reduction in variable pay costs - £1.4m and an increase in substantive workforce costs £0.6m. The substantive workforce increase is being examined to understand the recurrent impact on the Health Board pay run rate. The variable pay reduction is shown : <ul style="list-style-type: none"> £0.56m Overtime £0.85m Non medical Agency 	<p>Variable Pay Expenditure This Year and Last Year</p> <p>Variable Pay - Last Year Average Variable Pay - Last Year Irregular Sessions WLI Agency - Medical Agency - Non Medical Overtime Bank</p>

Description	Current Performance	Trend																																							
<p>PSPP – pay 95% of Non-NHS invoices within 30 days of receipt of goods or valid invoice</p>	<ul style="list-style-type: none"> The number of invoices paid within 30 days in February exceeded the 95% target for only the 2nd time this financial year, with in month performance being 96.26%. This continued the improvement of recent months with December and January being 93.63% and 94.62% respectively. The February performance has increased the cumulative compliance for the year to date from 93.25% at the end of January to 93.58% at the end of February. However, the cumulative position to the end of February means that whatever the compliance figure achieved in month in March, it will not be possible to achieve a cumulative compliance of 95% for the 2020/21 financial year. 	<p>Percentage of non-NHS invoices paid within 30 days of receipt of goods or valid invoice</p> <table border="1"> <thead> <tr> <th>Month</th> <th>In Month (%)</th> <th>Cumulative (%)</th> </tr> </thead> <tbody> <tr> <td>April</td> <td>87.86</td> <td>87.86</td> </tr> <tr> <td>May</td> <td>94.33</td> <td>92.69</td> </tr> <tr> <td>June</td> <td>96.93</td> <td>92.69</td> </tr> <tr> <td>July</td> <td>94.27</td> <td>93.39</td> </tr> <tr> <td>August</td> <td>94.27</td> <td>93.39</td> </tr> <tr> <td>September</td> <td>92.86</td> <td>92.86</td> </tr> <tr> <td>October</td> <td>89.99</td> <td>92.86</td> </tr> <tr> <td>November</td> <td>93.63</td> <td>93.11</td> </tr> <tr> <td>December</td> <td>94.62</td> <td>93.25</td> </tr> <tr> <td>January</td> <td>96.26</td> <td>93.58</td> </tr> <tr> <td>February</td> <td>96.26</td> <td>93.58</td> </tr> <tr> <td>March</td> <td></td> <td></td> </tr> </tbody> </table>	Month	In Month (%)	Cumulative (%)	April	87.86	87.86	May	94.33	92.69	June	96.93	92.69	July	94.27	93.39	August	94.27	93.39	September	92.86	92.86	October	89.99	92.86	November	93.63	93.11	December	94.62	93.25	January	96.26	93.58	February	96.26	93.58	March		
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APPENDIX 2: INTEGRATED PERFORMANCE DASHBOARD

Harm from Covid itself																							
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21
COVID19 related measures	Number of new COVID19 cases	Local	Jan-21	3,759		Reduce							1,381	303	57	53	66	787	4,663	5,525	11,973	3,759	1,207
	Number of staff referred for Antigen Testing	Local	Jan-21	10,749		Reduce							2,281	2,785	3,102	3,329	3,564	4,765	6,460	8,201	10,065	10,749	11,115
	Number of staff awaiting results of COVID19 test	Local	Jan-21	78		Reduce							0	19	16	1	0	38 (as at 10/10/20)	21 (as at 06/11/20)	41 (as at 06/12/20)	99 (as at 05/01/21)	78 (as at 07/02/21)	69 (as at 06/03/21)
