



Bwrdd Iechyd Prifysgol  
Bae Abertawe  
Swansea Bay University  
Health Board



<b>Report Date</b>	<b>25<sup>th</sup> July 2023</b>	<b>Agenda Item</b>	<b>2.1</b>
<b>Report Title</b>	<b>Integrated Performance Report</b>		
<b>Report Author</b>	Meghann Protheroe, Head of Health Board Performance		
<b>Report Sponsor</b>	Darren Griffiths, Director of Finance and Performance		
<b>Presented by</b>	Darren Griffiths, Director of Finance and Performance		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	The purpose of this report is to provide an update on the current performance of the Health Board at the end of the most recent reporting period (June 2023) in delivering key local performance measures as well as the national measures outlined in the 2022/23 NHS Wales Performance Framework.		
<b>Key Issues</b>	<p>The Integrated Performance Report is a routine report that provides an overview of how the Health Board is performing against the National Delivery measures and key local quality and safety measures.</p> <p>The Performance Delivery Framework 2022/23 was published in June 2023, and the measures have been updated accordingly in line with current data availability.</p> <p>The report format has been altered to align with key areas of focus within the Performance and Finance Committee</p> <p><b>Key high level issues to highlight this month are as follows:</b></p> <p><b><u>COVID19</u></b></p> <ul style="list-style-type: none"> <li>- The number of new cases of COVID19 has saw a further reduction in June 2023 to 60, compared with 81 in May 2023.</li> </ul> <p><b><u>Unscheduled Care</u></b></p> <ul style="list-style-type: none"> <li>- Emergency Department (ED) attendances have decreased in June 2023 to 12,026 from 12,186 in May 2023.</li> <li>- Performance against the 4-hour access is currently above the outlined trajectory in June 2023. ED 4-hour performance has improved by 0.8% in June 2023 to 76.1% from 75.3% in May 2023.</li> <li>- Performance against the 12-hour wait has improved in-month, however it is currently performing above the outlined trajectory. The number of patients waiting over 12-</li> </ul>		

hours in ED decreased to 1,274 in June 2023 from 1,303 in May 2023.

- Unscheduled care performance has seen an improvement throughout Quarter 1 as a result of developing and implementing a new on-boarding/escalation operational policy to support more timely ambulance handovers.
- The number of emergency admissions has reduced in June 2023 to 4,007 from 4,171 in May 2023.

### **Planned Care**

- June 2023 saw a 9% in-month reduction in the number of patients waiting over 26 weeks for a new outpatient appointment.
- Additionally, the number of patients waiting over 36 weeks decreased by 2.7% to 26,459.
- The number of patients waiting over 104 weeks for treatment decreased, with 5,474 patients waiting at this point in June 2023.
- In June, there was a further reduction in the number of patients waiting over 52 weeks at Stage 1, with 1,234 patients waiting at this stage.
- As a Health Board, updated ministerial priority trajectories for the 2023/24 planned care position have been developed and submitted to Welsh Government and are awaiting feedback.
- Therapy waiting times have deteriorated, there are 221 patients waiting over 14 weeks in June 2023 compared with 149 in May 2023.
- The number of patients waiting over 8 weeks for an Endoscopy has decreased in June 2023 to 4,737 from 4,826 in May 2023. The Endoscopy team also continue to maintain their compliance for all cancer waits.

### **Cancer**

- May 2023 saw 47% performance against the Single Cancer Pathway measure of patients receiving definitive treatment within 62 days (measure reported a month in arrears).
- Backlog figures have seen a reduction in recent weeks. The total backlog at 09/07/2023 was 325.

### **Mental Health**

- Performance against the Mental Health Measures continues to be maintained. However, one of the Welsh Government targets was not achieved in May 2023.
- In May 2023, 84% of patients waited less than 26 weeks for Psychological Therapy. This was below the national target of 95%.

### **Child and Adolescent Mental Health Services (CAMHS)**

	<ul style="list-style-type: none"> <li>- Access times for crisis performance has been maintained at 100% May 2023.</li> <li>- Neurodevelopmental Disorders (NDD) access times within 26 weeks continues to be a challenge, the performance has improved slightly to 30% in May 2023 against a target of 80%.</li> </ul>			
<b>Specific Action Required</b>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>	<b>Approval</b>
	✓		✓	
<b>Recommendations</b>	<p>Members are asked to:</p> <ul style="list-style-type: none"> <li>• <b>NOTE</b> the Health Board performance against key measures and targets.</li> <li>• <b>NOTE:</b> the inclusion of updated NHS Wales Performance Framework 2023/24 measures</li> <li>• <b>NOTE:</b> inclusion of updated national 2023/24 recovery trajectories recently submitted to Welsh Government</li> <li>• <b>NOTE:</b> Inclusion of updated UEC 2023/24 Trajectories</li> <li>• <b>NOTE:</b> the development and implementation of Tumour site specific recovery plans to support Single Cancer Pathway performance recovery</li> <li>• <b>NOTE</b> the actions being taken to improve performance: - <ul style="list-style-type: none"> <li>○ Updated tumour site specific action plans have been developed to support the SCP performance</li> <li>○ Detailed plans being developed to maximise the productivity and efficiency of planned care capacity to maintain improvements in planned care access</li> <li>○ The Endoscopy team have implemented several actions to support future improvement, which include; administrative validation, along with an increase in endoscopist sessions which will increase weekly capacity</li> <li>○ Focussed work is ongoing to increase Treat in Turn rates.</li> <li>○ As part of the plan to increase Orthopaedics activity, templates are consistently under review to support maximising capacity.</li> <li>○ Both UEC and cancer performance remain under escalation as part of the Health Board’s performance escalation framework.</li> </ul> </li> </ul>			

# INTEGRATED PERFORMANCE REPORT

## 1. INTRODUCTION

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

## 2. BACKGROUND

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

In recent years, performance management against the Performance Framework targets has been undertaken by reviewing the previous months' performance, to reduce the reporting function during the COVID-19 pandemic. Welsh Government have now deemed it appropriate to move away from reporting performance against the 'Quadrants of Harm' and focus will return to providing comprehensive performance updates in line with the All-Wales Performance Management Framework 2023/24.

## 3. GOVERNANCE AND RISK ISSUES

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

## 4. FINANCIAL IMPLICATIONS

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

## 5. RECOMMENDATION:

Members are asked to:

- **NOTE** the Health Board performance against key measures and targets.

- **NOTE:** the inclusion of updated NHS Wales Performance Framework 2023/24 measures
- **NOTE:** inclusion of updated national 2023/24 recovery trajectories recently submitted to Welsh Government
- **NOTE:** Inclusion of updated UEC 2023/24 Trajectories
- **NOTE:** the development and implementation of Tumour site specific recovery plans to support Single Cancer Pathway performance recovery
- **NOTE** the actions being taken to improve performance: -
  - Updated tumour site specific action plans have been developed to support the SCP performance
  - Detailed plans being developed to maximise the productivity and efficiency of planned care capacity to maintain improvements in planned care access
  - The Endoscopy team have implemented several actions to support future improvement, which include; administrative validation, along with an increase in endoscopist sessions which will increase weekly capacity
  - Focussed work is ongoing to increase Treat in Turn rates.
  - As part of the plan to increase Orthopaedics activity, templates are consistently under review to support maximising capacity.
  - Both UEC and cancer performance remain under escalation as part of the Health Board's performance escalation framework.

<b>Governance and Assurance</b>		
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	☒
	Co-Production and Health Literacy	☒
	Digitally Enabled Health and Wellbeing	☒
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	☒
	Partnerships for Care	☒
	Excellent Staff	☒
	Digitally Enabled Care	☒
	Outstanding Research, Innovation, Education and Learning	☒
<b>Health and Care Standards</b>		
(please choose)	Staying Healthy	☒
	Safe Care	☒
	Effective Care	☒
	Dignified Care	☒
	Timely Care	☒
	Individual Care	☒
	Staff and Resources	☒
<b>Quality, Safety and Patient Experience</b>		
<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>		
<b>Financial Implications</b>		
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.		
<b>Legal Implications (including equality and diversity assessment)</b>		
A number of indicators monitor progress in relation to legislation, such as the Mental Health Measure.		
<b>Staffing Implications</b>		
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.		
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>		
<p>The '5 Ways of Working' are demonstrated in the report as follows:</p> <ul style="list-style-type: none"> <li>• <b>Long term</b> – Actions within this report are both long and short term in order to balance the immediate service issues with long term objectives.</li> <li>• <b>Prevention</b> – the NHS Wales Delivery framework provides a measurable mechanism to evidence how the NHS is positively influencing the health and well-being of the</li> </ul>		

citizens of Wales with a particular focus upon maximising people’s physical and mental well-being.

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

<b>Report History</b>	The last iteration of the Integrated Performance Report was presented to Performance & Finance Committee in June 2023. This is a routine monthly report.
<b>Appendices</b>	Appendix 1: Integrated Performance Report



# Appendix 1- Integrated Performance Report July 2023



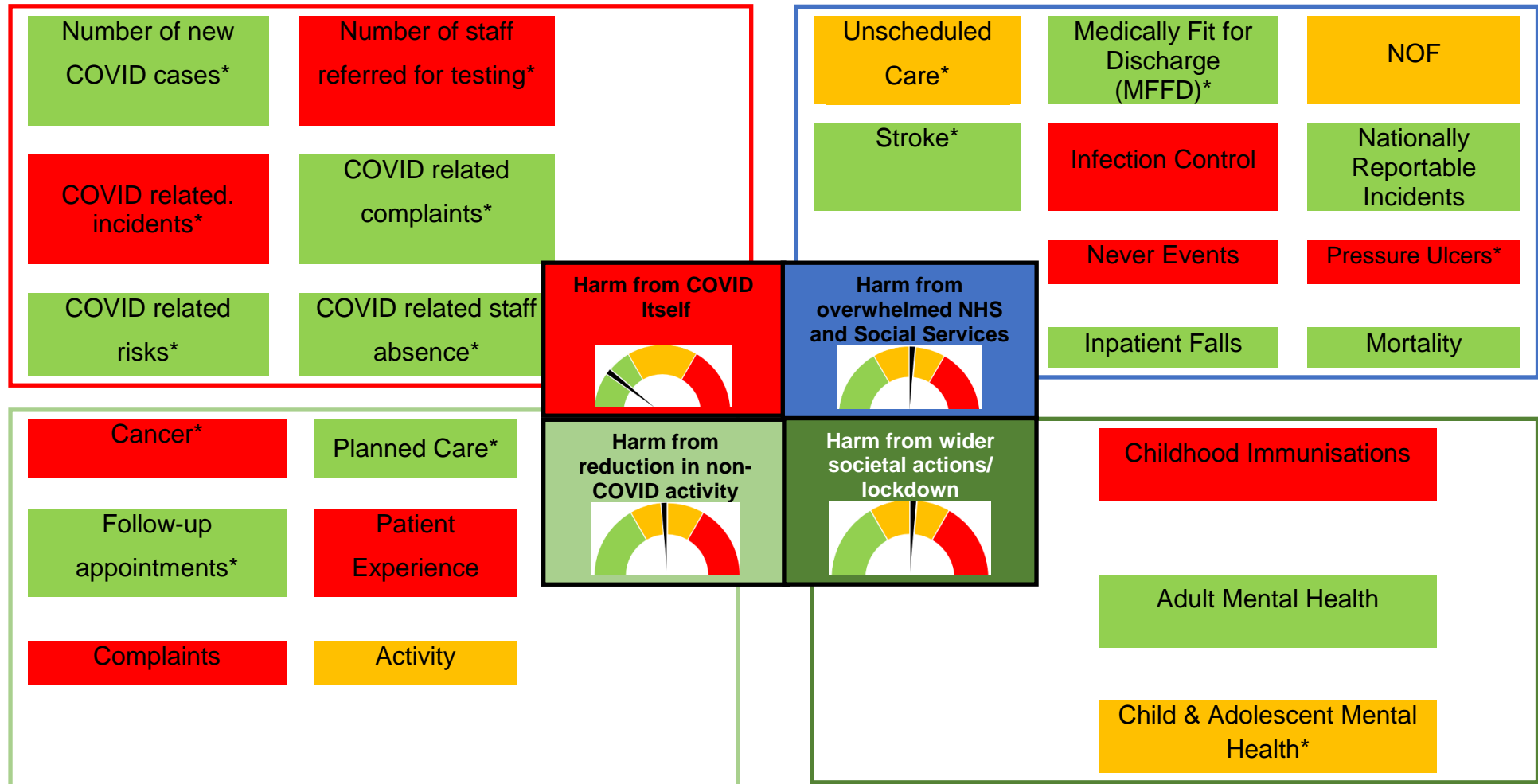
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# 1. QUADRANTS OF HARM SUMMARY

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



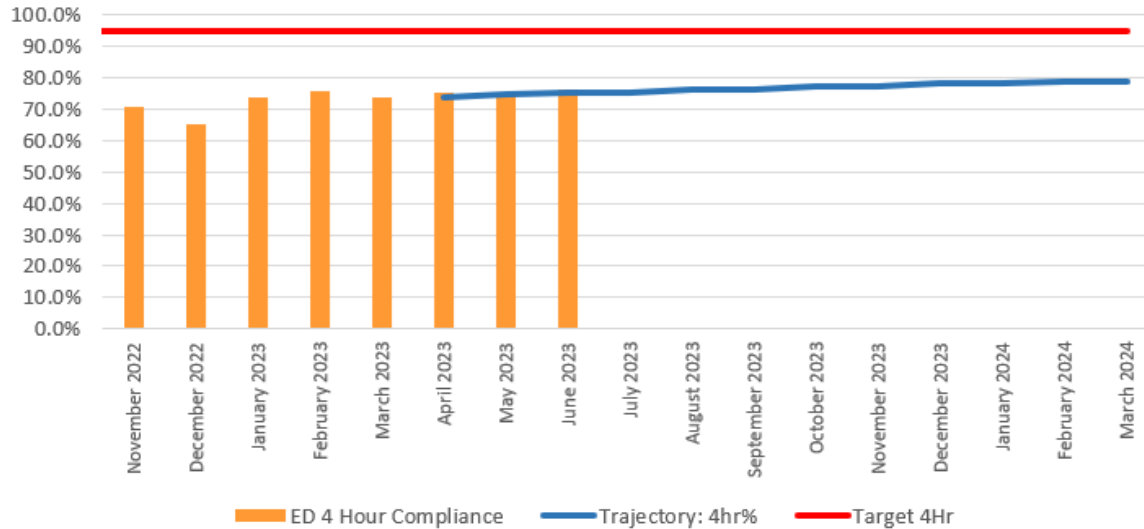
NB- RAG status is against national or local target  
 \*\* Data not available

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

## **2. ESCALATED SERVICE UPDATE TRAJECTORIES**

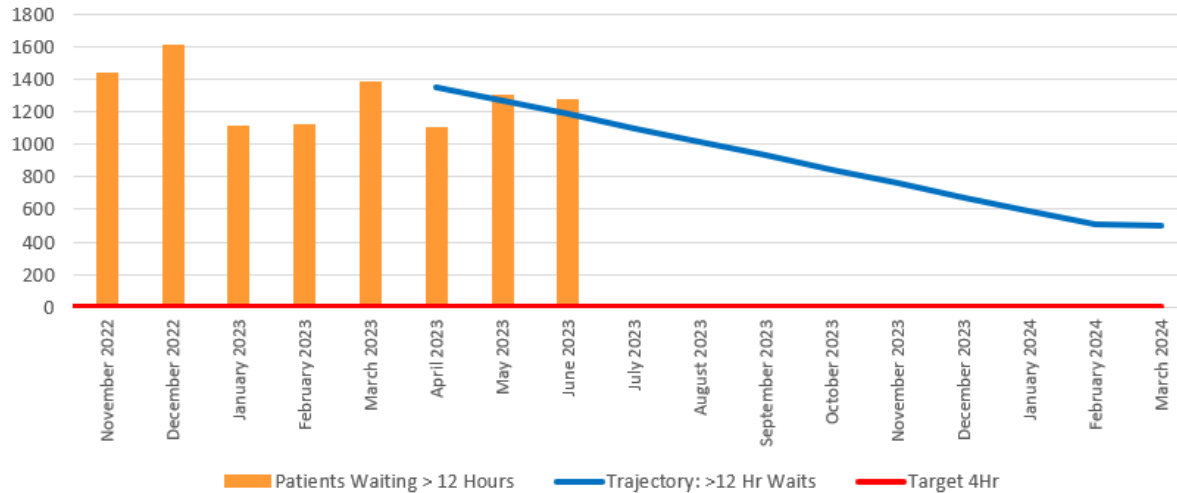
## UNSCHEDULED CARE – PERFORMANCE ESCALATION UPDATES

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



1. Performance against the 4-hour access is performing above the trajectory for June 2023. Emergency Department (ED) 4-hour performance increased by 0.8% in June 2023 to 76.1% from 75.3% in May 2023.

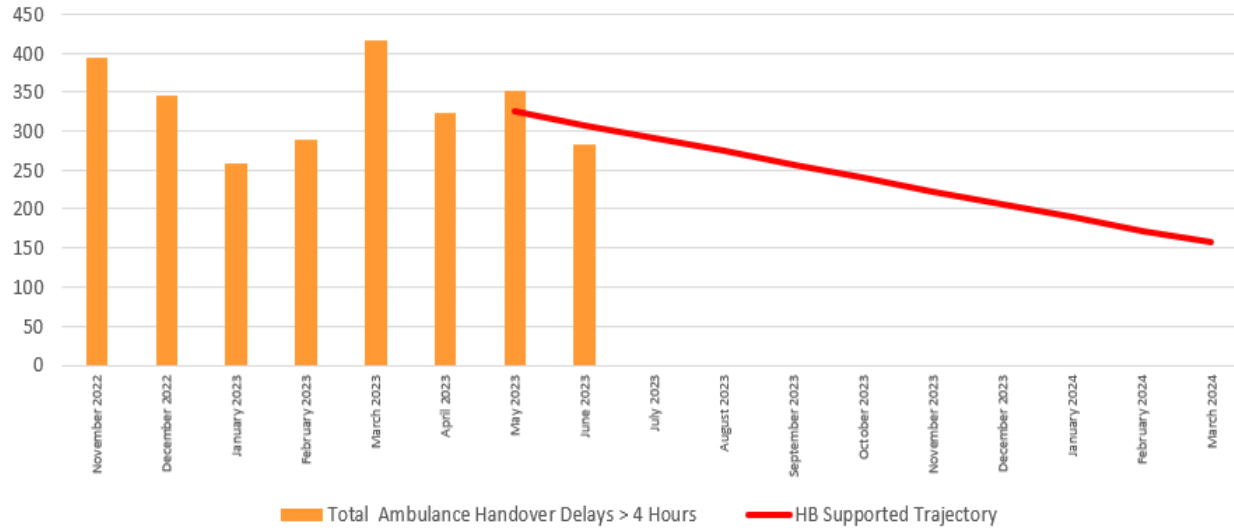
### 2. Submitted recovery trajectory for A&E 12-hour performance



2. Performance against the 12-hour waits improved in June and is currently slightly above the outlined trajectory. The number of patients waiting over 12-hours in ED decreased to 1,274 in June 2023 from 1,303 in May 2023.

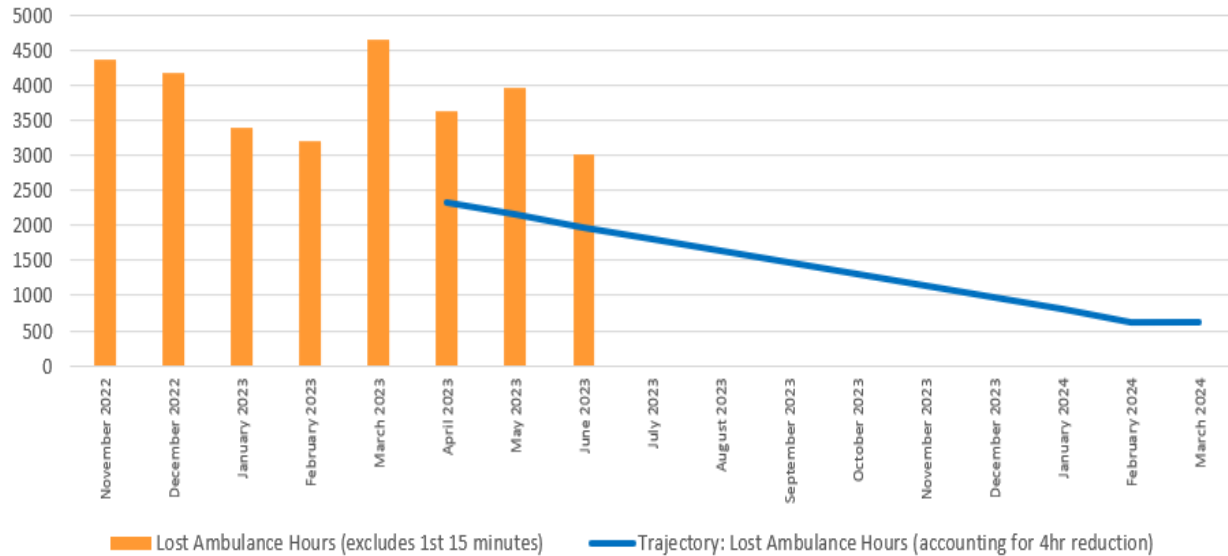
## UNSCHEDULED CARE – PERFORMANCE ESCALATION UPDATES

### 3. Ambulance Handover over 4 hours



3. The Ambulance handover rate over 4 hours have decreased in June 2023. The handover times over four hours decreased to 282 in June 2023 from 283 in May 2023. The figures are above the outlined trajectory for June 2023 which was 161.

### 4. Ambulance Handover Lost Hours

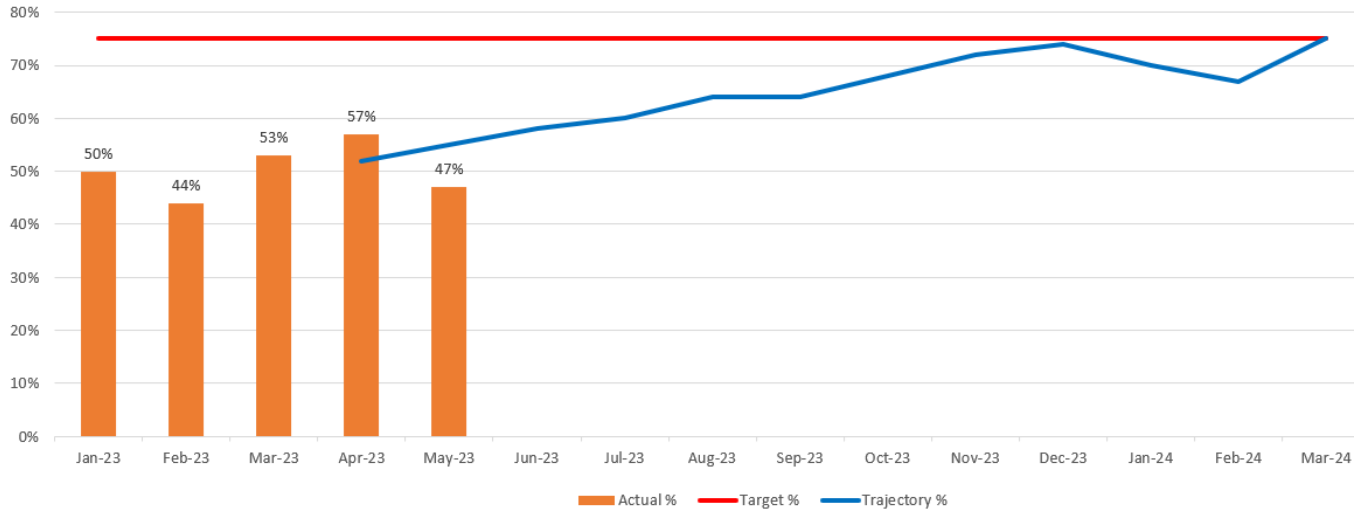


4. The ambulance handover lost hours rate has seen a reduction in June 2023. The ambulance handover lost hours decreased from 3,952 in May to 3,018 in June 2023, which is above the outlined trajectory for June 2023 (1,982).

# CANCER SERVICES – PERFORMANCE ESCALATION UPDATES

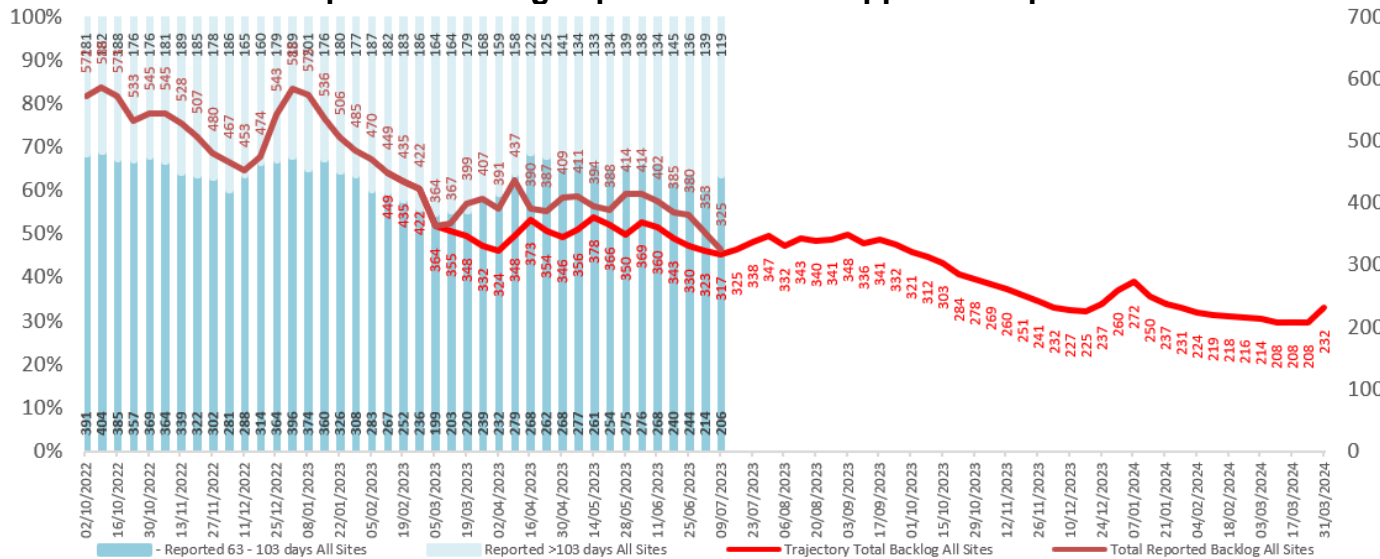
## 1. SCP performance trajectory

SCP 2023/24 Performance



1. The final SCP performance for May 2023 was 47%, which is a deterioration on the performance reported in April 2023. Performance is below the submitted trajectory (55%).

