

Report Date	24th September 2024	Agenda Item	
Report Title	Integrated Performance Report		
Report Author	Charlotte Angell, Health Board Performance Support Officer		
Report Sponsor	Darren Griffiths, Executive Director of Finance and Performance, Acting Deputy Chief Executive		
Presented by	Darren Griffiths, Executive Director of Finance and Performance, Acting Deputy Chief Executive		
Freedom of Information	Open		
Purpose of the Report	The purpose of this report is to provide an update on the current performance of the Health Board at the end of the most recent reporting period (August 2024) in delivering key local performance measures as well as the national measures outlined in the 2024/25 NHS Wales Performance Framework.		
Key Issues	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. Key high level issues to highlight this month are as follows: - <u>Unscheduled Care</u> • Performance against the 4-hour access has deteriorated from 79.1% to 76.6% in August 2024. • Performance against the 12-hour wait has deteriorated in August 2024 to 1,167 from 1,013. • In August 2024, there were 670 ambulance to hospital handovers taking over 1 hour; this is an increase of 92 compared with the previous month. • In August 2024, 3,147 ambulance hours were lost in handover delays compared to 2,678 in the previous month. • There was an increase in the average number of patients who were deemed clinically optimised in July 2024 (Pathway of care delays). The average number of clinically optimised patients increased from 226 in the previous month to 246. <u>Planned Care</u> • OP waits remain under the 52 week Ministerial target level in August 2024, a position sustained since October 2023. • At the end of August 2024, there were 1,278 patients waiting over 104 weeks for treatment an improvement of 6 from the previous month.		

	• In August 2024 there were 17 patients waiting over 14 weeks for a therapy service, all 17 were waiting for Dietetics. • In August 2024, there was a decrease in the number of patients waiting over 8 weeks for specified diagnostics. The position improved from 3,490 to 3,425. The breakdown is as follows: - • Endoscopy= 2,756 • Cardiac tests= 555 • Other Diagnostics = 114 <u>Cancer</u> • The final Single Cancer Pathway (SCP) measure of patients receiving definitive treatment in July 2024 was 59%, which is 1% higher than the figure reported in June 2024 (this measure is always reported a month in arrears due to data validation). • 305 patients were waiting in excess of 63 days at the end of August 2024. <u>Mental Health</u> • Performance against the Mental Health Measures continues to be maintained at above target levels in July 2024 with the exception of psychological therapies. • In July 2024, 61% of patients waited less than 26 weeks for Psychological Therapy. This was below the national target of 95%. <u>Child and Adolescent Mental Health Services (CAMHS)</u> • Access times for crisis performance has been maintained at 100% in July 2024. • Neurodevelopmental Disorders (NDD) access times within 26 weeks continues to be a challenge, the performance showed a modest deterioration of 3% in the month of August 2024 to 30%. • Note: S-CAMHS now included with P-CAMHS measure. Access to therapeutic interventions remains strong at 100% within 28 days. Access to assessment has improved against in August 2024 to 84% which is now above target levels; the fourth month of continuous improvement			
Specific Action Required	Information	Discussion	Assurance	Approval
	✓		✓	
Recommendations	Members are asked to: • ACKNOWLEDGE and DISCUSS the Health Board performance against key measures and targets.			



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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 2024/25.

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:



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

Governance and Assurance		
Link to Enabling Objectives (please choose)	Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities	
	Partnerships for Improving Health and Wellbeing	☒
	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	☒
Health and Care Standards		
(please choose)	Staying Healthy	☒
	Safe Care	☒
	Effective Care	☒
	Dignified Care	☒
	Timely Care	☒
	Individual Care	☒
	Staff and Resources	☒
Quality, Safety and Patient Experience		
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.		
There are no directly related Equality and Diversity implications as a result of this report.		
Financial Implications		
At this stage in the financial year there are no direct impacts on the Health Board's financial bottom line resulting from the performance reported herein.		
Legal Implications (including equality and diversity assessment)		
A number of indicators monitor progress in relation to legislation, such as the Mental Health Measure.		
Staffing Implications		
A number of indicators monitor progress in relation to Workforce, such as Sickness and Personal Development Review rates. Specific issues relating to staffing are also addressed individually in this report.		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
The '5 Ways of Working' are demonstrated in the report as follows:		
Long term – Actions within this report are both long and short term in order to balance the immediate service issues with long term objectives.		