	Number of COVID19 related incidents	Local	Jan-21	84		Reduce							119	67	40	26	39	30	87	141	127	84	63
	Number of COVID19 related serious incidents	Local	Jan-21	0		Reduce							1	0	2	0	11	1	1	1	0	0	0
	Number of COVID19 related complaints	Local	Jan-21	106		Reduce							77	61	39	58	27	30	37	50	83	106	131
	Number of COVID19 related risks	Local	Jan-21	3		Reduce							19	20	19	5	8	2	6	7	10	3	3
	Number of staff self isolated (asymptomatic)	Local	Dec-20	475		Reduce							851	516	474	422	420	353	329	291	475	218	
	Number of staff self isolated (symptomatic)	Local	Dec-20	394		Reduce							860	292	141	70	36	72	132	294	394	316	
	% sickness	Local	Dec-20	6.5%		Reduce							13.2%	6.0%	4.5%	3.6%	3.5%	3.2%	3.5%	4.4%	6.5%	4.0%	

Harm from overwhelmed NHS and social care system																								
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	
Unscheduled Care	% of emergency responses to red calls arriving within (up to and including) 8 minutes	National	Feb-21	70%	65%	65%	✔	59.6% (Jan-21)	2nd (Jan-21)		69%	69%	70%	75%	76%	74%	72%	69%	66%	67%	54%	67%	70%	
	Number of ambulance handovers over one hour	National	Feb-21	219	0			2,997 (Jan-21)	1st (Jan-21)		704	462	61	20	47	120	163	410	355	500	510	195	219	
	Handover hours lost over 15 minutes	Local	Feb-21	0							2,247	1,623	209	125	178	315	418	1,100	916	1,474	1,804	455	0	
	% 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	Feb-21	71%	95%			74.2% (Jan-21)	5th (Jan-21)		74.1%	72.8%	78.4%	83.5%	87.7%	80.1%	80.6%	76.4%	77.2%	75.4%	72.6%	77%	71%	
	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	Feb-21	534	0			5,462 (Jan-21)	3rd (Jan-21)		783	557	131	97	81	223	286	537	494	626	776	570	534	
NOF	% of survival within 30 days of emergency admission for a hip fracture	National	Nov-20	65.4%	12 month ↑			79.8% (Nov-20)	6th (Nov-20)		87.5%	75.0%	78.9%	77.1%	95.5%	93.5%	93.9%	89.4%	89.7%	65.4%				
	% of patients (age 60 years and over) who presented with a hip fracture that received an orthogeriatrician assessment within 72 hours	National	Dec-20	86.0%	12 month ↑			60% (Dec-20)	2nd (Dec-20)		79.0%	79.0%	79.0%	80.0%	82.0%	83.0%	83.0%	84.0%	84.0%	85.0%	86.0%			
Stroke	Direct admission to Acute Stroke Unit (<4 hrs)	National	Feb-21	18%	54.0%			7.1% (Dec-20)	5th out of 6 organisations (Dec-20)		62%	47.4%	Data not available			52.7%	57.4%	51.4%	50.0%	29.8%	23.7%	7.1%	6.8%	18.2%
	CT Scan (<1 hrs) (local)	Local	Feb-21	31%							38%	42.5%				49.1%	48.2%	52.8%	62.5%	42.1%	31.7%	22.7%	42.2%	30.6%
	Assessed by a Stroke Specialist Consultant Physician (< 24 hrs)	National	Feb-21	97%	85.3%			80.7% (Dec-20)	2nd (Dec-20)		97%	97.5%				100.0%	94.6%	97.2%	97.5%	98.2%	96.7%	95.5%	95.6%	97.2%
	Thrombolysis door to needle <= 45 mins	Local	Feb-21	0%	12 month ↑						0%	0.0%				30.0%	25.0%	0.0%	12.5%	11.1%	28.6%	0.0%	12.5%	0.0%
	% compliance against the therapy target of an average of 16.1 minutes if speech and language therapist input per stroke patient	National	Feb-21	61%	12 month ↑			44.6% (Dec-20)	1st (Dec-20)		28%	32.8%				30.7%	44.3%	61.7%	80.1%	86.5%	65.1%	63.4%	65.7%	61.2%
	% 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)															
