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Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	25th January 2022	Agenda Item	3.1
Report Title	Quality & Safety Performance Report		
Report Author	Meghann Protheroe, Head of Performance		
Report Sponsor	Darren Griffiths, Director of Finance and Performance		
Presented by	Darren Griffiths, Director of Finance and Performance		
Freedom of Information	Open		
Purpose of the Report	The purpose of this report is to provide an update on the current performance of the Health Board at the end of the most recent reporting window in delivering key local performance measures as well as the national measures outlined in the 2021/22 NHS Wales Delivery Framework.		
Key Issues	<p>The Quality and Safety Report is a routine report that provides an overview of how the Health Board is performing against the National Delivery measures and key local quality and safety measures.</p> <p>Historically Welsh Government publish a revised NHS Wales Delivery Framework on an annual basis. In 2021/22 a new Single Outcomes Framework for Health and Social Care was due to be published however, development of the framework was delayed due to the COVID19 pandemic. The updated National Delivery Framework 2021/22 was published in October 2021, with the updated framework measures being presented at the November 2021 Management Board meeting. Full updates outlined within the Delivery Framework will be reflected in the December 2021 Quality and Safety Report. The intention of the updated integrated framework measures is to demonstrate how patients and populations are better off through the delivery of services and allowing a different balance across our traditional services.</p> <p>The Health Board continues to refine the organisation's annual plan and develop recovery trajectories. Trajectories for recovery of unscheduled care and cancer performance were submitted for discussion at the September Performance and Finance Committee. Performance against these trajectories continue to be measured.</p> <p>Key high level issues to highlight this month are as follows:</p> <p>2021/22 Delivery Framework</p>		

	<p>COVID19- The number of new cases of COVID19 has increased in December 2021, with 18,167 new cases being reported in-month. The occupancy rate of confirmed COVID patients in critical care beds remains at a low rate, however figures continue to increase for Covid positive patients utilising general beds.</p> <p>Unscheduled Care- Demand for emergency department care within Swansea Bay University (SBU) Health Board increased from January 2021 to June 2021 but has since then been on modest reduction trajectory. Attendances have decreased in December 2021 to 9,082 from 10,138 in November 2021. The Health Board's performance against the 4-hour measure deteriorated from 73.46% in November 2021 to 70.15% in December 2021. The number of patients waiting over 12 hours in Accident and Emergency (A&E) increased slightly from 1,055 in November 2021 to 1,101 in December 2021.</p> <p>Planned Care- December 2021 saw a 3% in-month increase in the number of patients waiting over 26 weeks for a new outpatient appointment. Additionally, the number of patients waiting over 36 weeks increased by 1.2% to 37,504. However, December 2021 saw a 17% reduction in the number referrals received by secondary care. Therapy waiting times have increased in December 2021 to 889 from 629 in November 2021.</p> <p>Cancer- November 2021 saw 63.4% performance against the Single Cancer Pathway measure of patients receiving definitive treatment within 62 days (measure reported a month in arrears). The backlog of patients waiting over 63 days has increased in January 2021 to 673.</p> <p>Mental Health- performance against the Mental Health Measures continues to be maintained. All Welsh Government targets were achieved in November 2021. Psychological therapies within 26 weeks continue to be maintained at 100%.</p> <p>Child and Adolescent Mental Health Services (CAMHS)-Access times for crisis performance has been maintained at 97% November 2021. Neurodevelopmental Disorders (NDD) access times within 26 weeks continues to be a challenge, however performance has increased from 34% in October 2021 to 37% in November 2021 against a target of 80%.</p> <p>Serious Incidents closures- In November 2021, performance against the 80% target of submitting closure forms within 60 working days was 0%.</p> <p>Patient Experience- A new feedback system was introduced in March 2021, which has resulted in no data being reported for April 2021 as the system, was not fully operational until the end of April</p>
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	2021. December 2021 data is included in this report showing 93% satisfaction through 2,776 surveys completed.			
Specific Action Required	Information	Discussion	Assurance	Approval
	✓		✓	
Recommendations	Members are asked to: <ul style="list-style-type: none"> • NOTE- current Health Board performance against key measures and targets. 			

QUALITY & SAFETY PERFORMANCE REPORT

1. INTRODUCTION

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

2. BACKGROUND

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

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

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

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

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

Appendix 1 provides an overview of the Health Board's latest performance against the Delivery Framework measures along with key local quality and safety measures. A number of local COVID-19 specific measures have been included in this iteration of the performance report.

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

3. GOVERNANCE AND RISK ISSUES

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

4. FINANCIAL IMPLICATIONS

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

5. RECOMMENDATION

Members are asked to:

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

Governance and Assurance		
Link to Enabling Objectives (please choose)	Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities	
	Partnerships for Improving Health and Wellbeing	<input checked="" type="checkbox"/>
	Co-Production and Health Literacy	<input checked="" type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input checked="" type="checkbox"/>
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	<input checked="" type="checkbox"/>
	Partnerships for Care	<input checked="" type="checkbox"/>
	Excellent Staff	<input checked="" type="checkbox"/>
	Digitally Enabled Care	<input checked="" type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input checked="" type="checkbox"/>
Health and Care Standards		
(please choose)	Staying Healthy	<input checked="" type="checkbox"/>
	Safe Care	<input checked="" type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input checked="" type="checkbox"/>
	Timely Care	<input checked="" type="checkbox"/>
	Individual Care	<input checked="" type="checkbox"/>
	Staff and Resources	<input checked="" type="checkbox"/>
Quality, Safety and Patient Experience		
<p>The performance report outlines performance over the domains of quality and safety and patient experience, and outlines areas and actions for improvement. Quality, safety and patient experience are central principles underpinning the National Delivery Framework and this report is aligned to the domains within that framework.</p> <p>There are no directly related Equality and Diversity implications as a result of this report.</p>		
Financial Implications		
At this stage in the financial year there are no direct impacts on the Health Board's financial bottom line resulting from the performance reported herein.		
Legal Implications (including equality and diversity assessment)		
A number of indicators monitor progress in relation to legislation, such as the Mental Health Measure.		
Staffing Implications		
A number of indicators monitor progress in relation to Workforce, such as Sickness and Personal Development Review rates. Specific issues relating to staffing are also addressed individually in this report.		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
<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. 		

<ul style="list-style-type: none"> • Prevention – the NHS Wales Delivery framework provides a measurable mechanism to evidence how the NHS is positively influencing the health and well-being of the citizens of Wales with a particular focus upon maximising people’s physical and mental well-being. • Integration – this integrated performance report brings together key performance measures across the seven domains of the NHS Wales Delivery Framework, which identify the priority areas that patients, clinicians and stakeholders wanted the NHS to be measured against. The framework covers a wide spectrum of measures that are aligned with the Well-being of Future Generations (Wales) Act 2015. • Collaboration – in order to manage performance, the Corporate Functions within the Health Board liaise with leads from the Service Groups as well as key individuals from partner organisations including the Local Authorities, Welsh Ambulance Services Trust, Public Health Wales and external Health Boards. • Involvement – Corporate and Service Groups leads are key in identifying performance issues and identifying actions to take forward. 	
Report History	The last iteration of the Quality & Safety Performance Report was presented to Quality & Safety committee in December 2021. This is a routine monthly report.
Appendices	Appendix 1: Quality & Safety performance report



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Appendix 1- Quality & Safety Performance Report

January 2022



CONTENTS PAGE

	Page numbers:
1. <u>OVERVIEW – KEY PERFORMANCE INDICATORS SUMMARY</u>	11
2. <u>QUADRANTS OF HARM SUMMARY</u>	12
3. HARM QUADRANT- HARM FROM COVID ITSELF	
3.1 <u>Overview</u>	13
3.2 Updates on key measures:	14
• <u>COVID cases and Testing</u>	15
• <u>Staff absence due to COVID</u>	
4. HARM QUADRANT- HARM FROM OVERWHELMED NHS AND SOCIAL CARE SYSTEM	
4.1 <u>Overview</u>	16-19
4.2 Updates on key measures:	
• <u>Unscheduled care</u>	20-28
• <u>Fractured Neck of Femur (#NOF)</u>	29-30
• <u>Healthcare Acquired Infections</u>	31-33
• <u>Pressure Ulcers</u>	33
• <u>Serious Incidents</u>	34
• <u>Inpatient Falls</u>	35
• <u>Discharge Summaries</u>	35
• <u>Crude Mortality</u>	36
5. HARM QUADRANT- REDUCTION IN NON-COVID ACTIVITY	
5.1 <u>Overview</u>	37-38
5.2 <u>Primary and Community Care Overview</u>	39
5.3 Updates on key measures:	
• <u>Planned care</u>	40-44
• <u>Cancer</u>	45-48

• Follow-up appointments	49
• Patient Experience	50
• Complaints	51
 6. HARM QUADRANT- HARM FROM WIDER SOCIETAL ACTIONS/ LOCKDOWN	
6.1 Overview	52-53
6.2 Updates on key measures:	
• Adult Mental Health	54
• Child and Adolescent Mental Health	55
 APPENDIX 2: SUMMARY OF KEY MEASURES BY SERVICE GROUP	56-60
 APPENDIX 3: INTEGRATED PERFORMANCE DASHBOARD	61-64

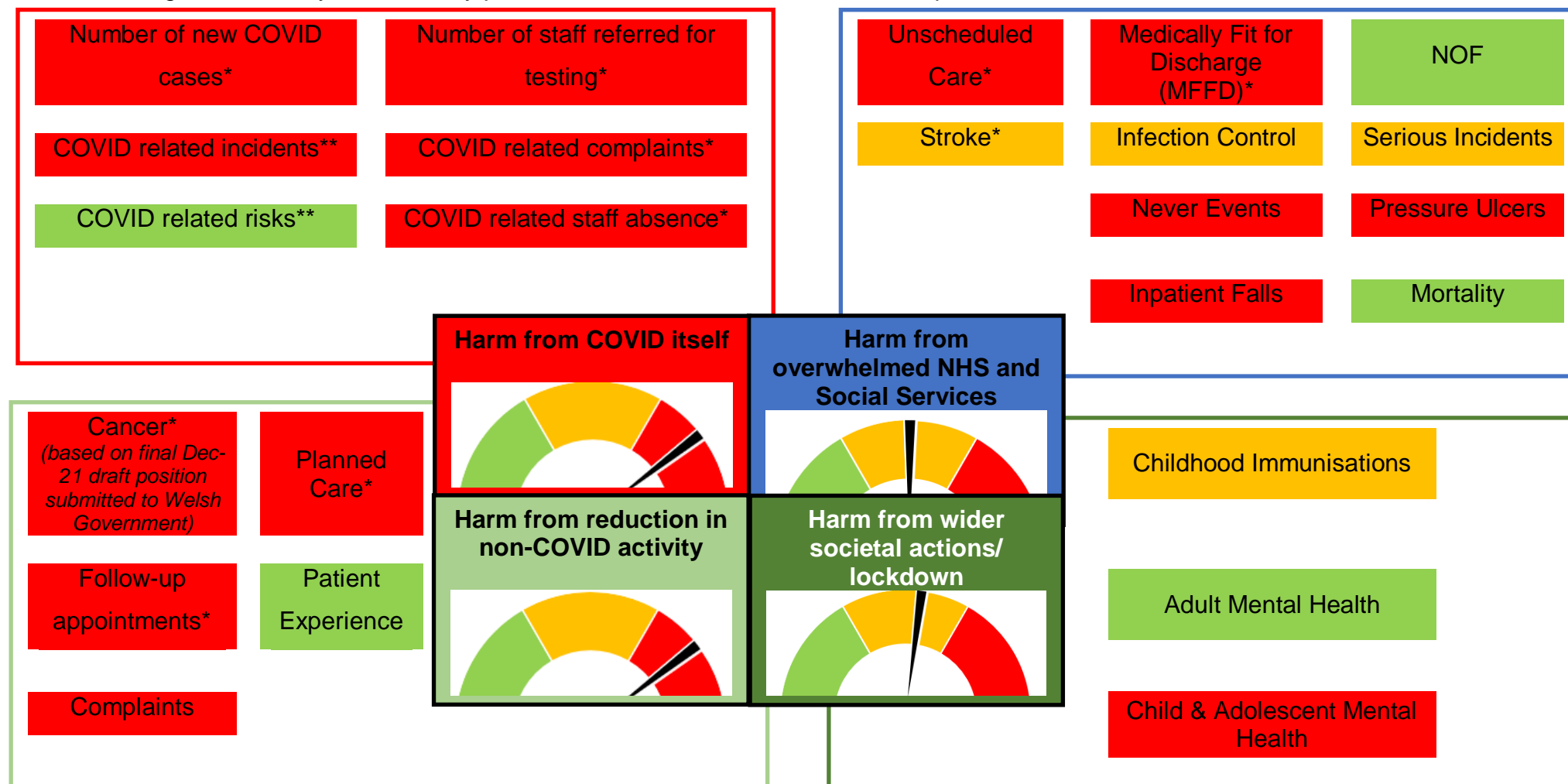
1. OVERVIEW- KEY PERFORMANCE INDICATORS SUMMARY

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

- Q&S report detail is reduced to reflect data capture currently available.
- Performance against the Mental Health Measures continues to be maintained. All Welsh Government targets were achieved in November 2021. Psychological therapies within 26 weeks continue to be maintained at 100%. Access times for routine CAMHS still continue to not meet the required targets. Crisis performance has been maintained at 97% compliance in November.
- Demand for emergency department care within Swansea Bay University (SBU) Health Board increased from January 2021 to June 2021 but has since then been on modest reduction trajectory. Attendances have decreased in December 2021 to 9,082 from 10,138 in November 2021. The Health Board's performance against the 4-hour measure deteriorated from 73.46% in November 2021 to 70.15% in December 2021. The number of patients waiting over 12 hours in Accident and Emergency (A&E) increased slightly from 1,055 in November 2021 to 1,101 in December 2021.
- Planned care system is still challenging and December 2021 saw a 3% in-month increase in the number of patients waiting over 26 weeks for a new outpatient appointment. Additionally, the number of patients waiting over 36 weeks increased by 1.2% to 37,504. However, December 2021 saw a 17% reduction in the number referrals received by secondary care.
- Therapy waiting times have increased in December 2021 to 889 from 629 in November 2021.
- November 2021 saw 63.4% performance against the Single Cancer Pathway measure of patients receiving definitive treatment within 62 days (measure reported a month in arrears). The backlog of patients waiting over 63 days has increased in January 2021 to 673.
- Concern response performance was below the Welsh Government target in October 2021, reporting 67% compliance against the 75% target.
- The number of formal complaints received in October 2021 was 135 which is a 14.2% increase on the number seen in September 2021.
- Health Board Friends & Family patient satisfaction level in December 2021 was 93% and 2,776 surveys were completed.
- There were two Serious Incidents (SI's) reported to Welsh Government in December 2021.
- There were no Never events reported for December 2021.
- Fractured Neck of Femur performance in November 2021 continues to be broadly at Welsh National levels (see detail below) and showing an improved position compared with March 2019-2020 for most indicators.

2. QUADRANTS OF HARM SUMMARY

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



NB- RAG status is against national or local target

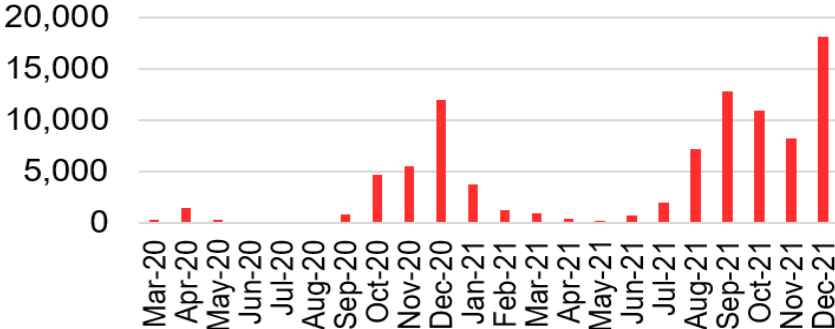
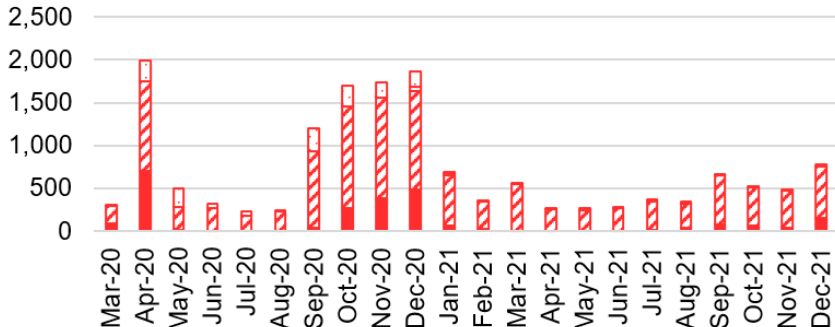
** Data not available

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

3. HARM QUADRANT- HARM FROM COVID ITSELF

Overview

		Harm quadrant- Harm from Covid itself															
Measure	Locality	National/ Local Target	Internal profile	Trend	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21
Number of new COVID19 cases*	HB Total			///	11,976	3,759	1,208	907	406	189	708	1,946	7,177	12,839	10,918	8,247	18,167
Number of staff referred for Antigen Testing	HB Total			///	1,864	684	366	568	274	267	281	367	406	673	524	494	787
Number of staff awaiting results of COVID19 test*	HB Total			///	99 (as at 05/01/21)	78 (as at 07/02/21)	69 (as at 06/03/21)	2 (as at 11/04/21)	0	0	0	0	0	0	0	0	0
Number of COVID19 related incidents*	HB Total			///	127	84	63	53	74	67	23	24	36	36	47	53	54
Number of COVID19 related serious incidents*	HB Total			///	0	0	0	0	0	0	0	0	0	0	0		
Number of COVID19 related complaints*	HB Total			///	83	106	131	98	38	13	16	4	6	3	4	14	20
Number of COVID19 related risks*	HB Total			///	10	3	3	3	2	2	1	1	1	0	0		
Number of staff self isolated (asymptomatic)*	Medical			///	55	7	2	3	2	1	3	7	5	20	13	6	0
	Nursing Registered			///	152	61	40	32	28	18	21	19	35	67	38	20	46
	Nursing Non Registered			///	81	57	33	35	25	20	18	24	21	43	28	12	37
	Other			///	187	93	85	75	29	22	28	21	54	97	41	27	43
Number of staff self isolated (symptomatic)*	Medical			///	34	16	5	1	1	1	2	3	7	15	10	5	3
	Nursing Registered			///	145	112	52	44	39	33	23	28	36	57	51	34	166
	Nursing Non Registered			///	68	88	49	29	24	20	18	18	27	44	34	20	94
	Other			///	147	100	50	34	23	17	7	18	44	88	85	61	130
% sickness*	Medical			///	8.3%	2.2%	0.7%	0.4%	0.3%	0.2%	0.5%	0.9%	1.3%	3.6%	2.4%	1.2%	0.3%
	Nursing Registered			///	7.4%	4.3%	2.3%	1.9%	1.6%	1.2%	1.1%	1.4%	1.8%	3.1%	2.2%	1.3%	5.3%
	Nursing Non Registered			///	7.3%	7.0%	3.9%	3.1%	2.4%	1.9%	1.8%	1.8%	2.3%	4.3%	3.1%	1.6%	6.5%
	Other			///	5.4%	3.1%	2.2%	1.7%	0.8%	0.6%	0.6%	0.7%	1.6%	2.9%	2.0%	1.4%	2.7%
	All			///	6.5%	4.0%	2.4%	1.9%	1.3%	1.0%	0.9%	1.1%	1.7%	3.2%	2.3%	1.4%	3.9%

COVID TESTING		
Description	Current Performance	Trend
<p><i>1. Number of new COVID19 cases in Swansea Bay population area</i></p>	<p>1. Number of new COVID cases In December 2021, there were an additional 18,167 positive cases recorded bringing the cumulative total to 91,545 in Swansea Bay since March 2020.</p>	<p>1.Number of new COVID19 cases for Swansea Bay population</p>  <p>■ New positive COVID19 cases</p>
	<p>4. Staff referred for Antigen testing The cumulative number of staff referred for COVID testing between March 2020 and December 2021 is 15,756 of which 16% have been positive (Cumulative total).</p>	<p>2.Outcome of staff referred for Antigen testing</p>  <p>■ Positive ▨ Negative □ In Progress □ Unknown/blank</p>