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

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



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Appendix 1- Integrated Performance Report September 2024



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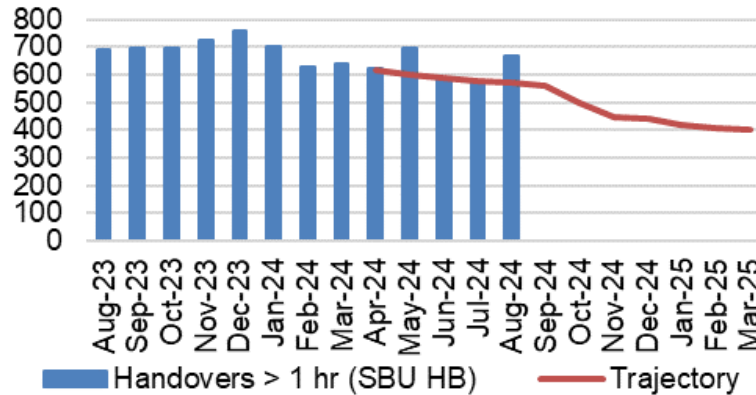
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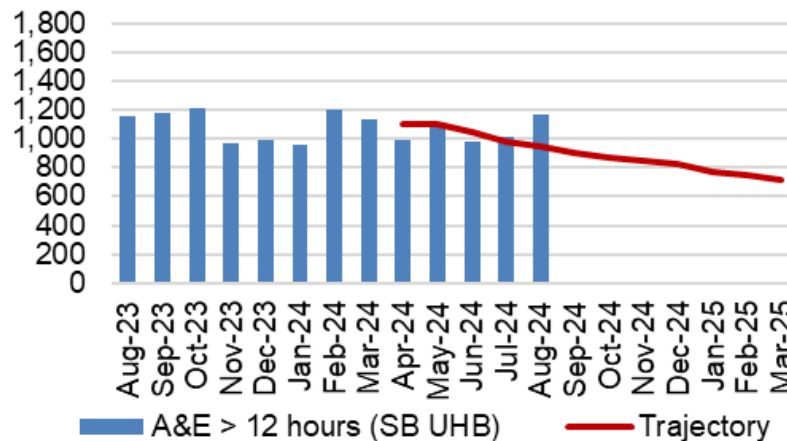
1. TARGETED INTERVENTION METRICS PERFORMANCE

URGENT AND EMERGENCY CARE

1. Ambulance handovers over 1 hour



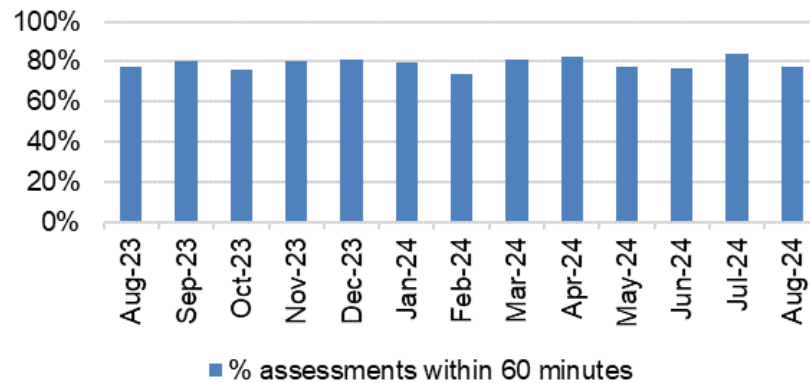
2. A&E waits over 12 hours



1. The number ambulance handovers over 1 hour has seen an increase in August 2024. The number of handovers over 1 hour increased from 578 in July 2024 to 670 in August 2024, which is above the outlined trajectory.

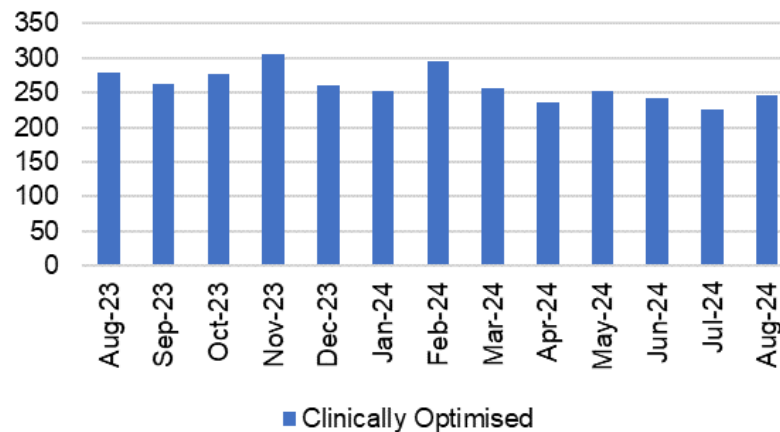
2. Performance against the 12-hour wait has deteriorated in-month and is currently performing above the outlined trajectory. The number of patients waiting over 12-hours in the Emergency Department increased to 1,167 in August 2024, from 1,013 in July 2024.