DTCs	Number of mental health HB DToCs	National	Mar-20	13	12 month ↓	27	✔				16	13	DTC reporting temporarily suspended											
	Number of non-mental health HB DToCs	National	Mar-20	60	12 month ↓	50	✘				69	60	DTC reporting temporarily suspended											
	% critical care bed days lost to delayed transfer of care	National	Q1 20/21	26.2%	Quarter on quarter ↓			5.3% (Q1 20/21)	2nd (Q1 20/21)			26.2%			2.5%									

Harm from overwhelmed NHS and social care system																							
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21
infection control	Cumulative cases of E.coli bacteraemias per 100k pop	National	Feb-21	59.8	<67		✔	60.01 (Jan-21)	3rd (Jan-21)		82.5	81.4	43.8	43.0	46.4	53.8	62.5	64.0	65.7	63.8	60.7	60.0	59.8
	Number of E.Coli bacteraemia cases (Hospital)		Feb-21	6							15	8	6	6	3	8	8	7	14	5	5	6	6
	Number of E.Coli bacteraemia cases (Community)			11							16	15	8	8	14	17	24	16	11	11	7	12	11
	Total number of E.Coli bacteraemia cases			17							31	23	14	14	17	25	32	23	25	16	12	18	17
	Cumulative cases of S.aureus bacteraemias per 100k pop		Feb-21	31.4	<20		✘	24.74 (Jan-21)	6th (Jan-21)		34.8	34.2	31.5	24.7	28.8	26.1	28.2	30.7	31.5	32.7	31.7	31.6	31.4
	Number of S.aureus bacteraemias cases (Hospital)		Feb-21	6							6	4	4	2	4	3	5	7	6	7	6	5	6
	Number of S.aureus bacteraemias cases (Community)			2							2	5	6	4	8	3	7	7	6	6	3	4	2
	Total number of S.aureus bacteraemias cases			8							8	9	10	6	12	6	12	14	12	13	9	9	8
	Cumulative cases of C.difficile per 100k pop		Feb-21	41.5	<26		✘	28.01 (Jan-21)	6th (Jan-21)		36.5	35.4	34.4	42.9	49.5	45.3	50.2	51.2	50.4	48.4	45.7	42.0	41.5
	Number of C.difficile cases (Hospital)		Feb-21	9							11	5	9	6	14	7	9	12	12	8	6	3	9
	Number of C.difficile cases (Community)			2							4	3	2	10	6	4	14	6	3	2	3	0	2
	Total number of C.difficile cases			11							15	8	11	16	20	11	23	18	15	10	9	3	11
	Cumulative cases of Klebsiella per 100k pop		Feb-21	25.8							21.0	21.1	18.8	18.4	21.6	20.0	22.1	21.0	21.9	23.4	24.9	26.4	25.8
	Number of Klebsiella cases (Hospital)		Feb-21	4							2	4	1	4	4	3	6	3	7	7	8	8	4
	Number of Klebsiella cases (Community)			2							1	3	5	2	5	2	4	2	2	4	4	5	2
	Total number of Klebsiella cases			6				70 (Jan-21)	4th (Jan-21)		3	7	6	6	9	5	10	5	9	11	12	13	6
	Cumulative cases of Aeruginosa per 100k pop		Feb-21	5.1							7.6	7.2	6.3	10.7	7.2	6.2	6.7	5.6	5.7	5.8	5.5	5.2	5.1
	Number of Aeruginosa cases (Hospital)		Feb-21	0							1	1	2	3	0	0	0	0	1	1	1	0	0
	Number of Aeruginosa cases (Community)			1							0	0	0	2	0	1	3	0	1	1	0	1	1
	Total number of Aeruginosa cases			1				10 (Jan-21)	2nd (Jan-21)		1	1	2	5	0	1	3	0	2	2	1	1	1
	Hand Hygiene Audits- compliance with WHO 5 moments	Local	Feb-21	93%		95%	✘				93%	99%	98%	99%	98%	98%	94%	96%	97%	97%	96%	95%	93%
Serious incidents and risks	Of the serious incidents due for assurance, the % which were assured within the agreed timescales	National	Feb-21	10%	90%	80%	✘				29%	30%	7%	29%	0%	0%	50%	20%	0%	0%	4%	0%	10%
	Number of new Never Events	National	Feb-21	0	0	0	✔				0	0	0	0	1	0	0	0	1	1	0	0	0
	Number of risks with a score greater than 20	Local	Feb-21	140		12 month ↓	✘				114	108	109	101	110	115	121	117	130	138	146	148	140