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

4.1 Overview

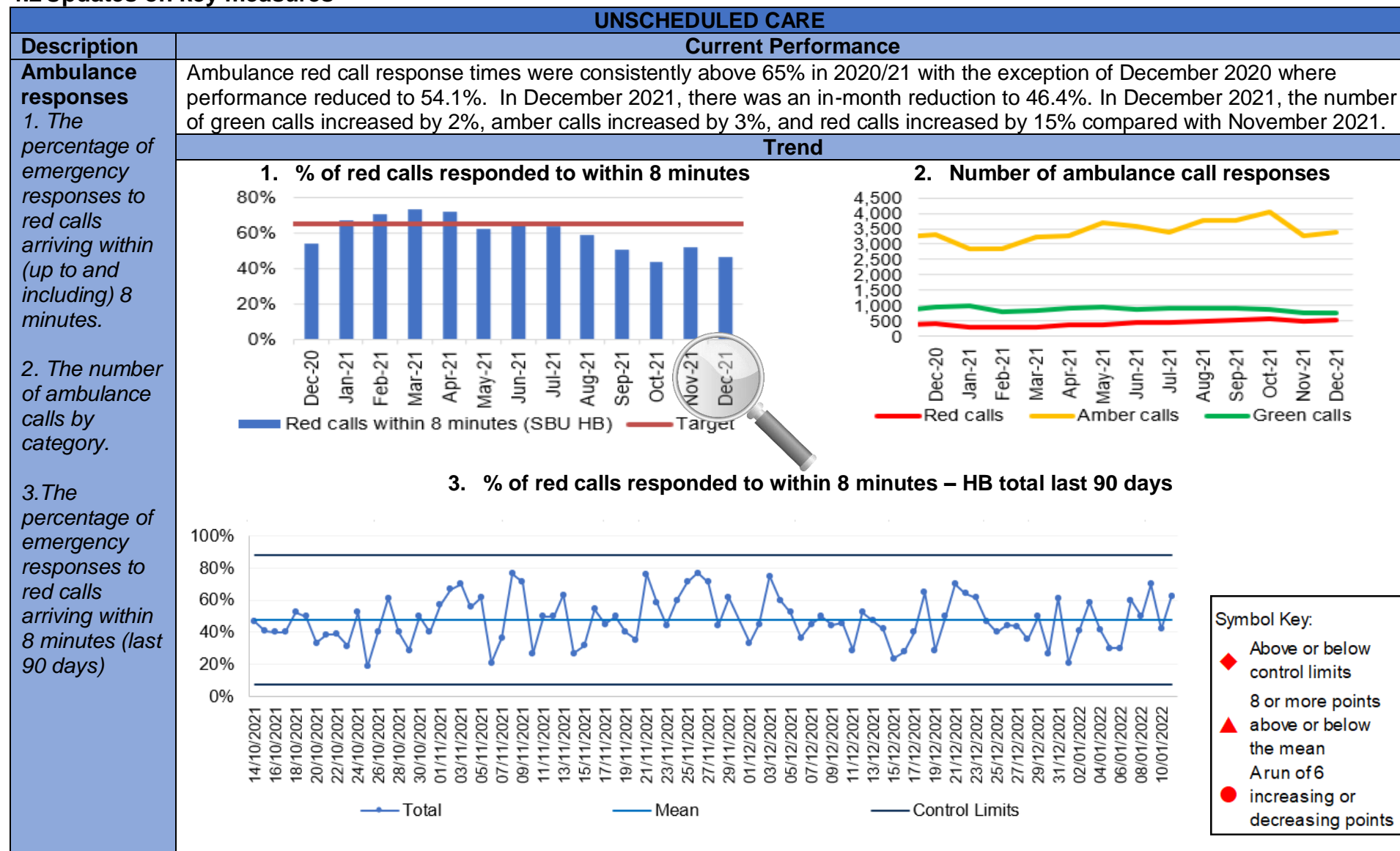
		Internal profile	Trend																
Measure	Locality			Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21			
		Unscheduled Care																	
Number of ambulance handovers over one hour*	Morrison			499	187	215	225	332	462	528	607	711	622	633	655	591			
	Singleton			11	8	4	6	5	15	19	9	15	20	15	15	21			
	Total			510	195	219	231	337	477	547	616	726	642	648	670	612			
% 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*	Morrison			62.7%	68.2%	61.0%	67.7%	62.8%	61.7%	59.0%	61.5%	62.3%	59.7%	58.8%	60.0%	58.5%			
	NPTH			99.0%	99.6%	99.7%	98.5%	99.2%	99.0%	97.7%	97.8%	99.4%	98.3%	99.4%	99.0%	94.9%			
	Total			72.6%	76.8%	71.3%	76.9%	74.9%	73.4%	72.4%	74.7%	75.0%	73.1%	72.0%	73.5%	70.2%			
Number of patients who spend 12 hours or more in all hospital major and minor care facilities from arrival until admission, transfer or discharge*	Morrison			775	570	534	457	630	684	879	1,013	1,059	1,250	1,275	1,054	1,100			
	NPTH			1	0	0	0	1	0	1	1	1	0	1	1	1			
	Total			776	570	534	457	631	684	880	1,014	1,060	1,250	1,276	1,055	1,101			
		Stroke																	
% of patients who have a direct admission to an acute stroke unit within 4 hours*	Morrison			7.1%	6.8%	18.2%	20.4%	20.3%	27.5%	28.3%	13.5%	15.4%	15.4%	0.0%	11.4%	16.7%			
	Total			7.1%	6.8%	18.2%	20.4%	20.3%	27.5%	28.3%	13.5%	15.4%	15.4%	0.0%	11.4%	16.7%			
% of patients who receive a CT scan within 1 hour*	Morrison			22.7%	42.2%	30.6%	40.8%	29.7%	36.5%	29.6%	34.6%	48.7%	34.1%	16.7%	40.9%	35.1%			
	Total			22.7%	42.2%	30.6%	40.8%	29.7%	36.5%	29.6%	34.6%	48.7%	34.1%	16.7%	40.9%	35.1%			
% of patients who are assessed by a stroke specialist consultant physician within 24 hours*	Morrison			95.5%	95.6%	97.2%	100.0%	96.9%	98.1%	100.0%	100.0%	92.3%	90.2%	100.0%	95.5%	97.3%			
	Total			95.5%	95.6%	97.2%	100.0%	96.9%	98.1%	100.0%	100.0%	92.3%	90.2%	100.0%	95.5%	97.3%			
% of thrombolysed stroke patients with a door to door needle time of less than or equal to 45 *minutes	Morrison			0.0%	12.5%	0.0%	55.6%	25.0%	0.0%	33.3%	28.6%	20.0%	0.0%	0.0%	9.1%	10.0%			
	Total			0.0%	12.5%	0.0%	55.6%	25.0%	0.0%	33.3%	28.6%	20.0%	0.0%	0.0%	9.1%	10.0%			
% of patients receiving the required minutes for speech and language therapy	Morrison			63.4%	65.7%	61.2%	55.9%	47.1%	39.7%	41.9%	45.4%	58.9%	58.6%	64.6%	54.4%	45.6%			
		Fractured Neck of Femur (NOF)																	
Prompt orthogeriatric assessment- % patients receiving an assessment by a senior geriatrician within 72 hours of presentation	Morrison			86.0%	86.8%	87.6%	88.3%	89.7%	90.7%	91.0%	90.5%	88.2%	87.3%	88.0%	88.7%				
Prompt surgery - % patients undergoing surgery by the day following presentation with hip fracture	Morrison			54.1%	55.5%	56.3%	56.2%	56.6%	57.2%	60.0%	59.5%	59.4%	58.4%	57.7%	57.1%				
NICE compliant surgery - % of operations consistent with the recommendations of NICE CG124	Morrison			68.5%	70.3%	71.2%	70.5%	70.4%	70.1%	71.0%	71.2%	69.8%	69.4%	69.9%	70.3%				
Prompt mobilisation after surgery - % of patients out of bed (standing or hoisted) by the day after operation	Morrison			74.3%	74.1%	74.1%	74.6%	75.4%	75.9%	76.0%	75.7%	74.4%	72.6%	71.1%	71.2%				
Not delirious when tested- % patients (<4 on 4AT test) when tested in the week after operation	Morrison			73.5%	74.4%	75.2%	75.3%	75.4%	75.9%	76.0%	76.8%	77.7%	76.1%	76.8%	77.0%				
Return to original residence- % patients discharged back to original residence, or in that residence at 120 day follow-up	Morrison			75.6%	73.7%	74.3%	70.7%	70.2%	71.3%	73.0%	68.4%	67.7%	66.1%	70.4%					
30 day mortality - crude and adjusted figures, noting ONS data only correct after around 6 months	Morrison			8.4%	7.5%														
% of survival within 30 days of emergency admission for a hip fracture	HB Total			68.0%	65.3%	70.7%	59.6%	71.1%	72.1%	78.3%	84.8%	86.7%	72.2%						

Measure	Locality	Internal profile	Trend	SBU												
				Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21
				Healthcare Acquired Infections												
Number of E.Coli bacteraemia cases	PCCS Community	10		7	12	11	19	20	15	23	15	25	12	12	17	12
	PCCS Hospital	0		0	0	0	0	0	1	0	0	0	1	0	0	0
	MH&LD	0		0	0	0	0	0	0	0	0	0	0	0	0	0
	Morrison	4		2	3	3	5	5	8	2	3	4	5	5	3	2
	NPTH	0		0	1	0	1	2	2	1	3	2	2	1	0	0
	Singleton	3		3	2	3	3	5	0	2	2	3	1	1	2	3
	Total	17		12	18	17	28	32	26	28	23	34	21	19	22	17
Number of S.aureus bacteraemia cases	PCCS Community	3		3	4	2	7	9	10	2	4	4	4	7	3	4
	PCCS Hospital	0		0	0	0	0	0	0	0	0	0	0	0	0	0
	MH&LD	0		0	0	0	0	0	0	0	0	0	0	0	0	0
	Morrison	2		1	5	4	2	2	1	3	3	4	8	9	0	5
	NPTH	0		1	0	0	0	0	0	0	0	0	1	0	0	0
	Singleton	3		4	0	3	2	2	4	2	4	4	4	2	1	0
	Total	8		9	9	9	11	13	15	7	11	12	17	18	4	9
Number of C.difficile cases	PCCS Community	4		3	0	2	5	5	5	6	7	2	5	5	10	1
	PCCS Hospital	0		0	0	0	0	0	0	0	1	0	0	0	0	0
	MH&LD	0		0	0	0	0	0	0	0	0	0	0	0	1	0
	Morrison	3		5	0	5	3	10	5	3	7	10	6	7	6	9
	NPTH	1		0	1	2	1	1	1	1	0	1	0	0	0	0
	Singleton	2		1	2	2	3	4	1	2	8	9	3	3	3	2
	Total	10		9	3	11	12	20	12	12	23	22	14	15	20	12
Number of Klebsiella cases	PCCS Community	4		4	5	2	9	5	2	7	1	4	3	5	5	3
	PCCS Hospital	0		0	0	0	0	0	0	0	0	0	0	0	0	0
	MH&LD	0		0	0	0	0	0	0	0	0	0	0	0	0	0
	Morrison	3		4	7	2	0	3	2	1	2	4	6	6	1	4
	NPTH	1		2	0	1	0	1	0	0	0	0	0	0	0	0
	Singleton	1		2	1	1	1	0	1	4	0	0	2	2	1	2
	Total	9		12	13	6	10	9	5	12	3	8	11	13	7	9
Number of Aeruginosa cases	PCCS Community	0		0	1	1	1	1	1	1	1	1	0	0	0	1
	PCCS Hospital	0		0	0	0	0	0	0	0	0	0	0	0	0	0
	MH&LD	0		0	0	0	0	0	0	0	0	0	0	0	0	0
	Morrison	1		1	0	0	0	2	0	1	0	0	2	0	2	2
	NPTH	0		0	0	0	0	0	0	0	0	0	0	0	0	1
	Singleton	0		0	0	0	0	0	0	0	0	1	0	0	1	0
	Total	1		1	1	1	1	3	1	2	1	2	2	0	3	4
Compliance with hand hygiene audits	PCCS			100.0%	100.0%	100.0%	100.0%	96.3%	-	100.0%	100.0%	100.0%	100.0%	-	100.0%	95.8%
	MH&LD			96.8%	98.7%	97.4%	96.7%	98.1%	99.6%	98.3%	95.9%	99.4%	98.3%	96.0%	90.3%	94.9%
	Morrison			96.8%	95.0%	92.8%	96.3%	95.8%	99.2%	94.5%	93.8%	93.5%	99.0%	97.9%	95.5%	96.1%
	NPTH			95.7%	100.0%	100.0%	100.0%	100.0%	90.0%	95.0%	93.3%	89.7%	100.0%	100.0%	100.0%	100.0%
	Singleton			96.0%	90.0%	88.5%	95.5%	100.0%	93.8%	93.9%	94.1%	92.0%	90.0%	97.0%	87.8%	-
	Total			96.2%	95.1%	92.8%	97.0%	96.3%	98.3%	96.0%	94.9%	94.9%	96.0%	97.1%	92.2%	95.0%

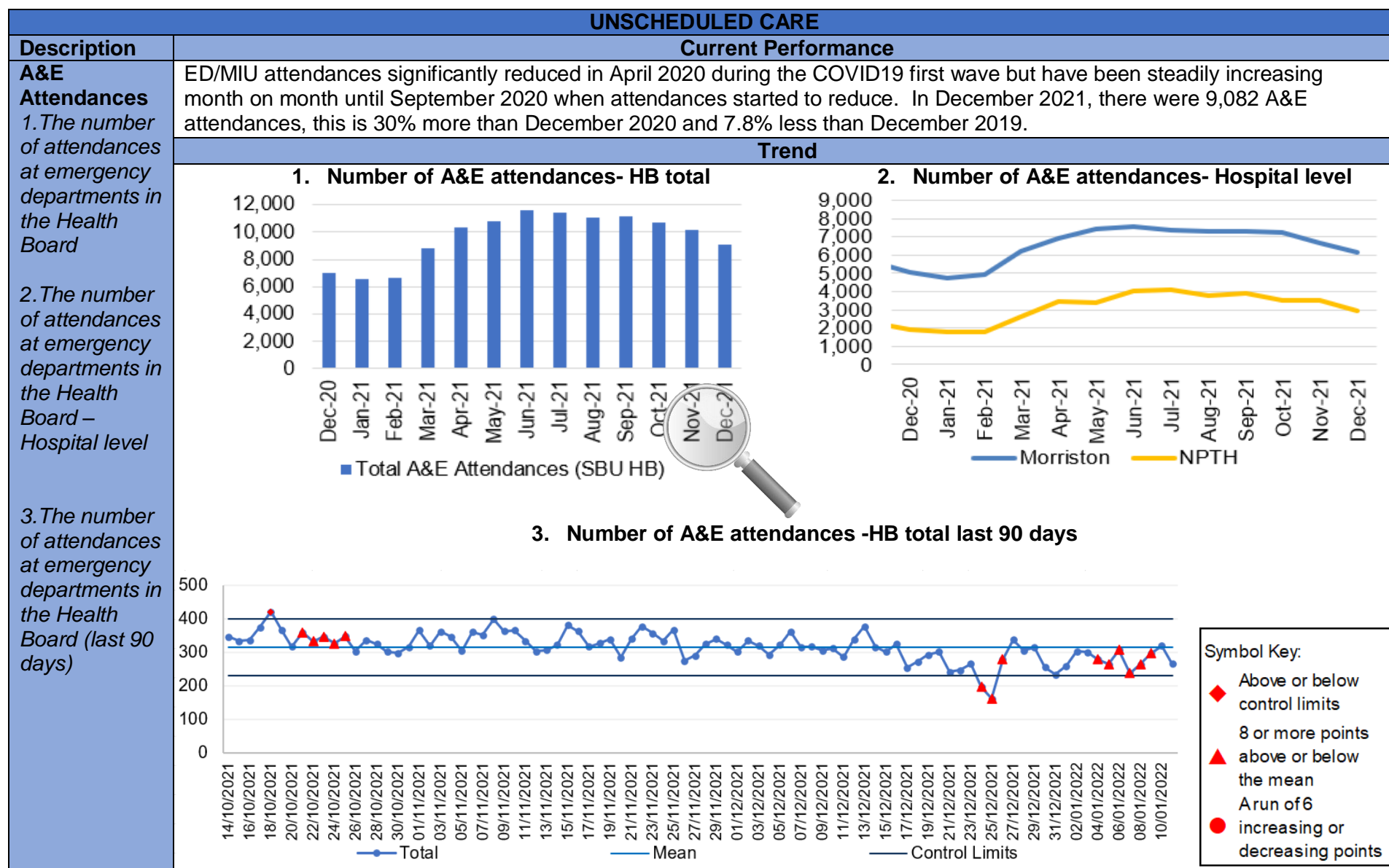
Measure	Locality	Internal profile	Trend	SBU													
				Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	
		Serious Incidents & Risks															
Number of Serious Incidents	PCCS			0	0	2	1	2	3	1	0	1	0	0	1	0	
	MH&LD			7	1	1	1	1	0	2	0	0	0	1	0	0	
	Morrison			1	2	1	2	0	2	1	1	0	2	0	6	0	
	NPTH			0	0	0	0	0	0	0	0	0	0	1	1	0	0
	Singleton			4	1	1	0	1	1	2	1	4	2	2	1	2	
	Total			12	4	5	4	4	6	6	1	5	5	4	8	2	
Of the serious incidents due for assurance, the % which were assured within the agreed timescales	Total			4%	0%	10%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	
Number of Never Events	PCCS			0	0	0	0	0	0	0	0	0	0	0	0	0	
	MH&LD			0	0	0	0	0	0	0	0	0	0	0	0	0	
	Morrison			0	0	0	0	0	0	0	1	0	0	0	0	1	0
	NPTH			0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Singleton			0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total			0	0	0	0	0	0	0	1	0	0	0	0	1	0
		Pressure Ulcers															
Total number of Pressure Ulcers	PCCS Community			26	25	24	26	31	20	21	33	34	39	32	31		
	PCCS Hospital			0	0	0	0	0	0	0	0	1	0	0	0		
	MH&LD			0	0	1	0	0	2	0	3	1	1	0	0		
	Morrison			41	31	26	24	25	30	25	37	32	47	32	27		
	NPTH			0	1	4	3	3	2	3	2	5	0	1	3		
	Singleton			20	19	17	9	31	19	25	16	14	17	9	13		
	Total			87	76	72	62	90	73	74	91	87	104	74	74		
Total number of Grade 3+ Pressure Ulcers	PCCS Community			7	5	4	2	10	2	4	2	8	6	7	8		
	PCCS Hospital			0	0	0	0	0	0	0	0	0	0	0	0		
	MH&LD			0	0	0	0	0	0	0	0	0	1	0	0		
	Morrison			2	2	2	1	1	0	0	3	1	0	1	1		
	NPTH			0	0	0	0	1	0	0	0	1	0	0	0		
	Singleton			1	0	1	0	2	1	2	0	0	0	0	1		
	Total			10	7	7	3	14	3	6	5	10	7	8	10		
Pressure Ulcer (Hosp) patients per 100,000 admissions	Total			1,128	928	951	533	896	756	723	853	767	955	613	616		