3. Median time from arrival to assessment within 60 mins



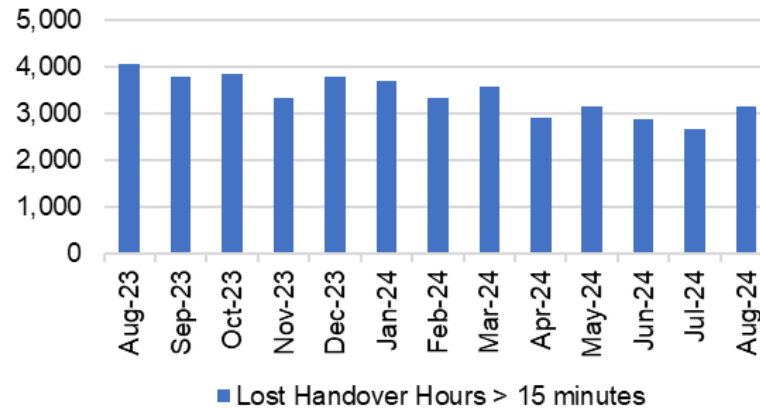
3. In August 2024 77.70% of patients received their first assessment within 60 minutes of their arrival at the Emergency Department. This is a reduction of 6.2% on the figure reported in July 2024 (83.94%).

4. Continuing reduction in pathway of care delays



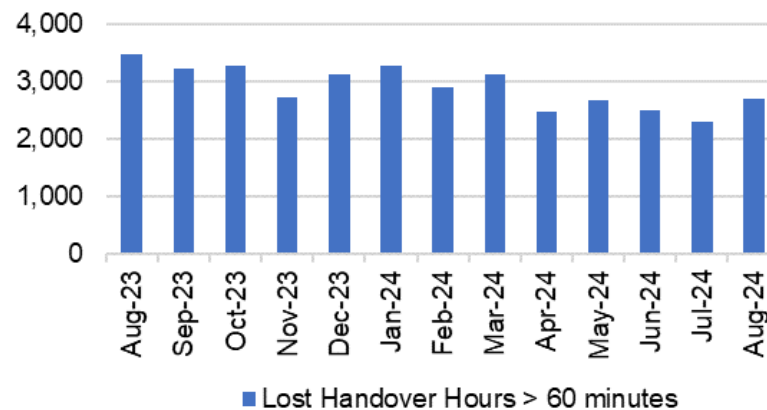
4. There was an increase in the average number of patients who were deemed clinically optimised in August 2024. The average number of clinically optimised patients increased from 226 in July 2024 to 246 in August 2024.

5. Lost Ambulance Hours Total



5. The ambulance handover lost hours rate has seen an increase in August 2024. The ambulance handover lost hours increased from 2,678 in July 2024 to 3,147 in August 2024.

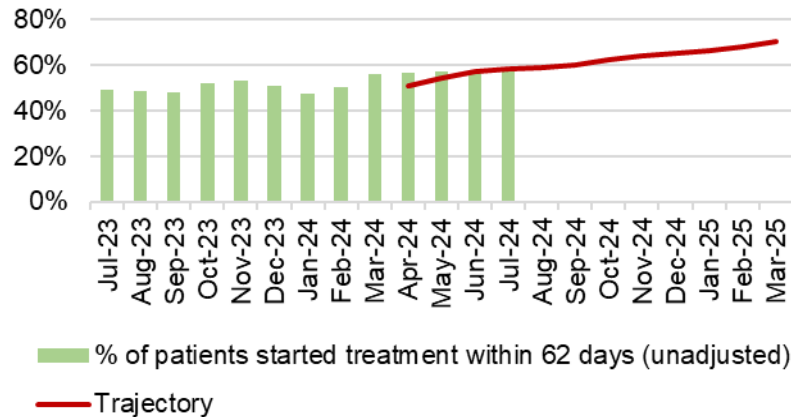
6. Lost Ambulance Hours over 1 hour



6. There has been an increase in the number of lost ambulance hours over 1 hour in August 2024. There were 2,707 lost hours over 1 hour in August 2024 which is an increase of 413 compared with 2,294 in July 2024.