	Number of risks with a score greater than 16	Local	Feb-21	233		12 month ↓	✘				204	198	202	193	204	204	210	206	224	224	238	242	233
Pressure Ulcers	Number of pressure ulcers acquired in hospital	Local	Jan-21	51		12 month ↓	✘				41	31	25	29	18	19	37	44	59	42	61	51	
	Number of pressure ulcers developed in the community		Jan-21	25		12 month ↓	✔				25	39	34	33	34	28	25	21	34	29	26	25	
	Total number of pressure ulcers		Jan-21	76		12 month ↓	✘				66	70	59	62	52	47	62	65	93	71	87	76	
	Number of grade 3+ pressure ulcers acquired in hospital		Jan-21	2		12 month ↓	✘				3	1	2	0	1	0	4	0	4	4	3	2	
	Number of grade 3+ pressure ulcers acquired in community		Jan-21	5		12 month ↓	✔				8	8	4	6	9	4	5	5	11	5	7	5	
Inpatient Falls	Total number of grade 3+ pressure ulcers	Local	Jan-21	7		12 month ↓	✘				11	9	6	6	10	4	9	5	15	9	10	7	
	Number of Inpatient Falls		Feb-21	177		12 month ↓	✘				207	210	193	209	196	208	227	219	187	247	247	203	177
Mortality	% of universal mortality reviews (UMRs) undertaken within 28 days of a death	Local	Jan-21	100%	95%	95%	✔				100.0%	95.7%	95.6%	99.3%	100.0%	95.5%	96.6%	99.2%	100.0%	98.1%	99.0%	100.0%	
	Stage 2 mortality reviews required	Local	Jan-21	19							8	9	10	11	10	10	10	11	9	17	12	19	
	% stage 2 mortality reviews completed	Local	Nov-20	36%		100%	✘				44.4%	0.0%	30.0%	27.3%	50.0%	90.0%	50.0%	54.5%	33.3%	35.7%			
	Crude hospital mortality rate (74 years of age or less)	National	Dec-20	1.08%	12 month ↓			1.36% (Dec-20)	4th (Dec-20)		0.72%	0.75%	0.80%	0.88%	0.89%	0.92%	0.90%	0.93%	0.97%	1.01%	1.08%		
	% of deaths scrutinised by a medical examiner	National			Qtr on qtr ↑																		
NEWS	% patients with completed NEWS scores & appropriate responses actioned	Local	Feb-21	96%		98%	✔				95.17%	91.9%	92.0%	93.9%	91.6%	96.6%	92.4%	93.6%	93.9%	94.6%	98.5%	95.0%	96.3%
HAT	Number of potentially preventable hospital acquired thromboses (HAT)	National	Q2 20/21	3	4 quarter ↓			6				2			3			3					
Coding	% of episodes clinically coded within 1 month of discharge	Local	Jan-21	95%	95%	95%	✔				95%	94%	94%	97%	97%	96%	96%	96%	95%	93%	93%	95%	
	% of clinical coding accuracy attained in the NWIS national clinical coding accuracy audit programme	National	2019/20	91%	Annual ↑			93.9% (2019/20)	7th (2019/20)		2019/20= 91.4%												
E-TOC	% of completed discharge summaries (total signed and sent)	Local	Feb-21	63%		100%	✘				67.0%	68%	61%	63%	67%	63%	66%	70%	68%	66%	59%	67%	63%
Workforce	Agency spend as a % of the total paybill	National	Aug-20	3.62%	12 month ↓			4.2% (Aug-20)	5th out of 10 organisations (Aug-20)		4.69%	4.46%	4.04%	3.21%	4.32%	2.81%	3.62%						
	Overall staff engagement score – scale score method	National	2018	3.81	Improvement			3.82 (2018)	7th out of 10 organisations (2018)		2018= 3.81												
	% of headcount by organisation who have had a PADR/medical appraisal in the previous 12 months (excluding doctors and dentists in training)	National	Feb-21	51%	85%	85%	✘	61.9% (Aug-20)	9th out of 10 organisations (Aug-20)		74%	72%	68%	63%	60%	59%	58%	58%	58%	56%	54%	52%	51%
	% 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	Feb-21	80%	85%	85%	✘	80.2% (Aug-20)	7th out of 10 organisations (Aug-20)		82%	83%	82%	79%	79%	80%	80%	80%	80%	80%	80%	80%	80%