## 2. Proposed backlog improvements to support SCP performance



2. Backlog figures have seen a reduction in recent weeks. The total backlog at 09/07/2023 was 325.

### **3. UPDATES ON KEY SERVICE AREAS**

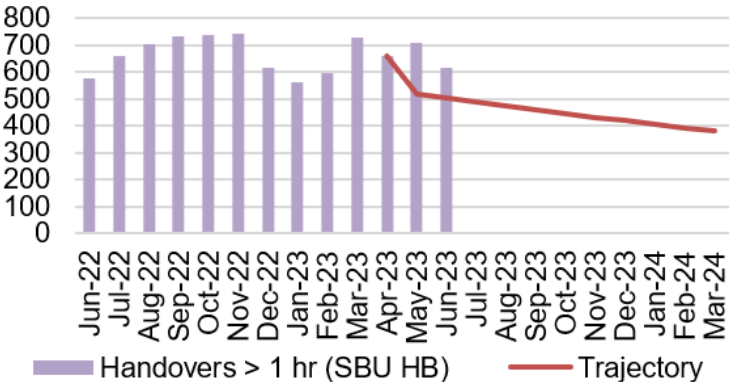
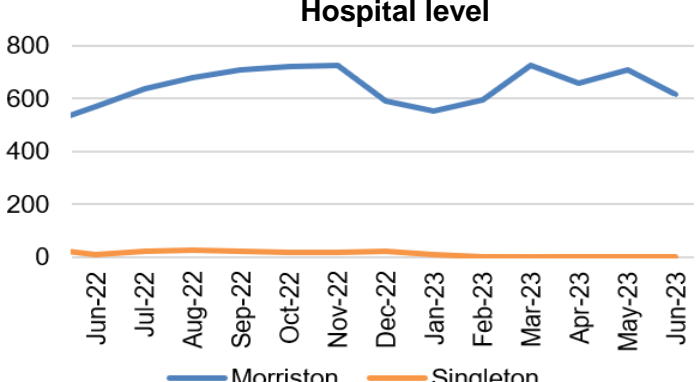
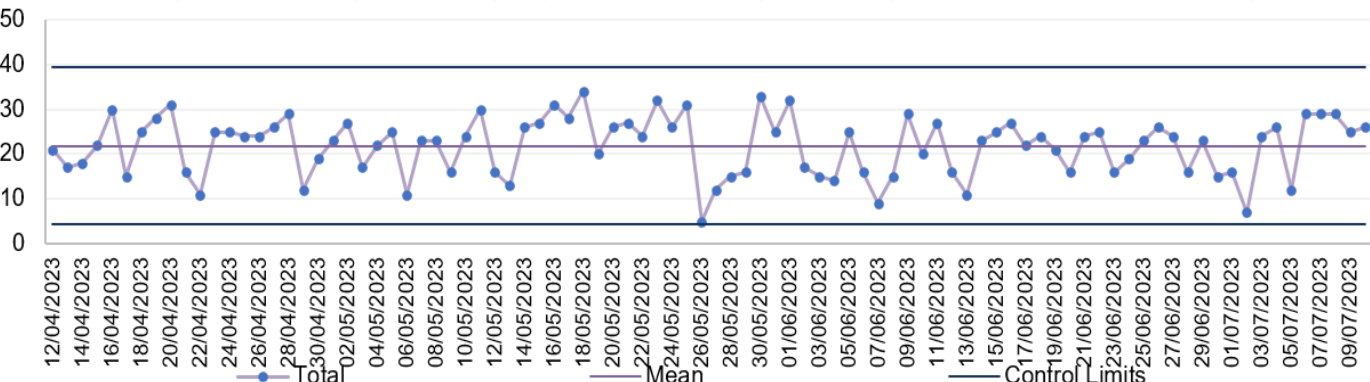
COVID Data		
Description	Current Performance	Trend
<p>1. Number of new COVID19 cases in Swansea Bay population area</p>	<p><b>Number of new COVID cases</b>            In June 2023, there were an additional 60 positive cases recorded bringing the cumulative total to 120,402 in Swansea Bay since March 2020.</p>	<p><b>Number of new COVID19 cases for Swansea Bay population</b></p> <p>■ New positive COVID19 cases</p>
<p>2. Number of staff referred for Antigen testing</p>	<p><b>Staff referred for Antigen testing</b>            The cumulative number of staff referred for COVID testing between March 2020 and March 2023 is 18,230 of which 19% have been positive (Cumulative total).             *WG have now ceased data collection for staff testing centres*</p>	<p><b>Outcome of staff referred for Antigen testing</b></p> <p>■ Positive    ▨ Negative    ▤ In Progress    □ Unknown/blank</p>

**COVID RELATED STAFF ABSENCE**

Description	Current Performance	Trend																																																																																				
<p><b>Staff absence due to COVID19</b></p> <p>1. Number of staff self-isolating (asymptomatic)</p> <p>2. Number of staff self-isolating (symptomatic)</p>	<p>The following data is based on the mid-month position and broken down into the categories requested by Welsh Government.</p> <p><b>1. &amp; 2. Number of staff self-isolating (asymptomatic and symptomatic)</b> Between May 2023 and June 2023, the number of staff self-isolating (asymptomatic) remained at 0 and the number of staff self-isolating (symptomatic) decreased from 27 to 7. In June 2023, the “other” staff group had the largest number of self-isolating staff who were symptomatic.</p>	<p align="center"><b>1. Number of staff self isolating (asymptomatic)</b></p> <p align="center"><b>2. Number of staff self isolating (symptomatic)</b></p>																																																																																				
<p>3. % staff sickness</p>	<p><b>% Staff sickness</b> The percentage of staff sickness absence due to COVID19 in June 2023 has reduced to 0.1% from 0.2% in May 2023.</p>	<p align="center"><b>% staff sickness</b></p> <table border="1"> <thead> <tr> <th></th> <th>Jun-22</th> <th>Jul-22</th> <th>Aug-22</th> <th>Sep-22</th> <th>Oct-22</th> <th>Nov-22</th> <th>Dec-22</th> <th>Jan-23</th> <th>Feb-23</th> <th>Mar-23</th> <th>Apr-23</th> <th>May-23</th> <th>Jun-23</th> </tr> </thead> <tbody> <tr> <td>Medical</td> <td>3.5%</td> <td>4.9%</td> <td>1.8%</td> <td>0.2%</td> <td>1.1%</td> <td>0.7%</td> <td>1.2%</td> <td>0.5%</td> <td>0.3%</td> <td>0.1%</td> <td>0.1%</td> <td>0.1%</td> <td>0.0%</td> </tr> <tr> <td>Nursing Reg</td> <td>2.8%</td> <td>2.4%</td> <td>1.3%</td> <td>1.1%</td> <td>1.2%</td> <td>0.9%</td> <td>1.1%</td> <td>0.7%</td> <td>0.6%</td> <td>0.7%</td> <td>0.4%</td> <td>0.4%</td> <td>0.1%</td> </tr> <tr> <td>Nursing Non Reg</td> <td>2.7%</td> <td>2.7%</td> <td>1.2%</td> <td>1.1%</td> <td>1.3%</td> <td>1.6%</td> <td>1.5%</td> <td>0.6%</td> <td>0.6%</td> <td>0.5%</td> <td>0.7%</td> <td>0.2%</td> <td>0.0%</td> </tr> <tr> <td>Other</td> <td>1.8%</td> <td>1.6%</td> <td>0.5%</td> <td>0.6%</td> <td>0.6%</td> <td>0.7%</td> <td>0.9%</td> <td>0.4%</td> <td>0.4%</td> <td>0.2%</td> <td>0.2%</td> <td>0.1%</td> <td>0.1%</td> </tr> <tr> <td>All</td> <td>2.4%</td> <td>2.2%</td> <td>1.0%</td> <td>0.8%</td> <td>0.9%</td> <td>0.9%</td> <td>1.1%</td> <td>0.5%</td> <td>0.5%</td> <td>0.4%</td> <td>0.3%</td> <td>0.2%</td> <td>0.1%</td> </tr> </tbody> </table>		Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Medical	3.5%	4.9%	1.8%	0.2%	1.1%	0.7%	1.2%	0.5%	0.3%	0.1%	0.1%	0.1%	0.0%	Nursing Reg	2.8%	2.4%	1.3%	1.1%	1.2%	0.9%	1.1%	0.7%	0.6%	0.7%	0.4%	0.4%	0.1%	Nursing Non Reg	2.7%	2.7%	1.2%	1.1%	1.3%	1.6%	1.5%	0.6%	0.6%	0.5%	0.7%	0.2%	0.0%	Other	1.8%	1.6%	0.5%	0.6%	0.6%	0.7%	0.9%	0.4%	0.4%	0.2%	0.2%	0.1%	0.1%	All	2.4%	2.2%	1.0%	0.8%	0.9%	0.9%	1.1%	0.5%	0.5%	0.4%	0.3%	0.2%	0.1%
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All	2.4%	2.2%	1.0%	0.8%	0.9%	0.9%	1.1%	0.5%	0.5%	0.4%	0.3%	0.2%	0.1%																																																																									

UNSCHEDULED CARE		
Description	Current Performance	Actions of Improvement
<b>Ambulance responses</b> 1. The percentage of emergency responses to red calls arriving within (up to and including) 8 minutes.  2. The number of ambulance calls by category.  3. The percentage of emergency responses to red calls arriving within 8 minutes (last 90 days)	In June 2023, the number of red calls responded to within 8 minutes increased to 63.6%, from 56.3% in May 2023. In June 2023, the number of green calls decreased by 14%, amber calls decreased by 9%, and red calls decreased by 7% compared with May 2023.	Ambulance response rates have seen an improvement in performance in June 2023. Red and amber release escalation protocols have now been put in place, along with a dedicated medical team in the Emergency Department to ensure timely reviews are taking place to support flow.
	Trend	
	<p><b>1. % of red calls responded to within 8 minutes</b></p> <p><b>2. Number of ambulance call responses</b></p>	<p><b>3. % of red calls responded to within 8 minutes – HB total last 90 days</b></p>

**UNSCHEDULED CARE**

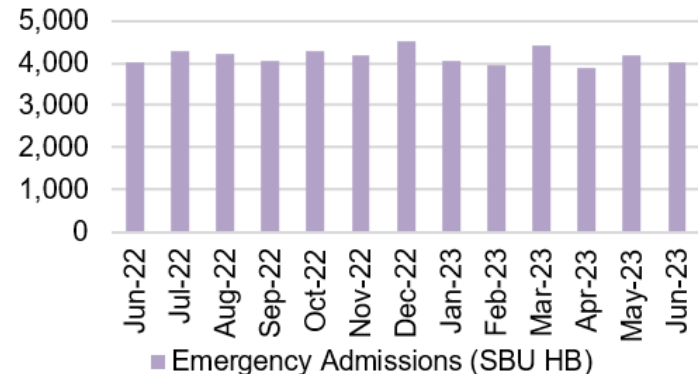
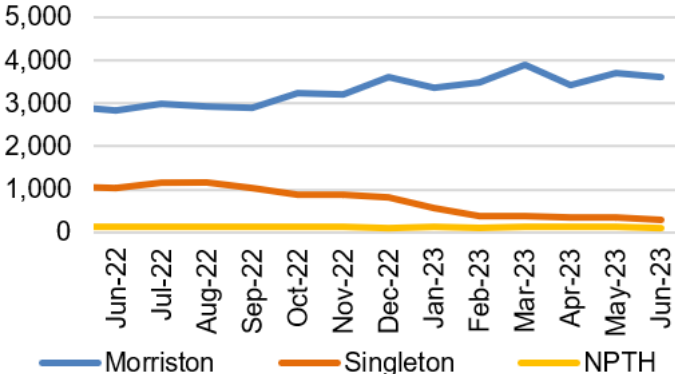
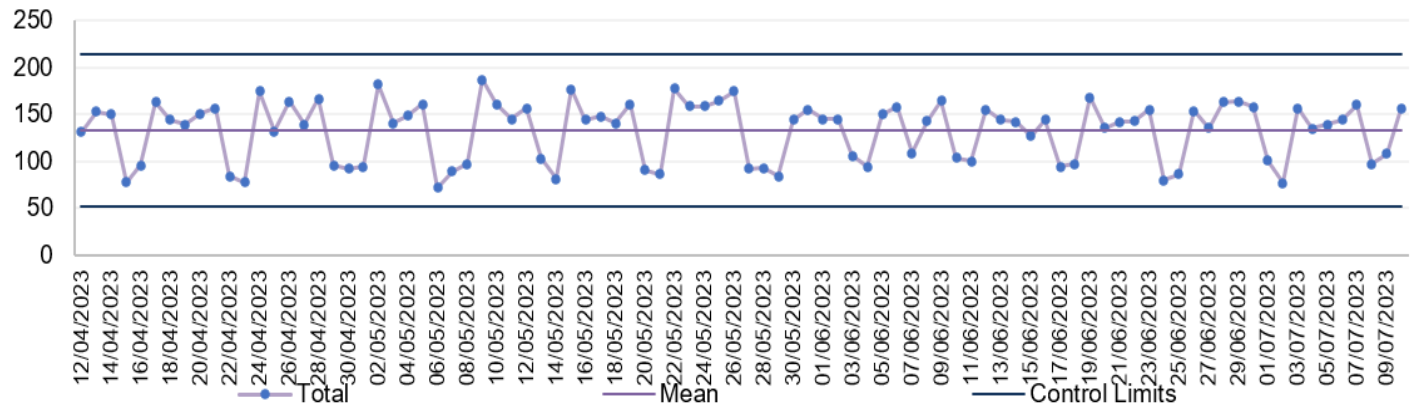
Description	Current Performance	Actions of Improvement
Ambulance handovers 1. The number of ambulance handovers over one hour  2. The number of ambulance handovers over one hour- Hospital level  3. The number of ambulance handovers over one hour (last 90 days)	In June 2023, there were 615 ambulance to hospital handovers taking over 1 hour; this is a reduction in figures compared with 708 in May 2023. In June 2023, all handovers over 1 hour were attributed to Morriston Hospital.  The number of handover hours lost over 15 minutes have decreased from 3,951.58 in May 2023 to 3,018 in June 2023.	Transformation of the urgent care pathways has been maintained with a focus on admission avoidance and length of stay reduction. Two dedicated ambulance co-ordinator roles are currently being recruited to, along with the expansion of the older persons assessment service – all of which has been implemented to support the pressure within the system.
	<b>Trend</b>	
	<p><b>1. Number of ambulance handovers- HB total</b></p>  <p><b>2. Number of ambulance handovers over 1 hour- Hospital level</b></p>  <p><b>3. Number of ambulance handovers- HB total last 90 days</b></p> 	

UNSCHEDULED CARE																																																																							
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<b>A&amp;E Attendances</b> 1. The number of attendances at emergency departments in the Health Board  2. The number of attendances at emergency departments in the Health Board – Hospital level  3. The number of attendances at emergency departments in the Health Board (last 90 days)	ED/MIU attendances significantly reduced in April 2020 during the COVID19 first wave but have been steadily increasing month on month until September 2020 when attendances started to reduce. In June 2023, there were 12,026 A&E attendances, this is 1% lower than May 2023.	There are several admission avoidance schemes in place in order to reduce the number of patients presenting at the A&E department which include; Rapid response therapies 7 day working, the WAST stack review and home first in-reach.																																																																					
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UNSCHEDULED CARE		
Description	Current Performance	Actions of Improvement
<b>A&amp;E waiting times</b>  <i>1. % of patients who spend less than 4 hours in all major and minor emergency care facilities from arrival until admission, transfer or discharge</i>  <i>2. % of patients who spend less than 4 hours in A&amp;E- Hospital level</i>  <i>3. % of patients who spend less than 4 hours in A&amp;E (last 90 days)</i>	<p>The Health Board's performance against the 4-hour measure improved from 75.30% in May 2023 to 76.11% in June 2023. Neath Port Talbot Hospital Minor Injuries Unit (MIU) has remained above the national target of 95% achieving 97.21% in June 2023. Morriston Hospital's performance improved between May and June 2023, achieving 61.97%% against the target.</p>	<p>Internal flow activities to support reduced occupancy and to improve flow throughout the day are being put in place, these include; Same Day Emergency Care (SDEC) GP delivered services, Frailty SDEC services and scoping is currently being undertaken with WAST colleagues to implement further pathways.</p>
	Trend	
	<p><b>1. % Patients waiting under 4 hours in A&amp;E- HB total</b></p>	<p><b>2. % Patients waiting under 4 hours in A&amp;E- Hospital level</b></p>
<p><b>3. % Patients waiting under 4 hours in A&amp;E- HB total last 90 days</b></p>		

UNSCHEDULED CARE		
Description	Current Performance	Actions of Improvement
<b>A&amp;E waiting times</b>  1. Number of patients who spend 12 hours or more in A&E  2. Number of patients who spend 12 hours or more in A&E- Hospital level  3. Number of patients who spend 12 hours or more in A&E (last 90 days)	<p>In June 2023, performance against the 12-hour measure improved when compared with May 2023, decreasing from 1,303 to 1,274. This is a reduction of 29 compared to May 2023. All of the patients waiting over 12 hours in May 2023 were attributed to Morriston Hospital.</p>	<p>A total of 8 virtual wards are now fully operational and the benefits of these are being experienced. The additional flow provided by the virtual wards and community engagement will support the flow from the ED department and the next stage includes NOF pathway changes and extended virtual wards.</p>
	Trend	
	<p><b>1. Number of patients waiting over 12 hours in A&amp;E- HB total</b></p> <p><b>2. Number of patients waiting over 12 hours in A&amp;E- Hospital level</b></p> <p><b>3. Number of patients waiting over 12 hours in A&amp;E – HB total last 90 days</b></p>	<p><b>Symbol Key:</b></p> <ul style="list-style-type: none"> <li>◆ Above or below control limits</li> <li>● 8 or more points</li> <li>▲ above or below the mean</li> <li>— Arun of 6</li> <li>● increasing or decreasing points</li> </ul>

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<p><b>Emergency admissions</b></p> <p>1. The number of emergency inpatient admissions</p> <p>2. The number of emergency inpatient admissions- Hospital level</p> <p>3. The number of emergency inpatient admissions (last 90 days)</p>	<p>In June 2023, there were 4,007 emergency admissions across the Health Board, which is 164 lower than May 2023. Singleton Hospital saw an in-month reduction, with 41 less admissions (from 342 in May 2023), Morriston Hospital saw an in-month reduction from 3,710 admissions in May 2023 to 3,603 admissions in June 2023.</p>	<p>The increased number of emergency admissions is directly linked to the pressure within the system and the reduced flow from ED – this will be addressed by the previously referenced occupancy actions</p>																																																																																			
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<p><b>Critical Care-Delayed Transfers of Care (DTC)-Morrison Hospital</b></p> <p>1. Total Critical Care delayed discharges (hours)</p> <p>2. Average lost bed days per day</p> <p>3. Percentage of patients delayed: Up to 8 hours Between 8 and 24 hours Over 24 hours</p>	<p>In June 2023, there were a total of 68 admissions into the Intensive Care Unit (ICU) in Morrison Hospital, this is a reduction when compared with 68 admissions in May 2023. June 2023, saw a reduction in the number of delayed discharge hours from 4,903.25 in May 2023 to 4,821.2 in June 2023. The average lost bed days increased to 6.7 per day. The percentage of patients delayed over 24 hours increased to 79.25% in June 2023 from 74.63% in May 2023.</p>	<p>Delayed discharges from ICU are intimately linked to capacity and flow constraints within the general wards and health/social-care system in general. A minor increase in the current pressures within ED are having a direct impact on discharges from ICU.</p>																																																																																																														
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Jun-22	5%	15%	80%																																																																																																													
Jul-22	10%	5%	85%																																																																																																													
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**UNSCHEDULED CARE**

Description	Current Performance	Trend																																																																						
<p><b>Clinically Optimised</b>  <i>The number of patients waiting at each site in the Health Board that are clinically optimised</i></p>	<p>In June 2023, there were on average 278 patients who were deemed clinically optimised but were still occupying a bed in one of the Health Board’s Hospitals.</p> <p>In June 2023, Morriston Hospital had the largest proportion of clinically optimised patients with 119, closely followed by Neath Port Talbot Hospital with 82.</p> <p><b>Actions of Improvement;</b>                      Continued work is underway to implement opportunities to reduce the number of Clinically Optimised Patients in the Hospital, implementing of the AMSR programme will also encourage a reduction in the figures.</p>	<p><b>The number of clinically optimised patients by site</b></p> <table border="1"> <caption>Estimated data for Clinically Optimised Patients</caption> <thead> <tr> <th>Month</th> <th>Morriston</th> <th>Singleton</th> <th>NPTH</th> <th>Gorseion</th> </tr> </thead> <tbody> <tr><td>Jun-22</td><td>130</td><td>65</td><td>85</td><td>15</td></tr> <tr><td>Jul-22</td><td>145</td><td>65</td><td>90</td><td>15</td></tr> <tr><td>Aug-22</td><td>115</td><td>70</td><td>100</td><td>10</td></tr> <tr><td>Sep-22</td><td>115</td><td>90</td><td>85</td><td>15</td></tr> <tr><td>Oct-22</td><td>105</td><td>70</td><td>100</td><td>20</td></tr> <tr><td>Nov-22</td><td>105</td><td>65</td><td>90</td><td>10</td></tr> <tr><td>Dec-22</td><td>100</td><td>60</td><td>80</td><td>10</td></tr> <tr><td>Jan-23</td><td>115</td><td>70</td><td>85</td><td>10</td></tr> <tr><td>Feb-23</td><td>100</td><td>100</td><td>85</td><td>10</td></tr> <tr><td>Mar-23</td><td>105</td><td>90</td><td>75</td><td>10</td></tr> <tr><td>Apr-23</td><td>105</td><td>75</td><td>75</td><td>20</td></tr> <tr><td>May-23</td><td>110</td><td>70</td><td>75</td><td>15</td></tr> <tr><td>Jun-23</td><td>119</td><td>55</td><td>82</td><td>20</td></tr> </tbody> </table>	Month	Morriston	Singleton	NPTH	Gorseion	Jun-22	130	65	85	15	Jul-22	145	65	90	15	Aug-22	115	70	100	10	Sep-22	115	90	85	15	Oct-22	105	70	100	20	Nov-22	105	65	90	10	Dec-22	100	60	80	10	Jan-23	115	70	85	10	Feb-23	100	100	85	10	Mar-23	105	90	75	10	Apr-23	105	75	75	20	May-23	110	70	75	15	Jun-23	119	55	82	20
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<p><b>Elective procedures cancelled due to lack of beds</b>                      The number of elective procedure cancelled across the hospital where the main cancellation reasons was lack of beds</p>	<p>In June 2023, there were 9 elective procedures cancelled due to lack of beds on the day of surgery. This is 24 less cancellations than those seen in May 2023.</p> <p>Of the cancelled procedures, all were attributed to Morriston Hospital in June 2023.</p>	<p><b>Total number of elective procedures cancelled due to lack of beds</b></p> <table border="1"> <caption>Estimated data for Elective Procedures Cancelled</caption> <thead> <tr> <th>Month</th> <th>Morriston</th> <th>Singleton</th> <th>NPTH</th> </tr> </thead> <tbody> <tr><td>Jun-22</td><td>45</td><td>0</td><td>0</td></tr> <tr><td>Jul-22</td><td>30</td><td>0</td><td>0</td></tr> <tr><td>Aug-22</td><td>10</td><td>0</td><td>0</td></tr> <tr><td>Sep-22</td><td>25</td><td>0</td><td>0</td></tr> <tr><td>Oct-22</td><td>35</td><td>0</td><td>0</td></tr> <tr><td>Nov-22</td><td>25</td><td>0</td><td>0</td></tr> <tr><td>Dec-22</td><td>25</td><td>0</td><td>0</td></tr> <tr><td>Jan-23</td><td>70</td><td>0</td><td>10</td></tr> <tr><td>Feb-23</td><td>35</td><td>0</td><td>0</td></tr> <tr><td>Mar-23</td><td>25</td><td>0</td><td>0</td></tr> <tr><td>Apr-23</td><td>10</td><td>0</td><td>0</td></tr> <tr><td>May-23</td><td>28</td><td>0</td><td>0</td></tr> <tr><td>Jun-23</td><td>9</td><td>0</td><td>0</td></tr> </tbody> </table>	Month	Morriston	Singleton	NPTH	Jun-22	45	0	0	Jul-22	30	0	0	Aug-22	10	0	0	Sep-22	25	0	0	Oct-22	35	0	0	Nov-22	25	0	0	Dec-22	25	0	0	Jan-23	70	0	10	Feb-23	35	0	0	Mar-23	25	0	0	Apr-23	10	0	0	May-23	28	0	0	Jun-23	9	0	0														
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## HEALTHCARE ACQUIRED INFECTIONS

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<p><b>Healthcare Acquired Infections (HCAI) - E.coli bacteraemia-</b>  <i>Number of laboratory confirmed E.coli bacteraemia cases</i></p>	<ul style="list-style-type: none"> <li>• 27 cases of <i>E. coli</i> bacteraemia were identified in June 2023, of which 13 were hospital acquired, 14 were community acquired and 2 were identified from other Health Board's.</li> <li>• The Health Board total is currently above the Welsh Government Profile target of 20 cases for June 2023.</li> </ul> <p><b>Actions of Improvement;</b>                      Each Service Group has developed detailed action plans which reinforce the quality and safety guidelines to support the reduction of Infection rates</p>	<p><b>Number of healthcare acquired E.coli bacteraemia cases</b></p> <table border="1"> <caption>Number of healthcare acquired E.coli bacteraemia cases</caption> <thead> <tr> <th>Month</th> <th>Number E.Coli cases (SBU)</th> <th>Trajectory</th> </tr> </thead> <tbody> <tr><td>Jun-22</td><td>17</td><td>20</td></tr> <tr><td>Jul-22</td><td>21</td><td>20</td></tr> <tr><td>Aug-22</td><td>32</td><td>20</td></tr> <tr><td>Sep-22</td><td>15</td><td>20</td></tr> <tr><td>Oct-22</td><td>22</td><td>20</td></tr> <tr><td>Nov-22</td><td>23</td><td>20</td></tr> <tr><td>Dec-22</td><td>22</td><td>20</td></tr> <tr><td>Jan-23</td><td>20</td><td>20</td></tr> <tr><td>Feb-23</td><td>17</td><td>20</td></tr> <tr><td>Mar-23</td><td>19</td><td>20</td></tr> <tr><td>Apr-23</td><td>26</td><td>20</td></tr> <tr><td>May-23</td><td>22</td><td>20</td></tr> <tr><td>Jun-23</td><td>27</td><td>20</td></tr> <tr><td>Jul-23</td><td>20</td><td>20</td></tr> <tr><td>Aug-23</td><td>19</td><td>20</td></tr> <tr><td>Sep-23</td><td>19</td><td>20</td></tr> <tr><td>Oct-23</td><td>19</td><td>20</td></tr> <tr><td>Nov-23</td><td>20</td><td>20</td></tr> <tr><td>Dec-23</td><td>21</td><td>20</td></tr> <tr><td>Jan-24</td><td>19</td><td>20</td></tr> <tr><td>Feb-24</td><td>19</td><td>20</td></tr> <tr><td>Mar-24</td><td>19</td><td>20</td></tr> </tbody> </table>	Month	Number E.Coli cases (SBU)	Trajectory	Jun-22	17	20	Jul-22	21	20	Aug-22	32	20	Sep-22	15	20	Oct-22	22	20	Nov-22	23	20	Dec-22	22	20	Jan-23	20	20	Feb-23	17	20	Mar-23	19	20	Apr-23	26	20	May-23	22	20	Jun-23	27	20	Jul-23	20	20	Aug-23	19	20	Sep-23	19	20	Oct-23	19	20	Nov-23	20	20	Dec-23	21	20	Jan-24	19	20	Feb-24	19	20	Mar-24	19	20
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<p><b>Healthcare Acquired Infections (HCAI)- S.aureus bacteraemia-</b>  <i>Number of laboratory confirmed S.aureus bacteraemias (MRSA &amp; MSSA) cases</i></p>	<ul style="list-style-type: none"> <li>• There were 12 cases of Staph. aureus bacteraemia in June 2023, of which 8 were hospital acquired and 4 were community acquired.</li> <li>• The Health Board total is currently above the Welsh Government Profile target of 6 cases for June 2023.</li> </ul> <p><b>Actions of Improvement;</b>                      Each Service Group has developed detailed action plans which reinforce the quality and safety guidelines to support the reduction of Infection rates</p>	<p><b>Number of healthcare acquired S.aureus bacteraemia cases</b></p> <table border="1"> <caption>Number of healthcare acquired S.aureus bacteraemia cases</caption> <thead> <tr> <th>Month</th> <th>Number of S.Aureus cases (SBU)</th> <th>Trajectory</th> </tr> </thead> <tbody> <tr><td>Jun-22</td><td>9</td><td>6</td></tr> <tr><td>Jul-22</td><td>12</td><td>6</td></tr> <tr><td>Aug-22</td><td>12</td><td>6</td></tr> <tr><td>Sep-22</td><td>14</td><td>6</td></tr> <tr><td>Oct-22</td><td>17</td><td>6</td></tr> <tr><td>Nov-22</td><td>8</td><td>6</td></tr> <tr><td>Dec-22</td><td>13</td><td>6</td></tr> <tr><td>Jan-23</td><td>10</td><td>6</td></tr> <tr><td>Feb-23</td><td>11</td><td>6</td></tr> <tr><td>Mar-23</td><td>10</td><td>6</td></tr> <tr><td>Apr-23</td><td>16</td><td>6</td></tr> <tr><td>May-23</td><td>10</td><td>6</td></tr> <tr><td>Jun-23</td><td>12</td><td>6</td></tr> <tr><td>Jul-23</td><td>6</td><td>6</td></tr> <tr><td>Aug-23</td><td>6</td><td>6</td></tr> <tr><td>Sep-23</td><td>6</td><td>6</td></tr> <tr><td>Oct-23</td><td>6</td><td>6</td></tr> <tr><td>Nov-23</td><td>6</td><td>6</td></tr> <tr><td>Dec-23</td><td>6</td><td>6</td></tr> <tr><td>Jan-24</td><td>5</td><td>6</td></tr> <tr><td>Feb-24</td><td>5</td><td>6</td></tr> <tr><td>Mar-24</td><td>5</td><td>6</td></tr> </tbody> </table>	Month	Number of S.Aureus cases (SBU)	Trajectory	Jun-22	9	6	Jul-22	12	6	Aug-22	12	6	Sep-22	14	6	Oct-22	17	6	Nov-22	8	6	Dec-22	13	6	Jan-23	10	6	Feb-23	11	6	Mar-23	10	6	Apr-23	16	6	May-23	10	6	Jun-23	12	6	Jul-23	6	6	Aug-23	6	6	Sep-23	6	6	Oct-23	6	6	Nov-23	6	6	Dec-23	6	6	Jan-24	5	6	Feb-24	5	6	Mar-24	5	6
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<p><b>Healthcare Acquired Infections (HCAI)-<i>C.difficile</i></b>                      Number of laboratory confirmed <i>C.difficile</i> cases</p>	<ul style="list-style-type: none"> <li>There were 20 <i>Clostridium difficile</i> toxin positive cases in June 2023, of which 13 were hospital acquired and 7 were community acquired.</li> <li>The Health Board total is currently above the Welsh Government Profile target of 9 cases for June 2023.</li> </ul> <p><b>Actions of Improvement;</b>                      Each Service Group has developed detailed action plans which reinforce the quality and safety guidelines to support the reduction of Infection rates</p>	<p style="text-align: center;"><b>Number of healthcare acquired <i>C.difficile</i> cases</b></p> <table border="1"> <caption>Number of healthcare acquired <i>C.difficile</i> cases</caption> <thead> <tr> <th>Month</th> <th>Number of <i>C.diff</i> cases (SBU)</th> <th>Trajectory</th> </tr> </thead> <tbody> <tr><td>Jun-22</td><td>16</td><td></td></tr> <tr><td>Jul-22</td><td>16</td><td></td></tr> <tr><td>Aug-22</td><td>22</td><td></td></tr> <tr><td>Sep-22</td><td>14</td><td></td></tr> <tr><td>Oct-22</td><td>21</td><td></td></tr> <tr><td>Nov-22</td><td>21</td><td></td></tr> <tr><td>Dec-22</td><td>14</td><td></td></tr> <tr><td>Jan-23</td><td>22</td><td></td></tr> <tr><td>Feb-23</td><td>12</td><td></td></tr> <tr><td>Mar-23</td><td>19</td><td></td></tr> <tr><td>Apr-23</td><td>18</td><td>10</td></tr> <tr><td>May-23</td><td>12</td><td>10</td></tr> <tr><td>Jun-23</td><td>20</td><td>8</td></tr> <tr><td>Jul-23</td><td></td><td>8</td></tr> <tr><td>Aug-23</td><td></td><td>8</td></tr> <tr><td>Sep-23</td><td></td><td>7</td></tr> <tr><td>Oct-23</td><td></td><td>7</td></tr> <tr><td>Nov-23</td><td></td><td>7</td></tr> <tr><td>Dec-23</td><td></td><td>7</td></tr> <tr><td>Jan-24</td><td></td><td>7</td></tr> <tr><td>Feb-24</td><td></td><td>7</td></tr> <tr><td>Mar-24</td><td></td><td>7</td></tr> </tbody> </table>	Month	Number of <i>C.diff</i> cases (SBU)	Trajectory	Jun-22	16		Jul-22	16		Aug-22	22		Sep-22	14		Oct-22	21		Nov-22	21		Dec-22	14		Jan-23	22		Feb-23	12		Mar-23	19		Apr-23	18	10	May-23	12	10	Jun-23	20	8	Jul-23		8	Aug-23		8	Sep-23		7	Oct-23		7	Nov-23		7	Dec-23		7	Jan-24		7	Feb-24		7	Mar-24		7
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<p><b>Healthcare Acquired Infections (HCAI)-<i>Klebsiella sp</i></b>                      Number of laboratory confirmed <i>Klebsiella sp</i> cases</p>	<ul style="list-style-type: none"> <li>There were 6 cases of <i>Klebsiella sp</i> in June 2023, of which 1 was hospital acquired and 5 were community acquired.</li> <li>The Health Board total is currently below the Welsh Government Profile target of 7 cases for June 2023.</li> </ul> <p><b>Actions of Improvement;</b>                      Each Service Group has developed detailed action plans which reinforce the quality and safety guidelines to support the reduction of Infection rates</p>	<p style="text-align: center;"><b>Number of healthcare acquired <i>Klebsiella</i> cases</b></p> <table border="1"> <caption>Number of healthcare acquired <i>Klebsiella</i> cases</caption> <thead> <tr> <th>Month</th> <th>Number of <i>Klebsiella</i> cases (SBU)</th> <th>Trajectory</th> </tr> </thead> <tbody> <tr><td>Jun-22</td><td>8</td><td></td></tr> <tr><td>Jul-22</td><td>11</td><td></td></tr> <tr><td>Aug-22</td><td>8</td><td></td></tr> <tr><td>Sep-22</td><td>10</td><td></td></tr> <tr><td>Oct-22</td><td>7</td><td></td></tr> <tr><td>Nov-22</td><td>11</td><td></td></tr> <tr><td>Dec-22</td><td>8</td><td></td></tr> <tr><td>Jan-23</td><td>11</td><td></td></tr> <tr><td>Feb-23</td><td>8</td><td></td></tr> <tr><td>Mar-23</td><td>11</td><td></td></tr> <tr><td>Apr-23</td><td>8</td><td>9</td></tr> <tr><td>May-23</td><td>10</td><td>7</td></tr> <tr><td>Jun-23</td><td>6</td><td>7</td></tr> <tr><td>Jul-23</td><td></td><td>7</td></tr> <tr><td>Aug-23</td><td></td><td>7</td></tr> <tr><td>Sep-23</td><td></td><td>6</td></tr> <tr><td>Oct-23</td><td></td><td>4</td></tr> <tr><td>Nov-23</td><td></td><td>4</td></tr> <tr><td>Dec-23</td><td></td><td>5</td></tr> <tr><td>Jan-24</td><td></td><td>5</td></tr> <tr><td>Feb-24</td><td></td><td>5</td></tr> <tr><td>Mar-24</td><td></td><td>4</td></tr> </tbody> </table>	Month	Number of <i>Klebsiella</i> cases (SBU)	Trajectory	Jun-22	8		Jul-22	11		Aug-22	8		Sep-22	10		Oct-22	7		Nov-22	11		Dec-22	8		Jan-23	11		Feb-23	8		Mar-23	11		Apr-23	8	9	May-23	10	7	Jun-23	6	7	Jul-23		7	Aug-23		7	Sep-23		6	Oct-23		4	Nov-23		4	Dec-23		5	Jan-24		5	Feb-24		5	Mar-24		4
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## HEALTHCARE ACQUIRED INFECTIONS