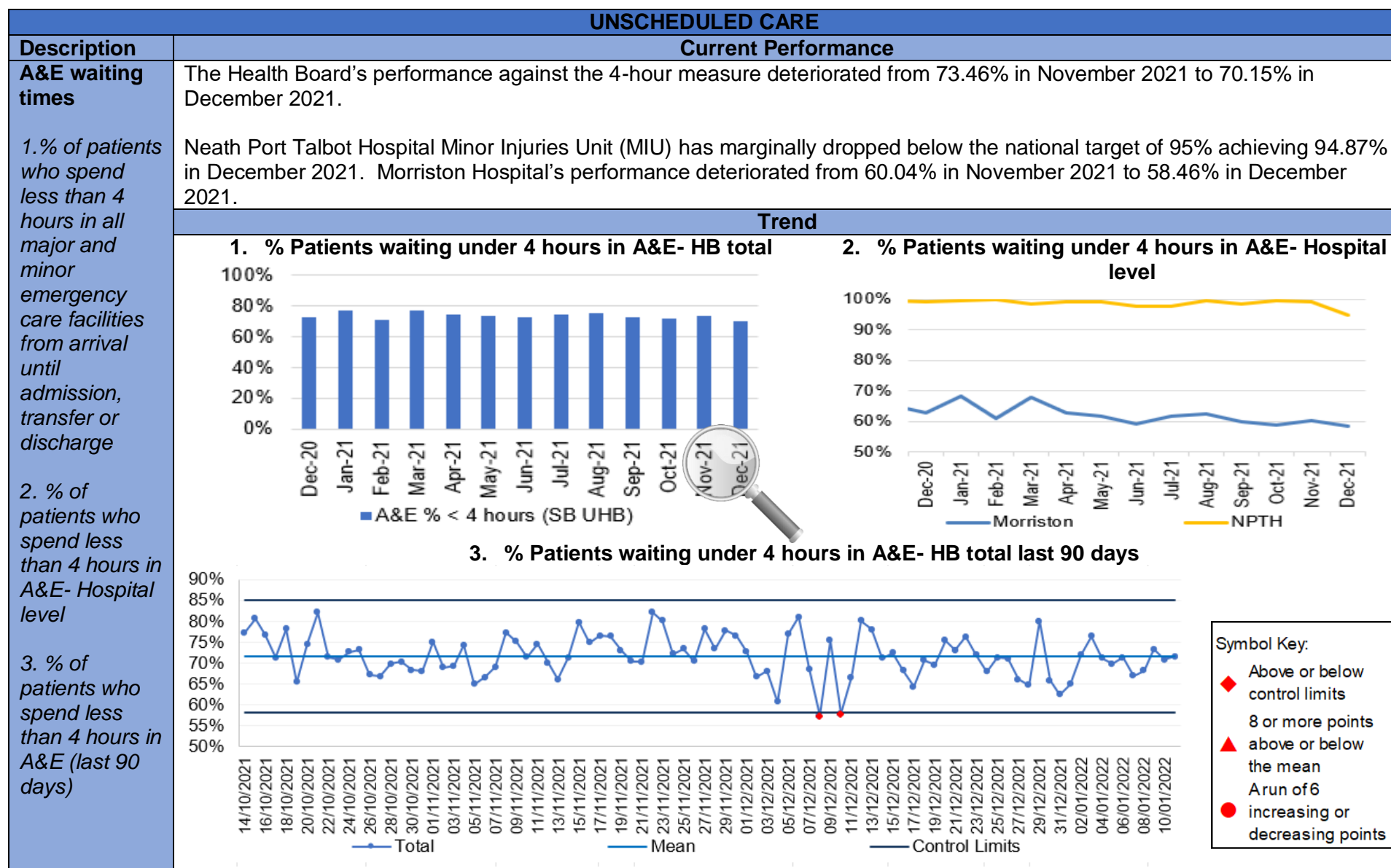
Measure	Locality	Internal profile	Trend	SBU												
				Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21
			Inpatient Falls													
Total number of Inpatient Falls	PCCS			8	9	10	4	12	5	8	6	6	8	4	6	8
	MH&LD			29	27	27	22	18	42	24	32	40	25	28	36	37
	Morrison			129	92	67	84	81	105	69	66	73	96	114	91	91
	NPTH			30	33	30	28	31	34	32	41	31	25	35	27	38
	Singleton			48	38	42	33	34	42	41	48	48	53	58	53	33
	Total			247	203	177	171	176	228	174	193	198	207	240	213	208
Inpatient Falls per 1,000 beddays	HB Total			6.91	5.56	5.40	4.62	4.85	5.94	4.50	4.88	4.95	5.18	5.81	5.35	5.28
			Mortality													
Universal Mortality reviews undertaken within 28 days (Stage 1 reviews)	Morrison			99%	100%	100%	98%	99%	98%	98%	97%	90%	97%	96%	99%	
	Singleton			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	0%	
	NPTH			100%	100%	100%	86%	100%	88%	100%	100%	100%	100%	80%	88%	
	Total			99%	100%	100%	98%	99%	98%	99%	98%	93%	98%	97%	99%	
Stage 2 mortality reviews completed within 60 days	Morrison			80%	43%	100%	86%	50%	38%	33%	50%	60%				
	Singleton			50%	50%	100%	67%	-	25%	0%	0%	0%				
	NPTH			-	0%	-	100%	100%	100%	0%	-	0%				
	Total			75%	37%	100%	82%	60%	39%	25%	43%	50%				
Crude hospital mortality rate by Delivery Unit (74 years of age or less)	Morrison			1.86%	1.97%	2.05%	2.04%	1.80%	1.76%	1.71%	1.73%	1.70%	1.72%	1.71%	1.76%	
	Singleton			0.54%	0.56%	0.57%	0.56%	0.50%	0.52%	0.52%	0.52%	0.53%	0.53%	0.54%	0.50%	
	NPTH			0.20%	0.24%	0.18%	0.17%	0.15%	0.15%	0.13%	0.12%	0.23%	0.11%	0.10%	0.21%	
	Total (SBU)			1.08%	1.14%	1.17%	1.17%	1.04%	1.04%	1.01%	1.03%	1.02%	1.03%	1.03%	0.99%	

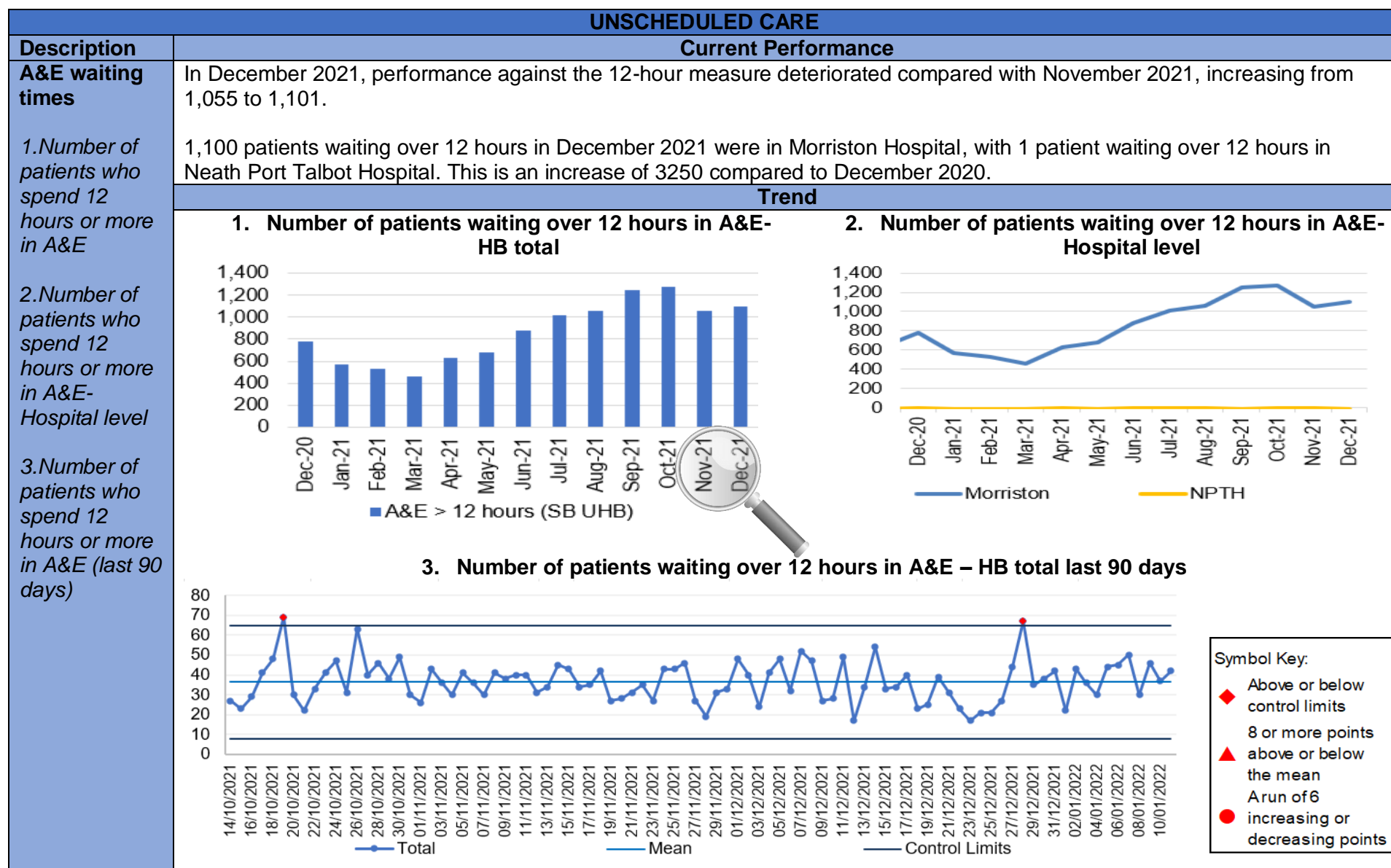
4.2 Updates on key measures

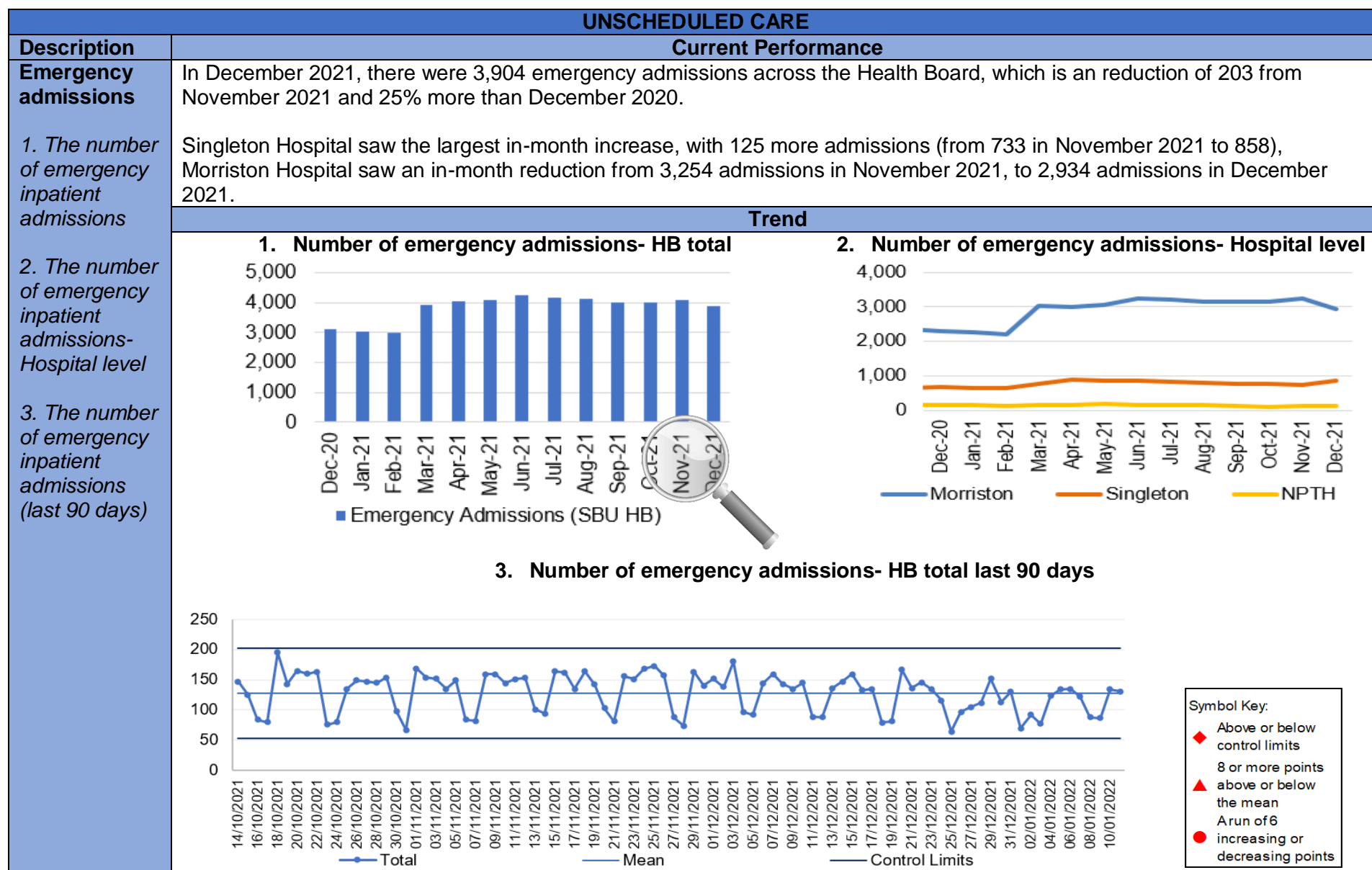


UNSCHEDULED CARE																																																																							
Description	Current Performance																																																																						
Ambulance handovers 1. The number of ambulance handovers over one hour 2. The number of ambulance handovers over one hour- Hospital level 3. The number of ambulance handovers over one hour (last 90 days)	<p>In December 2021, there were 612 ambulance to hospital handovers taking over 1 hour; this is a steady deterioration in performance from 510 in December 2020. However there was an in-month reduction in handover's compared to November 2021 (670). In December 2021, 591 handovers over 1 hour were attributed to Morriston Hospital and 21 were attributed to Singleton Hospital.</p> <p>The number of handover hours lost over 15 minutes increased from 2,461 in November 2021 to 2,527 in December 2021.</p>																																																																						
	<p style="text-align: center;">Trend</p> <div><div><p>1. Number of ambulance handovers- HB total</p><table><caption>1. Number of ambulance handovers- HB total</caption><thead><tr><th>Month</th><th>Handovers > 1 hr (SBU HB)</th></tr></thead><tbody><tr><td>Dec-20</td><td>510</td></tr><tr><td>Jan-21</td><td>200</td></tr><tr><td>Feb-21</td><td>220</td></tr><tr><td>Mar-21</td><td>230</td></tr><tr><td>Apr-21</td><td>320</td></tr><tr><td>May-21</td><td>480</td></tr><tr><td>Jun-21</td><td>550</td></tr><tr><td>Jul-21</td><td>620</td></tr><tr><td>Aug-21</td><td>720</td></tr><tr><td>Sep-21</td><td>650</td></tr><tr><td>Oct-21</td><td>660</td></tr><tr><td>Nov-21</td><td>670</td></tr><tr><td>Dec-21</td><td>612</td></tr></tbody></table></div><div><p>2. Number of ambulance handovers over 1 hour- Hospital level</p><table><caption>2. Number of ambulance handovers over 1 hour- Hospital level</caption><thead><tr><th>Month</th><th>Morriston handovers > 1 hour</th><th>Singleton handovers > 1 hour</th></tr></thead><tbody><tr><td>Dec-20</td><td>510</td><td>0</td></tr><tr><td>Jan-21</td><td>200</td><td>0</td></tr><tr><td>Feb-21</td><td>220</td><td>0</td></tr><tr><td>Mar-21</td><td>230</td><td>0</td></tr><tr><td>Apr-21</td><td>320</td><td>0</td></tr><tr><td>May-21</td><td>480</td><td>0</td></tr><tr><td>Jun-21</td><td>550</td><td>0</td></tr><tr><td>Jul-21</td><td>620</td><td>0</td></tr><tr><td>Aug-21</td><td>720</td><td>0</td></tr><tr><td>Sep-21</td><td>650</td><td>0</td></tr><tr><td>Oct-21</td><td>660</td><td>0</td></tr><tr><td>Nov-21</td><td>670</td><td>0</td></tr><tr><td>Dec-21</td><td>612</td><td>21</td></tr></tbody></table></div></div>	Month	Handovers > 1 hr (SBU HB)	Dec-20	510	Jan-21	200	Feb-21	220	Mar-21	230	Apr-21	320	May-21	480	Jun-21	550	Jul-21	620	Aug-21	720	Sep-21	650	Oct-21	660	Nov-21	670	Dec-21	612	Month	Morriston handovers > 1 hour	Singleton handovers > 1 hour	Dec-20	510	0	Jan-21	200	0	Feb-21	220	0	Mar-21	230	0	Apr-21	320	0	May-21	480	0	Jun-21	550	0	Jul-21	620	0	Aug-21	720	0	Sep-21	650	0	Oct-21	660	0	Nov-21	670	0	Dec-21	612	21
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<p>3. Number of ambulance handovers- HB total last 90 days</p> <p>Symbol Key:</p> <ul style="list-style-type: none">◆ Above or below control limits8 or more points above or below the mean▲ Arun of 6● increasing or decreasing points																																																																							









UNSCHEDULED CARE – Performance Escalation updates

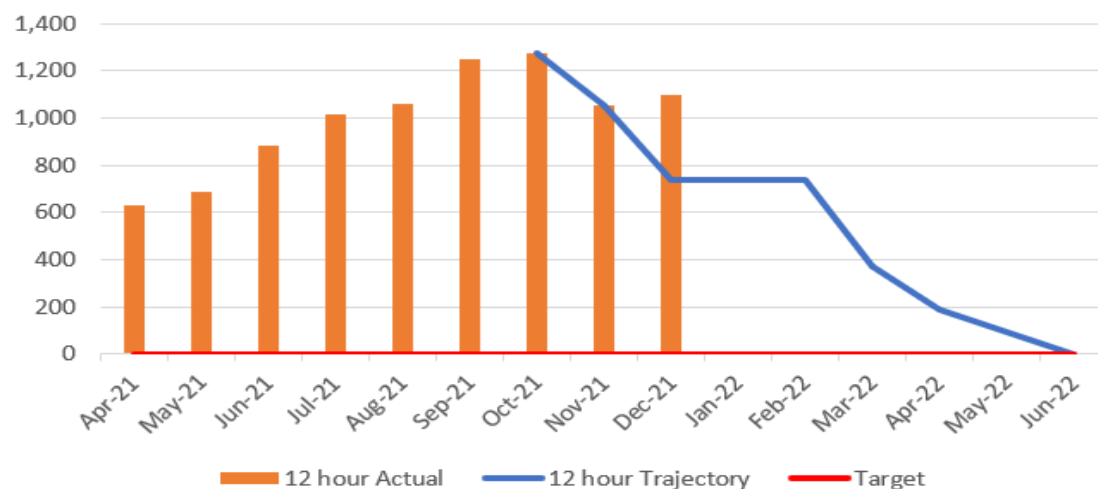
1. Submitted recover trajectory for A&E 4hr performance



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

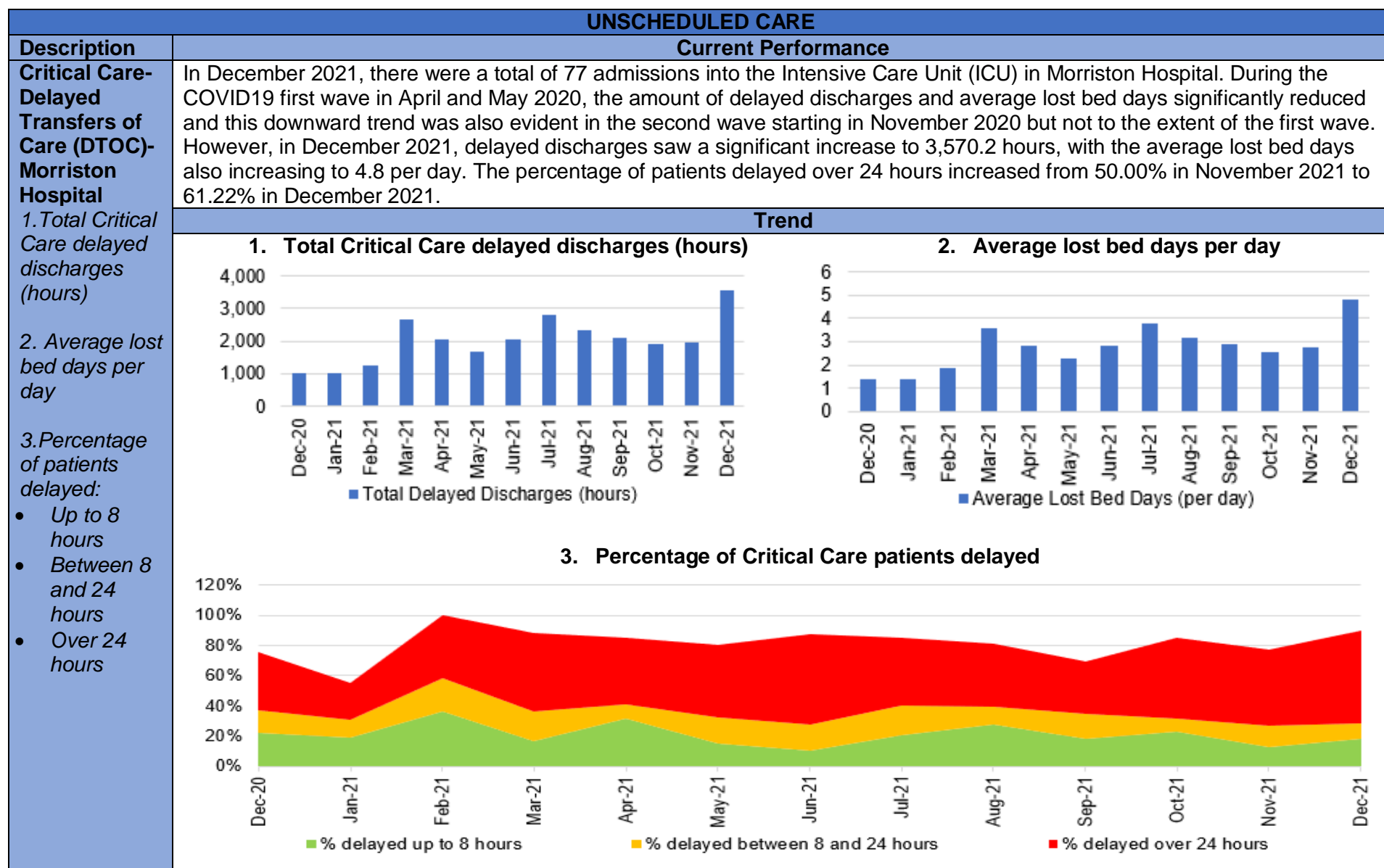
Weekly escalation meetings are currently in place to support performance recovery.