	% workforce sickness absence (12 month rolling)	National	Jan-21	7.57%	12 month ↓			5.92% (Aug-20)	10th out of 10 organisations (Aug-20)		6.18%	6.31%	6.65%	6.88%	6.98%	7.03%	7.03%	7.03%	7.07%	7.23%	7.48%	7.57%	
	% staff who would be happy with the standards of care provided by their organisation if a friend or relative needed treatment	National	2018	72%	Improvement			73% (2018)	7th out of 10 organisations (2018)		2018= 72%												

Harm from reduction in non-Covid activity																								
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	
Primary Care	% 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%												
	% 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%												
	% adult dental patients in the health board population re-attending NHS primary dental care between 6 and 9 months	National	Jan-21	5.9%	4 quarter ↓			21.8% (Q3 20/21)	1st (Q3 20/21)		31.8%	29.4%	19.2%	16.8%	14.7%	18.6%	24.7%	23.8%	27.2%	17.2%	12.0%	5.9%		
Cancer	% of patients starting definitive treatment within 62 days from point of suspicion (without adjustments)	National	Feb-21 (draft)	50.0%	12 month ↑			63.5% (Nov-20)	5th out of 6 organisations (Nov-20)		48.0%	58.0%	54.7%	61.8%	59.9%	68.2%	67.4%	62.4%	65.9%	55.4%	61.0%	67.9%	50.0%	
Radiotherapy waiting times	Scheduled (21 Day Target)	Local	Feb-21	35%	80%		✗				28%	56%	49%	46%	57%	71%	63%	60%	75%	58%	71%	45%	35%	
	Scheduled (28 Day Target)	Local	Feb-21	80%	100%		✗				58%	77%	86%	84%	93%	97%	92%	86%	90%	85%	88%	82%	80%	
	Urgent SC (7 Day Target)	Local	Feb-21	23%	80%		✗				52%	48%	45%	33%	65%	57%	57%	54%	43%	31%	50%	50%	23%	
	Urgent SC (14 Day Target)	Local	Feb-21	91%	100%		✗				92%	89%	91%	83%	90%	97%	91%	92%	86%	100%	85%	94%	91%	
	Emergency (within 1 day)	Local	Feb-21	100%	80%		✓				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
	Emergency (within 2 days)	Local	Feb-21	100%	100%		✓				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
	Elective Delay (21 Day Target)	Local	Feb-21	61%	80%		✗				56%	84%	76%	83%	92%	52%	46%	58%	58%	56%	71%	69%	61%	
	Elective Delay (28 Day Target)	Local	Feb-21	75%	100%		✗				73%	94%	88%	100%	100%	97%	75%	60%	75%	73%	88%	89%	75%	
Planned Care	Number of patients waiting > 8 weeks for a specified diagnostics	National	Feb-21	5,087	0			56,480 (Dec-20)	3rd (Dec-20)		424	1,407	5,788	8,346	8,033	7,510	8,070	7,666	6,645	6,610	6,579	6,239	5,087	
	Number of patients waiting > 14 weeks for a specified therapy	National	Feb-21	491	0			4,643 (Dec-20)	6th (Dec-20)		1	51	387	982	1,646	1,554	1,518	1,350	1,135	817	708	584	491	
	% of patients waiting < 26 weeks for treatment	National	Feb-21	48%	95%			52.3% (Dec-20)	7th (Dec-20)		82.3%	80.2%	72.3%	64.0%	59.4%	52.5%	43.7%	41.0%	44.8%	47.6%	48.0%	47.0%	47.9%	
	Number of patients waiting > 26 weeks for outpatient appointment	Local	Feb-21	21,225	0						1,306	2,055	5,499	9,300	11,964	15,721	20,497	23,069	22,050	21,005	21,179	21,208	21,225	
	Number of patients waiting > 36 weeks for treatment	National	Feb-21	32,719	0			226,138 (Dec-20)	3rd (Dec-20)		5,729	6,509	8,355	10,247	13,419	18,078	22,494	26,046	31,508	35,387	35,126	33,991	32,719	