Description	Current Performance	Trend																																																																					
<p><b>Healthcare Acquired Infections (HCAI)- Aeruginosa-</b> <i>Number of laboratory confirmed Aeruginosa cases</i></p>	<ul style="list-style-type: none"> <li>There were 4 cases of <i>P.Aeruginosa</i> in June 2023, of which 2 were hospital acquired, 1 was community acquired and 1 was identified from another Health Board.</li> <li>The Health Board total is currently above the Welsh Government Profile target of 2 cases for June 2023.</li> </ul> <p><b>Actions of Improvement;</b> Each Service Group has developed detailed action plans which reinforce the quality and safety guidelines to support the reduction of Infection rates</p>	<p><b>Number of healthcare acquired Pseudomonas cases</b></p> <table border="1" style="display: none;"> <caption>Number of healthcare acquired Pseudomonas cases (SBU) and Trajectory</caption> <thead> <tr> <th>Month</th> <th>Number of Pseudomonas cases (SBU)</th> <th>Trajectory</th> </tr> </thead> <tbody> <tr><td>Jun-22</td><td>4</td><td>4</td></tr> <tr><td>Jul-22</td><td>4</td><td>4</td></tr> <tr><td>Aug-22</td><td>3</td><td>3</td></tr> <tr><td>Sep-22</td><td>5</td><td>5</td></tr> <tr><td>Oct-22</td><td>6</td><td>6</td></tr> <tr><td>Nov-22</td><td>5</td><td>5</td></tr> <tr><td>Dec-22</td><td>3</td><td>3</td></tr> <tr><td>Jan-23</td><td>4</td><td>4</td></tr> <tr><td>Feb-23</td><td>2</td><td>2</td></tr> <tr><td>Mar-23</td><td>4</td><td>4</td></tr> <tr><td>Apr-23</td><td>2</td><td>3</td></tr> <tr><td>May-23</td><td>1</td><td>2</td></tr> <tr><td>Jun-23</td><td>4</td><td>2</td></tr> <tr><td>Jul-23</td><td>2</td><td>2</td></tr> <tr><td>Aug-23</td><td>2</td><td>2</td></tr> <tr><td>Sep-23</td><td>2</td><td>2</td></tr> <tr><td>Oct-23</td><td>1</td><td>1</td></tr> <tr><td>Nov-23</td><td>3</td><td>3</td></tr> <tr><td>Dec-23</td><td>2</td><td>2</td></tr> <tr><td>Jan-24</td><td>2</td><td>2</td></tr> <tr><td>Feb-24</td><td>2</td><td>2</td></tr> <tr><td>Mar-24</td><td>1</td><td>1</td></tr> </tbody> </table> <p>Legend: <span style="color: purple;">■</span> Number of Pseudomonas cases (SBU) <span style="color: red;">—</span> Trajectory</p>	Month	Number of Pseudomonas cases (SBU)	Trajectory	Jun-22	4	4	Jul-22	4	4	Aug-22	3	3	Sep-22	5	5	Oct-22	6	6	Nov-22	5	5	Dec-22	3	3	Jan-23	4	4	Feb-23	2	2	Mar-23	4	4	Apr-23	2	3	May-23	1	2	Jun-23	4	2	Jul-23	2	2	Aug-23	2	2	Sep-23	2	2	Oct-23	1	1	Nov-23	3	3	Dec-23	2	2	Jan-24	2	2	Feb-24	2	2	Mar-24	1	1
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PLANNED CARE		
Description	Current Performance	Actions of Improvement
<b>Referrals and shape of the waiting list</b>  <b>1. GP Referrals</b> <i>The number of Stage 1 additions per week</i>  <b>2. Stage 1 additions</b> <i>The number of new patients that have been added to the outpatient waiting list</i>  <b>3. Outpatient activity undertaken</b> <i>Total number of patients seen each month</i>  <b>4. Size of the waiting list</b> <i>Total number of patients on the waiting list by stage as at June 2023</i>	<p>June 2023 has seen an increase in referral figures compared with May 2023 (13,984). Referral rates have continued to rise slowly since December 2021, with 13,984 received in June 2023. Chart 4 shows the shape of the current waiting list and Chart 3 shows the outpatient activity undertaken over the last year.</p>	<p>The number of referrals received has remained steady in recent months, and is now showing a consistent pattern of demand.</p>
	<b>Trend</b>	
	<p><b>1. Number of GP referrals received by SBU Health Board</b></p> <p><b>2. Number of stage 1 additions per week</b></p> <p><b>3. Outpatient activity undertaken</b></p> <p><b>4. Total size of the waiting list (June 2023)</b></p>	

**PLANNED CARE**

Description	Current Performance	Actions of Improvement
<p><b>Outpatient waiting times</b></p> <p>1. Number of patients waiting more than 26 weeks for an outpatient appointment (stage 1)- Health Board Total</p> <p>2. Number of patients waiting more than 26 weeks for an outpatient appointment (stage 1)- Hospital Level</p> <p>3. Patients waiting over 26 weeks for an outpatient appointment by specialty</p> <p>4. Percentage of patients waiting less than 26 weeks</p>	<p>The number of patients waiting over 26 weeks for a first outpatient appointment is still a challenge. However, June 2023 saw an in-month reduction of 9% in the number of patients waiting over 26 weeks for an outpatient appointment. The number of breaches decreased from 14,733 in May 2023 to 13,427 in June 2023. Orthopaedics has the largest proportion of patients waiting over 26 weeks for an outpatient appointment, closely followed by Ophthalmology and OMFS. Chart 4 shows that the number of patients waiting less than 26 weeks for an outpatient appointment, this figure has improved to 60.7%.</p> <p style="text-align: center;"><b>Trend</b></p> <div style="display: flex; justify-content: space-around;"> <div data-bbox="504 555 1153 582"> <p><b>1. Number of stage 1 over 26 weeks- HB total</b></p> </div> <div data-bbox="1355 555 2027 582"> <p><b>2. Number of stage 1 over 26 weeks- Hospital level</b></p> </div> </div> <div style="display: flex; justify-content: space-around;"> <div data-bbox="504 981 1153 1008"> <p><b>3. Patients waiting over 26 weeks for an outpatient appointment by specialty as at June 2023</b></p> </div> <div data-bbox="1355 981 2027 1008"> <p><b>4. Percentage of patient waiting less than 26 weeks</b></p> </div> </div>	<p>Administrative validation is currently taking place to further cleanse the waiting list position and reduce the number of patients on the waiting list inappropriately.</p> <p>Service Group specific recovery trajectories have been developed to further support recovery</p>

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<p><b>Patients waiting over 36 weeks for treatment</b></p> <p>1. Number of patients waiting more than 36 weeks for treatment and the number of elective patients admitted for treatment- Health Board Total</p> <p>2. Number of patients waiting more than 52 weeks for treatment at Stage 1</p> <p>3. Number of elective admissions</p> <p>4. Number of patients waiting more than 104 weeks for treatment</p>	<p>In June 2023, there were 26,459 patients waiting over 36 weeks at all stages, which is a 2.7% in-month reduction from May 2023. 15,446 of the 26,459 were waiting over 52 weeks at all stages in June 2023. In June 2023, there were 5,474 patients waiting over 104 weeks for treatment, which is a 5% reduction from May 2023. The Health Board are currently out-performing all submitted recovery trajectories for 2023/24.</p>	<p>Updated national recovery trajectories have been submitted to Welsh Government for 2023/24 and are under review. Currently implementing planned care efficiency measures which include; over-booking clinics, improving treat in turn rates, increasing capacity, validation of pathways and internal administrative and clinical validation.</p>																																																																																																	
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**PLANNED CARE**

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<p><b>Ophthalmology Referrals</b>  <i>Number of patients referred into secondary care Ophthalmology services</i></p>	<p>In June 2023, there were 890 patients referred from Primary Care into secondary care ophthalmology services. This is an increase on the number of patients referred in May 2023, which was 803.</p> <p>The figures reported were however below the submitted Ophthalmology referrals trajectory to Welsh Government for 2023/24 in June 2023.</p>	<p><b>Number of referrals into secondary care Ophthalmology service</b></p> <table border="1"> <caption>Number of referrals into secondary care Ophthalmology service</caption> <thead> <tr> <th>Month</th> <th>Number of referrals</th> <th>Trajectory</th> </tr> </thead> <tbody> <tr><td>Sep-22</td><td>880</td><td>880</td></tr> <tr><td>Oct-22</td><td>780</td><td>800</td></tr> <tr><td>Nov-22</td><td>780</td><td>800</td></tr> <tr><td>Dec-22</td><td>720</td><td>800</td></tr> <tr><td>Jan-23</td><td>850</td><td>850</td></tr> <tr><td>Feb-23</td><td>820</td><td>850</td></tr> <tr><td>Mar-23</td><td>950</td><td>900</td></tr> <tr><td>Apr-23</td><td>720</td><td>880</td></tr> <tr><td>May-23</td><td>780</td><td>950</td></tr> <tr><td>Jun-23</td><td>880</td><td>950</td></tr> <tr><td>Jul-23</td><td>-</td><td>850</td></tr> <tr><td>Aug-23</td><td>-</td><td>950</td></tr> <tr><td>Sep-23</td><td>-</td><td>950</td></tr> <tr><td>Oct-23</td><td>-</td><td>950</td></tr> <tr><td>Nov-23</td><td>-</td><td>800</td></tr> <tr><td>Dec-23</td><td>-</td><td>950</td></tr> <tr><td>Jan-24</td><td>-</td><td>950</td></tr> <tr><td>Feb-24</td><td>-</td><td>950</td></tr> <tr><td>Mar-24</td><td>-</td><td>950</td></tr> </tbody> </table>	Month	Number of referrals	Trajectory	Sep-22	880	880	Oct-22	780	800	Nov-22	780	800	Dec-22	720	800	Jan-23	850	850	Feb-23	820	850	Mar-23	950	900	Apr-23	720	880	May-23	780	950	Jun-23	880	950	Jul-23	-	850	Aug-23	-	950	Sep-23	-	950	Oct-23	-	950	Nov-23	-	800	Dec-23	-	950	Jan-24	-	950	Feb-24	-	950	Mar-24	-	950
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<p><b>Ophthalmology waiting times</b>  <i>Percentage of ophthalmology R1 patients who are waiting within their clinical target date or within 25% in excess of their clinical target date for their care or treatments</i></p>	<p>In June 2023, 57.5% of Ophthalmology R1 patients were waiting within their clinical target date or within 25% of the target date.</p> <p><b>Actions of Improvement;</b>                      A detailed Ophthalmology action plan is currently being executed which focusses on performance improvement schemes using insourcing and outsourcing resources, administrative validation and active recruitment to fill any current vacancies impacting capacity</p>	<p><b>Percentage of ophthalmology R1 patients who are waiting within their clinical target date or within 25% in excess of their clinical target date for their care or treatments</b></p> <table border="1"> <caption>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</caption> <thead> <tr> <th>Month</th> <th>% of ophthalmology R1 appointments attended which were within their clinical target date or within 25% beyond their clinical target date</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>Jun-22</td><td>60%</td><td>100%</td></tr> <tr><td>Jul-22</td><td>60%</td><td>100%</td></tr> <tr><td>Aug-22</td><td>60%</td><td>100%</td></tr> <tr><td>Sep-22</td><td>60%</td><td>100%</td></tr> <tr><td>Oct-22</td><td>60%</td><td>100%</td></tr> <tr><td>Nov-22</td><td>60%</td><td>100%</td></tr> <tr><td>Dec-22</td><td>65%</td><td>100%</td></tr> <tr><td>Jan-23</td><td>50%</td><td>100%</td></tr> <tr><td>Feb-23</td><td>60%</td><td>100%</td></tr> <tr><td>Mar-23</td><td>60%</td><td>100%</td></tr> <tr><td>Apr-23</td><td>60%</td><td>100%</td></tr> <tr><td>May-23</td><td>60%</td><td>100%</td></tr> <tr><td>Jun-23</td><td>57.5%</td><td>100%</td></tr> </tbody> </table>	Month	% of ophthalmology R1 appointments attended which were within their clinical target date or within 25% beyond their clinical target date	Target	Jun-22	60%	100%	Jul-22	60%	100%	Aug-22	60%	100%	Sep-22	60%	100%	Oct-22	60%	100%	Nov-22	60%	100%	Dec-22	65%	100%	Jan-23	50%	100%	Feb-23	60%	100%	Mar-23	60%	100%	Apr-23	60%	100%	May-23	60%	100%	Jun-23	57.5%	100%																		
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**PLANNED CARE**

Description	Current Performance	Trend
<p><b>Diagnostics waiting times</b>  <i>The number of patients waiting more than 8 weeks for specified diagnostics</i></p>	<p>In June 2023, there was a reduction in the number of patients waiting over 8 weeks for specified diagnostics. It decreased from 7,255 in May 2023 to 7,221 in June 2023.</p> <p>The following is a breakdown for the 8-week breaches by diagnostic test for June 2023:</p> <ul style="list-style-type: none"> <li>• Endoscopy= 4,737</li> <li>• Cardiac tests= 551 ^</li> <li>• Other Diagnostics = 1,925 ^</li> </ul> <p><b>Actions of Improvement;</b>                      Detailed demand and capacity work is currently underway to develop a diagnostic recovery trajectory which works towards the ministerial target of 0 by March 2024.</p>	<p align="center"><b>Number of patients waiting longer than 8 weeks for Diagnostics</b></p> <p align="center"> <span style="color: green;">■</span> Other diagnostics (inc. radiology)                      <span style="color: red;">■</span> Endoscopy                      <span style="color: blue;">■</span> Cardiac tests                 </p>
<p><b>Therapy waiting times</b>  <i>The number of patients waiting more than 14 weeks for specified therapies</i></p>	<p>In June 2023 there were 221 patients waiting over 14 weeks for specified Therapies.</p> <p>The breakdown for breaches in June 2023 are:</p> <ul style="list-style-type: none"> <li>• Speech &amp; Language Therapy= 175 ^</li> <li>• Dietetics = 46 ^</li> </ul> <p><b>Actions of Improvement;</b>                      The Service Group have already identified the previous declining position in Dietetics and SLT and have developed detailed recovery trajectories in both areas.</p>	<p align="center"><b>Number of patients waiting longer than 14 weeks for therapies</b></p> <p align="center"> <span style="color: green;">■</span> Therapies &gt; 14 weeks (SBU HB)                      <span style="color: red;">—</span> Trajectory                 </p>