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



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

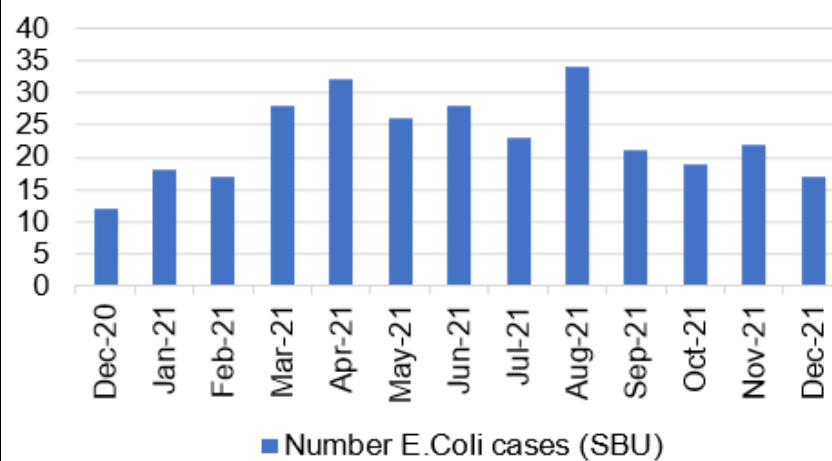
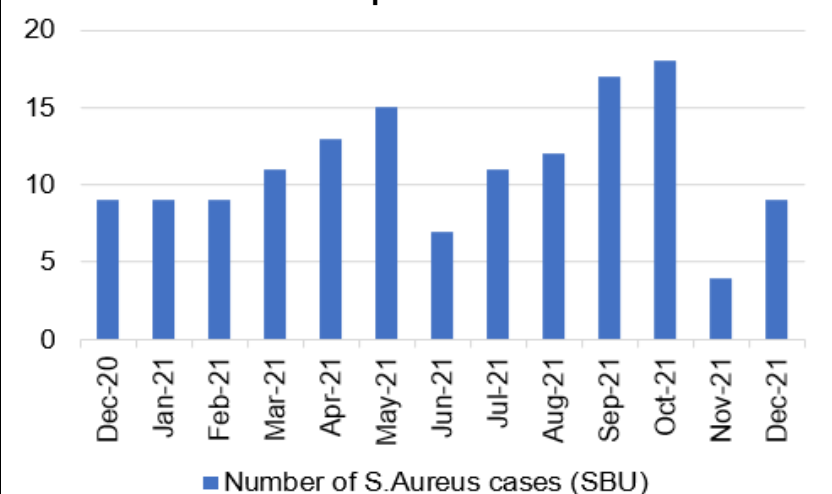
3. Two further trajectories relating to ambulance handover times were also agreed by the Board and these will be verbally updated at the meeting.

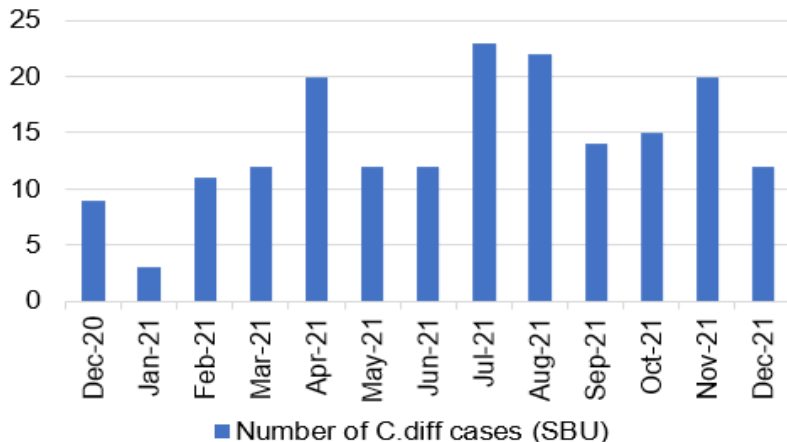
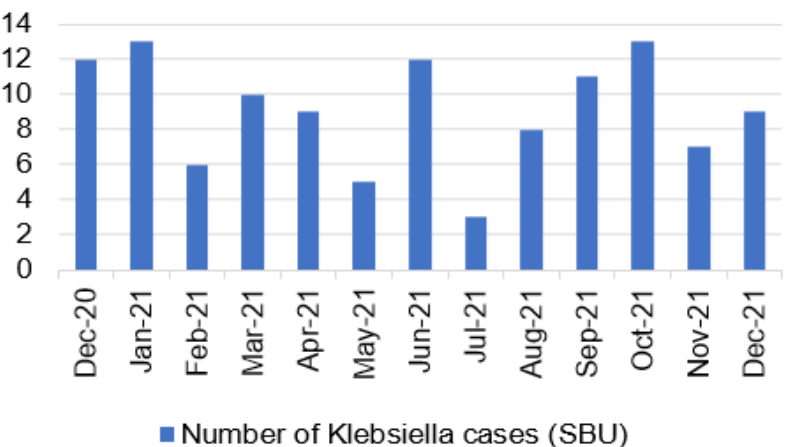


UNSCHEDULED CARE																																																																								
Description	Current Performance	Trend																																																																						
Clinically Optimised <i>The number of patients waiting at each site in the Health Board that are clinically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

FRACTURED NECK OF FEMUR (#NOF)																																																										
Description	Current Performance	Trend																																																								
5. <i>Not delirious when tested- % patients (<4 on 4AT test) when tested in the week after operation</i>	5. Not delirious when tested- 77% of patients were not delirious in the week after their operation in November 2021. This is an improvement of 5.9% compared with November 2020.	<p>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>Nov-20</td><td>75</td><td>60</td><td>60</td></tr><tr><td>Dec-20</td><td>75</td><td>60</td><td>60</td></tr><tr><td>Jan-21</td><td>75</td><td>60</td><td>60</td></tr><tr><td>Feb-21</td><td>75</td><td>60</td><td>60</td></tr><tr><td>Mar-21</td><td>75</td><td>60</td><td>60</td></tr><tr><td>Apr-21</td><td>75</td><td>60</td><td>60</td></tr><tr><td>May-21</td><td>75</td><td>60</td><td>60</td></tr><tr><td>Jun-21</td><td>75</td><td>60</td><td>60</td></tr><tr><td>Jul-21</td><td>75</td><td>60</td><td>60</td></tr><tr><td>Aug-21</td><td>75</td><td>60</td><td>60</td></tr><tr><td>Sep-21</td><td>75</td><td>60</td><td>60</td></tr><tr><td>Oct-21</td><td>75</td><td>60</td><td>60</td></tr><tr><td>Nov-21</td><td>77</td><td>60</td><td>60</td></tr></tbody></table>	Month	Morriston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)	Nov-20	75	60	60	Dec-20	75	60	60	Jan-21	75	60	60	Feb-21	75	60	60	Mar-21	75	60	60	Apr-21	75	60	60	May-21	75	60	60	Jun-21	75	60	60	Jul-21	75	60	60	Aug-21	75	60	60	Sep-21	75	60	60	Oct-21	75	60	60	Nov-21	77	60	60
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Oct-21	75	60	60																																																							
Nov-21	77	60	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- 70.4% of patients in October 2021 were discharged back to their original residence. This is 5.8% less than in October 2020.	<p>6. Return to original residence</p> <table><caption>6. Return to original residence (Estimated Data)</caption><thead><tr><th>Month</th><th>Morriston (%)</th><th>All-Wales (%)</th><th>Eng, Wal & N. Ire (%)</th></tr></thead><tbody><tr><td>Oct-20</td><td>75</td><td>75</td><td>75</td></tr><tr><td>Nov-20</td><td>75</td><td>75</td><td>75</td></tr><tr><td>Dec-20</td><td>75</td><td>75</td><td>75</td></tr><tr><td>Jan-21</td><td>70</td><td>75</td><td>75</td></tr><tr><td>Feb-21</td><td>70</td><td>75</td><td>75</td></tr><tr><td>Mar-21</td><td>70</td><td>75</td><td>75</td></tr><tr><td>Apr-21</td><td>70</td><td>75</td><td>75</td></tr><tr><td>May-21</td><td>70</td><td>75</td><td>75</td></tr><tr><td>Jun-21</td><td>70</td><td>75</td><td>75</td></tr><tr><td>Jul-21</td><td>70</td><td>75</td><td>75</td></tr><tr><td>Aug-21</td><td>70</td><td>75</td><td>75</td></tr><tr><td>Sep-21</td><td>70</td><td>75</td><td>75</td></tr><tr><td>Oct-21</td><td>70.4</td><td>75</td><td>75</td></tr></tbody></table>	Month	Morriston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)	Oct-20	75	75	75	Nov-20	75	75	75	Dec-20	75	75	75	Jan-21	70	75	75	Feb-21	70	75	75	Mar-21	70	75	75	Apr-21	70	75	75	May-21	70	75	75	Jun-21	70	75	75	Jul-21	70	75	75	Aug-21	70	75	75	Sep-21	70	75	75	Oct-21	70.4	75	75
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Oct-21	70.4	75	75																																																							
7. <i>30 day mortality rate</i>	7. 30 day mortality rate- In January 2021 the mortality rate for Morriston Hospital was 7.5% which is 0.5% less than January 2020. The mortality rate in Morriston Hospital in January 2021 is higher than the all-Wales average of 6.9% but lower than the national average of 7.6%. * Updated data is currently not available, but is being reviewed.	<p>7. 30 day mortality rate</p> <table><caption>7. 30 day mortality rate (Estimated Data)</caption><thead><tr><th>Month</th><th>Morriston (%)</th><th>All-Wales (%)</th><th>Eng, Wal & N. Ire (%)</th></tr></thead><tbody><tr><td>Jan-20</td><td>7.5</td><td>7.5</td><td>7.5</td></tr><tr><td>Feb-20</td><td>8.0</td><td>7.5</td><td>7.5</td></tr><tr><td>Mar-20</td><td>8.0</td><td>7.5</td><td>7.5</td></tr><tr><td>Apr-20</td><td>7.5</td><td>7.5</td><td>7.5</td></tr><tr><td>May-20</td><td>7.5</td><td>7.5</td><td>7.5</td></tr><tr><td>Jun-20</td><td>7.5</td><td>7.5</td><td>7.5</td></tr><tr><td>Jul-20</td><td>7.5</td><td>7.5</td><td>7.5</td></tr><tr><td>Aug-20</td><td>7.5</td><td>7.5</td><td>7.5</td></tr><tr><td>Sep-20</td><td>7.5</td><td>7.5</td><td>7.5</td></tr><tr><td>Oct-20</td><td>7.5</td><td>7.5</td><td>7.5</td></tr><tr><td>Nov-20</td><td>7.5</td><td>7.5</td><td>7.5</td></tr><tr><td>Dec-20</td><td>7.5</td><td>7.5</td><td>7.5</td></tr><tr><td>Jan-21</td><td>7.5</td><td>6.9</td><td>7.6</td></tr></tbody></table>	Month	Morriston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)	Jan-20	7.5	7.5	7.5	Feb-20	8.0	7.5	7.5	Mar-20	8.0	7.5	7.5	Apr-20	7.5	7.5	7.5	May-20	7.5	7.5	7.5	Jun-20	7.5	7.5	7.5	Jul-20	7.5	7.5	7.5	Aug-20	7.5	7.5	7.5	Sep-20	7.5	7.5	7.5	Oct-20	7.5	7.5	7.5	Nov-20	7.5	7.5	7.5	Dec-20	7.5	7.5	7.5	Jan-21	7.5	6.9	7.6
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Dec-20	7.5	7.5	7.5																																																							
Jan-21	7.5	6.9	7.6																																																							

HEALTHCARE ACQUIRED INFECTIONS																														
Description	Current Performance	Trend																												
Healthcare Acquired Infections (HCAI) - E.coli bacteraemia- <i>Number of laboratory confirmed E.coli bacteraemia cases</i>	<ul style="list-style-type: none">17 cases of <i>E. coli</i> bacteraemia were identified in December 2021, of which 5 were hospital acquired and 12 were community acquired.Cumulative cases from April 2021 to December 2021 are 19.8% higher than the equivalent period in 2020/21. (222 in 2021/22 compared with 178 in 2020/21).	<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>Dec-20</td><td>12</td></tr><tr><td>Jan-21</td><td>18</td></tr><tr><td>Feb-21</td><td>17</td></tr><tr><td>Mar-21</td><td>28</td></tr><tr><td>Apr-21</td><td>32</td></tr><tr><td>May-21</td><td>26</td></tr><tr><td>Jun-21</td><td>28</td></tr><tr><td>Jul-21</td><td>23</td></tr><tr><td>Aug-21</td><td>34</td></tr><tr><td>Sep-21</td><td>21</td></tr><tr><td>Oct-21</td><td>19</td></tr><tr><td>Nov-21</td><td>22</td></tr><tr><td>Dec-21</td><td>17</td></tr></tbody></table>	Month	Number of cases	Dec-20	12	Jan-21	18	Feb-21	17	Mar-21	28	Apr-21	32	May-21	26	Jun-21	28	Jul-21	23	Aug-21	34	Sep-21	21	Oct-21	19	Nov-21	22	Dec-21	17
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Dec-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 9 cases of Staph. aureus bacteraemia in December 2021, of which 5 were hospital acquired and 4 were community acquired.Cumulative cases from April 2021 to December 2021 are 10.4% higher than the equivalent period in 2020/21 (106 in 2021/22 compared with 94 in 2020/21).	<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>Dec-20</td><td>9</td></tr><tr><td>Jan-21</td><td>9</td></tr><tr><td>Feb-21</td><td>9</td></tr><tr><td>Mar-21</td><td>11</td></tr><tr><td>Apr-21</td><td>13</td></tr><tr><td>May-21</td><td>15</td></tr><tr><td>Jun-21</td><td>7</td></tr><tr><td>Jul-21</td><td>11</td></tr><tr><td>Aug-21</td><td>12</td></tr><tr><td>Sep-21</td><td>17</td></tr><tr><td>Oct-21</td><td>18</td></tr><tr><td>Nov-21</td><td>4</td></tr><tr><td>Dec-21</td><td>9</td></tr></tbody></table>	Month	Number of cases	Dec-20	9	Jan-21	9	Feb-21	9	Mar-21	11	Apr-21	13	May-21	15	Jun-21	7	Jul-21	11	Aug-21	12	Sep-21	17	Oct-21	18	Nov-21	4	Dec-21	9
Month	Number of cases																													
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HEALTHCARE ACQUIRED INFECTIONS																														
Description	Current Performance	Trend																												
Healthcare Acquired Infections (HCAI)- C.difficile- <i>Number of laboratory confirmed C.difficile cases</i>	<ul style="list-style-type: none">There were 12 <i>Clostridium difficile</i> toxin positive cases in December 2021, of which 11 were hospital acquired and 1 was community acquired.Cumulative cases from April 2021 to December 2021 are 11.3% higher than the equivalent period of 2020/21 (150 in 2021/22 compared with 133 in 2020/21).	<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>Dec-20</td><td>9</td></tr><tr><td>Jan-21</td><td>3</td></tr><tr><td>Feb-21</td><td>11</td></tr><tr><td>Mar-21</td><td>12</td></tr><tr><td>Apr-21</td><td>20</td></tr><tr><td>May-21</td><td>12</td></tr><tr><td>Jun-21</td><td>12</td></tr><tr><td>Jul-21</td><td>23</td></tr><tr><td>Aug-21</td><td>22</td></tr><tr><td>Sep-21</td><td>14</td></tr><tr><td>Oct-21</td><td>15</td></tr><tr><td>Nov-21</td><td>20</td></tr><tr><td>Dec-21</td><td>12</td></tr></tbody></table>	Month	Number of C.diff cases (SBU)	Dec-20	9	Jan-21	3	Feb-21	11	Mar-21	12	Apr-21	20	May-21	12	Jun-21	12	Jul-21	23	Aug-21	22	Sep-21	14	Oct-21	15	Nov-21	20	Dec-21	12
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Apr-21	20																													
May-21	12																													
Jun-21	12																													
Jul-21	23																													
Aug-21	22																													
Sep-21	14																													
Oct-21	15																													
Nov-21	20																													
Dec-21	12																													
Healthcare Acquired Infections (HCAI)- Klebsiella sp- <i>Number of laboratory confirmed Klebsiella sp cases</i>	<ul style="list-style-type: none">There were 9 cases of Klebsiella sp in December 2021, of which 6 were hospital acquired and 3 were community acquired.Cumulative cases from April 2021 to December 2021 are 5.2% higher than the equivalent period in 2020/21 (77 in 2021/22 compared with 73 in 2020/21).	<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>Dec-20</td><td>12</td></tr><tr><td>Jan-21</td><td>13</td></tr><tr><td>Feb-21</td><td>6</td></tr><tr><td>Mar-21</td><td>10</td></tr><tr><td>Apr-21</td><td>9</td></tr><tr><td>May-21</td><td>5</td></tr><tr><td>Jun-21</td><td>12</td></tr><tr><td>Jul-21</td><td>3</td></tr><tr><td>Aug-21</td><td>8</td></tr><tr><td>Sep-21</td><td>11</td></tr><tr><td>Oct-21</td><td>13</td></tr><tr><td>Nov-21</td><td>7</td></tr><tr><td>Dec-21</td><td>9</td></tr></tbody></table>	Month	Number of Klebsiella cases (SBU)	Dec-20	12	Jan-21	13	Feb-21	6	Mar-21	10	Apr-21	9	May-21	5	Jun-21	12	Jul-21	3	Aug-21	8	Sep-21	11	Oct-21	13	Nov-21	7	Dec-21	9
Month	Number of Klebsiella cases (SBU)																													
Dec-20	12																													
Jan-21	13																													
Feb-21	6																													
Mar-21	10																													
Apr-21	9																													
May-21	5																													
Jun-21	12																													
Jul-21	3																													
Aug-21	8																													
Sep-21	11																													
Oct-21	13																													
Nov-21	7																													
Dec-21	9																													