	The number of patients waiting for a follow-up outpatient appointment	National	Feb-21	120,882	35% reduction by March 2021	95,104	✗	754,816 (Dec-20)	5th (Dec-20)		128,674	125,708	123,082	121,434	120,468	120,062	120,969	120,962	120,968	120,874	119,963	119,999	120,882	
	The number of patients waiting for a follow-up outpatients appointment who are delayed over 100%	National	Feb-21	28,862		17,187	✗	202,329 (Dec-20)	5th (Dec-20)		17,747	18,258	19,538	21,026	21,448	22,101	23,209	24,472	26,217	27,156	27,641	28,419	28,862	
	% of R1 ophthalmology patient pathways waiting within target date or within 25% beyond target date for an outpatient appointment	National	Dec-20	47%	95%			43.6% (Dec-20)	3rd (Dec-20)		78.5%	76.2%	69.9%	64.1%	63.4%	55.5%	50.9%	47.7%	45.2%	48.4%	47.3%			
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	Feb-21	7.4%	12 month ↓						6.0%	5.6%	5.2%	3.7%	4.5%	4.4%	4.9%	6.2%	6.5%	6.9%	7.5%	6.7%	7.4%	
	% of patients who did not attend a follow-up outpatient appointment	Local	Feb-21	7.0%	12 month ↓						6.9%	6.5%	4.7%	3.3%	4.4%	4.9%	6.1%	6.6%	6.6%	6.9%	7.8%	7.6%	7.0%	
Theatre Efficiencies	Theatre Utilisation rates	Local	Feb-21	73.0%		90%	✗				66%	35%	6%	11%	16%	42%	90%	75%	75%	74%	59%	65%	73%	
	% of theatre sessions starting late	Local	Feb-21	41.6%		<25%	✗				43%	38%	45%	43%	46%	51%	46%	49%	44%	39%	45%	40%	42%	
	% of theatre sessions finishing early	Local	Feb-21	44.0%		<20%	✗				42%	40%	43%	45%	36%	37%	28%	39%	38%	50%	47%	44%	44%	
Postponed operations	Number of procedures postponed either on the day or the day before for specified non-clinical reasons	National	Dec-20	1,508	> 5% annual ↓			7,019 (Dec-20)	6th (Dec-20)		3,255	3,232	3,091	2,869	2,659	2,391	2,281	2,090	1,888	1,677	1,508			
Treatment Fund	All new medicines must be made available no later than 2 months after NICE and AWMMSG appraisals	National	Q2 20/21	98.8%	100%	100%	✗	98.3% (Q2 20/21)	3rd out of 6 organisations (Q2 20/21)			98.7%			98.7%			98.8%						

Harm from reduction in non-Covid activity																							
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21
Prescribing	Total antibacterial items per 1,000 STAR-PUs	National	Q2 20/21	249.9	4 quarter ↓			230.6 (Q2 20/21)	6th (Q2 20/21)			323.9			243.8			249.9					
	Patients aged 65 years or over prescribed an antipsychotic	National	Q2 20/21	1,511	Quarter on quarter ↓			10,205 (Q2 20/21)	5th (Q2 20/21)			1,476			1,464			1,511					
	Number of women of child bearing age prescribed valproate as a % of all women of child bearing age	National	Q2 20/21	0.23%	Quarter on quarter ↓			0.16% (Q2 20/21)	7th (Q2 20/21)						0.23%			0.23%					
	Opioid average daily quantities per 1,000 patients	National	Q2 20/21	4,369	4 quarter ↓			4,390.4 (Q2 20/21)	3rd (Q2 20/21)			4,329			4,308			4,369					
	Biosimilar medicines prescribed as % of total 'reference' product plus biosimilar	National	Q2 20/21	78.6%	Quarter on quarter ↑			82.6% (Q2 20/21)	4th (Q2 20/21)			80.7%			80.2%			78.6%					
Patient experience	Average rating given by the public (age 16+) for the overall satisfaction with health services in Wales	National	2018/19	6.4	Annual ↑			6.31 (2018/19)	2nd (2018/19)		2018/19= 6.4												