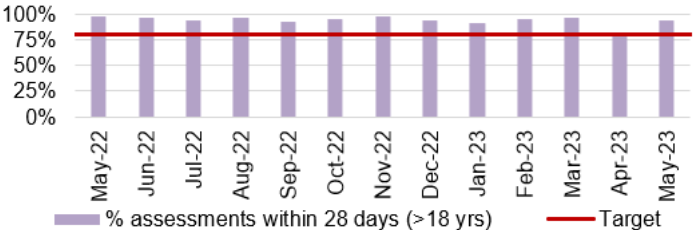
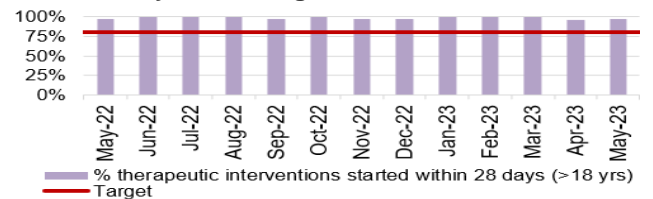
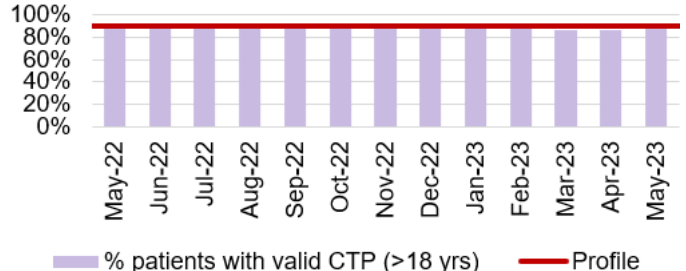
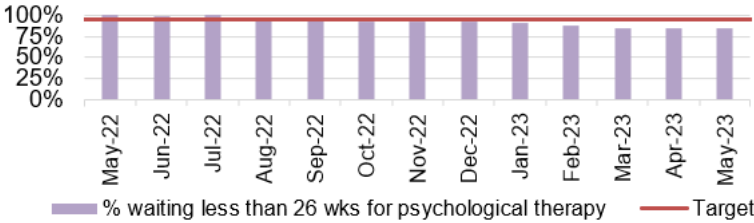
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<b>Single Cancer Pathway backlog</b> <i>The number of patients with an active wait status of more than 63 days</i>	June 2023 backlog by tumour site: <table border="1"> <thead> <tr> <th>Tumour Site</th> <th>63 - 103 days</th> <th>≥104 days</th> </tr> </thead> <tbody> <tr><td>Acute Leukaemia</td><td>0</td><td>0</td></tr> <tr><td>Brain/CNS</td><td>0</td><td>1</td></tr> <tr><td>Breast</td><td>9</td><td>4</td></tr> <tr><td>Children's cancer</td><td>0</td><td>0</td></tr> <tr><td>Gynaecological</td><td>64</td><td>29</td></tr> <tr><td>Haematological</td><td>9</td><td>3</td></tr> <tr><td>Head and neck</td><td>14</td><td>5</td></tr> <tr><td>Lower Gastrointestinal</td><td>31</td><td>24</td></tr> <tr><td>Lung</td><td>10</td><td>16</td></tr> <tr><td>Other</td><td>3</td><td>1</td></tr> <tr><td>Sarcoma</td><td>4</td><td>0</td></tr> <tr><td>Skin(c)</td><td>12</td><td>5</td></tr> <tr><td>Upper Gastrointestinal</td><td>26</td><td>10</td></tr> <tr><td>Urological</td><td>24</td><td>21</td></tr> <tr><td><b>Grand Total</b></td><td>206</td><td>119</td></tr> </tbody> </table>	Tumour Site	63 - 103 days	≥104 days	Acute Leukaemia	0	0	Brain/CNS	0	1	Breast	9	4	Children's cancer	0	0	Gynaecological	64	29	Haematological	9	3	Head and neck	14	5	Lower Gastrointestinal	31	24	Lung	10	16	Other	3	1	Sarcoma	4	0	Skin(c)	12	5	Upper Gastrointestinal	26	10	Urological	24	21	<b>Grand Total</b>	206	119	<b>Number of patients with a wait status of more than 62 days</b> <table border="1"> <caption>Number of patients with a wait status of more than 62 days</caption> <thead> <tr> <th>Month</th> <th>63-103 days</th> <th>≥ 104 days</th> </tr> </thead> <tbody> <tr><td>Jun-22</td><td>250</td><td>150</td></tr> <tr><td>Jul-22</td><td>350</td><td>100</td></tr> <tr><td>Aug-22</td><td>350</td><td>150</td></tr> <tr><td>Sep-22</td><td>400</td><td>150</td></tr> <tr><td>Oct-22</td><td>350</td><td>150</td></tr> <tr><td>Nov-22</td><td>300</td><td>150</td></tr> <tr><td>Dec-22</td><td>400</td><td>150</td></tr> <tr><td>Jan-23</td><td>300</td><td>150</td></tr> <tr><td>Feb-23</td><td>200</td><td>150</td></tr> <tr><td>Mar-23</td><td>250</td><td>150</td></tr> <tr><td>Apr-23</td><td>300</td><td>100</td></tr> <tr><td>May-23</td><td>300</td><td>100</td></tr> <tr><td>Jun-23</td><td>200</td><td>150</td></tr> </tbody> </table>	Month	63-103 days	≥ 104 days	Jun-22	250	150	Jul-22	350	100	Aug-22	350	150	Sep-22	400	150	Oct-22	350	150	Nov-22	300	150	Dec-22	400	150	Jan-23	300	150	Feb-23	200	150	Mar-23	250	150	Apr-23	300	100	May-23	300	100	Jun-23	200	150
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<b>Single Cancer Pathway backlog-patients waiting over 63 days</b>	June 2023 saw a reduction in the number of patients waiting over 63 days. The following actions have been outlined to support backlog reduction; <ul style="list-style-type: none"> <li>- Individual meetings have taken place with tumour sites to explore additional work to support a further reduction in the backlog</li> <li>- Targeted work is being undertaken to focus on reducing the number of patients waiting &gt;104 days as a priority</li> <li>- Focussed validation work is being undertaken each month to support the end of month position being as up to date as possible.</li> </ul>	<b>Percentage of patients starting first definitive cancer treatment within 62 days from point of suspicion</b> <table border="1"> <caption>SCP 2023/24 Performance</caption> <thead> <tr> <th>Month</th> <th>Actual %</th> <th>Target %</th> <th>Trajectory %</th> </tr> </thead> <tbody> <tr><td>Jan-23</td><td>50%</td><td>75%</td><td>50%</td></tr> <tr><td>Feb-23</td><td>44%</td><td>75%</td><td>44%</td></tr> <tr><td>Mar-23</td><td>53%</td><td>75%</td><td>53%</td></tr> <tr><td>Apr-23</td><td>57%</td><td>75%</td><td>57%</td></tr> <tr><td>May-23</td><td>47%</td><td>75%</td><td>47%</td></tr> <tr><td>Jun-23</td><td></td><td>75%</td><td>60%</td></tr> <tr><td>Jul-23</td><td></td><td>75%</td><td>65%</td></tr> <tr><td>Aug-23</td><td></td><td>75%</td><td>65%</td></tr> <tr><td>Sep-23</td><td></td><td>75%</td><td>65%</td></tr> <tr><td>Oct-23</td><td></td><td>75%</td><td>70%</td></tr> <tr><td>Nov-23</td><td></td><td>75%</td><td>72%</td></tr> <tr><td>Dec-23</td><td></td><td>75%</td><td>75%</td></tr> <tr><td>Jan-24</td><td></td><td>75%</td><td>75%</td></tr> <tr><td>Feb-24</td><td></td><td>75%</td><td>68%</td></tr> <tr><td>Mar-24</td><td></td><td>75%</td><td>75%</td></tr> </tbody> </table>	Month	Actual %	Target %	Trajectory %	Jan-23	50%	75%	50%	Feb-23	44%	75%	44%	Mar-23	53%	75%	53%	Apr-23	57%	75%	57%	May-23	47%	75%	47%	Jun-23		75%	60%	Jul-23		75%	65%	Aug-23		75%	65%	Sep-23		75%	65%	Oct-23		75%	70%	Nov-23		75%	72%	Dec-23		75%	75%	Jan-24		75%	75%	Feb-24		75%	68%	Mar-24		75%	75%																										
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<p><b>USC First Outpatient Appointments</b> <i>The number of patients at first outpatient appointment stage by days waiting</i></p>	<p>To date, early July 2023 figures show total wait volumes for first outpatient appointment have increased by 6% when compared with the previous week.</p> <p>Of the total number of patients awaiting a first outpatient appointment, 22% have been booked, which is slightly lower than figures seen in the previous months' performance.</p>	<p><b>The number of patients waiting for a first outpatient appointment (by total days waiting) – Early July 2023</b></p> <table border="1"> <thead> <tr> <th>FIRST OPA</th> <th>02-Jul</th> <th>09-Jul</th> </tr> </thead> <tbody> <tr><td>Acute Leukaemia</td><td>0</td><td>0</td></tr> <tr><td>Brain/CNS</td><td>0</td><td>0</td></tr> <tr><td>Breast</td><td>2</td><td>20</td></tr> <tr><td>Children's Cancer</td><td>4</td><td>5</td></tr> <tr><td>Gynaecological</td><td>126</td><td>83</td></tr> <tr><td>Haematological</td><td>2</td><td>2</td></tr> <tr><td>Head and Neck</td><td>109</td><td>101</td></tr> <tr><td>Lower GI</td><td>59</td><td>77</td></tr> <tr><td>Lung</td><td>2</td><td>4</td></tr> <tr><td>Other</td><td>206</td><td>275</td></tr> <tr><td>Sarcoma</td><td>6</td><td>2</td></tr> <tr><td>Skin</td><td>307</td><td>286</td></tr> <tr><td>Upper GI</td><td>42</td><td>45</td></tr> <tr><td>Urological</td><td>39</td><td>60</td></tr> <tr><td></td><td><b>904</b></td><td><b>960</b></td></tr> </tbody> </table>	FIRST OPA	02-Jul	09-Jul	Acute Leukaemia	0	0	Brain/CNS	0	0	Breast	2	20	Children's Cancer	4	5	Gynaecological	126	83	Haematological	2	2	Head and Neck	109	101	Lower GI	59	77	Lung	2	4	Other	206	275	Sarcoma	6	2	Skin	307	286	Upper GI	42	45	Urological	39	60		<b>904</b>	<b>960</b>
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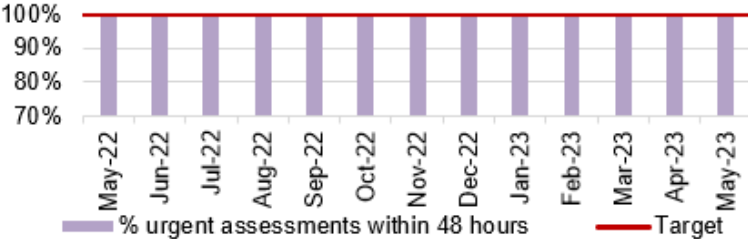
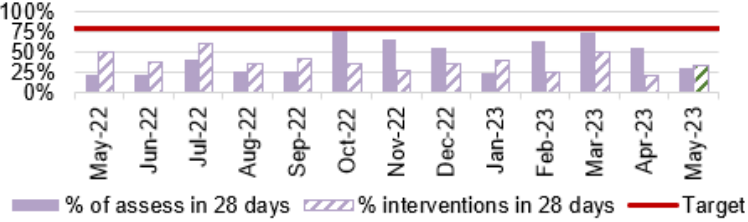
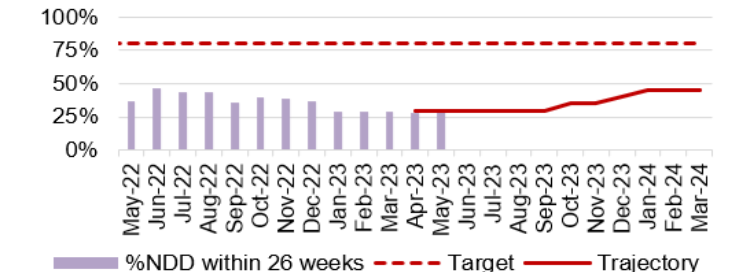
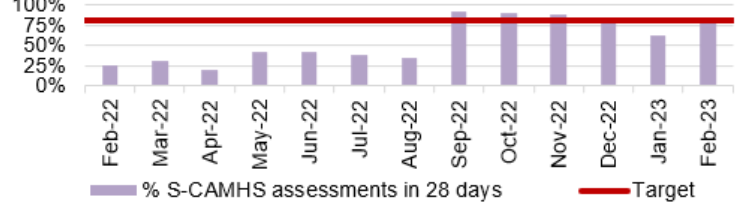
FOLLOW-UP APPOINTMENTS																																																																												
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<p><b>Follow-up appointments</b></p> <p>1. The total number of patients on the follow-up waiting list</p> <p>2. The number of patients waiting 100% over target for a follow-up appointment</p>	<p>In June 2023, the overall size of the follow-up waiting list decreased by 580 patients compared with May 2023 (from 150,109 to 149,529).</p> <p>In June 2023, there was a total of 68,286 patients waiting for a follow-up past their target date. This is a slight in-month reduction of 4.5% (from 71,519 in May 2023 to 68,286).</p> <p>Of the 68,286 delayed follow-ups in June 2023, 13,023 had appointment dates and 55,023 were still waiting for an appointment.</p> <p>In addition, 40,807 patients were waiting 100%+ over target date in June 2023. This is a 4.1% reduction when compared with May 2023.</p> <p><b>Actions of Improvement;</b> An internal SBUHB validation is in place to support validation work. Alongside this, Welsh Government has facilitated a pan-Wales contract with HBSUK to undertake more in-depth validation which focuses on direct contact with patients and a more “clinical-triage” approach. This work has begun and is focussing on services with the longest waits</p>	<p><b>1. Total number of patients waiting for a follow-up</b></p> <table border="1"> <caption>Data for Chart 1: Total number of patients waiting for a follow-up</caption> <thead> <tr> <th>Month</th> <th>Number of patients waiting for follow-up (SBU HB)</th> </tr> </thead> <tbody> <tr><td>Jun-22</td><td>135,000</td></tr> <tr><td>Jul-22</td><td>135,000</td></tr> <tr><td>Aug-22</td><td>135,000</td></tr> <tr><td>Sep-22</td><td>135,000</td></tr> <tr><td>Oct-22</td><td>135,000</td></tr> <tr><td>Nov-22</td><td>135,000</td></tr> <tr><td>Dec-22</td><td>135,000</td></tr> <tr><td>Jan-23</td><td>135,000</td></tr> <tr><td>Feb-23</td><td>135,000</td></tr> <tr><td>Mar-23</td><td>135,000</td></tr> <tr><td>Apr-23</td><td>135,000</td></tr> <tr><td>May-23</td><td>150,109</td></tr> <tr><td>Jun-23</td><td>149,529</td></tr> </tbody> </table> <p>■ Number of patients waiting for follow-up (SBU HB)</p> <p><b>2. Delayed follow-ups: Number of patients waiting 100% over target</b></p> <table border="1"> <caption>Data for Chart 2: Delayed follow-ups: Number of patients waiting 100% over target</caption> <thead> <tr> <th>Month</th> <th>Number of patients waiting 100% over target date (SBU HB)</th> </tr> </thead> <tbody> <tr><td>Jun-22</td><td>35,000</td></tr> <tr><td>Jul-22</td><td>35,000</td></tr> <tr><td>Aug-22</td><td>35,000</td></tr> <tr><td>Sep-22</td><td>35,000</td></tr> <tr><td>Oct-22</td><td>35,000</td></tr> <tr><td>Nov-22</td><td>35,000</td></tr> <tr><td>Dec-22</td><td>35,000</td></tr> <tr><td>Jan-23</td><td>35,000</td></tr> <tr><td>Feb-23</td><td>35,000</td></tr> <tr><td>Mar-23</td><td>35,000</td></tr> <tr><td>Apr-23</td><td>35,000</td></tr> <tr><td>May-23</td><td>71,519</td></tr> <tr><td>Jun-23</td><td>68,286</td></tr> <tr><td>Jul-23</td><td>68,286</td></tr> <tr><td>Aug-23</td><td>68,286</td></tr> <tr><td>Sep-23</td><td>68,286</td></tr> <tr><td>Oct-23</td><td>68,286</td></tr> <tr><td>Nov-23</td><td>68,286</td></tr> <tr><td>Dec-23</td><td>68,286</td></tr> <tr><td>Jan-24</td><td>68,286</td></tr> <tr><td>Feb-24</td><td>68,286</td></tr> <tr><td>Mar-24</td><td>68,286</td></tr> </tbody> </table> <p>■ Number of patients waiting 100% over target date (SBU HB) — Trajectory</p>	Month	Number of patients waiting for follow-up (SBU HB)	Jun-22	135,000	Jul-22	135,000	Aug-22	135,000	Sep-22	135,000	Oct-22	135,000	Nov-22	135,000	Dec-22	135,000	Jan-23	135,000	Feb-23	135,000	Mar-23	135,000	Apr-23	135,000	May-23	150,109	Jun-23	149,529	Month	Number of patients waiting 100% over target date (SBU HB)	Jun-22	35,000	Jul-22	35,000	Aug-22	35,000	Sep-22	35,000	Oct-22	35,000	Nov-22	35,000	Dec-22	35,000	Jan-23	35,000	Feb-23	35,000	Mar-23	35,000	Apr-23	35,000	May-23	71,519	Jun-23	68,286	Jul-23	68,286	Aug-23	68,286	Sep-23	68,286	Oct-23	68,286	Nov-23	68,286	Dec-23	68,286	Jan-24	68,286	Feb-24	68,286	Mar-24	68,286
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<p>Stroke Measures</p> <p>1. % of patients who have a direct admission to an acute stroke unit within 4 hours</p> <p>2. % of patients who received a CT Scan within 1 hour</p> <p>3. % of patients who are assessed by a stroke specialist consultant physician within 24 hours</p> <p>4. % of thrombolysed stroke patients with a door to door needle time of less than or equal to 45 minutes</p>	<p>1. In June 2023, 24% of patients had a direct admission to an acute stroke unit within 4 hours. This is an improvement on the performance in May 2023 (5.2%).</p> <p>2. In June 2023, 43% of patients received a CT scan within 1 hour of being admitted, this is an improvement on the figure reported in May 2023</p> <p>3. 92.9% of patients were assessed by a stroke specialist consultant physician within 24 hours in June 2023, which is an improvement of 2.2% from May 2023.</p> <p>4. In June 2023, 13% of patients were thrombolysed in a time of less than or equal to 45 minutes.</p> <p><b>Actions of Improvement;</b> The lack of ring fenced beds on all wards across the hospital sites is challenging as bed capacity is limited by the pressures of unscheduled care demand. The lack of dedicated stroke beds is directly impacting the stroke related performance measures. Work is underway to focus on future stroke performance improvement.</p>	<p><b>1. % of patients who have a direct admission to an acute stroke unit within 4 hours</b></p> <table border="1"> <caption>% 4 hour admissions (Morr)</caption> <thead> <tr> <th>Month</th> <th>%</th> </tr> </thead> <tbody> <tr><td>Jun-22</td><td>5.2</td></tr> <tr><td>Jul-22</td><td>5.2</td></tr> <tr><td>Aug-22</td><td>5.2</td></tr> <tr><td>Sep-22</td><td>5.2</td></tr> <tr><td>Oct-22</td><td>5.2</td></tr> <tr><td>Nov-22</td><td>5.2</td></tr> <tr><td>Dec-22</td><td>5.2</td></tr> <tr><td>Jan-23</td><td>5.2</td></tr> <tr><td>Feb-23</td><td>5.2</td></tr> <tr><td>Mar-23</td><td>5.2</td></tr> <tr><td>Apr-23</td><td>5.2</td></tr> <tr><td>May-23</td><td>5.2</td></tr> <tr><td>Jun-23</td><td>24</td></tr> </tbody> </table> <p><b>2. % of patients who received a CT Scan within 1 hour</b></p> <table border="1"> <caption>% 1 hr CT Scan (Morr)</caption> <thead> <tr> <th>Month</th> <th>%</th> </tr> </thead> <tbody> <tr><td>Jun-22</td><td>35</td></tr> <tr><td>Jul-22</td><td>35</td></tr> <tr><td>Aug-22</td><td>35</td></tr> <tr><td>Sep-22</td><td>55</td></tr> <tr><td>Oct-22</td><td>35</td></tr> <tr><td>Nov-22</td><td>35</td></tr> <tr><td>Dec-22</td><td>35</td></tr> <tr><td>Jan-23</td><td>35</td></tr> <tr><td>Feb-23</td><td>45</td></tr> <tr><td>Mar-23</td><td>45</td></tr> <tr><td>Apr-23</td><td>45</td></tr> <tr><td>May-23</td><td>40</td></tr> <tr><td>Jun-23</td><td>43</td></tr> </tbody> </table> <p><b>3. % of patients who are assessed by a stroke specialist consultant physician within 24 hours</b></p> <table border="1"> <caption>% assess within 24 hrs (Morr)</caption> <thead> <tr> <th>Month</th> <th>%</th> </tr> </thead> <tbody> <tr><td>Jun-22</td><td>92.9</td></tr> <tr><td>Jul-22</td><td>92.9</td></tr> <tr><td>Aug-22</td><td>92.9</td></tr> <tr><td>Sep-22</td><td>92.9</td></tr> <tr><td>Oct-22</td><td>92.9</td></tr> <tr><td>Nov-22</td><td>92.9</td></tr> <tr><td>Dec-22</td><td>92.9</td></tr> <tr><td>Jan-23</td><td>92.9</td></tr> <tr><td>Feb-23</td><td>92.9</td></tr> <tr><td>Mar-23</td><td>92.9</td></tr> <tr><td>Apr-23</td><td>92.9</td></tr> <tr><td>May-23</td><td>92.9</td></tr> <tr><td>Jun-23</td><td>92.9</td></tr> </tbody> </table> <p><b>4. % of thrombolysed stroke patients with a door to door needle time of less than or equal to 45 minutes</b></p> <table border="1"> <caption>45 mins thrombolysis (Morr)</caption> <thead> <tr> <th>Month</th> <th>%</th> </tr> </thead> <tbody> <tr><td>Jun-22</td><td>0</td></tr> <tr><td>Jul-22</td><td>0</td></tr> <tr><td>Aug-22</td><td>0</td></tr> <tr><td>Sep-22</td><td>13</td></tr> <tr><td>Oct-22</td><td>0</td></tr> <tr><td>Nov-22</td><td>0</td></tr> <tr><td>Dec-22</td><td>0</td></tr> <tr><td>Jan-23</td><td>0</td></tr> <tr><td>Feb-23</td><td>0</td></tr> <tr><td>Mar-23</td><td>0</td></tr> <tr><td>Apr-23</td><td>0</td></tr> <tr><td>May-23</td><td>0</td></tr> <tr><td>Jun-23</td><td>13</td></tr> </tbody> </table>	Month	%	Jun-22	5.2	Jul-22	5.2	Aug-22	5.2	Sep-22	5.2	Oct-22	5.2	Nov-22	5.2	Dec-22	5.2	Jan-23	5.2	Feb-23	5.2	Mar-23	5.2	Apr-23	5.2	May-23	5.2	Jun-23	24	Month	%	Jun-22	35	Jul-22	35	Aug-22	35	Sep-22	55	Oct-22	35	Nov-22	35	Dec-22	35	Jan-23	35	Feb-23	45	Mar-23	45	Apr-23	45	May-23	40	Jun-23	43	Month	%	Jun-22	92.9	Jul-22	92.9	Aug-22	92.9	Sep-22	92.9	Oct-22	92.9	Nov-22	92.9	Dec-22	92.9	Jan-23	92.9	Feb-23	92.9	Mar-23	92.9	Apr-23	92.9	May-23	92.9	Jun-23	92.9	Month	%	Jun-22	0	Jul-22	0	Aug-22	0	Sep-22	13	Oct-22	0	Nov-22	0	Dec-22	0	Jan-23	0	Feb-23	0	Mar-23	0	Apr-23	0	May-23	0	Jun-23	13
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**ADULT MENTAL HEALTH**

Description	Current Performance	Trend
<p>Adult Mental Health Measures:</p> <ol style="list-style-type: none"> <li><i>% of MH assessments undertaken within 28 days from the date of receipt of referral (18 years and over)</i></li> <li><i>% of therapeutic interventions started within 28 days following an assessment by LPMHSS (18 years and over)</i></li> <li><i>% of health board residents in receipt of secondary mental health services who have a valid Care and Treatment Plan (CTP) (18 years and over)</i></li> <li><i>% of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health</i></li> </ol>	<ol style="list-style-type: none"> <li>In May 2023, 94% of assessments were undertaken within 28 days of referral for patients 18 years and over.</li> <li>In May 2023, the percentage of therapeutic interventions started within 28 days following an assessment by the Local Primary Mental Health Support Service (LPMHSS) was 98%.</li> <li>88% of residents in receipt of secondary care mental health services had a valid Care and Treatment Plan in May 2023.</li> <li>In May 2023, 84% of patients waited less than 26 weeks for psychological therapy. This was below the national target of 95%.</li> </ol>	<ol style="list-style-type: none"> <li><b>% Mental Health assessments undertaken within 28 days from receipt of referral</b>   </li> <li><b>% Mental Health therapeutic interventions started within 28 days following LPMHSS assessment</b>   </li> <li><b>% residents with a valid Care and Treatment Plan (CTP)</b>   </li> <li><b>% waiting less than 26 weeks for Psychology Therapy</b>   </li> </ol>

**CHILD & ADOLESCENT MENTAL HEALTH (CAMHS)**

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<p>1. Crisis - % Urgent Assessment by CAMHS undertaken within 48 Hours from receipt of referral</p> <p>2. Primary CAMHS (P-CAMHS) - % Routine Assessment by CAMHS undertaken within 28 days from receipt of referral</p> <p>3. Primary CAMHS (P-CAMHS) - % Therapeutic interventions started within 28 days following assessment by LPMHSS</p> <p>4. NDD - % Neurodevelopmental Disorder patients receiving a Diagnostic Assessment within 26 weeks</p> <p>5. Specialist CAMHS (S-CAMHS) - % Routine Assessment by SCAMHS undertaken within 28 days from receipt of referral</p>	<p>1. In May 2023, 100% of CAMHS patients received an assessment within 48 hours.</p> <p>2. 31% of routine assessments were undertaken within 28 days from referral in May 2023 against a target of 80%.</p> <p>3. 33% of therapeutic interventions were started within 28 days following assessment by LPMHSS in May 2023.</p> <p>4. 30% of NDD patients received a diagnostic assessment within 26 weeks in May 2023 against a target of 80%.</p> <p>5. 82% of routine assessments by SCAMHS were undertaken within 28 days in February 2023. <i>*Updated data is not currently available to report*</i></p>	<p align="center"><b>Trend</b></p> <p><b>1. Crisis- assessment within 48 hours</b></p>  <table border="1"> <caption>1. 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## **4. NHS DELIVERY FRAMEWORK MEASURES & MINISTERIAL PRIORITY TRAJECTORIES**

## FRACTURED NECK OF FEMUR (#NOF)

Description	Current Performance	Trend
<p><b>Fractured Neck of Femur (#NOF)</b></p> <p>1. <i>Prompt orthogeriatric assessment- % patients receiving an assessment by a senior geriatrician within 72 hours of presentation</i></p> <p>2. <i>Prompt surgery - % patients undergoing surgery the day following presentation with hip fracture</i></p> <p>3. <i>NICE compliant surgery - % of operations consistent with the recommendations of NICE CG124</i></p> <p>4. <i>Prompt mobilisation after surgery - % patients out of bed (standing or hoisted) by the day after operation</i></p>	<p><b>1. Prompt orthogeriatric assessment-</b> In May 2023, 95% of patients in Morryston hospital received an assessment by a senior geriatrician within 72 hours.</p> <p><b>2. Prompt surgery-</b> In May 2023, 27.8% of patients had surgery the day following presentation with a hip fracture. This is a 9.4% deterioration from May 2022 which was 37.2%</p> <p><b>3. NICE compliant surgery-</b> 72.1% of operations were consistent with the NICE recommendations in May 2023. This is 1.4% less than in May 2022.</p> <p><b>4. Prompt mobilisation-</b> In May 2023, 79.7% of patients were out of bed the day after surgery. This is 10.5% more than in May 2022.</p>	<div style="text-align: center;"> <p><b>1. Prompt orthogeriatric assessment</b></p> <p><b>2. Prompt surgery</b></p> <p><b>3. NICE compliant Surgery</b></p> <p><b>4. Prompt mobilisation</b></p> </div>

**FRACTURED NECK OF FEMUR (#NOF)**

Description	Current Performance	Trend
<p>5. <i>Not delirious when tested- % patients (&lt;4 on 4AT test) when tested in the week after operation</i></p>	<p><b>5. Not delirious when tested-</b> 74.2% of patients were not delirious in the week after their operation in May 2023.</p>	<p align="center"><b>5. Not delirious when tested</b></p>
<p>6. <i>Return to original residence- % patients discharged back to original residence, or in that residence at 120 day follow-up</i></p>	<p><b>6. Return to original residence-</b> 68.9% of patients in May 2023 were discharged back to their original residence. This is 1% less than in May 2022.</p>	<p align="center"><b>6. Return to original residence</b></p>
<p>7. <i>30 day mortality rate</i></p>	<p><b>7. 30 day mortality rate-</b> In January 2021 the mortality rate for Morriston Hospital was 7.5% which is 0.5% less than January 2020. The mortality rate in Morriston Hospital in January 2021 is higher than the all-Wales average of 6.9% but lower than the national average of 7.6%.</p> <p>* Updated data is currently not available, but is being reviewed.</p>	<p align="center"><b>7. 30 day mortality rate</b></p>

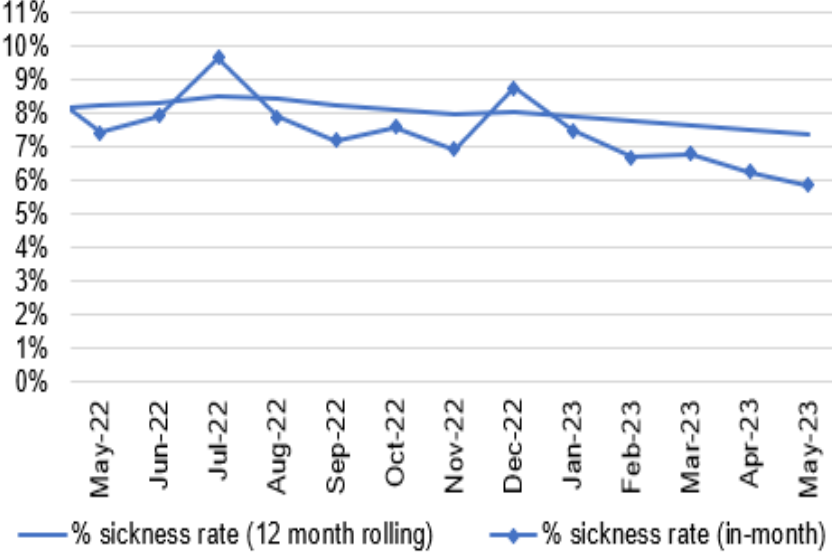
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<p><b>Number of pressure ulcers</b></p> <p>1. Total number of pressure ulcers developed in hospital and in the community</p> <p>2. Rate of pressure ulcers per 100,000 admission</p>	<p>1. In May 2023 there were 124 cases of healthcare acquired pressure ulcers, 41 of which were community acquired and 83 were hospital acquired.</p> <p>There were 19 grade 3+ pressure ulcers in May 2023, 9 of which were community acquired and 10 were hospital acquired.</p> <p>2. The rate per 100,000 admissions decreased from 1,204 in April 2023 to 1,105 in May 2023.</p>	<p><b>Total number of hospital and community acquired Pressure Ulcers (PU) and rate per 100,000 admissions</b></p> <table border="1"> <caption>Data for Pressure Ulcers and Rate per 100,000 Admissions</caption> <thead> <tr> <th>Month</th> <th>Pressure Ulcers (Community)</th> <th>Pressure Ulcers (Hospital)</th> <th>Rate per 100,000 admissions</th> </tr> </thead> <tbody> <tr><td>May-22</td><td>40</td><td>60</td><td>800</td></tr> <tr><td>Jun-22</td><td>35</td><td>55</td><td>750</td></tr> <tr><td>Jul-22</td><td>30</td><td>50</td><td>700</td></tr> <tr><td>Aug-22</td><td>50</td><td>55</td><td>750</td></tr> <tr><td>Sep-22</td><td>35</td><td>45</td><td>600</td></tr> <tr><td>Oct-22</td><td>45</td><td>55</td><td>750</td></tr> <tr><td>Nov-22</td><td>40</td><td>70</td><td>850</td></tr> <tr><td>Dec-22</td><td>45</td><td>45</td><td>650</td></tr> <tr><td>Jan-23</td><td>50</td><td>60</td><td>800</td></tr> <tr><td>Feb-23</td><td>45</td><td>55</td><td>800</td></tr> <tr><td>Mar-23</td><td>60</td><td>75</td><td>1100</td></tr> <tr><td>Apr-23</td><td>35</td><td>80</td><td>1200</td></tr> <tr><td>May-23</td><td>45</td><td>80</td><td>1100</td></tr> </tbody> </table>	Month	Pressure Ulcers (Community)	Pressure Ulcers (Hospital)	Rate per 100,000 admissions	May-22	40	60	800	Jun-22	35	55	750	Jul-22	30	50	700	Aug-22	50	55	750	Sep-22	35	45	600	Oct-22	45	55	750	Nov-22	40	70	850	Dec-22	45	45	650	Jan-23	50	60	800	Feb-23	45	55	800	Mar-23	60	75	1100	Apr-23	35	80	1200	May-23	45	80	1100
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<p><b>Inpatient Falls</b></p> <p>The total number of inpatient falls</p>	<ul style="list-style-type: none"> <li>The number of Falls reported via Datix web for Swansea Bay UHB was 143 in June 2023. This is 22.3% less than May 2023 where 184 falls were recorded.</li> </ul>	<p><b>Number of inpatient Falls</b></p> <table border="1"> <caption>Data for Number of Inpatient Falls</caption> <thead> <tr> <th>Month</th> <th>Hospital falls</th> </tr> </thead> <tbody> <tr><td>Jun-22</td><td>170</td></tr> <tr><td>Jul-22</td><td>170</td></tr> <tr><td>Aug-22</td><td>215</td></tr> <tr><td>Sep-22</td><td>170</td></tr> <tr><td>Oct-22</td><td>180</td></tr> <tr><td>Nov-22</td><td>175</td></tr> <tr><td>Dec-22</td><td>180</td></tr> <tr><td>Jan-23</td><td>185</td></tr> <tr><td>Feb-23</td><td>175</td></tr> <tr><td>Mar-23</td><td>210</td></tr> <tr><td>Apr-23</td><td>180</td></tr> <tr><td>May-23</td><td>180</td></tr> <tr><td>Jun-23</td><td>140</td></tr> </tbody> </table>	Month	Hospital falls	Jun-22	170	Jul-22	170	Aug-22	215	Sep-22	170	Oct-22	180	Nov-22	175	Dec-22	180	Jan-23	185	Feb-23	175	Mar-23	210	Apr-23	180	May-23	180	Jun-23	140																												
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## NATIONALLY REPORTABLE INCIDENTS

Description	Current Performance	Trend																																																																																				
<p><b>Nationally Reportable Incidents (NRI's)-</b></p> <p>1. <i>The number of Nationally reportable incidents</i></p> <p>2. <i>The number of Never Events</i></p> <p>3. <i>Of the nationally reportable incidents due for assurance, the percentage which were assured within the agreed timescales</i></p>	<p>1. The Health Board reported 4 Nationally Reportable Incidents for the month of June 2023 to Welsh Government. The Service Group breakdown is as follows;</p> <ul style="list-style-type: none"> <li>- Morriston – 2</li> <li>- Singleton – 1</li> <li>- Primary Care - 1</li> </ul> <p>2. There were no new Never Events reported in June 2023.</p> <p>3. In June 2023, there were no NRI's due for closure.</p>	<p><b>1. and 2. Number of nationally reportable incidents and never events</b></p> <table border="1"> <caption>Number of nationally reportable incidents and never events</caption> <thead> <tr> <th>Month</th> <th>Number of nationally reportable incidents</th> <th>Number of never events</th> </tr> </thead> <tbody> <tr><td>Jun-22</td><td>2</td><td>0</td></tr> <tr><td>Jul-22</td><td>2</td><td>0</td></tr> <tr><td>Aug-22</td><td>11</td><td>0</td></tr> <tr><td>Sep-22</td><td>15</td><td>0</td></tr> <tr><td>Oct-22</td><td>9</td><td>0</td></tr> <tr><td>Nov-22</td><td>12</td><td>0</td></tr> <tr><td>Dec-22</td><td>8</td><td>0</td></tr> <tr><td>Jan-23</td><td>10</td><td>0</td></tr> <tr><td>Feb-23</td><td>6</td><td>0</td></tr> <tr><td>Mar-23</td><td>9</td><td>0</td></tr> <tr><td>Apr-23</td><td>6</td><td>0</td></tr> <tr><td>May-23</td><td>8</td><td>0</td></tr> <tr><td>Jun-23</td><td>4</td><td>0</td></tr> </tbody> </table> <p><b>3. % of nationally reportable incidents closed within the agreed timescales</b></p> <table border="1"> <caption>% of nationally reportable incidents closed within the agreed timescales</caption> <thead> <tr> <th>Month</th> <th>% NRI's assured</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>May-22</td><td>100%</td><td>80%</td></tr> <tr><td>Jun-22</td><td>33%</td><td>80%</td></tr> <tr><td>Jul-22</td><td>0%</td><td>80%</td></tr> <tr><td>Aug-22</td><td>0%</td><td>80%</td></tr> <tr><td>Sep-22</td><td>0%</td><td>80%</td></tr> <tr><td>Oct-22</td><td>75%</td><td>80%</td></tr> <tr><td>Nov-22</td><td>72%</td><td>80%</td></tr> <tr><td>Dec-22</td><td>85%</td><td>80%</td></tr> <tr><td>Jan-23</td><td>68%</td><td>80%</td></tr> <tr><td>Feb-23</td><td>68%</td><td>80%</td></tr> <tr><td>Mar-23</td><td>82%</td><td>80%</td></tr> <tr><td>Apr-23</td><td>80%</td><td>80%</td></tr> <tr><td>May-23</td><td>68%</td><td>80%</td></tr> </tbody> </table>	Month	Number of nationally reportable incidents	Number of never events	Jun-22	2	0	Jul-22	2	0	Aug-22	11	0	Sep-22	15	0	Oct-22	9	0	Nov-22	12	0	Dec-22	8	0	Jan-23	10	0	Feb-23	6	0	Mar-23	9	0	Apr-23	6	0	May-23	8	0	Jun-23	4	0	Month	% NRI's assured	Target	May-22	100%	80%	Jun-22	33%	80%	Jul-22	0%	80%	Aug-22	0%	80%	Sep-22	0%	80%	Oct-22	75%	80%	Nov-22	72%	80%	Dec-22	85%	80%	Jan-23	68%	80%	Feb-23	68%	80%	Mar-23	82%	80%	Apr-23	80%	80%	May-23	68%	80%
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<b>Discharge Summaries</b> <i>Percentage of discharge summaries approved and sent to patients' doctor following discharge</i>	<p>The latest data shows that in June 2023, the percentage of completed discharge summaries was 65%.</p> <p>In June 2023, compliance ranged from 46% in Singleton Hospital to 74% in Morriston Hospital.</p>	<p><b>% discharge summaries approved and sent</b></p> <table border="1"> <caption>% of completed discharge summaries</caption> <thead> <tr> <th>Month</th> <th>% of completed discharge summaries</th> </tr> </thead> <tbody> <tr><td>Jun-22</td><td>65%</td></tr> <tr><td>Jul-22</td><td>62%</td></tr> <tr><td>Aug-22</td><td>68%</td></tr> <tr><td>Sep-22</td><td>70%</td></tr> <tr><td>Oct-22</td><td>65%</td></tr> <tr><td>Nov-22</td><td>70%</td></tr> <tr><td>Dec-22</td><td>62%</td></tr> <tr><td>Jan-23</td><td>64%</td></tr> <tr><td>Feb-23</td><td>64%</td></tr> <tr><td>Mar-23</td><td>62%</td></tr> <tr><td>Apr-23</td><td>64%</td></tr> <tr><td>May-23</td><td>65%</td></tr> <tr><td>Jun-23</td><td>65%</td></tr> </tbody> </table>	Month	% of completed discharge summaries	Jun-22	65%	Jul-22	62%	Aug-22	68%	Sep-22	70%	Oct-22	65%	Nov-22	70%	Dec-22	62%	Jan-23	64%	Feb-23	64%	Mar-23	62%	Apr-23	64%	May-23	65%	Jun-23	65%																																										
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**WORKFORCE**