HEALTHCARE ACQUIRED INFECTIONS																														
Description	Current Performance	Trend																												
Healthcare Acquired Infections (HCAI)- Aeruginosa- <i>Number of laboratory confirmed Aeruginosa cases</i>	<ul style="list-style-type: none">There were 4 cases of <i>P.Aeruginosa</i> in December 2021, of which 3 were hospital acquired and 1 was community acquired.Cumulative cases from April 2021 to December 2021 are 11% more than the equivalent period in 2020/21.	Number of healthcare acquired Pseudomonas cases <table><thead><tr><th>Month</th><th>Number of cases</th></tr></thead><tbody><tr><td>Dec-20</td><td>1</td></tr><tr><td>Jan-21</td><td>1</td></tr><tr><td>Feb-21</td><td>1</td></tr><tr><td>Mar-21</td><td>1</td></tr><tr><td>Apr-21</td><td>3</td></tr><tr><td>May-21</td><td>1</td></tr><tr><td>Jun-21</td><td>2</td></tr><tr><td>Jul-21</td><td>1</td></tr><tr><td>Aug-21</td><td>2</td></tr><tr><td>Sep-21</td><td>2</td></tr><tr><td>Oct-21</td><td>0</td></tr><tr><td>Nov-21</td><td>3</td></tr><tr><td>Dec-21</td><td>4</td></tr></tbody></table> <p>■ Number of Pseudomonas cases (SBU)</p>	Month	Number of cases	Dec-20	1	Jan-21	1	Feb-21	1	Mar-21	1	Apr-21	3	May-21	1	Jun-21	2	Jul-21	1	Aug-21	2	Sep-21	2	Oct-21	0	Nov-21	3	Dec-21	4
Month	Number of cases																													
Dec-20	1																													
Jan-21	1																													
Feb-21	1																													
Mar-21	1																													
Apr-21	3																													
May-21	1																													
Jun-21	2																													
Jul-21	1																													
Aug-21	2																													
Sep-21	2																													
Oct-21	0																													
Nov-21	3																													
Dec-21	4																													

PRESSURE ULCERS																																																										
Description	Current Performance	Trend																																																								
Number of pressure ulcers <i>1. Total number of pressure ulcers developed in hospital and in the community</i> <i>2. Rate of pressure ulcers per 100,000 admissions</i>	<ul style="list-style-type: none">In November 2021 there were 74 cases of healthcare acquired pressure ulcers, 31 of which were community acquired and 43 were hospital acquired.There were 10 grade 3+ pressure ulcers in November 2021, of which 8 were community acquired and 2 were hospital acquired.The rate per 100,000 admissions decreased from 955 in September 2021 to 613 in October 2021.	Total number of hospital and community acquired Pressure Ulcers (PU) and rate per 100,000 admissions <table><thead><tr><th>Month</th><th>Pressure Ulcers (Community)</th><th>Pressure Ulcers (Hospital)</th><th>Rate per 100,00 admissions</th></tr></thead><tbody><tr><td>Nov-20</td><td>70</td><td>40</td><td>955</td></tr><tr><td>Dec-20</td><td>85</td><td>50</td><td>1,050</td></tr><tr><td>Jan-21</td><td>75</td><td>50</td><td>950</td></tr><tr><td>Feb-21</td><td>70</td><td>50</td><td>950</td></tr><tr><td>Mar-21</td><td>60</td><td>40</td><td>650</td></tr><tr><td>Apr-21</td><td>85</td><td>50</td><td>950</td></tr><tr><td>May-21</td><td>70</td><td>50</td><td>850</td></tr><tr><td>Jun-21</td><td>70</td><td>50</td><td>750</td></tr><tr><td>Jul-21</td><td>85</td><td>50</td><td>950</td></tr><tr><td>Aug-21</td><td>85</td><td>50</td><td>1,050</td></tr><tr><td>Sep-21</td><td>100</td><td>50</td><td>955</td></tr><tr><td>Oct-21</td><td>70</td><td>40</td><td>613</td></tr><tr><td>Nov-21</td><td>70</td><td>40</td><td>613</td></tr></tbody></table> <p>■ Pressure Ulcers (Community) ■ Pressure Ulcers (Hospital) — Rate per 100,00 admissions</p>	Month	Pressure Ulcers (Community)	Pressure Ulcers (Hospital)	Rate per 100,00 admissions	Nov-20	70	40	955	Dec-20	85	50	1,050	Jan-21	75	50	950	Feb-21	70	50	950	Mar-21	60	40	650	Apr-21	85	50	950	May-21	70	50	850	Jun-21	70	50	750	Jul-21	85	50	950	Aug-21	85	50	1,050	Sep-21	100	50	955	Oct-21	70	40	613	Nov-21	70	40	613
Month	Pressure Ulcers (Community)	Pressure Ulcers (Hospital)	Rate per 100,00 admissions																																																							
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May-21	70	50	850																																																							
Jun-21	70	50	750																																																							
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















SERIOUS INCIDENTS																																												
Description	Current Performance	Trend																																										
Serious Incidents- <i>1. The number of serious incidents</i> <i>2. The number of Never Events</i> <i>3. Of the serious incidents due for assurance, the percentage which were assured within the agreed timescales</i>	1. The Health Board reported 2 Serious Incidents for the month of December 2021 to Welsh Government. The breakdown of incidents in December 2021 are set out below: - Singleton – 2	1. and 2. Number of serious incidents and never events <table><tr><th>Month</th><th>Number of Serious Incidents</th><th>Number of never events</th></tr><tr><td>Dec-20</td><td>12</td><td>0</td></tr><tr><td>Jan-21</td><td>4</td><td>0</td></tr><tr><td>Feb-21</td><td>5</td><td>0</td></tr><tr><td>Mar-21</td><td>4</td><td>0</td></tr><tr><td>Apr-21</td><td>4</td><td>0</td></tr><tr><td>May-21</td><td>6</td><td>0</td></tr><tr><td>Jun-21</td><td>7</td><td>0</td></tr><tr><td>Jul-21</td><td>1</td><td>0</td></tr><tr><td>Aug-21</td><td>5</td><td>0</td></tr><tr><td>Sep-21</td><td>5</td><td>0</td></tr><tr><td>Oct-21</td><td>4</td><td>0</td></tr><tr><td>Nov-21</td><td>9</td><td>0</td></tr><tr><td>Dec-21</td><td>2</td><td>0</td></tr></table>	Month	Number of Serious Incidents	Number of never events	Dec-20	12	0	Jan-21	4	0	Feb-21	5	0	Mar-21	4	0	Apr-21	4	0	May-21	6	0	Jun-21	7	0	Jul-21	1	0	Aug-21	5	0	Sep-21	5	0	Oct-21	4	0	Nov-21	9	0	Dec-21	2	0
	Month	Number of Serious Incidents	Number of never events																																									
	Dec-20	12	0																																									
Jan-21	4	0																																										
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Jun-21	7	0																																										
Jul-21	1	0																																										
Aug-21	5	0																																										
Sep-21	5	0																																										
Oct-21	4	0																																										
Nov-21	9	0																																										
Dec-21	2	0																																										
2. There were no new Never Event reported in December 2021.																																												
3. In November 2021, performance against the 80% target of submitting closure forms within 60 working days was 0% as the one closure form in Morriston due to be submitted to Welsh Government, was not submitted on time.	3. % of serious incidents closed within 60 days <table><tr><th>Month</th><th>% SI's assured</th><th>Target</th></tr><tr><td>Dec-20</td><td>5%</td><td>80%</td></tr><tr><td>Jan-21</td><td>0%</td><td>80%</td></tr><tr><td>Feb-21</td><td>10%</td><td>80%</td></tr><tr><td>Mar-21</td><td>0%</td><td>80%</td></tr><tr><td>Apr-21</td><td>0%</td><td>80%</td></tr><tr><td>May-21</td><td>0%</td><td>80%</td></tr><tr><td>Jun-21</td><td>0%</td><td>80%</td></tr><tr><td>Jul-21</td><td>35%</td><td>80%</td></tr><tr><td>Aug-21</td><td>0%</td><td>80%</td></tr><tr><td>Sep-21</td><td>0%</td><td>80%</td></tr><tr><td>Oct-21</td><td>0%</td><td>80%</td></tr><tr><td>Nov-21</td><td>0%</td><td>80%</td></tr><tr><td>Dec-21</td><td>0%</td><td>80%</td></tr></table> <p>* 0% compliance in November 2020 and January, March, April, May, June, August, October and November 2021</p>	Month	% SI's assured	Target	Dec-20	5%	80%	Jan-21	0%	80%	Feb-21	10%	80%	Mar-21	0%	80%	Apr-21	0%	80%	May-21	0%	80%	Jun-21	0%	80%	Jul-21	35%	80%	Aug-21	0%	80%	Sep-21	0%	80%	Oct-21	0%	80%	Nov-21	0%	80%	Dec-21	0%	80%	
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Nov-21	0%	80%																																										
Dec-21	0%	80%																																										

INPATIENT FALLS																														
Description	Current Performance	Trend																												
Inpatient Falls <i>The total number of inpatient falls</i>	<ul style="list-style-type: none">The number of Falls reported via Datix web for Swansea Bay UHB was 208 in December 2021. This is 16% less than December 2020 where 247 falls were recorded.	<p>Number of inpatient Falls</p> <table><thead><tr><th>Month</th><th>Inpatient falls</th></tr></thead><tbody><tr><td>Dec-20</td><td>247</td></tr><tr><td>Jan-21</td><td>200</td></tr><tr><td>Feb-21</td><td>175</td></tr><tr><td>Mar-21</td><td>170</td></tr><tr><td>Apr-21</td><td>175</td></tr><tr><td>May-21</td><td>225</td></tr><tr><td>Jun-21</td><td>170</td></tr><tr><td>Jul-21</td><td>190</td></tr><tr><td>Aug-21</td><td>195</td></tr><tr><td>Sep-21</td><td>205</td></tr><tr><td>Oct-21</td><td>235</td></tr><tr><td>Nov-21</td><td>210</td></tr><tr><td>Dec-21</td><td>208</td></tr></tbody></table>	Month	Inpatient falls	Dec-20	247	Jan-21	200	Feb-21	175	Mar-21	170	Apr-21	175	May-21	225	Jun-21	170	Jul-21	190	Aug-21	195	Sep-21	205	Oct-21	235	Nov-21	210	Dec-21	208
Month	Inpatient falls																													
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Sep-21	205																													
Oct-21	235																													
Nov-21	210																													
Dec-21	208																													
DISCHARGE SUMMARIES																														
Description	Current Performance	Trend																												
Discharge Summaries <i>Percentage of discharge summaries approved and sent to patients' doctor following discharge</i>	<p>The latest data shows that in December 2021, the percentage of completed discharge summaries was 62%.</p> <p>In December 2021, compliance ranged from 53% in Singleton Hospital to 82% in Mental Health & Learning Disabilities.</p>	<p>% discharge summaries approved and sent</p> <table><thead><tr><th>Month</th><th>% of completed discharge summaries</th></tr></thead><tbody><tr><td>Dec-20</td><td>58%</td></tr><tr><td>Jan-21</td><td>65%</td></tr><tr><td>Feb-21</td><td>62%</td></tr><tr><td>Mar-21</td><td>63%</td></tr><tr><td>Apr-21</td><td>62%</td></tr><tr><td>May-21</td><td>65%</td></tr><tr><td>Jun-21</td><td>68%</td></tr><tr><td>Jul-21</td><td>62%</td></tr><tr><td>Aug-21</td><td>61%</td></tr><tr><td>Sep-21</td><td>67%</td></tr><tr><td>Oct-21</td><td>60%</td></tr><tr><td>Nov-21</td><td>62%</td></tr><tr><td>Dec-21</td><td>62%</td></tr></tbody></table>	Month	% of completed discharge summaries	Dec-20	58%	Jan-21	65%	Feb-21	62%	Mar-21	63%	Apr-21	62%	May-21	65%	Jun-21	68%	Jul-21	62%	Aug-21	61%	Sep-21	67%	Oct-21	60%	Nov-21	62%	Dec-21	62%
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Dec-21	62%																													

CRUDE MORTALITY																																																																								
Description	Current Performance	Trend																																																																						
Crude Mortality Rate	November 2021 reports the crude mortality rate for the Health Board at 0.99%, which is 0.04% lower than October 2021.	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>Nov-20</td><td>1.7%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr><tr><td>Dec-20</td><td>1.8%</td><td>0.5%</td><td>0.2%</td><td>1.1%</td></tr><tr><td>Jan-21</td><td>1.9%</td><td>0.5%</td><td>0.3%</td><td>1.2%</td></tr><tr><td>Feb-21</td><td>2.0%</td><td>0.6%</td><td>0.2%</td><td>1.2%</td></tr><tr><td>Mar-21</td><td>1.9%</td><td>0.5%</td><td>0.2%</td><td>1.1%</td></tr><tr><td>Apr-21</td><td>1.8%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr><tr><td>May-21</td><td>1.8%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr><tr><td>Jun-21</td><td>1.7%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr><tr><td>Jul-21</td><td>1.7%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr><tr><td>Aug-21</td><td>1.7%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr><tr><td>Sep-21</td><td>1.7%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr><tr><td>Oct-21</td><td>1.7%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr><tr><td>Nov-21</td><td>1.8%</td><td>0.5%</td><td>0.2%</td><td>1.0%</td></tr></tbody></table>	Month	Morriston Hospital	Singleton Hospital	NPT Hospital	HB Total	Nov-20	1.7%	0.5%	0.2%	1.0%	Dec-20	1.8%	0.5%	0.2%	1.1%	Jan-21	1.9%	0.5%	0.3%	1.2%	Feb-21	2.0%	0.6%	0.2%	1.2%	Mar-21	1.9%	0.5%	0.2%	1.1%	Apr-21	1.8%	0.5%	0.2%	1.0%	May-21	1.8%	0.5%	0.2%	1.0%	Jun-21	1.7%	0.5%	0.2%	1.0%	Jul-21	1.7%	0.5%	0.2%	1.0%	Aug-21	1.7%	0.5%	0.2%	1.0%	Sep-21	1.7%	0.5%	0.2%	1.0%	Oct-21	1.7%	0.5%	0.2%	1.0%	Nov-21	1.8%	0.5%	0.2%	1.0%
	Month		Morriston Hospital	Singleton Hospital	NPT Hospital	HB Total																																																																		
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	A breakdown by Hospital for November 2021: <ul style="list-style-type: none">• Morriston – 1.76%• Singleton – 0.50%• NPT – 0.21%																																																																							

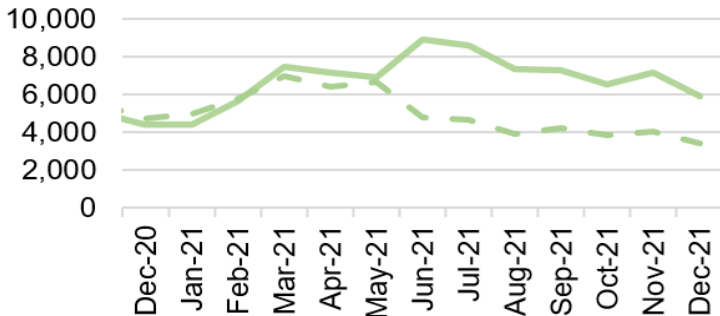

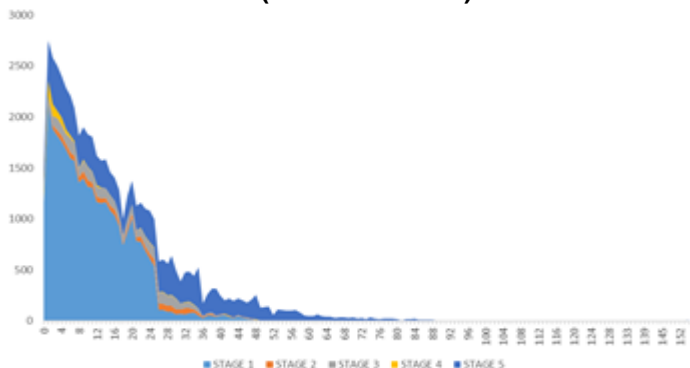
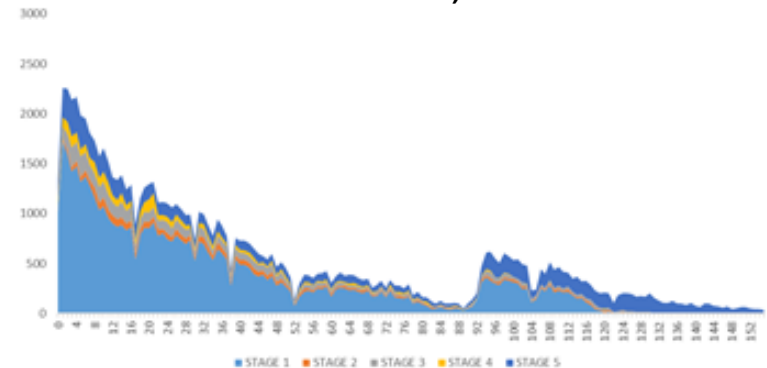
5 HARM QUADRANT- HARM FROM REDUCTION IN NON-COVID ACTIVITY

5.1 Overview

		Harm from reduction in non-Covid activity															
Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21
		Cancer															
Single Cancer Pathway- % of patients started treatment within 62 days (without suspensions)	Total	12 month improvement trend			61.0%	67.9%	56.4%	71.6%	65.7%	60.0%	66.8%	55.0%	58.4%	62.2%	61.9%	63.4%	45.0%
		Planned Care															
Number of patients waiting > 26 weeks for outpatient appointment*	Morrison	0			12,543	12,487	12,479	12,870	13,398	14,047	13,867	14,080	14,661	15,092	15,906	16,385	17,214
	NPTH				49	61	111	73	92	157	228	271	335	407	378	387	294
	Singleton				8,336	8,427	8,414	8,575	9,027	9,327	9,053	8,769	8,383	8,447	8,162	7,955	7,920
	PC&CS				251	233	221	232	235	169	131	105	65	51	37	25	24
	Total				21,179	21,208	21,225	21,750	22,752	23,700	23,279	23,225	23,444	23,997	24,483	24,752	25,452
Number of patients waiting > 36 weeks for treatment*	Morrison	0			22,391	21,695	21,199	21,228	21,579	22,095	22,414	22,968	23,364	23,214	23,874	24,121	24,500
	NPTH				42	41	43	45	46	45	57	98	167	189	191	198	150
	Singleton				11,629	11,385	10,788	10,942	11,134	11,727	12,022	11,980	11,920	11,764	11,841	12,245	12,388
	PC&CS				247	219	204	196	181	115	119	82	53	43	35	25	22
	Total (inc. diagnostics > 36 wks)				35,126	33,991	32,719	32,874	33,395	34,447	35,040	35,583	35,999	35,711	36,420	37,064	37,504
Number of patients waiting > 8 weeks for a specified diagnostics*	Morrison	0			4,361	3,938	2,978	2,517	2,757	2,739	3,162	3,390	3,573	3,528	3,320	3,217	2,927
	Singleton				2,218	2,301	2,109	2,037	2,047	2,103	2,068	2,035	1,950	2,204	2,619	2,791	3,144
	Total				6,579	6,239	5,087	4,554	4,804	4,842	5,230	5,425	5,523	5,732	5,939	6,008	6,071
Number of patients waiting > 14 weeks for a specified therapy*	MH&LD	0			0	0	0	0	0	1	0	0	0	0	0	0	0
	NPTH				93	127	129	60	18	8	15	1	15	18	28	29	12
	PC&CS				615	457	362	309	183	157	156	150	171	302	386	600	877
	Total				708	584	491	369	201	166	171	151	186	320	414	629	889