	% of adults (age 16+) who reported that they were very satisfied or fairly satisfied about the care that they received at their GP/family doctor	National	2019/20	88.7%	Annual ↑			88.6% (2019/20)	3rd (2019/20)		2019/20= 88.7%												
	% of adults (age 16+) who reported that they were very satisfied or fairly satisfied about the care that they received at an NHS hospital (Local)	Local	2018/19	92.9%	Annual ↑			93.3%			2018/19= 92.9%												
	Number of friends and family surveys completed	Local	Feb-21	798		12 month ↑	✓				3,014	1,720	150	247	393	502	625	2,804	1,047	787	584	678	798
	% of who would recommend and highly recommend	Local	Feb-21	85%		90%	✗				95%	95%	90%	92%	87%	91%	83%	93%	82%	84%	77%	79%	85%
	% of all-Wales surveys scoring 9 out 10 on overall satisfaction	Local	Feb-21	94%		90%	✓				81%	90%	95%	100%	79%	91%	83%	84%	79%	85%	65%	81%	94%
Complaints	Number of new formal complaints received	Local	Feb-21	94		12 month trend ↓	✗				113	92	37	52	73	77	74	107	121	103	83	78	94
	% concerns that had final reply (Reg 24)/interim reply (Reg 26) within 30 working days of concern received	National	Dec-21	80%	75%	80%	✓	71.9% (Q2 20/21)	5th (Q2 20/21)		76%	48%	81%	81%	75%	79%	72%	82%	75%	82%	80%		
	% of acknowledgements sent within 2 working days	Local	Feb-21	100%		100%	✓				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Research	Number of patients recruited in Health and Care Research Wales clinical research portfolio studies	National	Q1-Q2 20/21	376	10% annual ↑	1,651	✗	6,378 (Q1-2 20/21)	5th out of 10 organisations (Q1-2 20/21)			1,505			210			166					
	Number of patients recruited in Health and Care Research Wales commercially sponsored studies		Q1-Q2 20/21	21	5% annual ↑	215	✗	73 (Q1-2 20/21)	2nd out of 10 organisations (Q1-2 20/21)			205			2			19					

Harm from wider societal actions/lockdown																							
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21
Early years measures	% of babies who are exclusively breastfed at 10 days old	National	2019/20	34.2%	Annual ↑			35.3% (2019/20)	5th (2019/20)		2019/20= 34.2%												
	% children who received 3 doses of the hexavalent '6 in 1' vaccine by age 1	National	Q3 20/21	96.7%	95%			95.8% (Q2 20/21)	4th (Q2 20/21)			96%			96.5%			96.5%			96.7%		
	% of children who received 2 doses of the MMR vaccine by age 5	National	Q3 20/21	92.0%	95%			92.0% (Q2 20/21)	5th (Q2 20/21)			92%			90.8%			91.7%			92.0%		
Smoking cessation	% of adult smokers who make a quit attempt via smoking cessation services	National	Q1-Q2 20/21	1.66%	5% annual target			1.65% (Q1-2 20/21)	4th (Q1-2 20/21)			2.87%						1.66%					
Alcohol	European age standardised rate of alcohol attributed hospital admissions for individuals resident in Wales	National	Q2 20/21	331.7	4 quarter ↓			364.3 (Q2 20/21)	2nd (Q2 20/21)			390.5			279.6			331.7					
	% of people who have been referred to health board services who have completed treatment for alcohol abuse	National	Q2 20/21	23%	4 quarter ↑			64% (Q3 20/21)	6th (Q2 20/21)			42.3%			32.8%			23.2%			39.5%		
Influenza	% uptake of influenza among 65 year olds and over	National	Feb-21	75.4%	75%			76.4% (Jan-21)	5th (Jan-21)		68.0%	68.1%	Data collection restarts October 2020						65.6%	72.4%	74.8%	75.2%	75.4%