Description	Current Performance	Trend																		
<p><b>Staff sickness rates-</b> <i>Percentage of sickness absence rate of staff</i></p>	<ul style="list-style-type: none"> <li>Our in-month sickness performance improved from 6.24% in April to 5.85% in May 2023.</li> <li>The 12-month rolling performance improved slightly from 7.46% in April 2023 to 7.37% in May 2023.</li> <li>The following table provides the top 5 absence reasons by full time equivalent (FTE) days lost in May 2023.</li> </ul> <table border="1" data-bbox="517 671 1200 1294"> <thead> <tr> <th>Absence Reason</th> <th>FTE Days Lost</th> <th>%</th> </tr> </thead> <tbody> <tr> <td>Anxiety/ stress/ depression/ other psychiatric illnesses</td> <td>7,433.05</td> <td>33.7%</td> </tr> <tr> <td>Other musculoskeletal problems</td> <td>2,181.01</td> <td>9.9%</td> </tr> <tr> <td>Other known causes – not elsewhere classified</td> <td>1,767.53</td> <td>8.0%</td> </tr> <tr> <td>Gastrointestinal problems</td> <td>1,584.82</td> <td>7.2%</td> </tr> <tr> <td>Injury, Fracture</td> <td>1,155.72</td> <td>5.2%</td> </tr> </tbody> </table>	Absence Reason	FTE Days Lost	%	Anxiety/ stress/ depression/ other psychiatric illnesses	7,433.05	33.7%	Other musculoskeletal problems	2,181.01	9.9%	Other known causes – not elsewhere classified	1,767.53	8.0%	Gastrointestinal problems	1,584.82	7.2%	Injury, Fracture	1,155.72	5.2%	<p><b>% of full time equivalent (FTE) days lost to sickness absence (12 month rolling and in-month)</b></p>  <p>— % sickness rate (12 month rolling)    ◆ % sickness rate (in-month)</p>
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## THEATRE EFFICIENCY

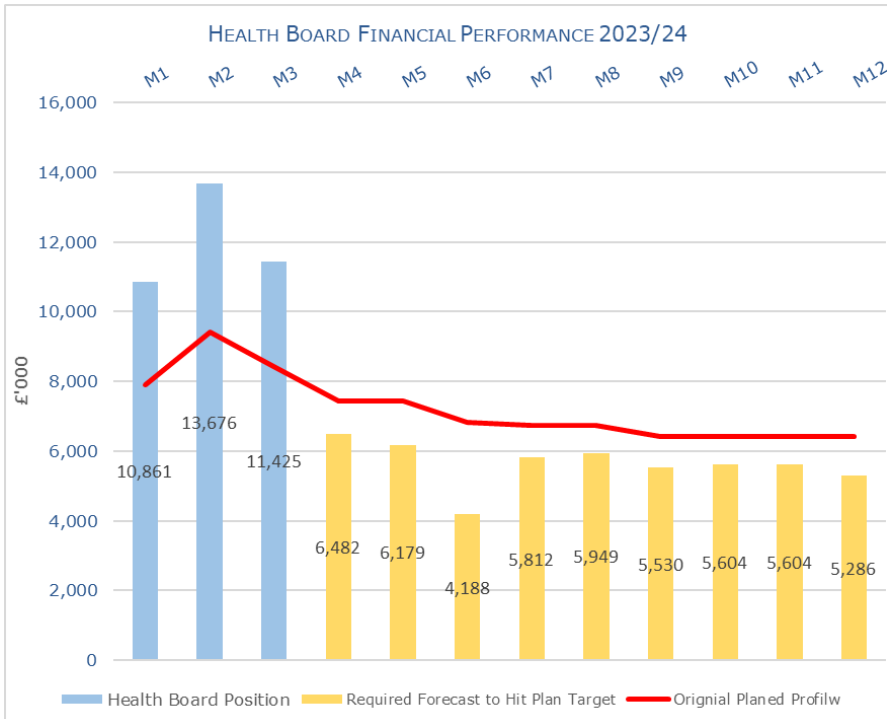
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<p><b>Theatre Efficiency</b></p> <p><b>1. Theatre Utilisation Rates</b></p> <p><b>2. % of theatre sessions starting late</b></p> <p><b>3. % of theatre sessions finishing early</b></p> <p><b>4. % of theatre sessions cancelled at short notice (&lt;28 days)</b></p> <p><b>5. % of operations cancelled on the day</b></p>	<p>In June 2023 the Theatre Utilisation rate was 69%. This is 7% lower than the figure's reported in May 2023 and are 12% lower than those seen in June 2022 (781%).</p> <p>36% of theatre sessions started late in June 2023. This is a 1% improvement on performance seen in May 2023 (37%).</p> <p>In June 2023, 47% of theatre sessions finished early. This is 4% lower than figures seen in May 2023 and 4% lower than those seen in May 2022</p> <p>11% of theatre sessions were cancelled at short notice in June 2023. This is 6% higher than the figure reported in May 2023 and is 8% higher than figures seen in June 2022.</p> <p>Of the operations cancelled in June 2023, 33% of them were cancelled on the day. This is the 2% lower than figures reported in May 2023.</p>	<p style="text-align: center;"><b>1. Theatre Utilisation Rates</b></p> <table border="1"> <caption>1. 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<p><b>Patient experience</b></p> <p>1. Number of friends and family surveys completed</p> <p>2. Percentage of patients/ service users who would recommend and highly recommend</p>	<ul style="list-style-type: none"> <li>Health Board Friends &amp; Family patient satisfaction level in June 2023 was 89% and 2,503 surveys were completed.               <ul style="list-style-type: none"> <li>Singleton/ Neath Port Talbot Hospitals Service Group completed 731 surveys in June 2023, with a recommended score of 95%.</li> <li>Morrison Hospital completed 1,512 surveys in June 2023, with a recommended score of 85%.</li> <li>Primary &amp; Community Care completed 255 surveys for June 2023, with a recommended score of 96%.</li> <li>The Mental Health Service Group completed 44 surveys for June 2023, with a recommended score of 100%.</li> </ul> </li> </ul>	<p><b>1. Number of friends and family surveys completed</b></p> <table border="1"> <caption>Estimated data for Chart 1: Number of friends and family surveys completed</caption> <thead> <tr> <th>Month</th> <th>MH &amp; LD</th> <th>Neath Port Talbot</th> <th>Singleton Hospital</th> <th>Morrison Hospital</th> </tr> </thead> <tbody> <tr><td>Jun-22</td><td>0</td><td>0</td><td>1,800</td><td>1,200</td></tr> <tr><td>Jul-22</td><td>0</td><td>0</td><td>2,000</td><td>1,400</td></tr> <tr><td>Aug-22</td><td>0</td><td>0</td><td>2,300</td><td>1,700</td></tr> <tr><td>Sep-22</td><td>0</td><td>0</td><td>2,200</td><td>1,600</td></tr> <tr><td>Oct-22</td><td>0</td><td>0</td><td>2,400</td><td>1,700</td></tr> <tr><td>Nov-22</td><td>0</td><td>0</td><td>2,300</td><td>1,800</td></tr> <tr><td>Dec-22</td><td>0</td><td>0</td><td>2,000</td><td>1,500</td></tr> <tr><td>Jan-23</td><td>0</td><td>0</td><td>2,700</td><td>2,600</td></tr> <tr><td>Feb-23</td><td>0</td><td>0</td><td>2,300</td><td>2,000</td></tr> <tr><td>Mar-23</td><td>0</td><td>0</td><td>2,900</td><td>2,400</td></tr> <tr><td>Apr-23</td><td>0</td><td>0</td><td>1,300</td><td>1,300</td></tr> <tr><td>May-23</td><td>0</td><td>0</td><td>1,200</td><td>2,100</td></tr> <tr><td>Jun-23</td><td>0</td><td>0</td><td>800</td><td>1,700</td></tr> </tbody> </table> <p><b>2. % of patients/ service users who would recommend and highly recommend</b></p> <table border="1"> <caption>Estimated data for Chart 2: % of patients/ service users who would recommend and highly recommend</caption> <thead> <tr> <th>Month</th> <th>MH&amp;LD</th> <th>Morrison</th> <th>NPT</th> <th>PCCS</th> <th>Singleton</th> </tr> </thead> <tbody> <tr><td>Jun-22</td><td>100%</td><td>88%</td><td>92%</td><td>90%</td><td>91%</td></tr> <tr><td>Jul-22</td><td>100%</td><td>83%</td><td>93%</td><td>93%</td><td>92%</td></tr> <tr><td>Aug-22</td><td>100%</td><td>83%</td><td>92%</td><td>93%</td><td>91%</td></tr> <tr><td>Sep-22</td><td>100%</td><td>82%</td><td>93%</td><td>94%</td><td>91%</td></tr> <tr><td>Oct-22</td><td>100%</td><td>87%</td><td>93%</td><td>94%</td><td>92%</td></tr> <tr><td>Nov-22</td><td>100%</td><td>88%</td><td>93%</td><td>94%</td><td>92%</td></tr> <tr><td>Dec-22</td><td>100%</td><td>83%</td><td>92%</td><td>93%</td><td>91%</td></tr> <tr><td>Jan-23</td><td>100%</td><td>90%</td><td>93%</td><td>92%</td><td>94%</td></tr> <tr><td>Feb-23</td><td>100%</td><td>89%</td><td>93%</td><td>93%</td><td>96%</td></tr> <tr><td>Mar-23</td><td>100%</td><td>88%</td><td>92%</td><td>94%</td><td>91%</td></tr> <tr><td>Apr-23</td><td>100%</td><td>87%</td><td>93%</td><td>95%</td><td>88%</td></tr> <tr><td>May-23</td><td>100%</td><td>87%</td><td>93%</td><td>95%</td><td>92%</td></tr> <tr><td>Jun-23</td><td>100%</td><td>85%</td><td>93%</td><td>95%</td><td>94%</td></tr> </tbody> </table>	Month	MH & LD	Neath Port Talbot	Singleton Hospital	Morrison Hospital	Jun-22	0	0	1,800	1,200	Jul-22	0	0	2,000	1,400	Aug-22	0	0	2,300	1,700	Sep-22	0	0	2,200	1,600	Oct-22	0	0	2,400	1,700	Nov-22	0	0	2,300	1,800	Dec-22	0	0	2,000	1,500	Jan-23	0	0	2,700	2,600	Feb-23	0	0	2,300	2,000	Mar-23	0	0	2,900	2,400	Apr-23	0	0	1,300	1,300	May-23	0	0	1,200	2,100	Jun-23	0	0	800	1,700	Month	MH&LD	Morrison	NPT	PCCS	Singleton	Jun-22	100%	88%	92%	90%	91%	Jul-22	100%	83%	93%	93%	92%	Aug-22	100%	83%	92%	93%	91%	Sep-22	100%	82%	93%	94%	91%	Oct-22	100%	87%	93%	94%	92%	Nov-22	100%	88%	93%	94%	92%	Dec-22	100%	83%	92%	93%	91%	Jan-23	100%	90%	93%	92%	94%	Feb-23	100%	89%	93%	93%	96%	Mar-23	100%	88%	92%	94%	91%	Apr-23	100%	87%	93%	95%	88%	May-23	100%	87%	93%	95%	92%	Jun-23	100%	85%	93%	95%	94%
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## FINANCE UPDATES

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

Description	Current Performance	Trend																																																				
<p><b>Revenue Financial Position</b> – expenditure incurred against revenue resource limit</p>	<p>Key assumptions underpinning the plan:</p> <ul style="list-style-type: none"> <li>• No unmet b/f savings from 2022/23 = <b>£0m</b></li> <li>• Run rate to remain within the envelope provided = <b>£11m</b></li> <li>• Savings requirement = <b>£22.2m</b></li> </ul> <p>The actual month variance is an overspend in month of £11.425m and a cumulative overspend position of £35.960m.</p>	 <p>The chart displays monthly expenditure in £'000 from Month 1 (M1) to Month 12 (M12). It compares the actual Health Board Position (blue bars), the Required Forecast to Hit Plan Target (yellow bars), and the Original Planned Profile (red line). The Health Board Position shows a significant overspend in M2 (£13,676) and M3 (£11,425), followed by a period of underspend from M4 onwards. The Required Forecast to Hit Plan Target shows a steady decline from M4 to M12, indicating the necessary savings to stay within the budget.</p> <table border="1"> <caption>Health Board Financial Performance 2023/24 Data</caption> <thead> <tr> <th>Month</th> <th>Health Board Position (£'000)</th> <th>Required Forecast to Hit Plan Target (£'000)</th> <th>Original Planned Profile (£'000)</th> </tr> </thead> <tbody> <tr><td>M1</td><td>10,861</td><td></td><td>7,800</td></tr> <tr><td>M2</td><td>13,676</td><td></td><td>9,500</td></tr> <tr><td>M3</td><td>11,425</td><td></td><td>8,500</td></tr> <tr><td>M4</td><td></td><td>6,482</td><td>7,500</td></tr> <tr><td>M5</td><td></td><td>6,179</td><td>7,500</td></tr> <tr><td>M6</td><td></td><td>4,188</td><td>7,000</td></tr> <tr><td>M7</td><td></td><td>5,812</td><td>6,800</td></tr> <tr><td>M8</td><td></td><td>5,949</td><td>6,800</td></tr> <tr><td>M9</td><td></td><td>5,530</td><td>6,500</td></tr> <tr><td>M10</td><td></td><td>5,604</td><td>6,500</td></tr> <tr><td>M11</td><td></td><td>5,604</td><td>6,500</td></tr> <tr><td>M12</td><td></td><td>5,286</td><td>6,500</td></tr> </tbody> </table>	Month	Health Board Position (£'000)	Required Forecast to Hit Plan Target (£'000)	Original Planned Profile (£'000)	M1	10,861		7,800	M2	13,676		9,500	M3	11,425		8,500	M4		6,482	7,500	M5		6,179	7,500	M6		4,188	7,000	M7		5,812	6,800	M8		5,949	6,800	M9		5,530	6,500	M10		5,604	6,500	M11		5,604	6,500	M12		5,286	6,500
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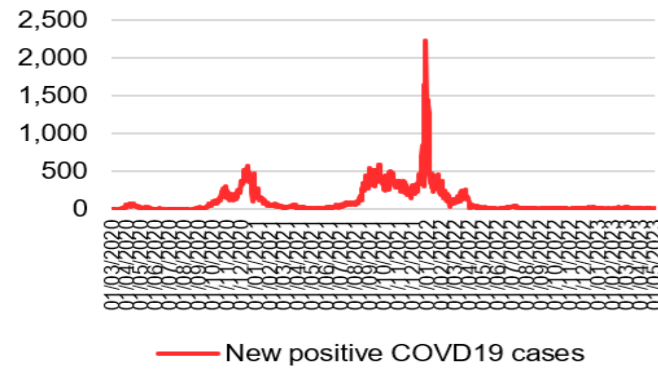
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<p><b>Capital Financial Position –</b> expenditure incurred against capital resource limit</p>	<ul style="list-style-type: none"> <li>The forecast outturn capital position for 2023/24 is an overspend of £3.257m. Allocations are anticipated from Welsh Government which will balance this position.</li> <li>Any All Wales Capital schemes where a high/medium risk is reported are closely monitored and discussed at the Capital Review progress meetings with Welsh Government.</li> </ul>	<p style="text-align: center;"><b>Capital - Cumulative Performance to Plan</b></p> <table border="1"> <caption>Capital - Cumulative Performance to Plan (Estimated Data)</caption> <thead> <tr> <th>Month</th> <th>Forecast (£'000)</th> <th>Actual/Revised Forecast (£'000)</th> </tr> </thead> <tbody> <tr><td>April</td><td>2,000</td><td>2,000</td></tr> <tr><td>May</td><td>5,000</td><td>5,000</td></tr> <tr><td>June</td><td>8,000</td><td>8,000</td></tr> <tr><td>July</td><td>10,000</td><td>10,000</td></tr> <tr><td>Aug</td><td>12,000</td><td>12,000</td></tr> <tr><td>Sept</td><td>14,000</td><td>14,000</td></tr> <tr><td>Oct</td><td>16,000</td><td>16,000</td></tr> <tr><td>Nov</td><td>18,000</td><td>18,000</td></tr> <tr><td>Dec</td><td>20,000</td><td>20,000</td></tr> <tr><td>Jan</td><td>22,000</td><td>22,000</td></tr> <tr><td>Feb</td><td>25,000</td><td>28,000</td></tr> <tr><td>March</td><td>35,000</td><td>38,000</td></tr> </tbody> </table>	Month	Forecast (£'000)	Actual/Revised Forecast (£'000)	April	2,000	2,000	May	5,000	5,000	June	8,000	8,000	July	10,000	10,000	Aug	12,000	12,000	Sept	14,000	14,000	Oct	16,000	16,000	Nov	18,000	18,000	Dec	20,000	20,000	Jan	22,000	22,000	Feb	25,000	28,000	March	35,000	38,000																																																																														
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<p><b>Workforce Spend –</b> workforce expenditure profile</p>	<ul style="list-style-type: none"> <li>The pay budgets are overspent by £1.252m in June.</li> <li>Variable pay has decreased in June by circa. £340k. Overtime reduced by £492k this month, along with £357k in WLI. However spend in Agency – Medical, Bank and Irregular sessions was circa £472k. Further work is needed to bring spend down in line with the current year budget.</li> </ul>	<p style="text-align: center;"><b>Variable Pay Expenditure</b></p> <table border="1"> <caption>Variable Pay Expenditure (Estimated Data)</caption> <thead> <tr> <th>Period</th> <th>Bank</th> <th>Overtime</th> <th>Agency - Non Medical</th> <th>Agency - Medical</th> <th>WLI</th> <th>Irregular Sessions</th> <th>Current Year Budget</th> <th>Last Year Expenditure</th> </tr> </thead> <tbody> <tr><td>P01</td><td>1,500,000</td><td>500,000</td><td>1,000,000</td><td>500,000</td><td>500,000</td><td>500,000</td><td>3,500,000</td><td>4,000,000</td></tr> <tr><td>P02</td><td>1,500,000</td><td>500,000</td><td>1,000,000</td><td>500,000</td><td>500,000</td><td>500,000</td><td>1,000,000</td><td>6,000,000</td></tr> <tr><td>P03</td><td>1,500,000</td><td>500,000</td><td>1,000,000</td><td>500,000</td><td>500,000</td><td>500,000</td><td>2,000,000</td><td>6,000,000</td></tr> <tr><td>P04</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>7,000,000</td></tr> <tr><td>P05</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>500,000</td><td>6,500,000</td></tr> <tr><td>P06</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>500,000</td><td>6,500,000</td></tr> <tr><td>P07</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>500,000</td><td>6,500,000</td></tr> <tr><td>P08</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>500,000</td><td>6,500,000</td></tr> <tr><td>P09</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>500,000</td><td>6,500,000</td></tr> <tr><td>P10</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>500,000</td><td>7,000,000</td></tr> <tr><td>P11</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>500,000</td><td>6,500,000</td></tr> <tr><td>P12</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>500,000</td><td>10,000,000</td></tr> </tbody> </table>	Period	Bank	Overtime	Agency - Non Medical	Agency - Medical	WLI	Irregular Sessions	Current Year Budget	Last Year Expenditure	P01	1,500,000	500,000	1,000,000	500,000	500,000	500,000	3,500,000	4,000,000	P02	1,500,000	500,000	1,000,000	500,000	500,000	500,000	1,000,000	6,000,000	P03	1,500,000	500,000	1,000,000	500,000	500,000	500,000	2,000,000	6,000,000	P04	0	0	0	0	0	0	0	7,000,000	P05	0	0	0	0	0	0	500,000	6,500,000	P06	0	0	0	0	0	0	500,000	6,500,000	P07	0	0	0	0	0	0	500,000	6,500,000	P08	0	0	0	0	0	0	500,000	6,500,000	P09	0	0	0	0	0	0	500,000	6,500,000	P10	0	0	0	0	0	0	500,000	7,000,000	P11	0	0	0	0	0	0	500,000	6,500,000	P12	0	0	0	0	0	0	500,000	10,000,000
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Description	Current Performance	Trend																																																				
<p><b>PSPP – pay 95% of Non-NHS invoices within 30 days of receipt of goods or valid invoice</b></p>	<ul style="list-style-type: none"> <li>The cumulative PSPP compliance has increased slightly this month and is now just above target at 95.84%. In June the compliance also increased and now stands above target at 97.50% (May - 94.51%).</li> <li>Although the PSPP was achieved this month, there were still delays in receipting.</li> </ul>	<p><b>Percentage of non-NHS invoices paid within 30 days of receipt of goods or valid invoice</b></p> <table border="1"> <caption>PSPP Performance Data (M1-M12)</caption> <thead> <tr> <th>Month</th> <th>PSPP In Month (%)</th> <th>PSPP Cumulative (%)</th> <th>PSPP Target (%)</th> </tr> </thead> <tbody> <tr><td>M1</td><td>95.00</td><td>95.50</td><td>95.00</td></tr> <tr><td>M2</td><td>94.50</td><td>95.00</td><td>95.00</td></tr> <tr><td>M3</td><td>97.50</td><td>95.84</td><td>95.00</td></tr> <tr><td>M4</td><td></td><td></td><td>95.00</td></tr> <tr><td>M5</td><td></td><td></td><td>95.00</td></tr> <tr><td>M6</td><td></td><td></td><td>95.00</td></tr> <tr><td>M7</td><td></td><td></td><td>95.00</td></tr> <tr><td>M8</td><td></td><td></td><td>95.00</td></tr> <tr><td>M9</td><td></td><td></td><td>95.00</td></tr> <tr><td>M10</td><td></td><td></td><td>95.00</td></tr> <tr><td>M11</td><td></td><td></td><td>95.00</td></tr> <tr><td>M12</td><td></td><td></td><td>95.00</td></tr> </tbody> </table>	Month	PSPP In Month (%)	PSPP Cumulative (%)	PSPP Target (%)	M1	95.00	95.50	95.00	M2	94.50	95.00	95.00	M3	97.50	95.84	95.00	M4			95.00	M5			95.00	M6			95.00	M7			95.00	M8			95.00	M9			95.00	M10			95.00	M11			95.00	M12			95.00
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<p><b>Agency spend as a of the total pay bill</b></p>	<ul style="list-style-type: none"> <li>The agency spend as a percentage of the total pay bill has decreased in June 2023 to 5.2% compared to 5.8% in May 2023.</li> </ul>	<p><b>Agency spend as a percentage of the total pay bill</b></p> <table border="1"> <caption>Agency Spend as a Percentage of Total Pay Bill</caption> <thead> <tr> <th>Month</th> <th>Agency Spend (%)</th> </tr> </thead> <tbody> <tr><td>Jun-22</td><td>6.2</td></tr> <tr><td>Jul-22</td><td>6.8</td></tr> <tr><td>Aug-22</td><td>6.5</td></tr> <tr><td>Sep-22</td><td>4.8</td></tr> <tr><td>Oct-22</td><td>6.5</td></tr> <tr><td>Nov-22</td><td>6.5</td></tr> <tr><td>Dec-22</td><td>6.0</td></tr> <tr><td>Jan-23</td><td>7.5</td></tr> <tr><td>Feb-23</td><td>6.2</td></tr> <tr><td>Mar-23</td><td>5.2</td></tr> <tr><td>Apr-23</td><td>5.8</td></tr> <tr><td>May-23</td><td>5.8</td></tr> <tr><td>Jun-23</td><td>5.2</td></tr> </tbody> </table>	Month	Agency Spend (%)	Jun-22	6.2	Jul-22	6.8	Aug-22	6.5	Sep-22	4.8	Oct-22	6.5	Nov-22	6.5	Dec-22	6.0	Jan-23	7.5	Feb-23	6.2	Mar-23	5.2	Apr-23	5.8	May-23	5.8	Jun-23	5.2																								
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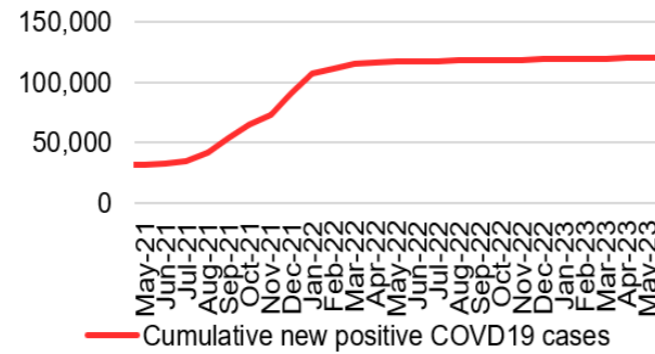
## 5. TABLE OF ALL MEASURES

## HARM FROM COVID ITSELF

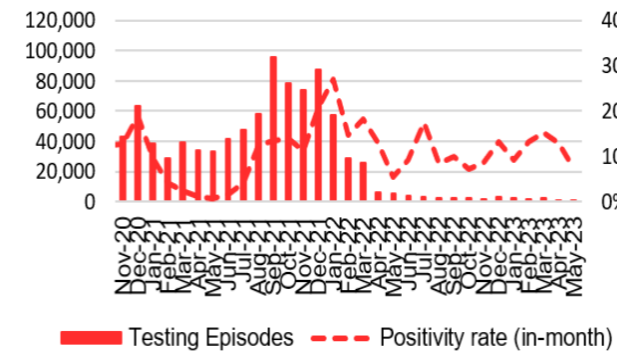
**Chart 1: Number of new COVID19 cases**



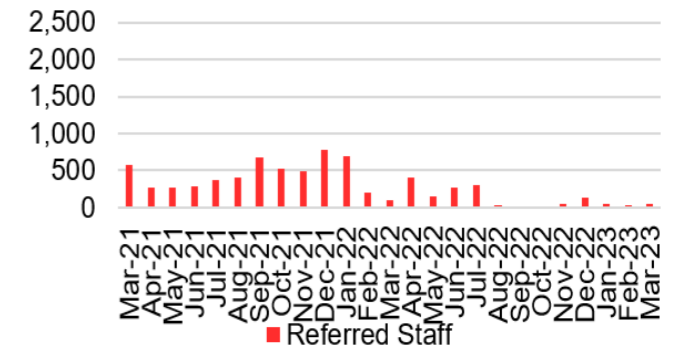
**Chart 2: Number of new COVID19 cases (cumulative)**



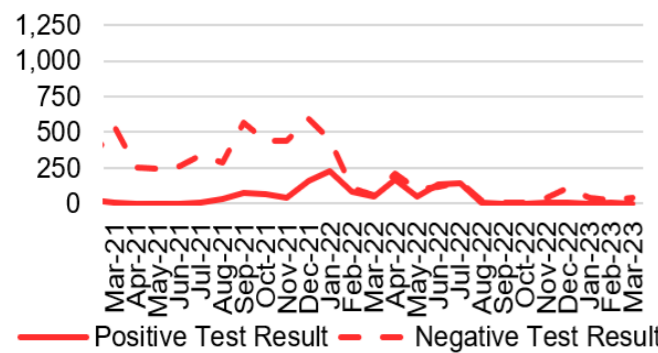
**Chart 3: Number of COVID19 tests completed and positivity rate**