Measure	Locality	National/ Local Target	Internal profile	Trend	SBU													
					Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	
			Planned Care															
Total number of patients waiting for a follow-up outpatient appointment *	Total	HB Target TBC			119,963	119,999	120,882	121,403	122,303	123,088	127,444	130,208	127,391	130,963	131,554	129,255	131,403	
Number of patients delayed by over 100% past their target date *	Total				27,641	28,419	28,862	29,316	29,334	30,062	30,550	31,316	29,770	32,574	33,121	30,946	31,912	
Number of patients delayed past their agreed target date (booked and not booked) *	Total				56,210	57,297	57,458	55,944	55,086	54,664	55,254	60,618	54,993	60,340	60,447	56,618	58,006	
Number of Ophthalmology patients without an allocated health risk factor	Total	0			326	212	281	294	614	326	486	539	628	702	413	528	694	
Number of patients without a documented clinical review date	Total	0			90	32	25	14	9	5	6	5	6	7	3	4	2	
			Patient Experience/ Feedback															
Number of friends and family surveys completed	PCCS	12 month improvement trend			84	144	97	255		159	532	79	245	213	89	360	291	
	MH&LD				56	22	8	11		3	0	0	59	18	10	36	23	
	Morriston				152	168	211	326		1,330	934	699	642	995	941	1,131	878	
	NPTH				18	43	31	16										
	Singleton				330	323	459	453		3,098	1,808	1,029	1,106	1,452	1,118	1,602	1,580	
	Total				584	678	798	1,050		4,590	3,297	1,912	2,075	2,025	2,733	3,194	2,776	
% of patients who would recommend and highly recommend	PCCS	90%	80%		62%	76%	77%	90%		100%	100%	89%	94%	90%	90%	94%	90%	
	MH&LD				21%	36%	88%	73%		100%	0%	0%	93%	94%	90%	97%	100%	
	Morriston				70%	76%	82%	86%		96%	97%	93%	92%	93%	92%	93%	94%	
	NPTH				67%	58%	32%	75%										
	Singleton				85%	85%	92%	87%		97%	97%	91%	92%	90%	92%	94%	94%	
	Total				77%	79%	85%	87%		96%	97%	92%	92%	92%	92%	94%	93%	
% of all-Wales surveys scoring 9 or 10 on overall satisfaction	PCCS	90%	80%		67%	90%	100%	100%		100%	-		95%	92%	94%	89%	97%	
	MH&LD				-	-	-	50%										
	Morriston				33%	80%	71%	90%		93%	97%		96%	96%	94%	93%	96%	
	NPTH				67%	67%	100%	100%										
	Singleton				80%	77%	95%	92%		93%	97%		95%	96%	95%	93%	97%	
	Total				65%	81%	94%	93%		92%	96%		92%	96%	93%	93%	96%	
Number of new complaints received	PCCS	12 month reduction rend			24	9	10	22	8	16	16	18	8	11	12			
	MH&LD				6	11	15	10	26	15	19	24	13	12	13			
	Morriston				38	33	40	50	23	53	69	51	50	61	57			
	NPTH				1	7	6	7	4	3	10	6	6	6	6			
	Singleton				20	15	20	24	24	23	31	28	32	21	33			
	Total				83	78	94	117	100	115	159	139	115	115	134			
% of complaints that have received a final reply (under Regulation 24) or an interim reply (under Regulation 26) up to and including 30 working days from the date the complaint was first received by the organisation	PCCS	75%	80%		77%	63%	67%	67%	88%	81%	72%	54%	75%	73%	83%			
	MH&LD				75%	73%	64%	67%	69%	67%	50%	58%	62%	92%	69%			
	Morriston				91%	81%	95%	92%	100%	92%	80%	76%	94%	84%	70%			
	NPTH				0%	57%	67%	100%	100%	100%	70%	100%	67%	50%	83%			
	Singleton				70%	57%	68%	67%	61%	68%	43%	54%	81%	52%	48%			
	Total				80%	71%	80%	81%	78%	78%	68%	69%	83%	75%	67%			

5.3 Updates on key measures

PLANNED CARE	
Description	Current Performance
Referrals and shape of the waiting list	December 2021 has seen a reduction in referral figures. Since September 2020 the number of referrals and additions appeared to stabilise but then started to increase again from January 2021. Chart 4 shows the shape of the current waiting list. Chart 3 shows the waiting list as at December 2019 as this reflects a typical monthly snapshot of the waiting list prior to the COVID19 pandemic.
	Trend
1. GP Referrals <i>The number of Stage 1 additions per week</i>	1. Number of GP referrals received by SBU Health Board
	
	2. Number of stage 1 additions per week
	
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>	3. Total size of the waiting list and movement (December 2019)
	
4. Size of the waiting list <i>Total number of patients on the waiting list by stage as at December 2021</i>	4. Total size of the waiting list and movement (December 2021)
	