	% uptake of influenza among under 65s in risk groups	National	Feb-21	49.4%	55%			50.7% (Jan-21)	5th (Jan-21)		43.4%	44.0%							34.4%	42.8%	47.2%	48.7%	49.4%
	% uptake of influenza among pregnant women	National	2019/20	86.1%	75%			78.5% (2019/20)	5th out of 10 organisations (2019/20)			78.2%							Data not available				
	% uptake of influenza among children 2 to 3 years old	Local	Feb-21	53.4%	50%			56.1% (Jan-21)	5th (Jan-21)		50.3%	50.3%							35.7%	48.8%	52.5%	53.2%	53.4%
	% uptake of influenza among healthcare workers	National	Feb-21	63.4%	60%			58.7% (2019/20)	7th out of 10 organisations (2019/20)		58.7%	58.7%							56.2%	62.9%	63.0%	63.4%	63.4%
Screening services	Uptake of screening for bowel cancer	National	2018/19	57.0%	60%			57.3% (2018/19)	4th (2018/19)		2018/19= 57.0% (data relates to												
	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												
	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												
CAMHS	% of urgent assessments undertaken within 48 hours from receipt of referral (Crisis)	Local	Jan-21	100%		100%	✓				100%	94%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
	% Patients with Neurodevelopmental Disorders (NDD) receiving a Diagnostic Assessment within 26 weeks	National	Jan-21	24%	80%	80%	✗	27.9% (Dec-20)	5th (Dec-20)		35%	38%	35%	30%	28%	30%	24%	21%	22%	24%	26%	24%	
	% Patients waiting less than 28 days for a first outpatient appointment for CAMHS	National	Jan-21	53%	80%	80%	✗	42.4% (Dec-20)	5th (Dec-20)		93%	67%	44%	78%	100%	100%	100%	98%	90%	88%	61%	53%	
	P-CAMHS - % of Routine Assessment by CAMHS undertaken within 28 days from receipt of referral	National	Jan-21	29%		80%	✗	61.4% (Dec-20)	3rd (Dec-20)		0%	14%	11%	89%	100%	100%	100%	62%	29%	41%	73%	29%	
	P-CAMHS - % of therapeutic interventions started within 28 days following assessment by LPMHSS	National	Jan-21	93%		80%	✓	82.8% (Dec-20)	1st (Dec-20)		100%	94%	85%	100%	100%	100%	86%	100%	100%	100%	100%	93%	
	S-CAMHS - % of Routine Assessment by SCAMHS undertaken within 28 days from receipt of referral	Local	Jan-21	60%		80%	✗				93%	75%	46%	72%	100%	100%	100%	98%	79%	62%	58%	60%	
	% residents in receipt of CAMHS to have a valid Care and Treatment Plan (CTP)	National	Jan-21	83%		90%	✗	85.6% (Dec-20)	5th (Dec-20)		99%	99%	99%	97%	91%	98%	98%	81%	82%	81%	82%	83%	
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	Jan-21	96%	80%	80%	✓	81.6% (Dec-20)	3rd (Dec-20)		97%	97%	99%	99%	100%	99%	99%	97%	99.5%	98%	99%	96%	
	% of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS (over 18 years of age)	National	Jan-21	95%	80%	80%	✓	87.0% (Dec-21)	2nd (Dec-20)		94%	97%	97%	100%	96%	96%	88%	94%	93%	98%	95%	95%	
	% patients waiting < 26 weeks to start a psychological therapy in Specialist Adult Mental Health	National	Jan-21	100%	95%	95%	✓	58.2% (Dec-20)	1st (Dec-20)		100%	100%	93%	89%	84%	89%	91%	99%	99.7%	100%	100%		
	% residents in receipt of secondary MH services (all ages) who have a valid care and treatment plan (CTP)	National	Jan-21	91%	90%	90%	✓	87.3% (Dec-20)	4th (Dec-20)		92%	91%	93%	92%	92%	94%	92%	90%	91%	91%	89%	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%												