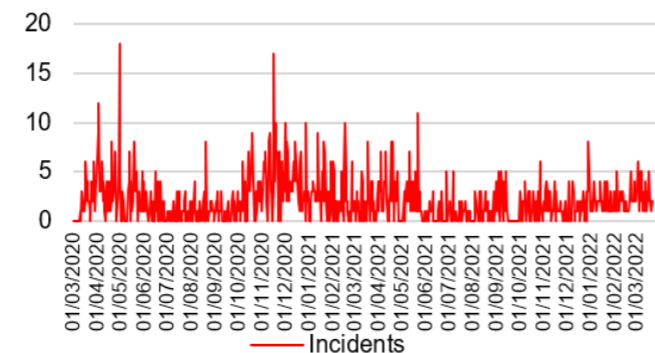
**Chart 4: Number of staff referred for Antigen testing**



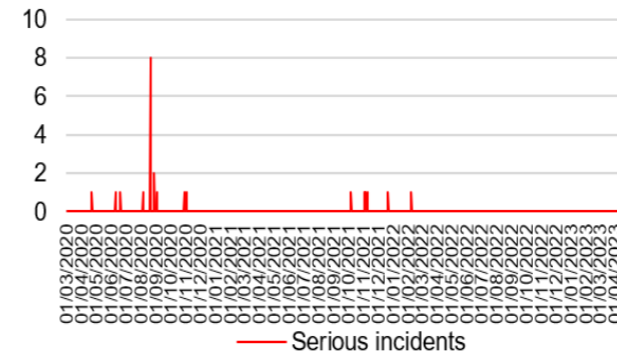
**Chart 5: Outcome of staff COVID19/ antigen tests**



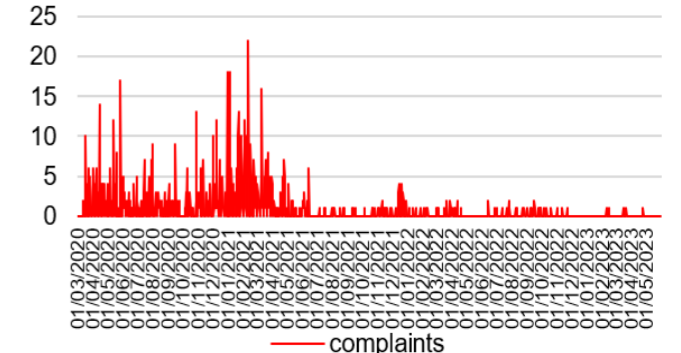
**Chart 6: Number of COVID19 related incidents**



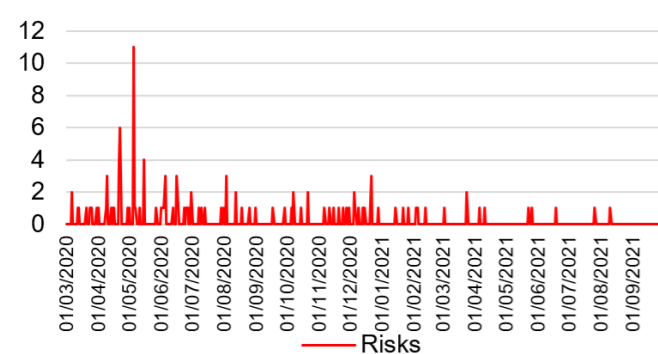
**Chart 7: Number of COVID19 related serious incidents**



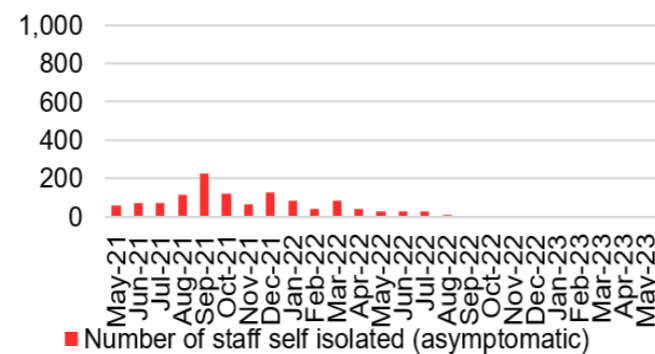
**Chart 8: Number of COVID19 related complaints**



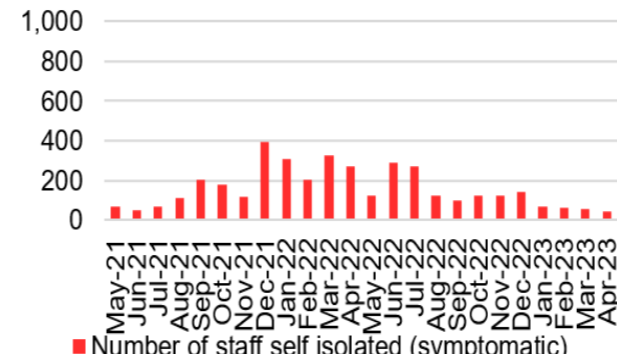
**Chart 9: Number of COVID19 related risks**



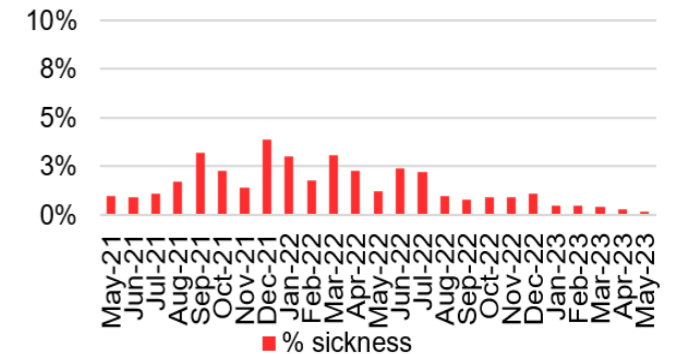
**Chart 10: Number of staff self-isolating (asymptomatic)**



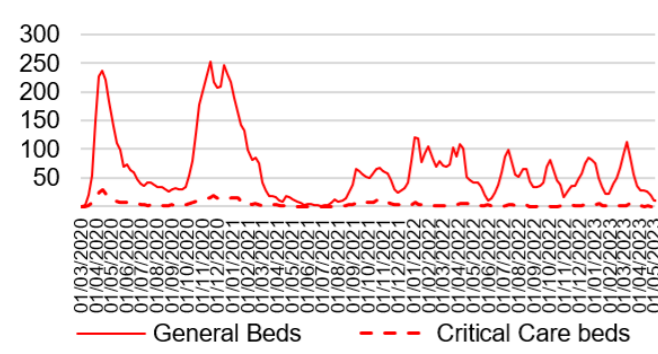
**Chart 11: Number of staff self isolating (symptomatic)**



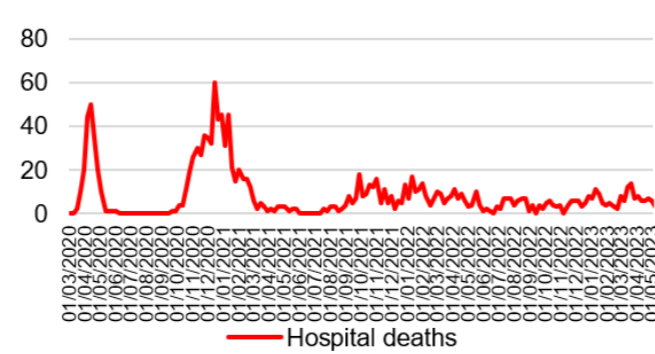
**Chart 12: % staff sickness**



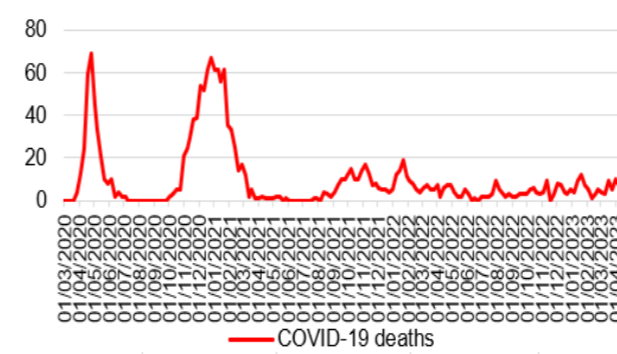
**Chart 13: Bed Occupancy for suspected and confirmed COVID19 cases**



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



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



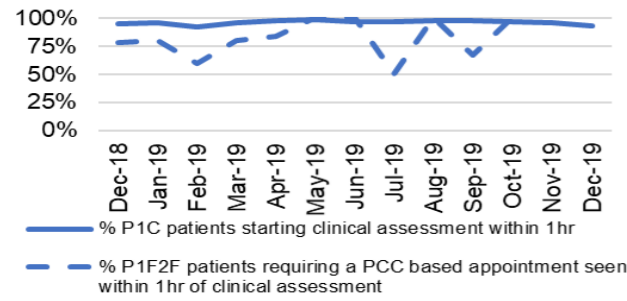
**Chart 16: Number of mortuary spaces**



# HARM FROM OVERWHELMED NHS AND SOCIAL CARE SYSTEM

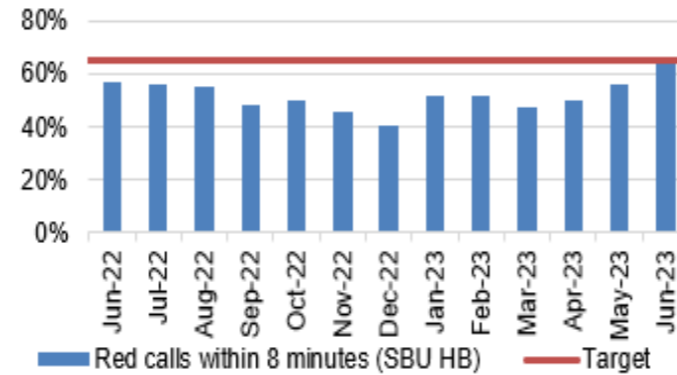
## Unscheduled Care- Overview

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

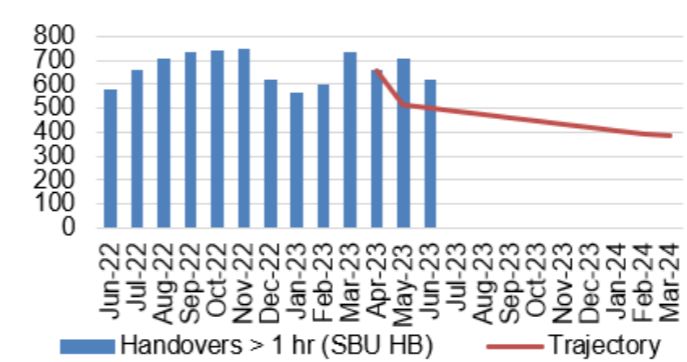


Service continues to experience issues with data reporting. It is anticipated that up to date accurate data will be available shortly.

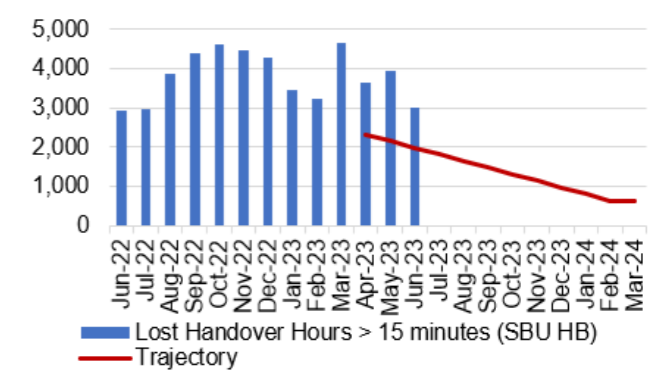
**Chart 2: % red calls responded to within 8 minutes**



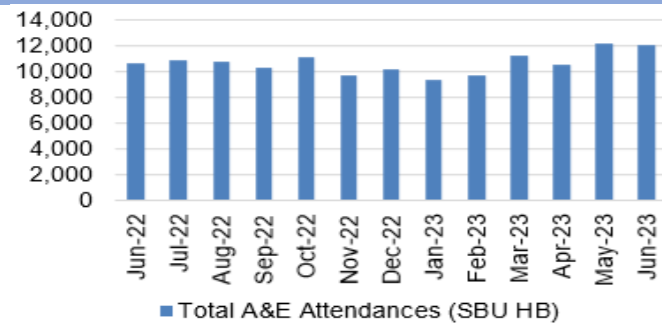
**Chart 3: Number of ambulance handovers over 1 hour**



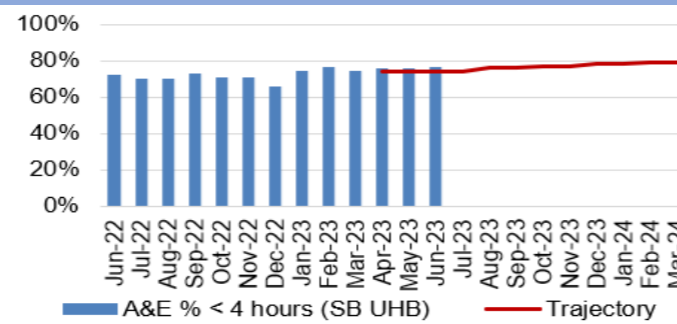
**Chart 4: Lost hours- notification to ambulance handover over 15 minutes**



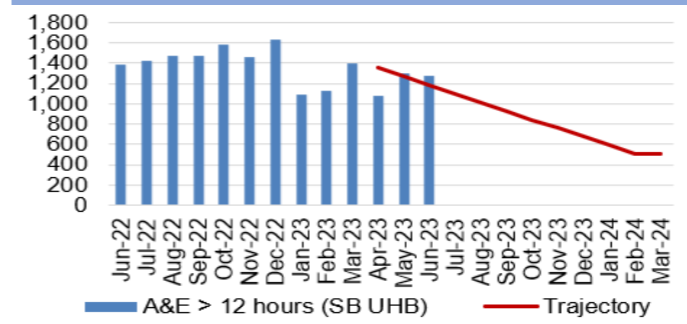
**Chart 5: A&E Attendances**



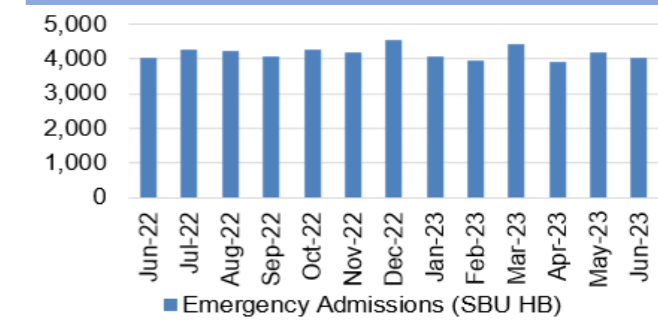
**Chart 6: % patients who spend less than 4 hours in A&E**



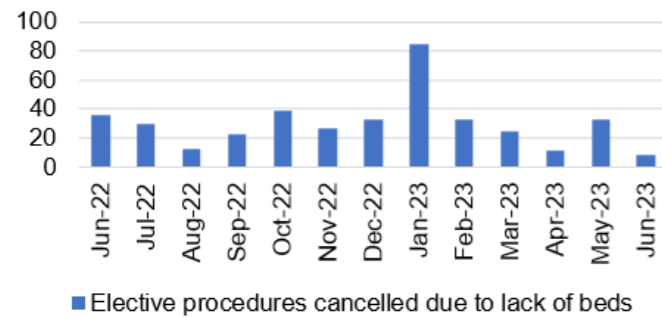
**Chart 7: Number of patients waiting over 12 hours in A&E**



**Chart 8: Number of emergency admissions**



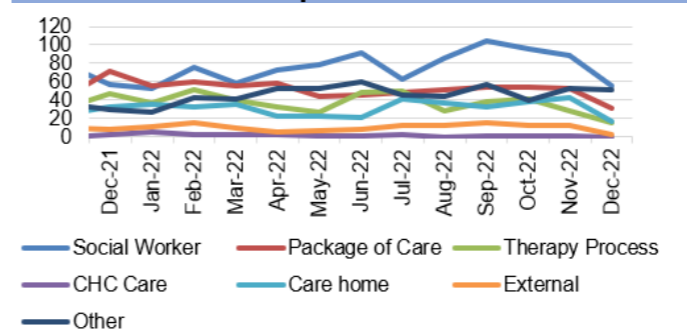
**Chart 9: Elective procedures cancelled due to lack of beds**



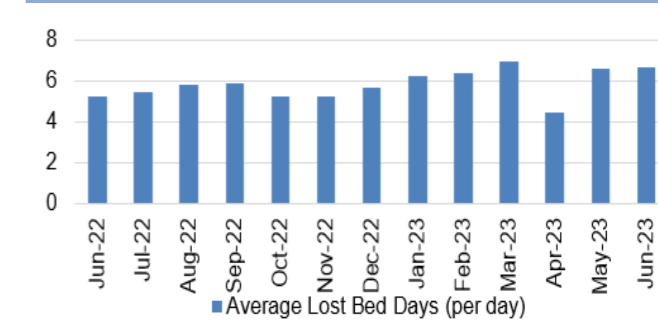
**Chart 10: Number of clinically optimised patients**



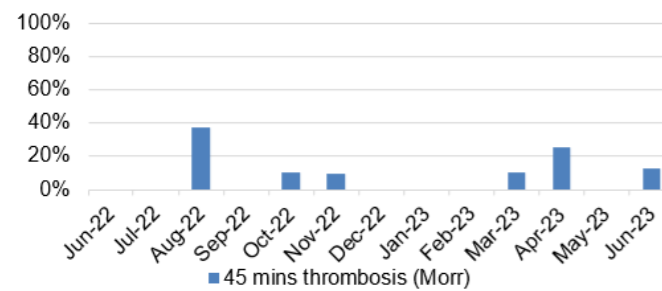
**Chart 11: Delay reason for clinically optimised patients**



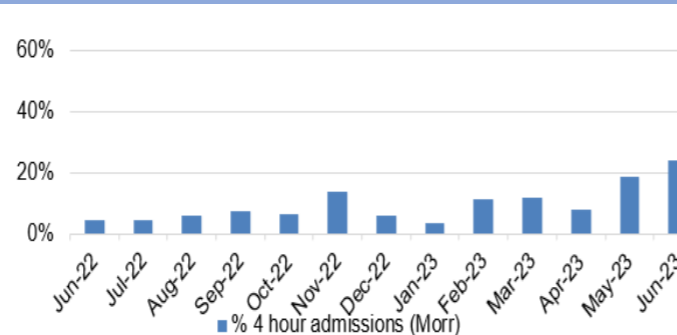
**Chart 12: Average lost bed days (per day)**



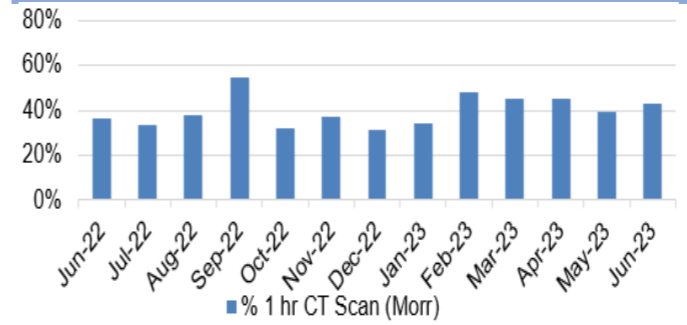
**Chart 13; % of thrombolysed stroke patients with a door to door needle time of less than or equal to 45 minutes**



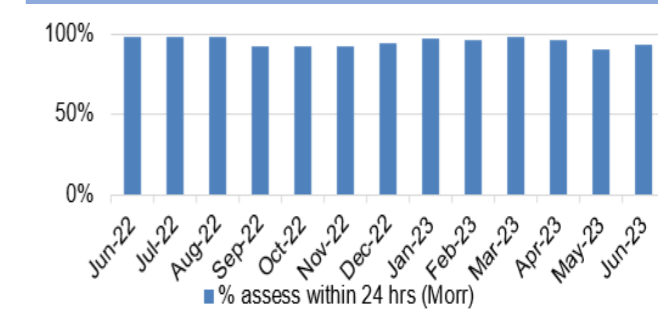
**Chart 14: Direct admission to Acute Stroke Unit within 4 hours**



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



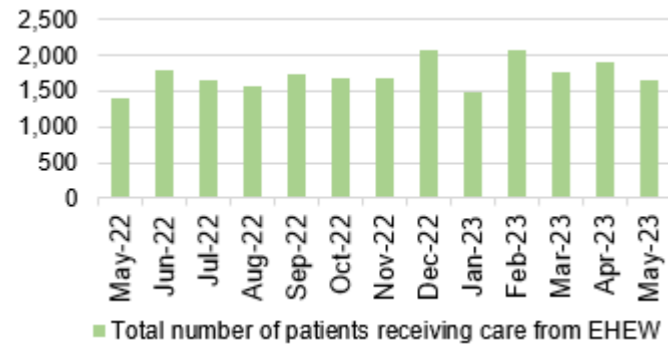
**Chart 16: % stroke patients receiving consultant assessment within 24 hours**



# HARM FROM REDUCTION IN NON-COVID ACTIVITY

## Primary and Community Care Overview

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



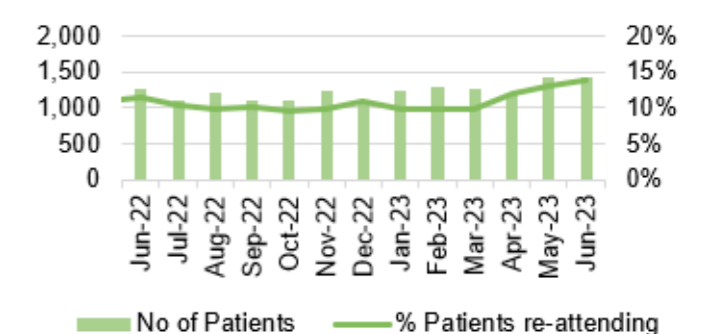
**Chart 2: GMS - Escalation Levels**



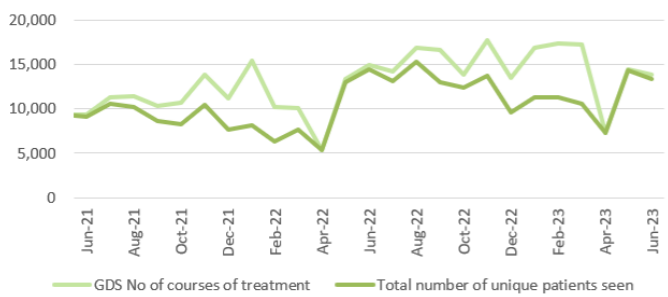
**Chart 3: GMS - Sustainability**



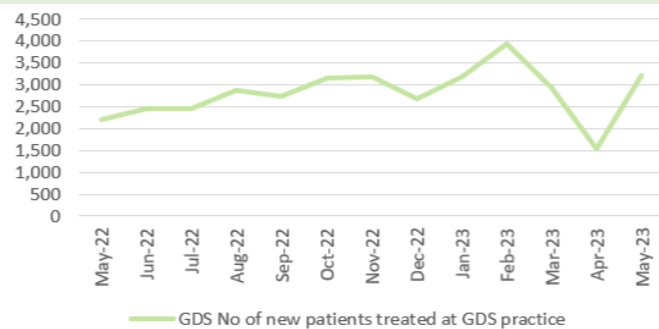
**Chart 4: Number and percentage of adult dental patients re-attending NHS Primary Dental Care between 6-9 months**



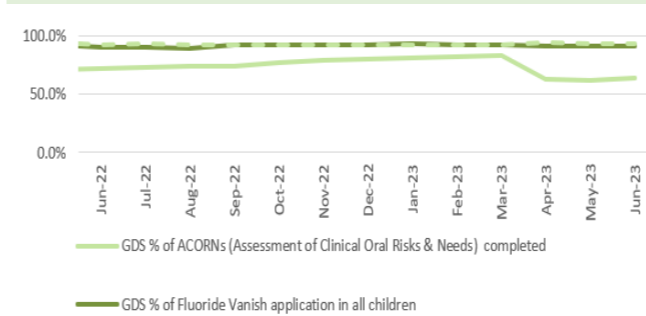
**Chart 5: General Dental Services - Activity**



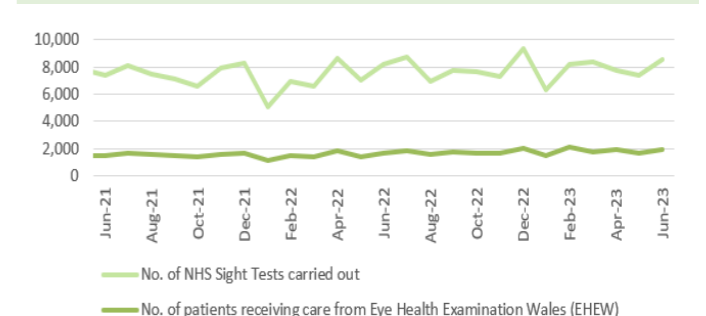
**Chart 6: General Dental Services - New Patients**



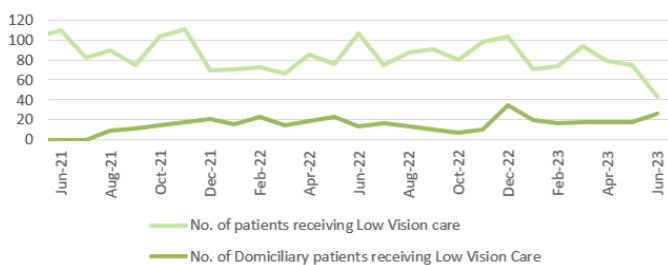
**Chart 7: General Dental Services - ACORNs/FV**



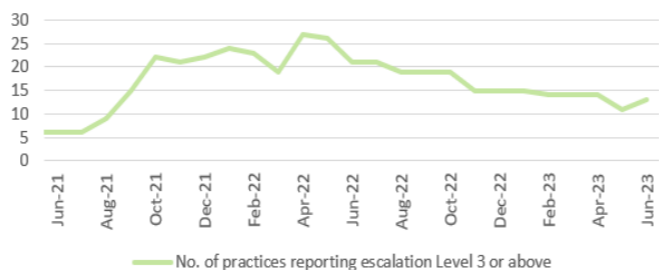
**Chart 8: Optometry Activity – sight tests**



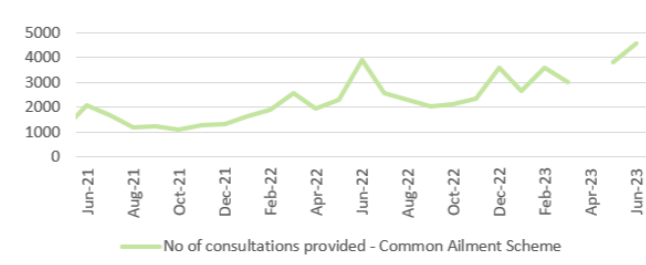
**Chart 9: Optometry Activity – low vision care**



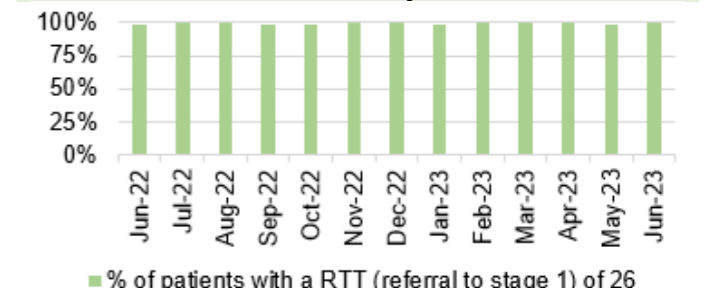
**Chart 10: Community Pharmacy – Escalation levels**



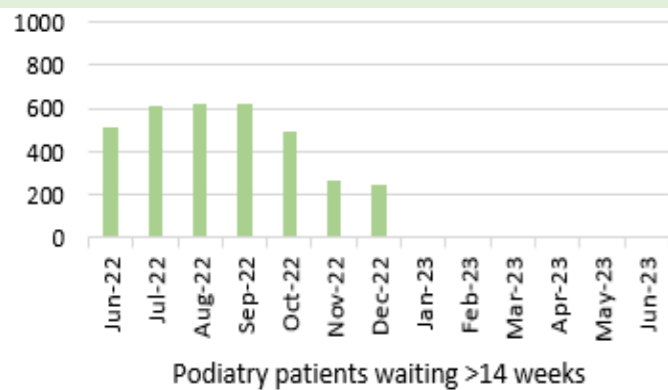
**Chart 11: Common Ailment Scheme – No. consultations provided**



**Chart 12: % of patients with a RTT (referral to stage 1) of 26 weeks or less for Restorative Dentistry**



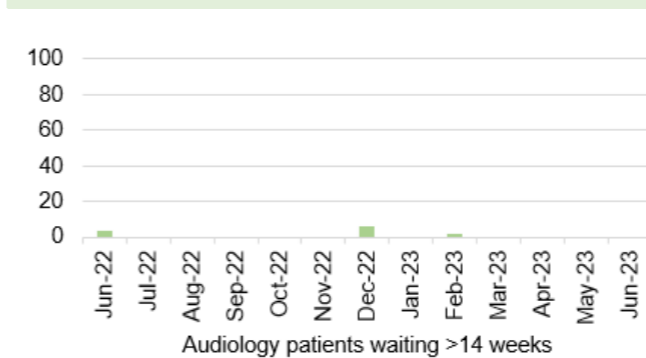
**Chart 13: Podiatry - Total number of patients waiting > 14 weeks**