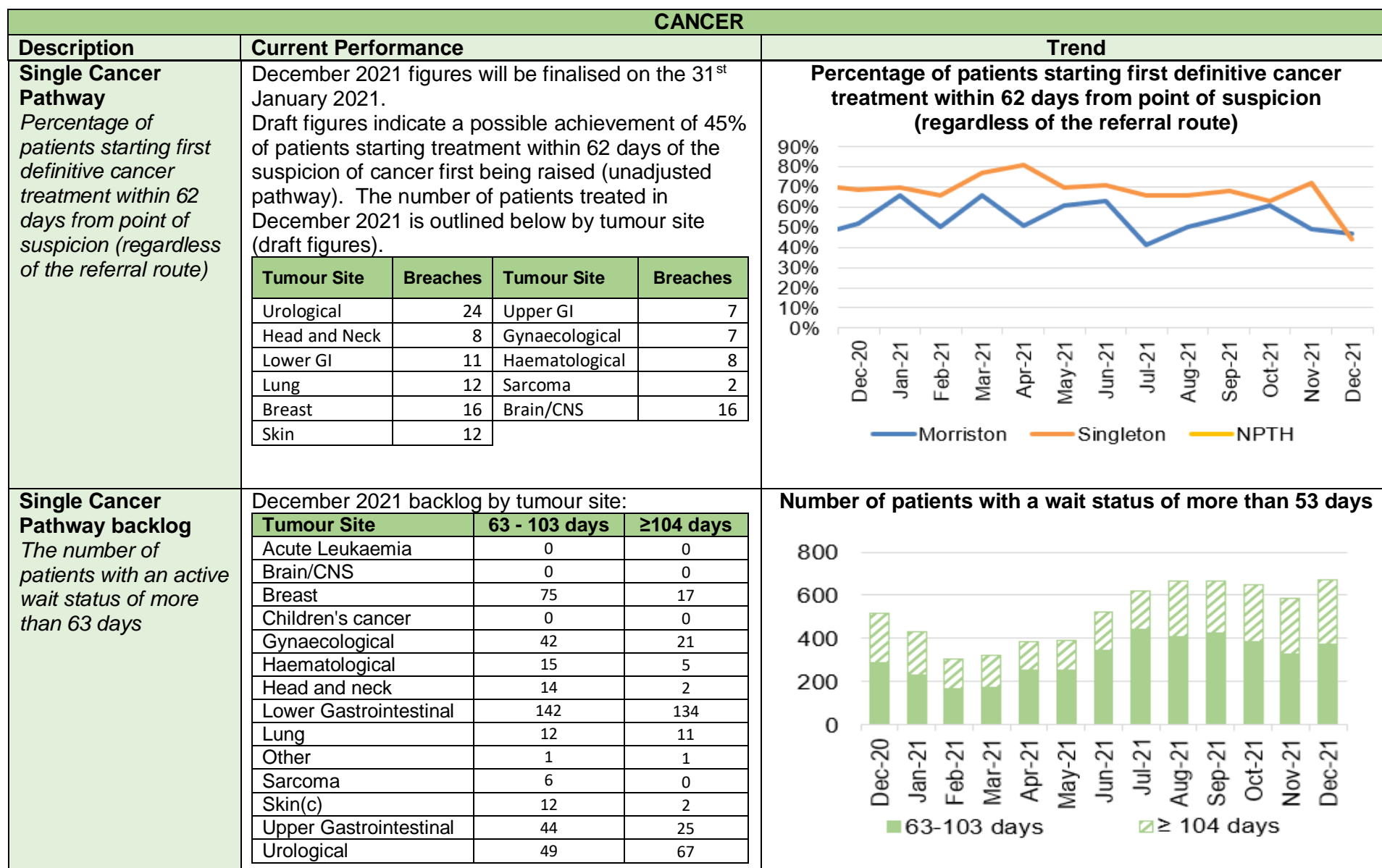
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Outpatient waiting times 1. Number of patients waiting more than 26 weeks for an outpatient appointment (stage 1)- Health Board Total 2. Number of patients waiting more than 26 weeks for an outpatient appointment (stage 1)- Hospital Level 3. Patients waiting over 26 weeks for an outpatient appointment by specialty 4. Outpatient activity undertaken	<p>The number of patients waiting over 26 weeks for a first outpatient appointment is still a challenge. December 2021 saw an in-month increase in the number of patients waiting over 26 weeks for an outpatient appointment. The number of breaches increased from 24,752 in November 2021 to 25,452 in December 2021. Orthopaedics has the largest proportion of patients waiting over 26 weeks for an outpatient appointment, closely followed by Ophthalmology and ENT. The number of outpatient attendances has significantly reduced since February 2020 due to COVID19. Chart 4 shows that the number of attendances started to increase from April 2021 before remaining steady for a period and then increasing again in November 2021.</p>																																																																																																																																																																																																										
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Patients waiting over 36 weeks for treatment 1. Number of patients waiting more than 36 weeks for treatment and the number of elective patients admitted for treatment- Health Board Total 2. Number of patients waiting more than 36 weeks for treatment and the number of elective patients admitted for treatment- Hospital level 3. Number of elective admissions	<p>The number of patients waiting longer than 36 weeks from referral to treatment has increased every month since the first wave of COVID19 in March 2020. December 2020 was the first month in 2020 that saw an in-month reduction and this trend continued into January and February 2021 however, the number of breaches increased again from March 2021. In December 2021, there were 37,504 patients waiting over 36 weeks which is a 1.2% in-month increase from November 2021. 27,7268 of the 37,504 were waiting over 52 weeks in December 2021.</p>																																																																																																																																																													
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	<div><div><h3>1. Number of patients waiting over 36 weeks- HB total</h3><table><caption>1. Number of patients waiting over 36 weeks- HB total</caption><thead><tr><th>Month</th><th>Patients</th></tr></thead><tbody><tr><td>Dec-20</td><td>35,000</td></tr><tr><td>Jan-21</td><td>34,000</td></tr><tr><td>Feb-21</td><td>33,000</td></tr><tr><td>Mar-21</td><td>32,000</td></tr><tr><td>Apr-21</td><td>33,000</td></tr><tr><td>May-21</td><td>34,000</td></tr><tr><td>Jun-21</td><td>35,000</td></tr><tr><td>Jul-21</td><td>36,000</td></tr><tr><td>Aug-21</td><td>37,000</td></tr><tr><td>Sep-21</td><td>38,000</td></tr><tr><td>Oct-21</td><td>39,000</td></tr><tr><td>Nov-21</td><td>40,000</td></tr><tr><td>Dec-21</td><td>41,000</td></tr></tbody></table><p>■ > 36 wks (SB UHB)</p></div><div><h3>2. Number of patients waiting over 36 weeks- Hospital level</h3><table><caption>2. Number of patients waiting over 36 weeks- Hospital level</caption><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>PCT</th><th>NPTH</th></tr></thead><tbody><tr><td>Dec-20</td><td>22,000</td><td>12,000</td><td>1,000</td><td>1,000</td></tr><tr><td>Jan-21</td><td>21,000</td><td>11,000</td><td>1,000</td><td>1,000</td></tr><tr><td>Feb-21</td><td>20,000</td><td>10,000</td><td>1,000</td><td>1,000</td></tr><tr><td>Mar-21</td><td>21,000</td><td>11,000</td><td>1,000</td><td>1,000</td></tr><tr><td>Apr-21</td><td>22,000</td><td>12,000</td><td>1,000</td><td>1,000</td></tr><tr><td>May-21</td><td>23,000</td><td>13,000</td><td>1,000</td><td>1,000</td></tr><tr><td>Jun-21</td><td>24,000</td><td>14,000</td><td>1,000</td><td>1,000</td></tr><tr><td>Jul-21</td><td>25,000</td><td>15,000</td><td>1,000</td><td>1,000</td></tr><tr><td>Aug-21</td><td>26,000</td><td>16,000</td><td>1,000</td><td>1,000</td></tr><tr><td>Sep-21</td><td>27,000</td><td>17,000</td><td>1,000</td><td>1,000</td></tr><tr><td>Oct-21</td><td>28,000</td><td>18,000</td><td>1,000</td><td>1,000</td></tr><tr><td>Nov-21</td><td>29,000</td><td>19,000</td><td>1,000</td><td>1,000</td></tr><tr><td>Dec-21</td><td>30,000</td><td>20,000</td><td>1,000</td><td>1,000</td></tr></tbody></table><p>— Morriston — Singleton — PCT — NPTH</p></div><div><h3>3. Number of elective admissions</h3><table><caption>3. Number of elective admissions</caption><thead><tr><th>Month</th><th>Admissions</th></tr></thead><tbody><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>3,800</td></tr><tr><td>Mar-21</td><td>4,200</td></tr><tr><td>Apr-21</td><td>4,000</td></tr><tr><td>May-21</td><td>4,500</td></tr><tr><td>Jun-21</td><td>5,500</td></tr><tr><td>Jul-21</td><td>5,200</td></tr><tr><td>Aug-21</td><td>4,500</td></tr><tr><td>Sep-21</td><td>4,200</td></tr><tr><td>Oct-21</td><td>4,000</td></tr><tr><td>Nov-21</td><td>4,500</td></tr><tr><td>Dec-21</td><td>3,800</td></tr></tbody></table><p>— Admitted elective patients</p></div><div><h3>4.Total RTT waiting list</h3><table><caption>4.Total RTT waiting list</caption><thead><tr><th>Month</th><th>Total Waiting List</th></tr></thead><tbody><tr><td>Apr-21</td><td>75,000</td></tr><tr><td>May-21</td><td>78,000</td></tr><tr><td>Jun-21</td><td>80,000</td></tr><tr><td>Jul-21</td><td>82,000</td></tr><tr><td>Aug-21</td><td>85,000</td></tr><tr><td>Sep-21</td><td>88,000</td></tr><tr><td>Oct-21</td><td>90,000</td></tr><tr><td>Nov-21</td><td>92,000</td></tr><tr><td>Dec-21</td><td>95,000</td></tr><tr><td>Jan-22</td><td>98,000</td></tr><tr><td>Feb-22</td><td>100,000</td></tr><tr><td>Mar-22</td><td>102,000</td></tr><tr><td>Apr-22</td><td>105,000</td></tr><tr><td>May-22</td><td>108,000</td></tr><tr><td>Jun-22</td><td>110,000</td></tr></tbody></table><p>— Total Waiting List — Trajectory</p></div></div>	Month	Patients	Dec-20	35,000	Jan-21	34,000	Feb-21	33,000	Mar-21	32,000	Apr-21	33,000	May-21	34,000	Jun-21	35,000	Jul-21	36,000	Aug-21	37,000	Sep-21	38,000	Oct-21	39,000	Nov-21	40,000	Dec-21	41,000	Month	Morriston	Singleton	PCT	NPTH	Dec-20	22,000	12,000	1,000	1,000	Jan-21	21,000	11,000	1,000	1,000	Feb-21	20,000	10,000	1,000	1,000	Mar-21	21,000	11,000	1,000	1,000	Apr-21	22,000	12,000	1,000	1,000	May-21	23,000	13,000	1,000	1,000	Jun-21	24,000	14,000	1,000	1,000	Jul-21	25,000	15,000	1,000	1,000	Aug-21	26,000	16,000	1,000	1,000	Sep-21	27,000	17,000	1,000	1,000	Oct-21	28,000	18,000	1,000	1,000	Nov-21	29,000	19,000	1,000	1,000	Dec-21	30,000	20,000	1,000	1,000	Month	Admissions	Dec-20	3,000	Jan-21	3,500	Feb-21	3,800	Mar-21	4,200	Apr-21	4,000	May-21	4,500	Jun-21	5,500	Jul-21	5,200	Aug-21	4,500	Sep-21	4,200	Oct-21	4,000	Nov-21	4,500	Dec-21	3,800	Month	Total Waiting List	Apr-21	75,000	May-21	78,000	Jun-21	80,000	Jul-21	82,000	Aug-21	85,000	Sep-21	88,000	Oct-21	90,000	Nov-21	92,000	Dec-21	95,000	Jan-22	98,000	Feb-22	100,000	Mar-22	102,000	Apr-22	105,000	May-22	108,000	Jun-22
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Total waiting times <i>Percentage of patients waiting less than 26 weeks from referral to treatment</i>	<p>Throughout 2019/20 the overall percentage of patients waiting less than 26 weeks from referral to treatment ranged between 80% and 88%. Whereas, throughout the Covid19 pandemic in 2020/21 the percentage ranged between 41% and 72%.</p> <p>In December 2021, 50.5% of patients were waiting under 26 weeks from referral to treatment, which is a reduction from November 2021.</p>	<p>Percentage of patient waiting less than 26 weeks</p> <table><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>PCT</th><th>NPTH</th></tr></thead><tbody><tr><td>Dec-20</td><td>40%</td><td>50%</td><td>40%</td><td>95%</td></tr><tr><td>Jan-21</td><td>40%</td><td>48%</td><td>42%</td><td>88%</td></tr><tr><td>Feb-21</td><td>40%</td><td>48%</td><td>45%</td><td>85%</td></tr><tr><td>Mar-21</td><td>40%</td><td>48%</td><td>42%</td><td>92%</td></tr><tr><td>Apr-21</td><td>40%</td><td>48%</td><td>38%</td><td>88%</td></tr><tr><td>May-21</td><td>42%</td><td>48%</td><td>45%</td><td>85%</td></tr><tr><td>Jun-21</td><td>42%</td><td>48%</td><td>55%</td><td>82%</td></tr><tr><td>Jul-21</td><td>42%</td><td>48%</td><td>65%</td><td>80%</td></tr><tr><td>Aug-21</td><td>42%</td><td>48%</td><td>75%</td><td>78%</td></tr><tr><td>Sep-21</td><td>42%</td><td>48%</td><td>80%</td><td>75%</td></tr><tr><td>Oct-21</td><td>42%</td><td>48%</td><td>82%</td><td>72%</td></tr><tr><td>Nov-21</td><td>42%</td><td>48%</td><td>85%</td><td>72%</td></tr><tr><td>Dec-21</td><td>42%</td><td>48%</td><td>85%</td><td>75%</td></tr></tbody></table>	Month	Morriston	Singleton	PCT	NPTH	Dec-20	40%	50%	40%	95%	Jan-21	40%	48%	42%	88%	Feb-21	40%	48%	45%	85%	Mar-21	40%	48%	42%	92%	Apr-21	40%	48%	38%	88%	May-21	42%	48%	45%	85%	Jun-21	42%	48%	55%	82%	Jul-21	42%	48%	65%	80%	Aug-21	42%	48%	75%	78%	Sep-21	42%	48%	80%	75%	Oct-21	42%	48%	82%	72%	Nov-21	42%	48%	85%	72%	Dec-21	42%	48%	85%	75%
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Ophthalmology waiting times <i>Percentage of ophthalmology R1 patients who are waiting within their clinical target date or within 25% in excess of their clinical target date for their care or treatments</i>	<p>In December 2021, 48.7% of Ophthalmology R1 patients were waiting within their clinical target date or within 25% of the target date.</p> <p>There was an upward trend in performance in 2019/20 however, there was a continuous downward trend in performance in 2020/21, however performance seems to be improving slightly in 2021/22.</p>	<p>Percentage of ophthalmology R1 patients who are waiting within their clinical target date or within 25% in excess of their clinical target date for their care or treatments</p> <table><thead><tr><th>Month</th><th>% of R1 ophthalmology patient pathways</th></tr></thead><tbody><tr><td>Dec-20</td><td>48%</td></tr><tr><td>Jan-21</td><td>45%</td></tr><tr><td>Feb-21</td><td>48%</td></tr><tr><td>Mar-21</td><td>48%</td></tr><tr><td>Apr-21</td><td>48%</td></tr><tr><td>May-21</td><td>48%</td></tr><tr><td>Jun-21</td><td>48%</td></tr><tr><td>Jul-21</td><td>48%</td></tr><tr><td>Aug-21</td><td>48%</td></tr><tr><td>Sep-21</td><td>48%</td></tr><tr><td>Oct-21</td><td>48%</td></tr><tr><td>Nov-21</td><td>48%</td></tr><tr><td>Dec-21</td><td>48.7%</td></tr></tbody></table> <p>■ % of R1 ophthalmology patient pathways waiting within target date or within 25% beyond target date for an outpatient appointment</p> <p>— Target</p>	Month	% of R1 ophthalmology patient pathways	Dec-20	48%	Jan-21	45%	Feb-21	48%	Mar-21	48%	Apr-21	48%	May-21	48%	Jun-21	48%	Jul-21	48%	Aug-21	48%	Sep-21	48%	Oct-21	48%	Nov-21	48%	Dec-21	48.7%																																										
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Diagnostics waiting times <i>The number of patients waiting more than 8 weeks for specified diagnostics</i>	<p>In December 2021, there was a small increase in the number of patients waiting over 8 weeks for specified diagnostics. It increased from 6,008 in November 2021 to 6,071 in December 2021.</p> <p>The following is a breakdown for the 8-week breaches by diagnostic test for December 2021:</p> <ul style="list-style-type: none">• Endoscopy= 3,144• Cardiac tests= 1,813• Other Diagnostics = 1,106	<p>Number of patients waiting longer than 8 weeks for diagnostics</p> <table border="1"><caption>Approximate data for 8-week breaches (Line Graph)</caption><thead><tr><th>Month</th><th>Cardiac tests</th><th>Endoscopy</th><th>Other diagnostics (inc. radiology)</th></tr></thead><tbody><tr><td>Dec-20</td><td>1,500</td><td>2,200</td><td>2,800</td></tr><tr><td>Jan-21</td><td>1,300</td><td>2,300</td><td>2,500</td></tr><tr><td>Feb-21</td><td>1,400</td><td>2,100</td><td>1,500</td></tr><tr><td>Mar-21</td><td>1,300</td><td>2,000</td><td>1,200</td></tr><tr><td>Apr-21</td><td>1,500</td><td>2,100</td><td>1,300</td></tr><tr><td>May-21</td><td>1,600</td><td>2,100</td><td>1,200</td></tr><tr><td>Jun-21</td><td>1,800</td><td>2,100</td><td>1,300</td></tr><tr><td>Jul-21</td><td>1,900</td><td>2,000</td><td>1,300</td></tr><tr><td>Aug-21</td><td>1,800</td><td>1,900</td><td>1,500</td></tr><tr><td>Sep-21</td><td>1,900</td><td>2,100</td><td>1,400</td></tr><tr><td>Oct-21</td><td>1,700</td><td>2,500</td><td>1,300</td></tr><tr><td>Nov-21</td><td>1,800</td><td>2,800</td><td>1,200</td></tr><tr><td>Dec-21</td><td>1,813</td><td>3,144</td><td>1,106</td></tr></tbody></table> <p>— Cardiac tests — Endoscopy — Other diagnostics (inc. radiology)</p>	Month	Cardiac tests	Endoscopy	Other diagnostics (inc. radiology)	Dec-20	1,500	2,200	2,800	Jan-21	1,300	2,300	2,500	Feb-21	1,400	2,100	1,500	Mar-21	1,300	2,000	1,200	Apr-21	1,500	2,100	1,300	May-21	1,600	2,100	1,200	Jun-21	1,800	2,100	1,300	Jul-21	1,900	2,000	1,300	Aug-21	1,800	1,900	1,500	Sep-21	1,900	2,100	1,400	Oct-21	1,700	2,500	1,300	Nov-21	1,800	2,800	1,200	Dec-21	1,813	3,144	1,106																																																								
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Therapy waiting times <i>The number of patients waiting more than 14 weeks for specified therapies</i>	<p>In December 2021 there were 889 patients waiting over 14 weeks for specified Therapies.</p> <p>The breakdown for the breaches in December 2021 are:</p> <ul style="list-style-type: none">• Podiatry = 714• Speech & Language Therapy= 161• Dietetics = 8 <p><u>Podiatry Recovery</u> Specifically, within Podiatry, Staff sickness/vacancies are having a detrimental impact on Waiting list performance. Active recruitment is currently taking place, with locum cover being explored. A detailed action plan will be developed by 21st January to address the further deteriorating position.</p>	<p>Number of patients waiting longer than 14 weeks for therapies</p> <table border="1"><caption>Approximate data for 14-week breaches (Stacked Bar Chart)</caption><thead><tr><th>Month</th><th>Occ Therapy/ LD (MH)</th><th>Occ Therapy (exc. MH)</th><th>Audiology</th><th>Speech & Language</th><th>Dietetics</th><th>Physio</th><th>Podiatry</th></tr></thead><tbody><tr><td>Dec-20</td><td>100</td><td>100</td><td>100</td><td>100</td><td>10</td><td>10</td><td>100</td></tr><tr><td>Jan-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>10</td><td>10</td><td>100</td></tr><tr><td>Feb-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>10</td><td>10</td><td>100</td></tr><tr><td>Mar-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>10</td><td>10</td><td>100</td></tr><tr><td>Apr-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>10</td><td>10</td><td>100</td></tr><tr><td>May-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>10</td><td>10</td><td>100</td></tr><tr><td>Jun-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>10</td><td>10</td><td>100</td></tr><tr><td>Jul-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>10</td><td>10</td><td>100</td></tr><tr><td>Aug-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>10</td><td>10</td><td>100</td></tr><tr><td>Sep-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>10</td><td>10</td><td>100</td></tr><tr><td>Oct-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>10</td><td>10</td><td>100</td></tr><tr><td>Nov-21</td><td>100</td><td>100</td><td>100</td><td>100</td><td>10</td><td>10</td><td>100</td></tr><tr><td>Dec-21</td><td>100</td><td>100</td><td>100</td><td>161</td><td>8</td><td>10</td><td>714</td></tr></tbody></table> <p>■ Occ Therapy/ LD (MH) ■ Dietetics ■ Occ Therapy (exc. MH) ■ Physio ■ Audiology ■ Podiatry ■ Speech & Language</p>	Month	Occ Therapy/ LD (MH)	Occ Therapy (exc. MH)	Audiology	Speech & Language	Dietetics	Physio	Podiatry	Dec-20	100	100	100	100	10	10	100	Jan-21	100	100	100	100	10	10	100	Feb-21	100	100	100	100	10	10	100	Mar-21	100	100	100	100	10	10	100	Apr-21	100	100	100	100	10	10	100	May-21	100	100	100	100	10	10	100	Jun-21	100	100	100	100	10	10	100	Jul-21	100	100	100	100	10	10	100	Aug-21	100	100	100	100	10	10	100	Sep-21	100	100	100	100	10	10	100	Oct-21	100	100	100	100	10	10	100	Nov-21	100	100	100	100	10	10	100	Dec-21	100	100	100	161	8	10	714
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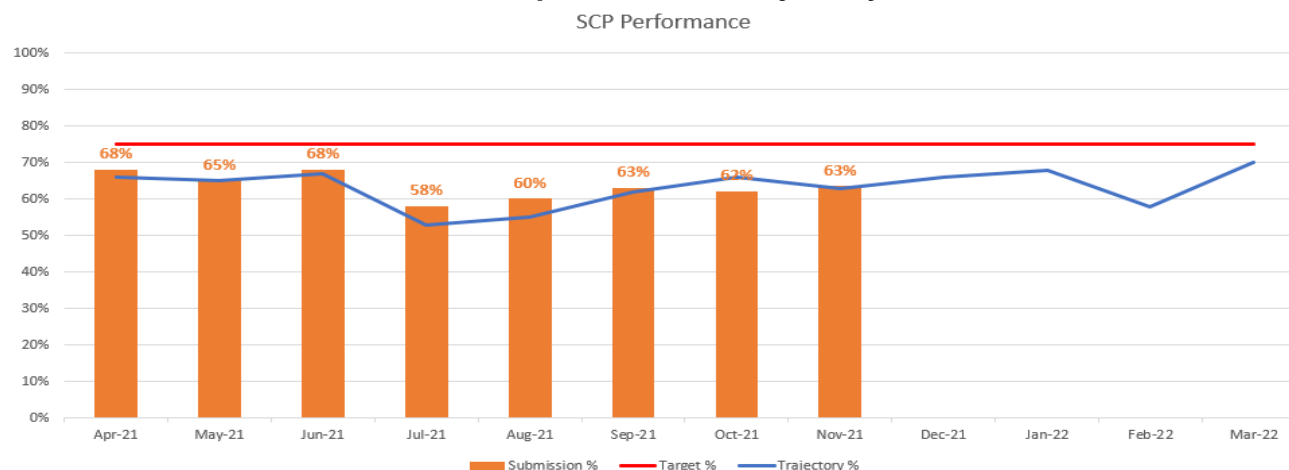
CANCER																														
Description	Current Performance	Trend																												
<p>Cancer demand and shape of the waiting list</p> <p>1. Number of Urgent Suspected Cancer (USC) referrals received</p>	<p>The number of Urgent Suspected Cancer (USC) referrals significantly reduced between March and April 2020, however there has been an upward trend since May 2020.</p> <p>The shape of the waiting list shows that there is a significant “wave” of patients that are likely to breach in the near future, there is also an increased number of referrals being received in comparison with previous years.</p>	<p>1. Number of USC referrals</p> <table><thead><tr><th>Month</th><th>Number of USC referrals</th></tr></thead><tbody><tr><td>Dec-20</td><td>1340</td></tr><tr><td>Jan-21</td><td>1475</td></tr><tr><td>Feb-21</td><td>1594</td></tr><tr><td>Mar-21</td><td>1932</td></tr><tr><td>Apr-21</td><td>1880</td></tr><tr><td>May-21</td><td>1871</td></tr><tr><td>Jun-21</td><td>2014</td></tr><tr><td>Jul-21</td><td>2062</td></tr><tr><td>Aug-21</td><td>1742</td></tr><tr><td>Sep-21</td><td>2005</td></tr><tr><td>Oct-21</td><td>1821</td></tr><tr><td>Nov-21</td><td>1771</td></tr><tr><td>Dec-21</td><td>1452</td></tr></tbody></table>	Month	Number of USC referrals	Dec-20	1340	Jan-21	1475	Feb-21	1594	Mar-21	1932	Apr-21	1880	May-21	1871	Jun-21	2014	Jul-21	2062	Aug-21	1742	Sep-21	2005	Oct-21	1821	Nov-21	1771	Dec-21	1452
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<p>2. Single Cancer Pathway backlog- patients waiting over 63 days</p>	<p>December 2021 has seen an increase in the number of patients waiting over 63 days. The following actions have been outlined to support backlog reduction;</p> <ul style="list-style-type: none">- Currently finalising plans to establish FIT testing in Primary care – this change will improve pathway efficiency.- A new cancer performance service manager has been appointed and will start in post on 31st January 2022.- A new pelvic mass clinic pilot is due to commence on 17th January 2022 to support rapid assessment, diagnosis and management of patient presenting with suspected ovarian cancer.- Currently progressing with filling the breast surgeon vacancy, the Job Description is currently being finalised.- Waiting list initiatives for PMB patients have started from W/C 10th January 2022	<p>2. Single Cancer Pathway backlog- patients waiting over 63 days</p> <table><thead><tr><th>Month</th><th>Total backlog</th></tr></thead><tbody><tr><td>Dec-20</td><td>500</td></tr><tr><td>Jan-21</td><td>450</td></tr><tr><td>Feb-21</td><td>300</td></tr><tr><td>Mar-21</td><td>320</td></tr><tr><td>Apr-21</td><td>380</td></tr><tr><td>May-21</td><td>380</td></tr><tr><td>Jun-21</td><td>500</td></tr><tr><td>Jul-21</td><td>600</td></tr><tr><td>Aug-21</td><td>650</td></tr><tr><td>Sep-21</td><td>650</td></tr><tr><td>Oct-21</td><td>620</td></tr><tr><td>Nov-21</td><td>580</td></tr><tr><td>Dec-21</td><td>650</td></tr></tbody></table> <p>■ Total backlog</p>	Month	Total backlog	Dec-20	500	Jan-21	450	Feb-21	300	Mar-21	320	Apr-21	380	May-21	380	Jun-21	500	Jul-21	600	Aug-21	650	Sep-21	650	Oct-21	620	Nov-21	580	Dec-21	650
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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>	To date, early January 2022 figures show total wait volumes have decreased by 13%. This can be attributed to a change in the data recording following the introduction of a new category of patients who are first reviewed in a 'diagnostic one stop' outpatient appointment.	The number of patients waiting for a first outpatient appointment (by total days waiting) – Early January 2021																																																														
		<table><tr><th>FIRST OPA</th><th>2-Jan</th><th>9-Jan</th><th>% change</th></tr><tr><td>Acute Leukaemia</td><td>0</td><td>0</td><td>0%</td></tr><tr><td>Brain/CNS</td><td>1</td><td>0</td><td>-100%</td></tr><tr><td>Breast</td><td>1</td><td>0</td><td>-100%</td></tr><tr><td>Children's Cancer</td><td>1</td><td>0</td><td>-100%</td></tr><tr><td>Gynaecological</td><td>58</td><td>34</td><td>-41%</td></tr><tr><td>Haematological</td><td>2</td><td>4</td><td>100%</td></tr><tr><td>Head and Neck</td><td>55</td><td>50</td><td>-9%</td></tr><tr><td>Lower GI</td><td>53</td><td>75</td><td>42%</td></tr><tr><td>Lung</td><td>7</td><td>5</td><td>-29%</td></tr><tr><td>Other</td><td>47</td><td>33</td><td>-30%</td></tr><tr><td>Sarcoma</td><td>6</td><td>4</td><td>-33%</td></tr><tr><td>Skin</td><td>71</td><td>38</td><td>-46%</td></tr><tr><td>Upper GI</td><td>48</td><td>47</td><td>-2%</td></tr><tr><td>Urological</td><td>30</td><td>41</td><td>37%</td></tr><tr><td></td><td>380</td><td>331</td><td>-13%</td></tr></table>	FIRST OPA	2-Jan	9-Jan	% change	Acute Leukaemia	0	0	0%	Brain/CNS	1	0	-100%	Breast	1	0	-100%	Children's Cancer	1	0	-100%	Gynaecological	58	34	-41%	Haematological	2	4	100%	Head and Neck	55	50	-9%	Lower GI	53	75	42%	Lung	7	5	-29%	Other	47	33	-30%	Sarcoma	6	4	-33%	Skin	71	38	-46%	Upper GI	48	47	-2%	Urological	30	41	37%		380
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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.	Radiotherapy waiting times																																																														
		<table><thead><tr><th>Measure</th><th>Target</th><th>Dec-21</th></tr></thead><tbody><tr><td>Scheduled (21 Day Target)</td><td>80%</td><td>37%</td></tr><tr><td>Scheduled (28 Day Target)</td><td>100%</td><td>78%</td></tr><tr><td>Urgent SC (7 Day Target)</td><td>80%</td><td>37%</td></tr><tr><td>Urgent SC (14 Day Target)</td><td>100%</td><td>87%</td></tr><tr><td>Emergency (within 1 day)</td><td>80%</td><td>100%</td></tr><tr><td>Emergency (within 2 days)</td><td>100%</td><td>100%</td></tr><tr><td>Elective Delay (21 Day Target)</td><td>80%</td><td>92%</td></tr><tr><td>Elective Delay (28 Day Target)</td><td>100%</td><td>100%</td></tr></tbody></table>			Measure	Target	Dec-21	Scheduled (21 Day Target)	80%	37%	Scheduled (28 Day Target)	100%	78%	Urgent SC (7 Day Target)	80%	37%	Urgent SC (14 Day Target)	100%	87%	Emergency (within 1 day)	80%	100%	Emergency (within 2 days)	100%	100%	Elective Delay (21 Day Target)	80%	92%	Elective Delay (28 Day Target)	100%	100%																																	
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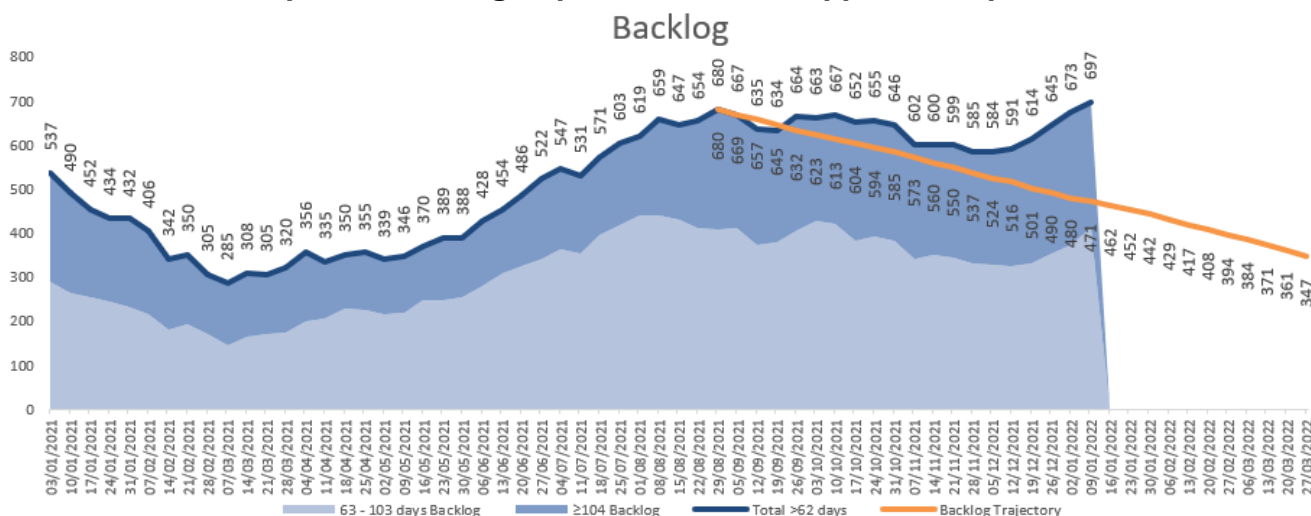
Cancer Services – Performance Escalation Updates

1.SCP performance trajectory

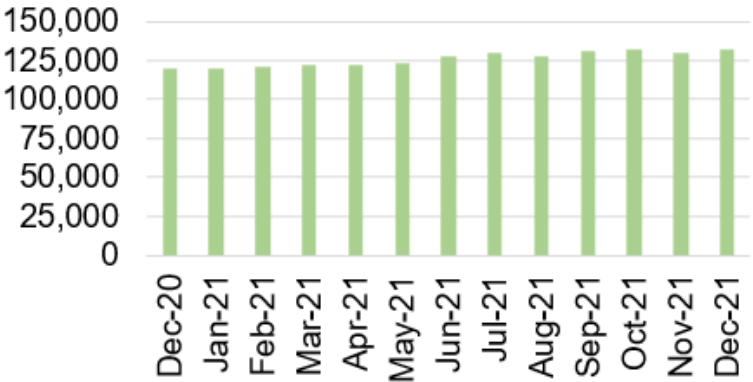
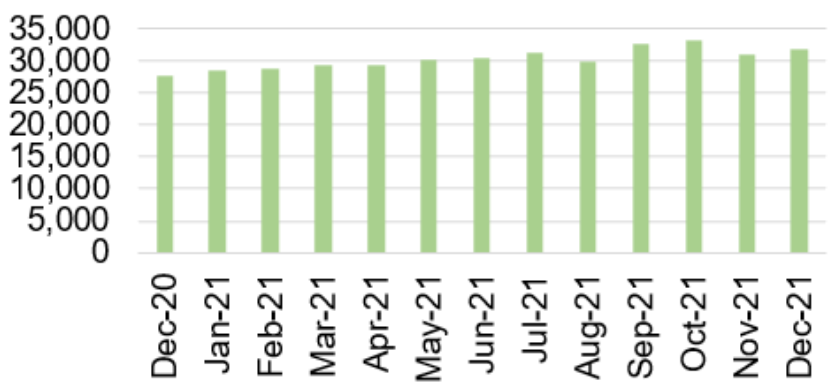


1. SCP performance in November 2021 was reported as 63.4% which is marginally above the outlined trajectory of 63%. December 2021 performance is still in draft format, however current projections suggest performance will be below the recovery trajectory.