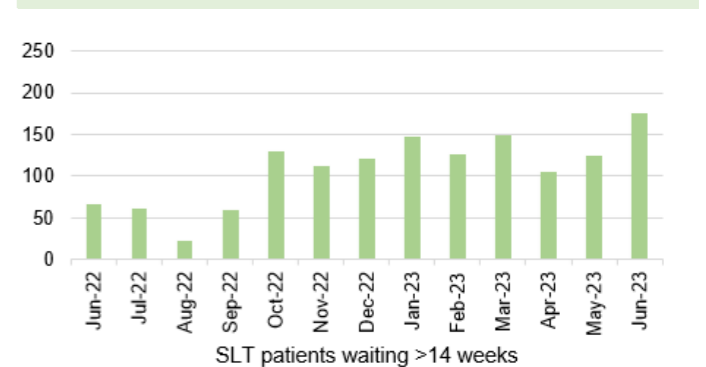
**Chart 14: Dietetics - Total number of patients waiting > 14 weeks**



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

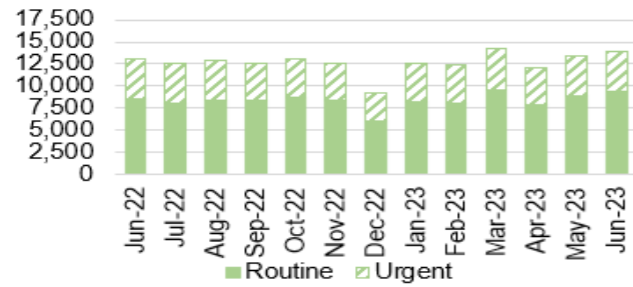


**Chart 16: Speech & Language Therapy- Number of patients waiting > 14 weeks**

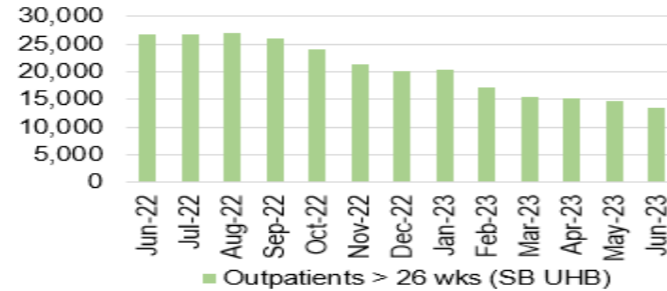


## Harm from reduction in non-Covid activity Planned Care Overview

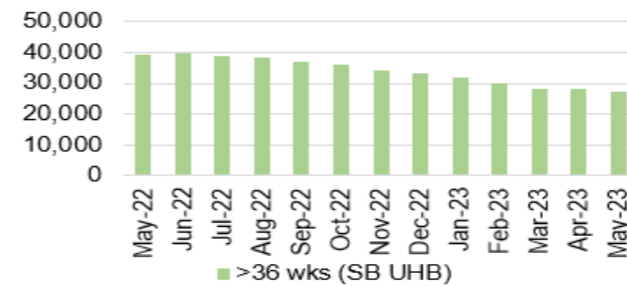
**Chart 1: Number of GP Referrals into secondary care**



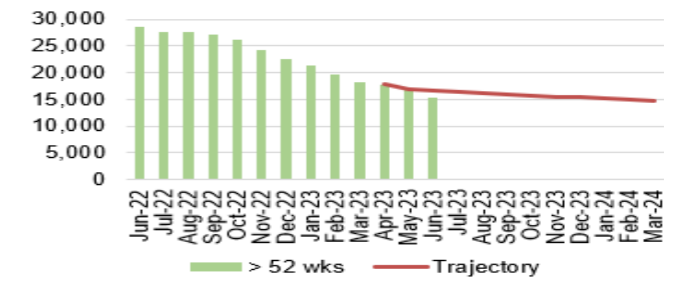
**Chart 2: Number of patients waiting over 26 weeks for an outpatient appointment**



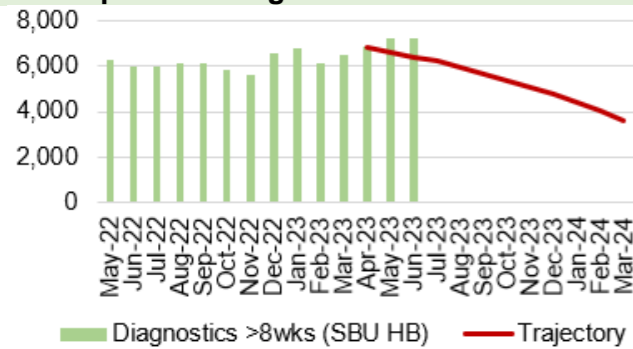
**Chart 3: Number of patients waiting over 36 weeks for treatment**



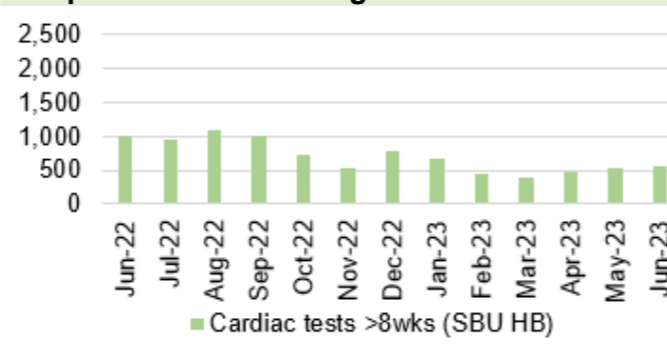
**Chart 4: Number of patients waiting over 52 weeks for treatment**



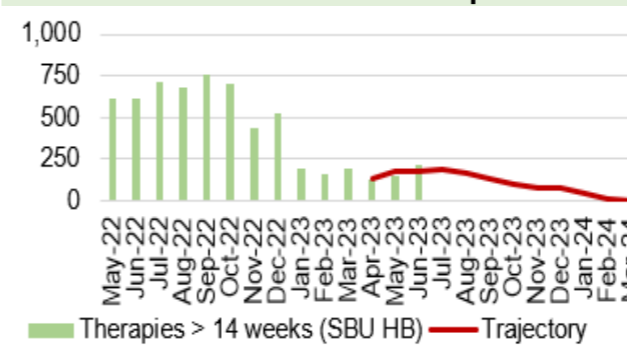
**Chart 5: Number of patients waiting for reportable diagnostics over 8 weeks**



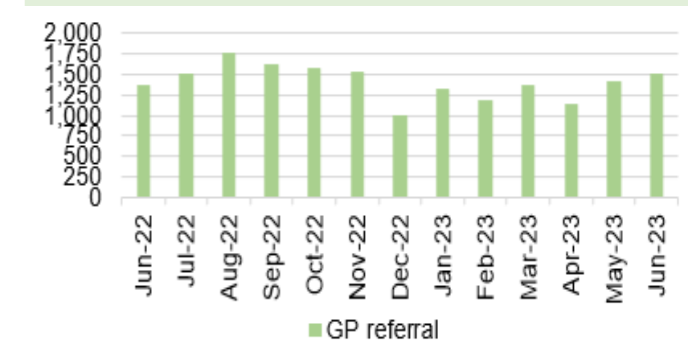
**Chart 6: Number of patients waiting for reportable Cardiac diagnostics over 8 weeks**



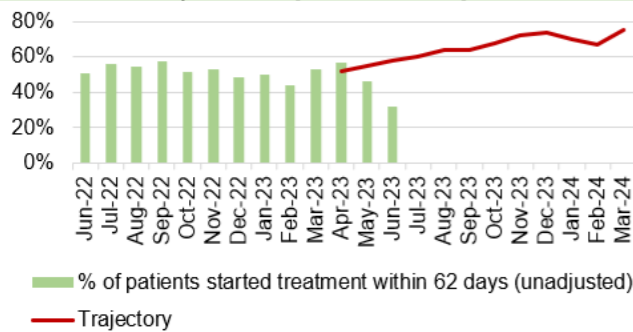
**Chart 7: Number of patients waiting more than 14 weeks for Therapies**



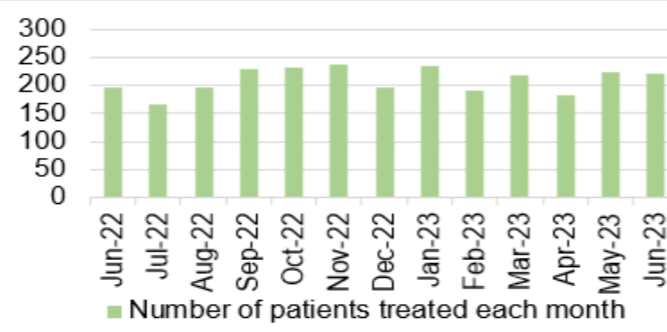
**Chart 8: Cancer referrals**



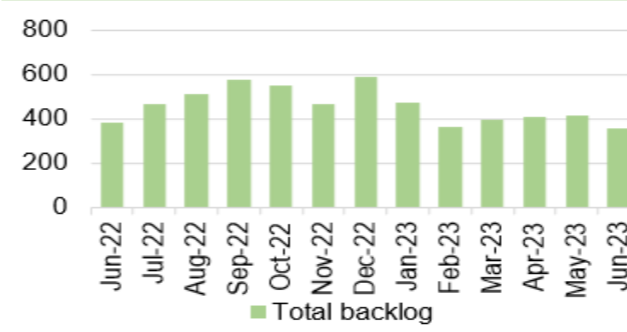
**Chart 9: Single Cancer Pathway- % of patients starting definitive treatment within 62 days from point of suspicion**



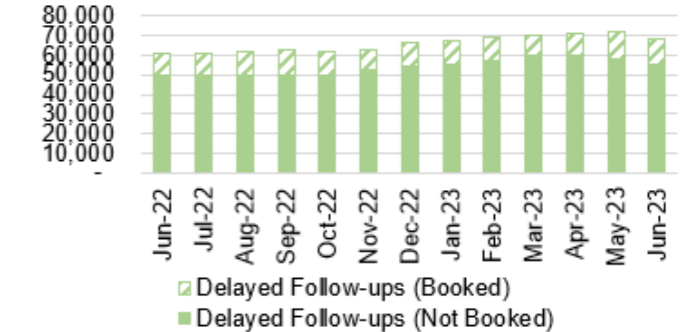
**Chart 10: Number of new cancer patients starting definitive treatment**



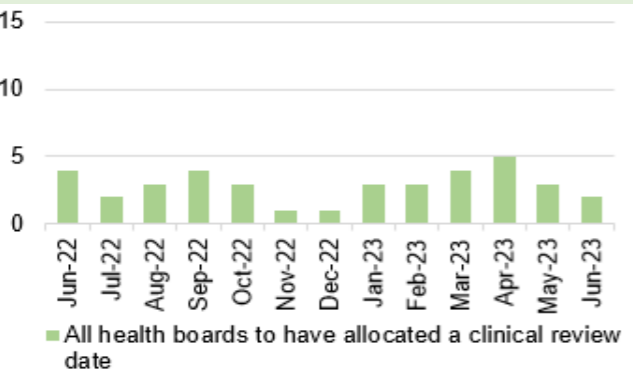
**Chart 11: Single Cancer Pathway backlog- patients waiting over 63 days**



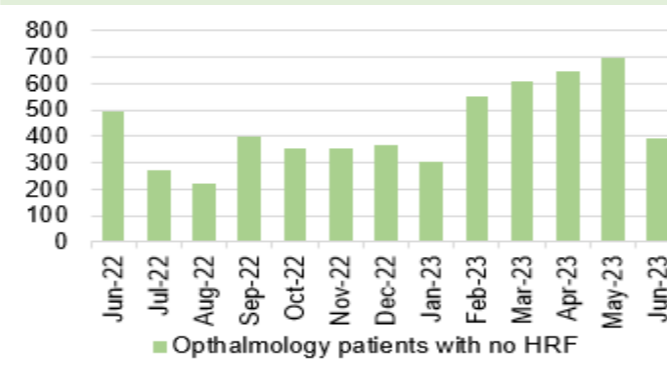
**Chart 12: Number of patients waiting for an outpatient follow-up who are delayed past their target date**



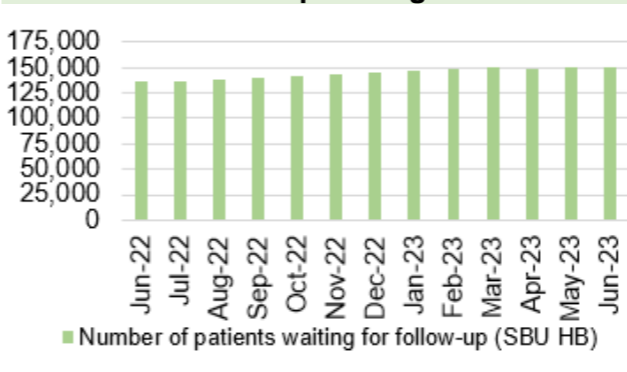
**Chart 13: Number of patients without a documented clinical review date**



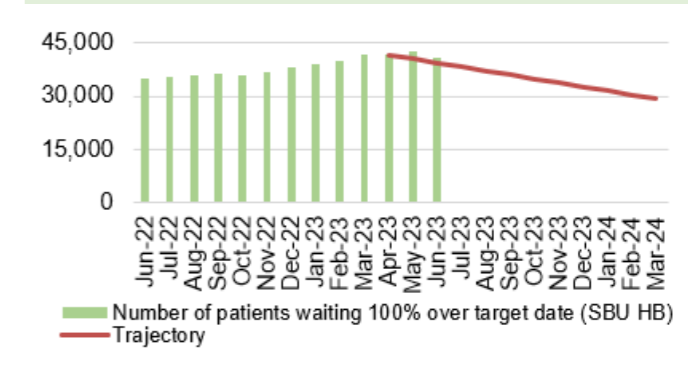
**Chart 14: Ophthalmology patients without an allocated health risk factor**



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



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



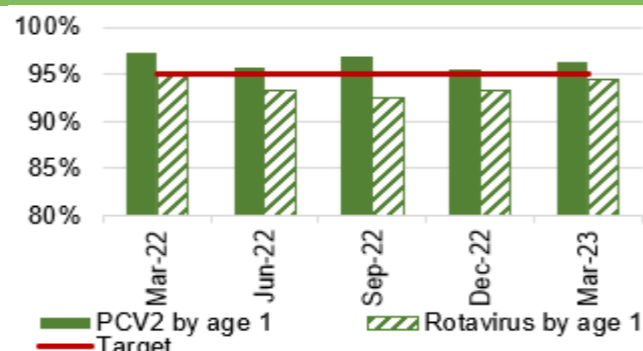
## HARM FROM WIDER SOCIETAL ACTIONS/LOCKDOWN

### Vaccinations and Immunisations

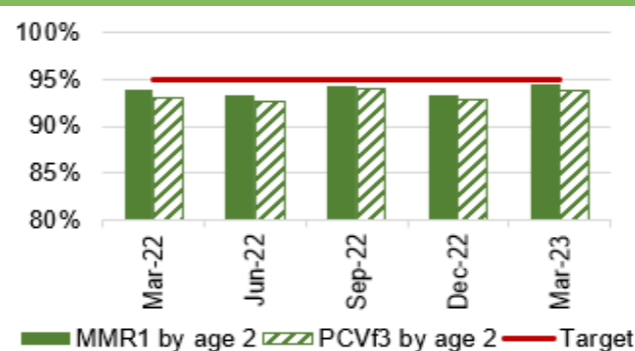
**Chart 1: % children who received 3 doses of the hexavalent '6 in 1' vaccine and MenB2 vaccine by age 1**



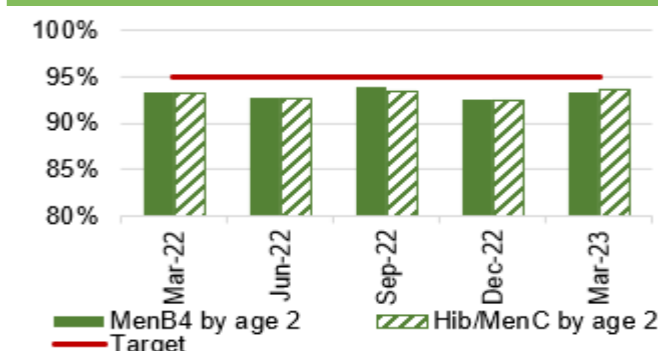
**Chart 2: % children who received PCV2 vaccine and Rotavirus vaccine by age 1**



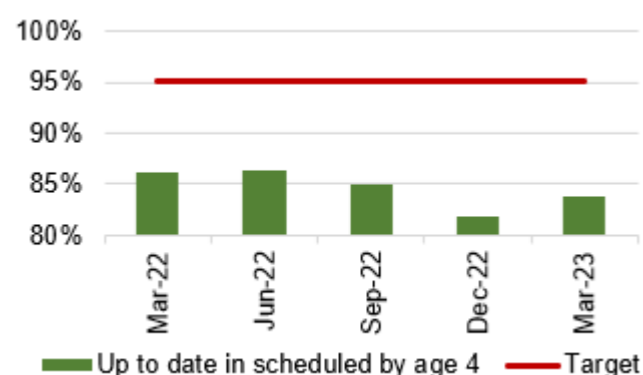
**Chart 3: % children who received MMR1 vaccine and PCVf3 vaccine by age 2**



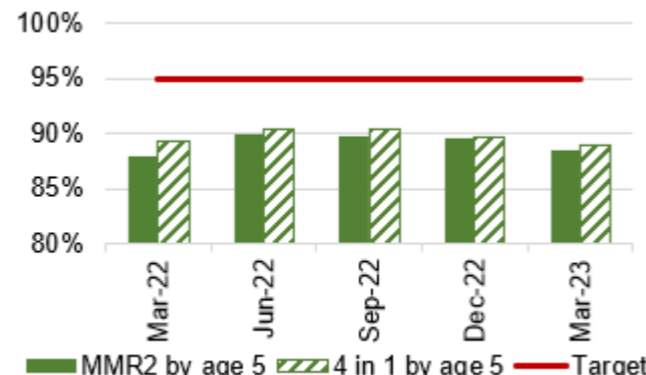
**Chart 4: % children who received MenB4 vaccine and Hib/MenC vaccine by age 2**



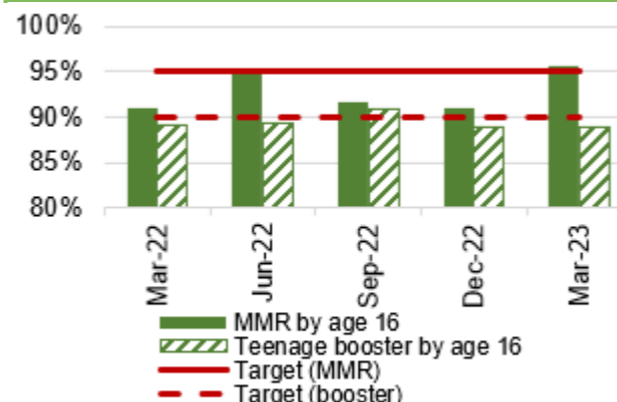
**Chart 5: % children who are up to date in schedule by age 4**



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



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



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

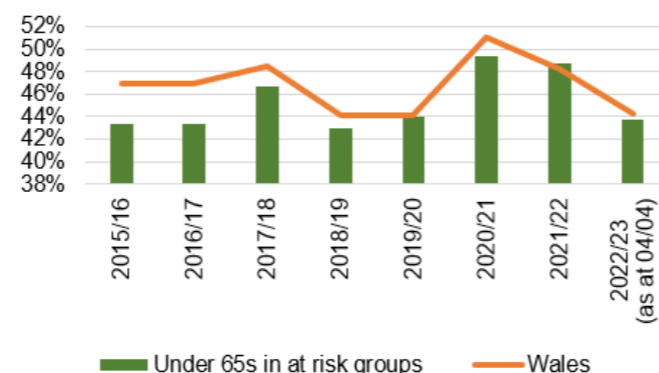


**Chart 9: Influenza uptake for amongst 65 year olds and over**



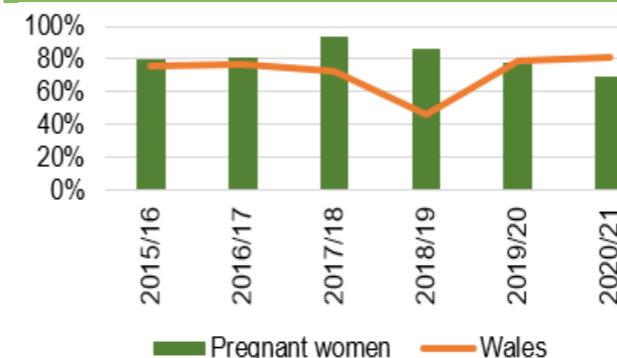
Data prior to April 2019 relates to Abertawe Bro Morgannwg University Health Board

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



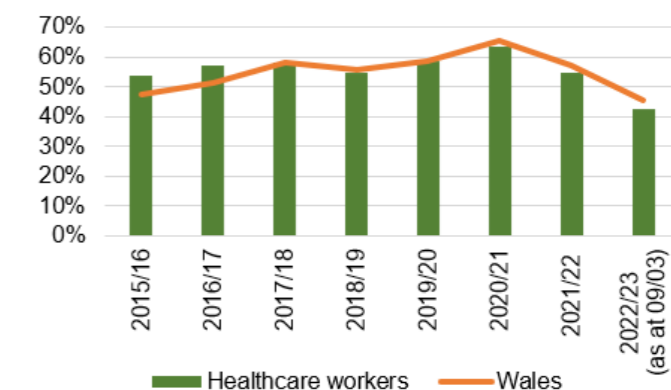
Data prior to April 2019 relates to Abertawe Bro Morgannwg University Health Board

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



Data prior to April 2019 relates to Abertawe Bro Morgannwg University Health Board. 2021/22 data not available

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

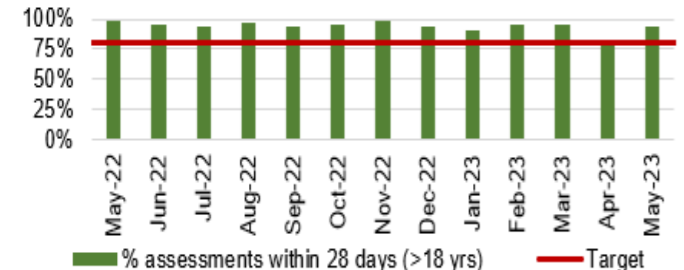


Data prior to April 2019 relates to Abertawe Bro Morgannwg University Health Board.

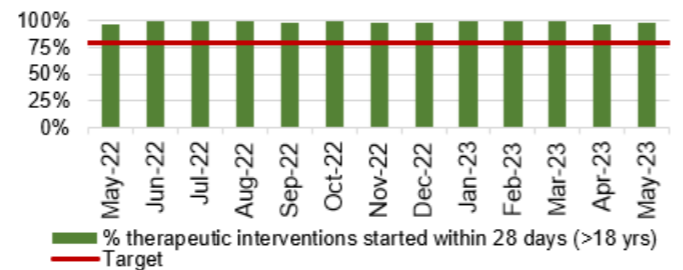
# HARM FROM WIDER SOCIETAL ACTIONS/LOCKDOWN

## Mental Health Overview

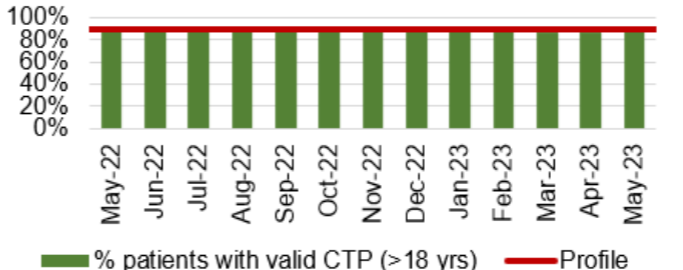
**Chart 1: % of mental health assessments undertaken within (up to and including) 28 days from the date of receipt of referral**



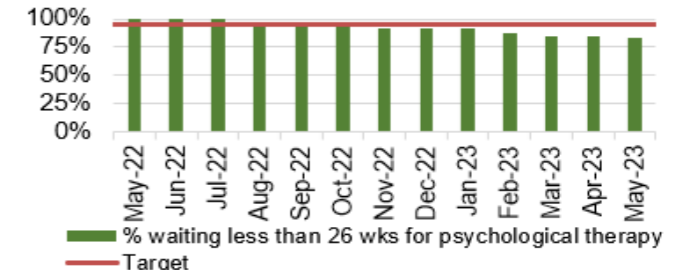
**Chart 2: % of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS**



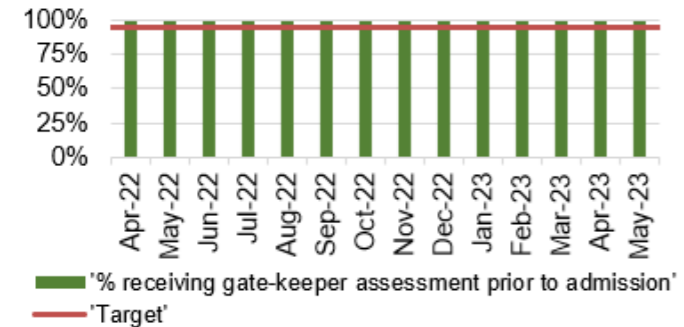
**Chart 3: % of health board residents in receipt of secondary mental health services (all ages) who have a valid care and treatment plan**



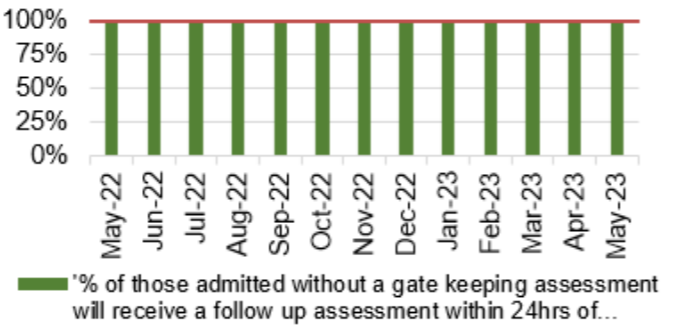
**Chart 4: % of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health**



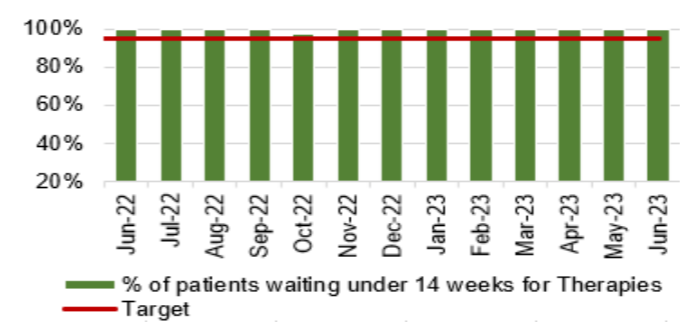
**Chart 5: 95% of those admitted 0900-2100 will receive a gate-keeping assessment by the CRHTS prior to admission**



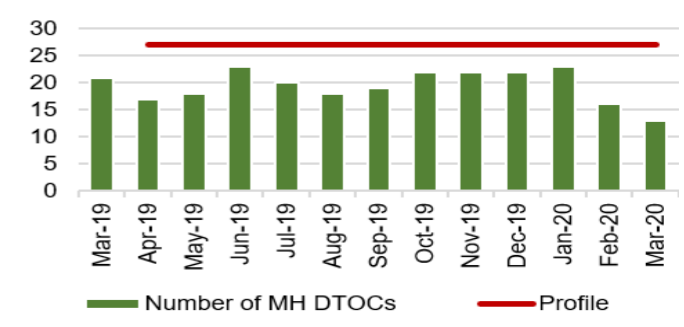
**Chart 6: 100% of those admitted without a gate keeping assessment will receive a follow up assessment by CRHTS within 24hrs of admission**



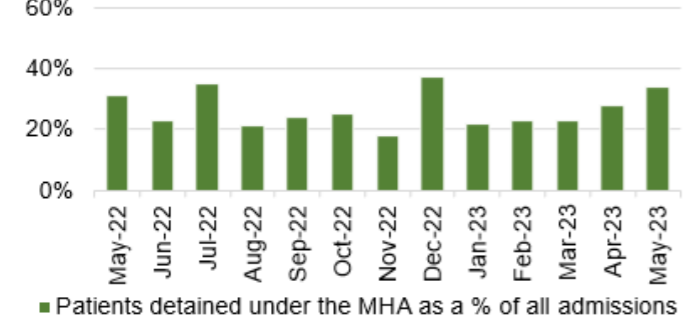
**Chart 7: % of patients waiting under 14 weeks for Therapies**



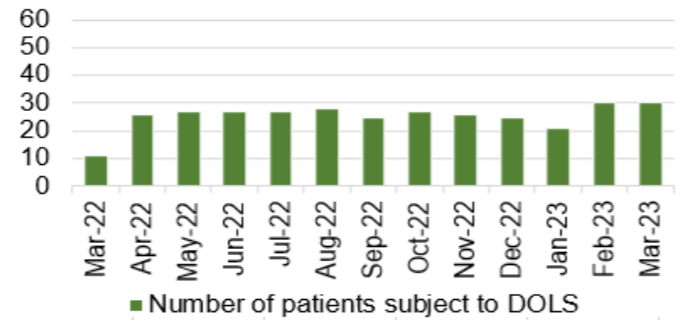
**Chart 8: Number of Mental Health Delayed Transfers of Care (DTOCs)**



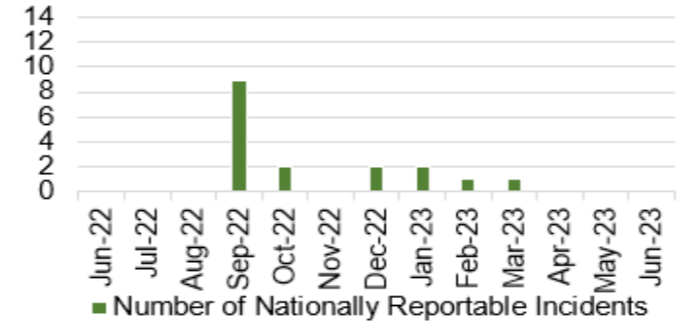
**Chart 9: Number of patients detained under the Mental Health Act as a percentage of all admissions**



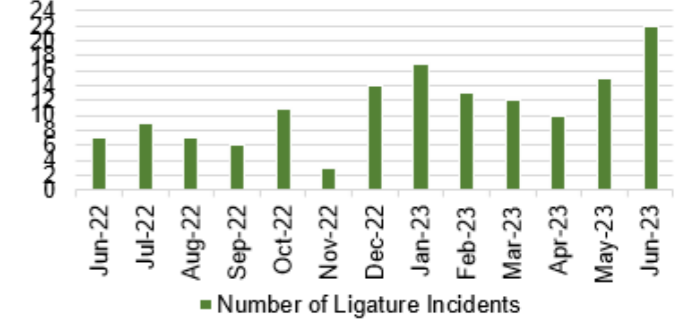
**Chart 10: Number of patients subject to Deprivation of Liberty Safeguards (DOLS)**



**Chart 11: Number of Nationally Reportable Incidents**

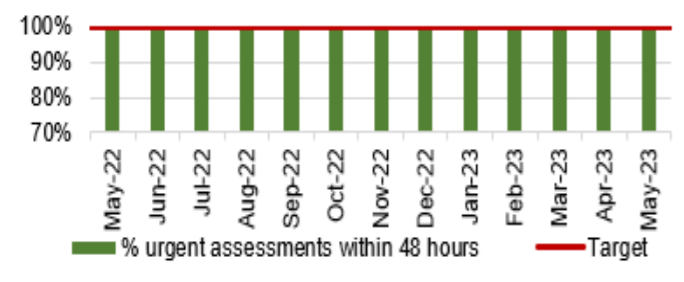


**Chart 12: Number of ligature incidents**



## Child & Adolescent Mental Health Services (CAMHS)

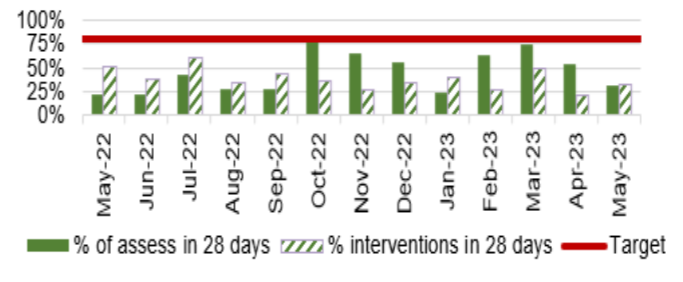
**Chart 13: Urgent assessments undertaken within 48 hours from receipt of referral**



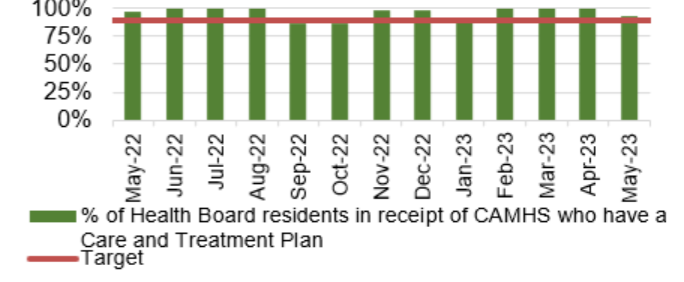
**Chart 14: Neuro-developmental disorder assessment and intervention received within 26 weeks**



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



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



**APPENDIX 1: 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	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	
COVID19 related measures	Number of new COVID19 cases	Local	Jun-23	60		Reduce					372	600	217	218	171	171	395	230	249	378	153	81	60	
	Number of staff referred for Antigen Testing	Local	Mar-23	18,230		Reduce					17,579	17,878	17,916	17,926	17,934	17,981	18,108	18,157	18,187	18,230				
	Number of staff awaiting results of COVID19 test	Local	Jun-23	0		Reduce					0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Number of COVID19 related incidents	Local	Jun-23	90		Reduce					52	91	46	84	61	51	61	34	33	57	29	61	90	
	Number of COVID19 related serious incidents	Local	Jun-23	0		Reduce					0	0	0	1	0	0	0	0	0	0	0	0	0	0
	Number of COVID19 related complaints	Local	Jun-23	0		Reduce					4	5	6	11	3	3	0	0	0	2	2	1	0	0
	Number of COVID19 related risks	Local	Oct-21	0		Reduce																		
	Number of staff self isolated (asymptomatic)	Local	Jun-23	0		Reduce					28	26	8	5	1	0	0	0	0	1	0	0	0	0
	Number of staff self isolated (symptomatic)	Local	Jun-23	7		Reduce					287	272	121	100	121	124	144	70	63	57	45	27	7	
% sickness	Local	Jun-23	0.1%		Reduce					2.4%	2.2%	1.0%	0.8%	0.9%	0.9%	1.1%	0.5%	0.5%	0.4%	0.3%	0.2%	0.1%		
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	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	
Unscheduled Care	% of emergency responses to red calls arriving within (up to and including) 8 minutes	National	Jun-23	64%	65%	65%	✘	39.5% (Dec-22)	3rd (Dec-22)		57%	56%	55%	49%	50%	46%	41%	52%	52%	48%	50%	56%	64%	
	Number of ambulance handovers over one hour	National	Jun-23	615	↑ trajectory	502	✘	6,798 (Dec-22)	1st (Dec-22)		578	659	705	732	739	744	614	561	594	729	658	708	615	
	Handover hours lost over 15 minutes	Local	Jun-23	3018							2,920	2,976	3,870	4,378	4,599	4,456	4,289	3,440	3,245	4,659	3,627	3,952	3,018	
	% 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	Jun-23	76%	Month on month improvement		✔	63.1% (Dec-22)	4th (Dec-22)		72%	69%	70%	73%	71%	70%	65%	74%	76%	74%	75%	75%	76%	
	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	Jun-23	1274	↑ trajectory	1185	✘	12,099 (Dec-22)	4th (Dec-22)		1,388	1,429	1,474	1,470	1,584	1,456	1,632	1,089	1,125	1,395	1,083	1,303	1,274	
NOF	% of patients (age 60 years and over) who presented with a hip fracture that received an orthogeriatrician assessment within 72 hours	Local	Sep-22	93.0%	12 month ↑			70% (Oct-22)	1st (Oct-22)		89.0%	91.0%	93.0%	93.0%										
Stroke	Direct admission to Acute Stroke Unit (<4 hrs)	Local	Jun-23	23.8%							4.5%	4.2%	6.0%	7.5%	6.2%	13.7%	5.9%	3.4%	11.1%	11.9%	7.8%	18.6%	23.8%	
	CT Scan (<1 hrs) (local)	Local	Jun-23	42.9%							36.4%	33.3%	38.0%	55.0%	32.3%	37.3%	31.4%	33.9%	48.1%	45.2%	45.1%	39.5%	42.9%	
	Assessed by a Stroke Specialist Consultant Physician (< 24 hrs)	Local	Jun-23	92.9%							97.7%	97.9%	98.0%	92.5%	92.3%	92.2%	94.1%	96.6%	96.3%	97.6%	96.1%	90.7%	92.9%	
	Thrombolysis door to needle <= 45 mins	Local	Jun-23	12.5%							0.0%	0.0%	37.5%	0.0%	10.0%	9.1%	0.0%	0.0%	0.0%	10.0%	25.0%	0.0%	12.5%	
	% stroke patients who receive mechanical thrombectomy	Local	Jun-23	5.0%	10%		✘	2.1% (Nov-22)	4th (Nov-22)		4.7%	0.0%	0.0%	0.0%	0.0%	4.0%	0.0%	0.0%	0.0%	0.0%	6.5%	2.0%	7.1%	5.0%
	% compliance against the therapy target of an average of 16.1 minutes if speech and language therapist input per stroke patient	Local	Jun-23	66.7%	12 month ↑		✔	50.7% (Nov-22)	4th (Nov-22)		29.5%	29.1%	30.7%	35.2%	38.7%	37.9%	34.1%	43.9%	48.0%	64.3%	68.6%	62.9%	66.7%	
DTOCs	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	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23		
infection control	Cumulative cases of E.coli bacteraemias per 100k pop	National	Jun-23	75.1	<67		✘	67.80 (Dec-22)	3rd (Dec-22)		70.8	68.9	74.5	70.4	69.4	70.0	69.6	68.7	67.9	67.5	81.1	73.7	75.1		
	Number of E.Coli bacteraemia cases (Hospital)		Jun-23	13	≤ 234 (Cumulative)	11	✘				5	3	11	7	12	11	8	8	9	9	14	12	13		
	Number of E.Coli bacteraemia cases (Community)		Jun-23	14		11	✘				12	18	21	8	10	12	14	12	8	10	12	10	12	10	14
	Total number of E.Coli bacteraemia cases		Jun-23	27		22	✘				17	21	32	15	22	23	22	20	17	19	19	26	22	27	
	Cumulative cases of S.aureus bacteraemias per 100k pop		Jun-23	42.2	<20		✘	27.76 (Dec-22)	6th (Dec-22)		41.0	39.8	38.4	39.3	41.0	39.0	39.4	38.4	38.6	38.6	53.1	43.0	42.2		
	Number of S.aureus bacteraemias cases (Hospital)		Jun-23	8	≤ 71 (Cumulative)	4	✘				7	6	6	8	13	3	10	8	9	5	7	8	8		
	Number of S.aureus bacteraemias cases (Community)		Jun-23	4		2	✘				2	6	6	6	4	5	3	2	2	5	3	2	4		
	Total number of S.aureus bacteraemias cases		Jun-23	12		6	✘				9	12	12	14	17	8	13	10	11	10	16	10	12		
	Cumulative cases of C.difficile per 100k pop		Jun-23	51.4	<25		✘	36.68 (Dec-22)	5th (Dec-22)		41.0	42.9	47.6	46.9	48.9	50.9	49.6	51.3	50.6	51.4	56.2	46.0	51.4		
	Number of C.difficile cases (Hospital)		Jun-23	13	≤ 95 (Cumulative)	6	✘				7	10	16	11	15	10	8	15	10	13	7	8	13		
	Number of C.difficile cases (Community)		Jun-23	7		3	✘				9	6	6	3	6	11	6	7	2	6	8	4	7		
	Total number of C.difficile cases		Jun-23	20		9	✘				16	16	22	14	21	21	14	22	12	19	15	12	20		
	Cumulative cases of Klebsiella per 100k pop		Jun-23	24.7							22.6	24.5	25.0	25.5	24.9	26.0	26.1	26.9	26.8	27.4	25.0	27.6	24.7		
	Number of Klebsiella cases (Hospital)		Jun-23	1	≤ 71 (Cumulative)	4	✔				6	4	4	1	3	6	5	5	7	4	7	4	1		
	Number of Klebsiella cases (Community)		Jun-23	5		3	✘				2	7	4	9	4	5	3	6	1	7	1	6	5		
	Total number of Klebsiella cases		Jun-23	6		7	✔	63 Total (Dec-22)	2nd (Dec-22)		8	11	8	10	7	11	8	11	8	11	8	11	8	10	6
	Cumulative cases of Aeruginosa per 100k pop		Jun-23	7.2							8.2	9.2	9.2	10.2	11.3	11.9	11.5	11.6	11.2	11.3	6.2	4.6	7.2		
	Number of Aeruginosa cases (Hospital)		Jun-23	3	≤ 24 (Cumulative)	2	✘				3	2	3	4	3	5	1	2	2	2	1	1	3		
	Number of Aeruginosa cases (Community)		Jun-23	1		0	✘				1	2	0	1	3	0	2	2	0	2	1	0	1		
	Total number of Aeruginosa cases		Jun-23	4		2	✘	8 Total (Dec-22)	4th (Dec-22)		4	4	3	5	6	5	3	4	2	4	2	1	4		
Hand Hygiene Audits- compliance with WHO 5 moments	Local	Local	Jun-23	94.8%		95%	✔				98%	96%	90%	97%	96%	96%	95%	97%	95%	93%	99%	95%	95%		
Nationally Reportable Incidents and risks	Of the nationally reportable incidents due for assurance, the % which were assured within the agreed timescales	National	Mar-23	83.0%	90%	80%					33%	-	0%	-	75%	73%	85%	67%	67%	83%					
	Number of new Never Events	Local	Mar-23	0		0	✔				0	1	0	0	0	1	0	0	1	0					
	Number of risks with a score greater than 20	Local	Mar-23	148		12 month ↓	✘				132	128	131	133	134	136	137	141	143	148					
Number of risks with a score greater than 16	Local	Mar-23	307		12 month ↓	✘				264	259	269	270	268	278	280	290	295	307						
Pressure Ulcers	Number of pressure ulcers acquired in hospital	Local	May-23	83		12 month ↓	✘				53	58	54	39	59	69	47	64	60	76	83	83			
	Number of pressure ulcers developed in the community		May-23	41		12 month ↓	✘				32	27	50	40	44	45	42	45	41	62	31	41			
	Total number of pressure ulcers		May-23	124		12 month ↓	✘				85	85	104	79	103	114	89	109	101	138	114	124			
	Number of grade 3+ pressure ulcers acquired in hospital		May-23	10		12 month ↓	✘				3	5	3	0	1	7	8	4	4	7	5	10			
	Number of grade 3+ pressure ulcers acquired in community		May-23	9		12 month ↓	✘				12	2	11	6	2	7	13	4	9	14	7	9			
Total number of grade 3+ pressure ulcers	May-23	19		12 month ↓	✘				15	7	14	6	3	14	21	8	13	21	12	19					
Inpatient Falls	Number of Inpatient Falls	Local	Jun-23	143		12 month ↓	✔				172	174	216	175	184	178	184	189	179	214	183	184	143		
NEWS	% patients with completed NEWS scores & appropriate responses actioned	Local	Jun-23	82%		98%	✘				93.7%	90.5%	86.2%	87.6%	87.5%	88.2%	97.2%	91.8%	98.3%	85.1%	96.6%	91.9%	81.6%		
Coding	% of episodes clinically coded within 1 month of discharge	National	May-23	55%	12 month ↓		✘				81%	82%	77%	81%	84%	67%	78%	71%	76%	67%	55%	55%			
E-TOC	% of completed discharge summaries (total signed and sent)	Local	Jun-23	65%		100%	✘				64%	63%	69%	70%	66%	71%	62%	64%	64%	62%	64%	65%	65%		
Workforce	Agency spend as a % of the total pay bill	Local	Jun-23	5.80%	12 month ↓		✔	5.9% (Sep-22)	7th out of 12 organisations (Sep-22)		6.2%	6.7%	6.4%	4.9%	6.5%	6.4%	6.0%	7.4%	6.2%	5.2%	5.7%	5.8%	5.2%		
	% of headcount by organisation who have had a PADP/medical appraisal in the previous 12 months (excluding doctors and dentists in training)	National	Jun-23	67%	85%		✘	63.3% (Sep-22)	9th out of 12 organisations (Sep-22)		55%	58%	61%	64%	67%	68%	68%	69%	69%	69%	72%	68%	67%		
	% compliance for all completed Level 1 competency with the Core Skills and Training Framework	Local	Jun-23	87%	85%		✔	81.8% (Sep-22)	8th out of 12 organisations (Sep-22)		80%	81%	81%	82%	83%	84%	84%	85%	85%	82%	86%	87%	87%		
	% workforce sickness absence (12 month rolling)	National	May-23	7.37%	12 month ↓		✔	7.11% (Sep-22)	11th out of 12 organisations (Sep-22)		8.29%	8.46%	8.44%	8.25%	8.08%	7.99%	8.02%	7.89%	7.78%	7.65%	7.46%	7.37%			

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	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23
Primary Care	% adult dental patients in the health board population re-attending NHS primary dental care between 6 and 9 months	Local	Jun-23	13.9%							11.5%	10.4%	10.0%	10.0%	9.6%	9.3%	10.9%	9.7%	9.9%	9.9%	11.8%	13.0%	13.9%
Cancer	% of patients starting definitive treatment within 62 days from point of suspicion (without adjustments)	National	Jun-23	31.7%	↑ trajectory	55%	✘	53.9% (Nov-22)	4th out of 6 organisations (Nov-22)		50.6%	55.9%	54.9%	57.3%	51.2%	52.9%	48.3%	50.4%	44.1%	53.2%	56.5%	46.6%	37.7%
Radiotherapy waiting times	Scheduled (14 Day Target)	Local	Jun-23	18%	80%		✘				18%	2%	10%	5%	18%	19%	26%	32%	31%	32%	22%	35%	18%
	Scheduled (21 Day Target)	Local	Jun-23	63%	100%		✘				51%	29%	35%	34%	65%	82%	83%	82%	86%	81%	70%	81%	63%
	Urgent SC (2 Day Target)	Local	Jun-23	24%	80%		✘				22%	18%	11%	31%	33%	17%	37%	31%	19%	30%	22%	50%	24%
	Urgent SC (7 Day Target)	Local	Jun-23	52%	100%		✘				43%	64%	48%	54%	70%	77%	70%	85%	69%	84%	70%	73%	52%
	Emergency (within 1 day)	Local	Jun-23	71%	80%		✘				82%	58%	65%	100%	70%	100%	83%	100%	91%	100%	100%	100%	71%
	Emergency (within 2 days)	Local	Jun-23	100%	100%		✔				88%	92%	90%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
	Elective Delay (7 Day Target)	Local	Jun-23	93%	80%		✔				68%	66%	91%	70%	81%	91%	85%	82%	93%	94%	87%	93%	93%
	Elective Delay (14 Day Target)	Local	Jun-23	95%	100%		✘				79%	70%	98%	79%	91%	100%	100%	98%	100%	100%	93%	100%	95%
Planned Care	Number of patients waiting > 8 weeks for a diagnostic endoscopy	Local	Jun-23	4,745				15,517 (Nov-22)	7th (Nov-22)		4,449	4,407	4,257	4,205	4,170	4,136	4,289	4,372	4,408	4,554	4,677	4,847	4,745
	Number of patients waiting > 8 weeks for a specified diagnostics	National	Jun-23	7,221	↑ trajectory	6,426	✘	42,566 (Nov-22)	4th (Nov-22)		6,012	6,032	6,108	6,177	5,833	5,627	6,607	6,829	6,116	6,514	6,867	7,255	7,221
	Number of patients waiting > 14 weeks for a specified therapy	National	Jun-23	221	↑ trajectory	183	✘	9,584 (Nov-22)	2nd (Nov-22)		609	714	682	755	707	441	527	194	157	193	129	149	221
	% of patients waiting < 26 weeks for treatment	Local	Jun-23	61%	95%			56% (Nov-22)	6th (Nov-22)		50.8%	51.8%	52.0%	52.1%	53.5%	54.4%	54.2%	52.8%	56.9%	58.4%	58.2%	58.7%	60.7%
	Number of patients waiting > 26 weeks for first outpatient appointment	Local	Jun-23	13,427							26,826	26,811	27,019	26,065	24,112	21,400	20,174	20,288	17,257	15,385	15,184	14,733	13,427
	Number of patients waiting > 36 weeks for first outpatient appointment	National	Jun-23	6,893	↑ trajectory	7,321	✔				21,720	22,071	21,940	20,151	18,379	15,537	14,140	12,767	11,115	9,163	8,561	7,675	6,893
	Number of patients waiting > 52 weeks for first outpatient appointment	National	Jun-23	1,234	↑ trajectory	1,464	✔	85,301 (Nov-22)	3rd (Nov-22)		14,951	15,232	15,122	13,980	12,352	9,774	7,779	6,630	5,475	3,895	3,456	2,719	1,234
	Number of patients waiting > 36 weeks for treatment	Local	Jun-23	26,459				252,779 (Nov-22)	3rd (Nov-22)		39,760	38,888	38,583	37,095	36,121	34,207	33,321	30,017	28,353	28,087	27,189	26,459	
	Number of patients waiting > 52 weeks for treatment	National	Jun-23	15,446	↑ trajectory	16,716	✔				28,566	27,681	27,570	27,077	26,147	24,308	22,634	21,306	19,707	18,181	17,823	16,976	15,446
	Number of patients waiting > 104 weeks for treatment	National	Jun-23	5,474	↑ trajectory	5,803	✔	49,594 (Nov-22)	5th (Nov-22)		12,064	11,400	10,960	10,623	10,090	9,048	8,066	7,331	6,656	6,015	5,952	5,792	5,474
	The number of patients waiting for a follow-up outpatient appointment	Local	Jun-23	149,529							136,435	136,982	138,736	139,989	141,643	143,899	144,780	146,632	148,070	150,860	147,864	150,109	149,529
	The number of patients waiting for a follow-up outpatients appointment who are delayed over 100%	National	Jun-23	40,807	↑ trajectory	39,341	✘	224,552 (Nov-22)	5th (Nov-22)		35,114	35,659	36,037	36,144	35,968	36,769	38,252	39,056	40,146	41,710	41,611	42,534	40,807
	% of ophthalmology R1 appointments attended which were within their clinical target date or within 25% beyond their clinical target date	National	Jun-23	57%	95%		✘	64.9% (Nov-22)	1st (Nov-22)		63.7%	65.6%	62.4%	60.3%	65.2%	67.1%	69.9%	53.1%	64.6%	59.4%	62.7%	62.3%	57.5%
	Number of GP referrals	Local	Jun-23	13,984	12 month ↓		✘				13,050	12,548	12,930	12,572	13,014	12,663	9,231	12,658	12,347	14,220	12,012	13,341	13,984
Number of patients referred from primary care into secondary care Ophthalmology Services	National	Jun-23	890	↑ trajectory	950	✔				830	761	844	886	799	807	731	870	841	969	737	803	890	
DNAs	% of patients who did not attend a new outpatient appointment	Local	Jun-23	10%	12 month ↓		✘				8.2%	8.2%	8.0%	7.8%	8.3%	9.5%	11.1%	8.9%	9.2%	8.2%	7.9%	10.1%	10.6%
	% of patients who did not attend a follow-up outpatient appointment	Local	Jun-23	8%	12 month ↓		✘				7.8%	7.7%	7.6%	7.8%	7.7%	8.5%	8.7%	7.8%	7.9%	7.9%	8.0%	8.2%	8.4%
Theatre Efficiencies	Theatre Utilisation rates	Local	Jun-23	63%		90%	✘				81%	72%	59%	71%	77%	74%	59%	72%	70%	71%	71%	76%	69%
	% of theatre sessions starting late	Local	Jun-23	36%		<25%	✘				43%	40%	36%	37%	40%	35%	39%	35%	39%	33%	35%	37%	36%
	% of theatre sessions finishing early	Local	Jun-23	47%		<20%	✘				43%	46%	43%	48%	45%	44%	46%	44%	45%	49%	48%	51%	47%
Patient experience	Number of friends and family surveys completed	National	Jun-23	2,503	Month on month improvement		✘				3,292	3,391	3,950	3,914	4,358	4,287	3,569	5,073	4,425	5,358	2,704	3,477	2,503
	% of who would recommend and highly recommend	Local	Jun-23	89%		90%	✘				88%	89%	89%	88%	90%	91%	89%	92%	92%	92%	92%	90%	89%
	% of all-Wales surveys scoring 9 out of 10 on overall satisfaction	Local	Jun-23	90%		90%	✔				91%	90%	93%	92%	93%	91%	92%	92%	95%	95%	95%	95%	90%
Complaints	Number of new formal complaints received	Local	Apr-23	183		12 month trend ↓	✘				118	153	124	120	140	113	120	127	135	183	149		
	% concerns that had final reply (Reg 24)/interim reply (Reg 26) within 30 working days of concern received	Local	Apr-23	72%		80%	✘				65%	64%	65%	71%	71%	69%	73%	78%	67%	72%	77%		
	% of acknowledgements sent within 2 working days	Local	Apr-23	100%		100%	✔				100%	100%	100%	99%	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	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23							
	% children who received 3 doses of the hexavalent '6 in 1' vaccine by age 1	National	Q4 22/23	95.4%	95%			94.7% (Q2 22/23)	2nd (Q2 22/23)		94.9%			94.9%			94.6%			95.4%										
	% of children who received 2 doses of the MMR vaccine by age 5	National	Q4 22/23	88.4%	95%			90.0% (Q2 22/23)	5th (Q2 22/23)		89.9%			89.8%			89.5%			88.4%										
Influenza	% uptake of influenza among 65 year olds and over	National	Mar-23	75.9%	75%			78.0% (Mar-22)	3rd (Mar-22)		Data collection restarts October 2022										62.2%	72.4%	74.4%	75.6%	76.0%	75.9%	Data collection restarts October 2023			
	% uptake of influenza among under 65s in risk groups	Local	Mar-23	43.8%	55%			48.2% (Mar-22)	4th (Mar-22)		Data collection restarts October 2022										30.2%	37.7%	40.4%	42.1%	43.4%	43.8%				
	% uptake of influenza among children 2 to 3 years old	Local	Mar-23	38.8%	50%			47.6% (Mar-22)	5th (Mar-22)		Data collection restarts October 2022										23.6%	34.6%	37.9%	39.2%	39.3%	38.8%				
	% uptake of influenza among healthcare workers	Local	Mar-23	42.4%	60%			65.6% (2020/21)	6th out of 10 organisations (2020/21)		Data collection restarts October 2022											34.4%	40.9%	40.9%	42.4%	42.4%				
	% uptake of the Spring COVID-19 vaccination for those eligible	National	Jun-23	67.8%	75%		✘				Historical data not available																			67.8%
CAMHS	% of urgent assessments undertaken within 48 hours from receipt of referral (Crisis)	Local	May-23	100%	100%		✔				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%								
	% Patients with Neurodevelopmental Disorders (NDD) receiving a Diagnostic Assessment within 26 weeks	National	May-23	30%	80%	30%	✔	31.4% (Nov-22)	3rd (Nov-22)		47%	44%	44%	36%	40%	39%	37%	29%	29%	29%	28%	30%								
	% Patients waiting less than 28 days for a first outpatient appointment for CAMHS	National	May-23	31%	80%		✘	83.2% (Nov-22)	5th (Nov-22)		33%	38%	34%	91%	91%	89%	79%	62%	82%	74%	55%	31%								
	P-CAMHS - % of Routine Assessment by CAMHS undertaken within 28 days from receipt of referral	National	May-23	31%	80%		✘	66.8% (Nov-22)	5th (Nov-22)		22%	42%	27%	27%	83%	65%	56%	24%	64%	74%	55%	31%								
	P-CAMHS - % of therapeutic interventions started within 28 days following assessment by LPMHSS	National	May-23	33%	80%		✘	34.4% (Nov-22)	4th (Nov-22)		38%	61%	35%	43%	36%	27%	35%	40%	26%	50%	21%	33%								
	S-CAMHS - % of Routine Assessment by SCAMHS undertaken within 28 days from receipt of referral	Local	Feb-23	82%	80%							41%	38%	34%	91%	90%	89%	79%	62%	82%										
	% residents in receipt of CAMHS to have a valid Care and Treatment Plan (CTP)	National	May-23	93%	90%		✔	63.8% (Nov-22)	1st (Nov-22)		100%	100%	100%	87%	87%	99%	99%	91%	100%	100%	100%	93%								
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	May-23	94%	80%		✘	86.9% (Nov-22)	3rd (Nov-22)		96%	94%	97%	93%	95%	98%	94%	91%	95%	96%	78%	94%								
	% of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS (over 18 years of age)	National	May-23	98%	80%		✔	73.1% (Nov-22)	2nd (Nov-22)		100%	100%	100%	98%	100%	98%	98%	100%	100%	100%	96%	98%								
	% patients waiting < 26 weeks to start a psychological therapy in Specialist Adult Mental Health	National	May-23	84%	80%		✔	73.9% (Nov-22)	2nd (Nov-22)		100%	100%	97%	96%	93%	92%	92%	91%	88%	85%	85%	84%								
	% residents in receipt of secondary MH services (all ages) who have a valid care and treatment plan (CTP)	National	May-23	88%	90%		✘	84.2% (Nov-22)	2nd (Nov-22)		89%	89%	90%	89%	90%	90%	90%	89%	89%	87%	87%	88%								
	% Service Users admitted to a psychiatric hospital between 9:00 and 21:00 hours that have received a gate-keeping assessment by the CRHTservice prior to	Local	May-23	100%	100%		✔	95.8% (Nov-22)	1st (Nov-22)		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%								
	% service users admitted to a psychiatric hospital who have not received a gate keeping assessment by the CHRHTS that have received a follow up assessment by the CRHTS within 24 hours of admission	Local	May-23	100%	100%		✔	90.9% (Nov-22)	1st (Nov-22)		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%								