Proposed backlog improvements to support SCP performance



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

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 December 2021, the overall size of the follow-up waiting list increased by 2,148 patients compared with November 2021 (from 129,255 to 131,403).</p> <p>In December 2021, there was a total of 58,006 patients waiting for a follow-up past their target date. This is an in-month increase of 2.5% (from 56,618 in November 2021 to 58,006 in December 2021).</p> <p>Of the 58,006 delayed follow-ups in December 2021, 11,680 had appointment dates and 46,326 were still waiting for an appointment.</p> <p>In addition, 31,912 patients were waiting 100%+ over target date in December 2021. This is a 3.1% increase when compared with November 2021.</p>	<p>1. Total number of patients waiting for a follow-up</p>  <p>■ Number of patients waiting for follow-up (SBU HB)</p> <p>2. Delayed follow-ups: Number of patients waiting 100% over target</p>  <p>■ Number of patients waiting 100% over target date (SBU HB)</p>





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

COMPLAINTS		
Description	Current Performance	Trend
Patient concerns <i>1. Number of formal complaints received</i> <		

6.1 Overview

		Harm from wider societal actions/lockdown														
Measure	Locality	National/ Local Target	Internal profile	Trend	SBU											
					Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21
		Childhood immunisations														
% children who received 3 doses of the hexavalent '6 in 1' vaccine by age 1	NPT	95%	90%	*	97.2%	94.1%		95.5%			96.6%					
	Swansea			*	96.4%	96.3%		95.9%			95.9%					
	HB Total			*	96.7%	95.4%		95.7%			96.2%					
% children who received MenB2 vaccine by age 1	NPT	95%	90%	*	97.8%	93.8%		95.2%			96.6%					
	Swansea			*	95.8%	96.1%		96.3%			95.5%					
	HB Total			*	96.6%	95.2%		95.8%			95.9%					
% children who received PCV2 vaccine by age 1	NPT	95%	90%	*	98.1%	96.6%		94.4%			98.2%					
	Swansea			*	96.2%	97.2%		95.4%			96.8%					
	HB Total			*	96.9%	96.9%		95.0%			97.3%					
% children who received Rotavirus vaccine by age 1	NPT	95%	90%	*	95.0%	93.8%		94.0%			96.6%					
	Swansea			*	95.1%	94.1%		94.8%			94.4%					
	HB Total			*	95.1%	94.0%		94.6%			95.2%					
% children who received MMR1 vaccine by age 2	NPT	95%	90%	*	93.6%	95.5%		94.0%			94.3%					
	Swansea			*	95.2%	93.1%		94.8%			93.8%					
	HB Total			*	94.6%	94.0%		94.6%			94.0%					
% children who received PCVf3 vaccine by age 2	NPT	95%	90%	*	93.9%	96.1%		94.4%			95.6%					
	Swansea			*	95.2%	93.3%		95.4%			93.0%					
	HB Total			*	94.7%	94.3%		95.0%			93.9%					
% children who received MenB4 vaccine by age 2	NPT	95%	90%	*	93.9%	95.5%		94.1%			95.3%					
	Swansea			*	95.2%	93.3%		95.5%			93.0%					
	HB Total			*	94.7%	94.1%		95.0%			93.8%					
% children who received Hib/MenC vaccine by age 2	NPT	95%	90%	*	93.6%	95.2%		93.5%			95.3%					
	Swansea			*	94.8%	92.7%		95.7%			93.5%					
	HB Total			*	94.4%	96.3%		94.9%			94.1%					

Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21
% children who are up to date in schedule by age 4	NPT	95%	90%	*	86.4%	86.6%			87.9%			86.4%					
	Swansea			*	87.8%	86.2%			88.1%			88.3%					
	HB Total			*	87.2%	86.3%			88.0%			87.6%					
% of children who received 2 doses of the MMR vaccine by age 5	NPT	95%	90%	*	92.0%	93.9%			90.8%			89.0%					
	Swansea			*	92.0%	91.4%			91.3%			90.3%					
	HB Total			*	92.0%	92.4%			91.1%			89.8%					
% children who received 4 in 1 vaccine by age 5	NPT	95%	90%	*	92.5%	93.7%			91.3%			89.3%					
	Swansea			*	93.1%	90.5%			92.0%			92.0%					
	HB Total			*	92.9%	91.7%			91.7%			91.0%					
% children who received MMR vaccination by age 16	NPT	95%	90%	*	96.0%	90.5%			90.1%			94.0%					
	Swansea			*	93.6%	87.8%			91.2%			90.0%					
	HB Total			*	94.5%	88.9%			90.8%			91.6%					
% children who received teenage booster by age 16	NPT	90%	85%	*	92.7%	91.3%			91.6%			90.4%					
	Swansea			*	92.2%	90.0%			89.9%			90.0%					
	HB Total			*	92.4%	90.5%			90.6%			90.2%					
% children who received MenACWY vaccine by age 16	NPT	Improve		*	92.9%	92.1%			92.1%			90.9%					
	Swansea			*	92.3%	90.8%			91.1%			90.4%					
	HB Total			*	92.5%	91.3%			91.5%			90.6%					

Measure	Locality	National/ Local Target	Internal profile	Trend	SBU												
					Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21
		Mental Health Services															
% of urgent assessments undertaken within 48 hours from receipt of referral (Crisis) (< 18 yrs)	< 18 years old (CAMHS)	100%			100%	100%	100%	100%	100%	93%	94%	79%	100%	95%	97%	97%	
% of patients waiting less than 28 days for 1st outpatient appointment (< 18 yrs)	< 18 years old (CAMHS)	80%			61%	53%	66%	63%	60%	61%	58%	41%	48%	40%	40%	66%	
% of routine assessments undertaken within 28 days from receipt of referral (PCAMHS) (< 18 yrs)	< 18 years old (CAMHS)	80%			73%	29%	97%	46%	0%	0%	0%	29%	37%	89%	65%	36%	
% of routine assessments undertaken within 28 days from receipt of referral (SCAMHS) (< 18 yrs)	< 18 years old (CAMHS)	80%			58%	60%	56%	53%	48%	53%	44%	29%	32%	41%	3%	3%	
% of mental health assessments undertaken within (up to and including) 28 days from the date of receipt of referral (> 18 yrs)	> 18 years old	80%			99%	96%	98%	97%	97%	98%	99%	98%	100%	96%	98%	98%	
% of therapeutic interventions started within 28 days following assessment by LPMHSS (< 18 yrs)	< 18 years old (CAMHS)	80%			100%	93%	97%	91%	49%	67%	1%	100%	82%	35%	0%	64%	
% of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS (> 18 yrs)	> 18 years old	80%			95%	95%	98%	97%	92%	96%	99%	97%	100%	90%	98%	96%	
% of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health (> 18 yrs)	> 18 years old	95%			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	
% of patients with NDD receiving diagnostic assessment and intervention within 26 weeks (< 18 yrs)	< 18 years old (CAMHS)	80%			26%	24%	28%	30%	30%	33%	32%	34%	27%	34%	34%	37%	
% residents in receipt of secondary mental health services (all ages) who have a valid care and treatment plan (CTP) (< 18 yrs)	< 18 years old (CAMHS)	90%			82%	83%	84%	82%	82%	83%	81%	81%	65%	84%	84%	84%	
% residents in receipt of secondary mental health services (all ages) who have a valid care and treatment plan (CTP) (> 18 yrs)	> 18 years old	90%			89%	91%	91%	91%	91%	92%	88%	88%	84%	84%	83%	81%	

6.3 Updates on key measures

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

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

APPENDIX 2: Summary

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

Harm quadrant- Harm from Covid itself											
Category	Measure	Target Type	Target	Internal HB Profile	Reporting period	Morrison	NPTH	Singleton	Primary & Community	MH & LD	HB Total
COVID19 related	Number of new COVID19 cases*	Local			Dec-21						18,167
	Number of staff referred for Antigen Testing*	Local			Dec-21						787
	Number of staff awaiting results of COVID19 test*	Local			Dec-21						0
	Number of COVID19 related incidents*	Local			Dec-21						54
	Number of COVID19 related serious incidents*	Local			Oct-21						0
	Number of COVID19 related complaints*	Local			Dec-21						20
	Number of COVID19 related risks*	Local			Oct-21						0
	Number of staff self isolated (asymptomatic)*	Local			Dec-21						126
	Number of staff self isolated (symptomatic)*	Local			Dec-21						393
	% sickness*	Local			Dec-21						3.9%

	National or local target achieved
	Target not achieved but within tolerance level
	Performance outside of profile/ target

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

Harm quadrant- Harm from overwhelmed NHS and social care system											
Category	Measure	Target Type	Target	Internal HB Profile	Reporting period	Morrison	NPTH	Singleton	Primary & Community	MH & LD	HB Total
Unscheduled Care	Number of ambulance handovers over one hour*	National	0		Dec-21	591		21			612
	% of patients who spend less than 4 hours in all major and minor emergency care (i.e. A&E) facilities from arrival until admission, transfer or discharge*	National	95%		Dec-21	58.5%	94.9%				70%
	Number of patients who spend 12 hours or more in all hospital major and minor care facilities from arrival until admission, transfer or discharge*	National	0		Dec-21	1,100	1				1,101
Stroke	% of patients who have a direct admission to an acute stroke unit within 4 hours*	National	59.8% (UK SNAP average)		Dec-21	17%					17%
	% of patients who receive a CT scan within 1 hour*	National	54.5% (UK SNAP average)		Dec-21	35%					35%
	% of patients who are assessed by a stroke specialist consultant physician within 24 hours*	National	84.2% (UK SNAP average)		Dec-21	97%					97%
	% of thrombolysed stroke patients with a door to door needle time of less than or equal to 45 minutes*	National	12 month improvement trend		Dec-21	10%					10%
	% of patients receiving the required minutes for speech and language therapy*	National	12 month improvement trend		Dec-21	46%					46%
Fractured Neck of Femur (#NOF)	Prompt orthogeriatric assessment- % patients receiving an assessment by a senior geriatrician within 72 hours of presentation	Local	75%		Nov-21	88.7%					88.7%
	Prompt surgery - % patients undergoing surgery by the day following presentation with hip fracture	Local	75%		Nov-21	57.1%					57.1%
	NICE compliant surgery - % of operations consistent with the recommendations of NICE CG124	Local	75%		Nov-21	70.3%					70.3%
	Prompt mobilisation after surgery - % of patients out of bed (standing or hoisted) by the day after operation	Local	75%		Nov-21	71.2%					71.2%
	Not delirious when tested- % patients (<4 on 4AT test) when tested in the week after operation	Local	75%		Nov-21	77.0%					77.0%
	Return to original residence- % patients discharged back to original residence, or in that residence at 120 day follow-up	Local	75%		Oct-21	70.4%					70.4%
	30 day mortality - crude and adjusted figures, noting ONS data only correct after around 6 months	Local	12 month improvement trend		Jan-21	7.5%					7.5%
	% of survival within 30 days of emergency admission for a hip fracture	Local	12 month improvement trend		Sep-21	72.2%					72.2%

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

Harm quadrant- Harm from overwhelmed NHS and social care system											
Category	Measure	Target Type	Target	Internal HB Profile	Reporting period	Morriston	NPTH	Singleton	Primary & Community	MH & LD	HB Total
Healthcare acquired infections	Number of E.Coli bacteraemia cases	National	12 month reduction trend	17	Dec-21	2	0	3	12	0	17
	Number of S.aureus bacteraemia cases	National		8	Dec-21	5	0	0	4	0	9
	Number of C.difficile cases	National		10	Dec-21	9	0	2	1	0	12
	Number of Klebsiella cases	National		9	Dec-21	4	0	2	3	0	9
	Number of Aeruginosa cases	National		1	Dec-21	2	1	0	1	0	4
	Compliance with hand hygiene audits	Local	95%		Dec-21	96%	100%	-	96%	95%	95%
Serious incidents	Number of Serious Incidents	Local	12 month reduction trend		Dec-21	0	0	2	0	0	2
	Of the serious incidents due for assurance, the % which were assured within the agreed timescales	Local	90%		Dec-21						0%
	Number of Never Events	Local	0		Dec-21	0	0	0	0	0	0
Pressure Ulcers	Total number of Pressure Ulcers	Local	12 month reduction trend		Nov-21	27	3	13	31	0	74
	Total number of Grade 3+ Pressure Ulcers	Local	12 month reduction trend		Nov-21	1	0	1	8	0	10
	Pressure Ulcer (Hosp) patients per 100,000 admissions	Local	12 month reduction trend		Nov-21						616
Inpatient Falls	Total number of Inpatient Falls	Local	12 month reduction trend		Dec-21	91	38	33	8	37	208
	Inpatient Falls per 1,000 beddays	Local	Between 3.0 & 5.0		Dec-21						5.28
Mortality	Universal Mortality reviews undertaken within 28 days	Local	95%		Nov-21	99%	88%				99%
	Stage 2 mortality reviews completed within 60 days	Local	95%		Aug-21	60%	0%	0%			50%
	Crude hospital mortality rate by Delivery Unit (74 years and over)	National	12 month reduction trend		Nov-21	1.76%	0.21%	0.50%			0.99%

Harm quadrant- Harm from reduction in non-Covid activity											
Category	Measure	Target Type	Target	Internal HB Profile	Reporting period	Morrison	NPTH	Singleton	Primary & Community	MH & LD	HB Total
Cancer	Single Cancer Pathway- % of patients started treatment within 62 days (with suspensions)*	National	12 month improvement trend		Dec-21 (Draft)						45%
Planned Care	Number of patients waiting > 26 weeks for outpatient appointment	National	0		Dec-21	17,214	294	7,920	24		25,452
	Number of patients waiting > 36 weeks for treatment (inc. Diagnostics > 36 wks)	National	0		Dec-21	24,500	150	12,388	22		37,504
	Number of patients waiting > 8 weeks for a specified diagnostics	National	0		Dec-21	2,927		3,144			6,071
	Number of patients waiting > 14 weeks for a specified therapy	National	0		Dec-21		12		877	0	889
	Total number of patients waiting for a follow-up outpatient appointment	National	0		Dec-21						131,403
	Number of patients delayed by over 100% past their target date	National	0		Dec-21						31,912
	Number of patients delayed past their agreed target date (booked and not booked)	Local	0		Dec-21						58,006
	Number of Ophthalmology patients without an allocated health risk factor	Local	0		Dec-21						694
	Number of patients without a documented clinical review date	Local	0		Dec-21						2
Patient Experience/ Feedback	Number of friends and family surveys completed	Local	12 month improvement trend		Dec-21	878	Now reported under Singleton	1,580	291	23	878
	% of patients who would recommend and highly recommend	Local	90%	80%	Dec-21	94%		94%	90%	100%	93%
	% of all-Wales surveys scoring 9 or 10 on overall satisfaction	Local	90%	80%	Dec-21	96%		97%	97%		96%
	Number of new complaints received	Local	12 month reduction trend		Oct-21	57	6	33	12	13	134
	% of complaints that have received a final reply (under Regulation 24) or an interim reply (under Regulation 26) up to and including 30 working days from the date the complaint was first received by the organisation	National	75%	80%	Oct-21	70%	83%	48%	83%	69%	67%

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

Harm Quadrant- Harm from wider societal actions/lockdown											
Category	Measure	Target Type	Target	Internal HB Profile	Reporting period	Morriston	NPTH	Singleton	Primary & Community	MH & LD	HB Total
Childhood immunisations	% children who received 3 doses of the hexavalent '6 in 1' vaccine by age 1	National	95%	90%	Q2 2021/22						96.2%
	% children who received MenB2 vaccine by age 1	Local	95%	90%	Q2 2021/22						95.9%
	% children who received PCV2 vaccine by age 1		95%	90%	Q2 2021/22						97.3%
	% children who received Rotavirus vaccine by age 1		95%	90%	Q2 2021/22						95.2%
	% children who received MMR1 vaccine by age 2		95%	90%	Q2 2021/22						94.0%
	% children who received PCVf3 vaccine by age 2		95%	90%	Q2 2021/22						93.9%
	% children who received MenB4 vaccine by age 2		95%	90%	Q2 2021/22						93.8%
	% children who received Hib/MenC vaccine by age 2		95%	90%	Q2 2021/22						94.1%
	% children who are up to date in schedule by age 4		95%	90%	Q2 2021/22						87.6%
	% of children who received 2 doses of the MMR vaccine by age 5	National	95%	90%	Q2 2021/22						89.8%
	% children who received 4 in 1 vaccine by age 5	Local	95%	90%	Q2 2021/22						91.0%
	% children who received MMR vaccination by age 16		95%	90%	Q2 2021/22						91.6%
	% children who received teenage booster by age 16		90%	85%	Q2 2021/22						90.2%
	% children who received MenACWY vaccine by age 16		Improve		Q2 2021/22						90.6%
Mental Health (Adult and Children)	% of urgent assessments undertaken within 48 hours from receipt of referral (Crisis) (< 18 yrs)	Local	100%		Nov-21						97%
	% of patients waiting less than 28 days for 1st outpatient appointment (< 18 yrs)	National	80%		Nov-21						66%
	% of routine assessments undertaken within 28 days from receipt of referral (PCAMHS) (< 18 yrs)	National	80%		Nov-21						36%
	% of routine assessments undertaken within 28 days from receipt of referral (SCAMHS) (< 18 yrs)	Local	80%		Nov-21						3%
	% of mental health assessments undertaken within (up to and including) 28 days from the date of receipt of referral (> 18 yrs)	National	80%		Nov-21					98%	98%
	% of therapeutic interventions started within 28 days following assessment by LPMHSS (< 18 yrs)	National	80%		Nov-21						64%
	% of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS (> 18 yrs)	National	80%		Nov-21					96%	96%
	% of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health (> 18 yrs)	National	95%		Nov-21					100%	100.0%
	% of patients with NDD receiving diagnostic assessment and intervention within 26 weeks (< 18 yrs)	National	80%		Nov-21						37%
	% residents in receipt of secondary mental health services (all ages) who have a valid care and treatment plan (CTP) (< 18 yrs)	National	90%		Nov-21						84%
	% residents in receipt of secondary mental health services (all ages) who have a valid care and treatment plan (CTP) (> 18 yrs)	National	90%		Nov-21					81%	81%

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

APPENDIX 3: INTEGRATED PERFORMANCE DASHBOARD

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

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

Harm from overwhelmed NHS and social care system																							
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21
Mortality	% of universal mortality reviews (UMRs) undertaken within 28 days of a death	Local	Nov-21	99%	95%	95%	✓				99.0%	100.0%	100.0%	97.6%	99.3%	98.0%	98.6%	97.6%	93.0%	98.0%	96.8%	98.5%	
	Stage 2 mortality reviews required	Local	Nov-21	10							12	19	6	11	5	18	12	7	17	10	16	10	
	% stage 2 mortality reviews completed	Local	Aug-21	50.00%		100%	✗				75.0%	36.8%					25.0%	42.9%	50.0%				
	Crude hospital mortality rate (74 years of age or less)	National	Nov-21	0.99%	12 month ↓			1.35% (Sep-21)	4th (Sep-21)		1.08%	1.14%	1.17%	1.17%	1.04%	1.04%	1.01%	1.03%	1.02%	1.03%	1.03%	0.99%	
NEWS	% patients with completed NEWS scores & appropriate responses actioned	Local	Dec-21	89%		98%	✗				98.5%	95.0%	96.3%	93.5%	97.4%	98.9%	95.0%	89.7%	91.7%	91.6%	93.8%	92.2%	89.1%
Coding	% of episodes clinically coded within 1 month of discharge	Local	Nov-21	76%	95%	95%	✗				93%	95%	96%	96%	96%	96%	89%	90%	94%	90%	92%	76%	
E-TOC	% of completed discharge summaries (total signed and sent)	Local	Dec-21	62%		100%	✗				59%	67%	63%	64%	63%	67%	69%	62%	62%	68%	61%	63%	62%
Workforce	Agency spend as a % of the total pay bill	National	May-21	3.30%	12 month ↓			4.1% (May-21)	all Wales 10th organisation s (May-21)		5.4%	6.2%	4.9%	5.7%	4.4%	3.3%							
	Overall staff engagement score – scale score method	National	2020	75%	Improvement			75% (2020)	all Wales 30th organisation s (2020)		2020 = 75%												
	% of headcount by organisation who have had a PADR/medical appraisal in the previous 12 months (excluding doctors and dentists in training)	National	Dec-21	57%	85%	85%	✗	60.0% (May-21)	all Wales 10th organisation s (May-21)		54%	52%	51%	53%	57%	60%	65%	60%	60%	58%	56%	55%	57%
	% compliance for all completed Level 1 competency with the Core Skills and Training Framework	National	Dec-21	80%	85%	85%	✗	78.8% (May-21)	all Wales 6th organisation s (May-21)		80%	80%	80%	80%	80%	80%	81%	81%	81%	80%	80%	80%	80%
	% workforce sickness absence (12 month rolling)	National	Nov-21	7.44%	12 month ↓			5.68% (May-21)	all Wales 21st organisation s (May-21)		7.48%	7.57%	7.56%	7.44%	7.12%	6.93%	6.91%	6.99%	7.11%	7.29%	7.44%	7.44%	
	% staff who would be happy with the standards of care provided by their organisation if a friend or relative needed treatment	National	2020	67.1%	Improvement			67.8% (2020)	all Wales 31st organisation s (2020)		2020 = 67.1%												

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

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