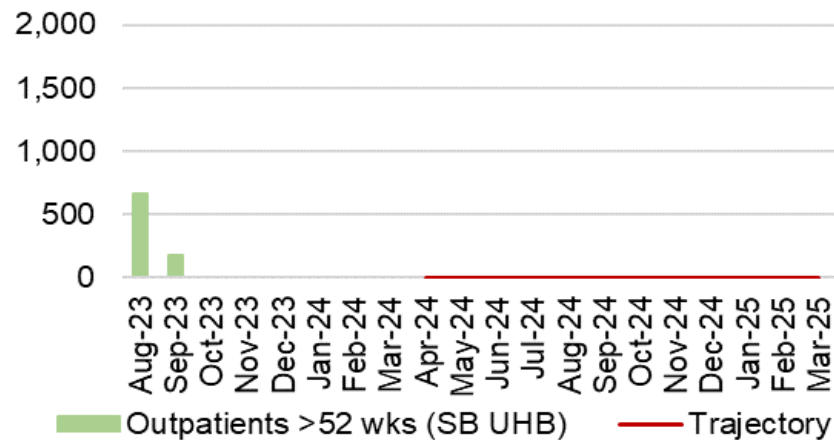
PLANNED CARE & CANCER

1. Single Cancer Pathway



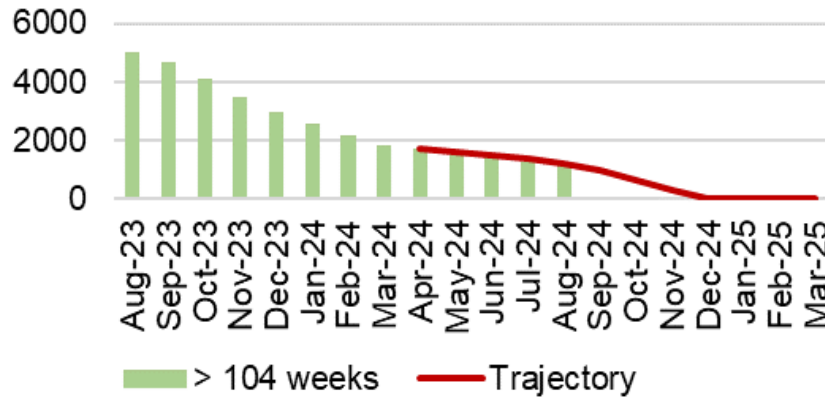
1. The final SCP performance for July 2024 was 59%, which is higher than the figure reported in June 2024. Performance is currently above the submitted trajectory (58%).

2. Outpatients waiting over 52 weeks



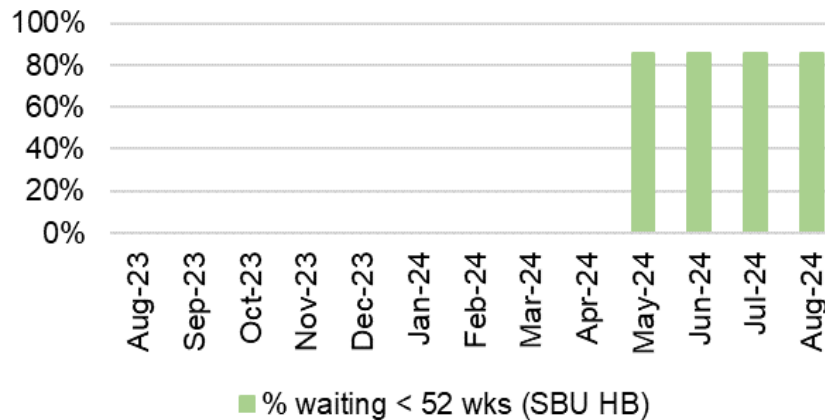
2. The number of patients waiting over 52 weeks for a first outpatient appointment remained below the Ministerial target level of 0 in August 2024. This position has been sustained since October 2023.

3. 104 week waits – all pathways



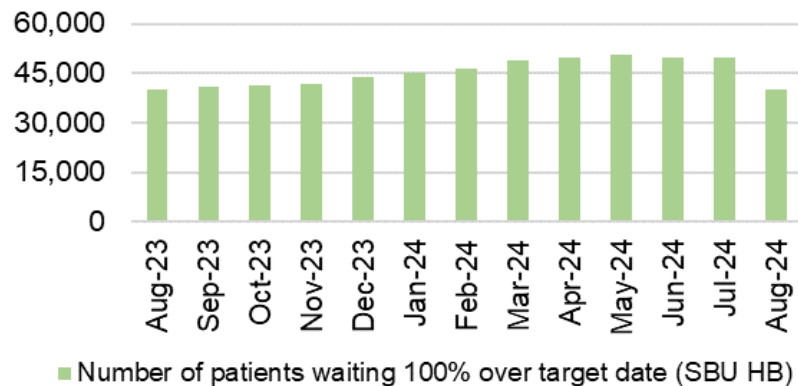
3. August 2024 saw a slight in-month reduction of 0.05% in the number of patients waiting over 104 weeks for treatment. The number decreased from 1,284 in July 2024 to 1,278 in August 2024.

4. % of patients waiting under 52 weeks (all pathways)



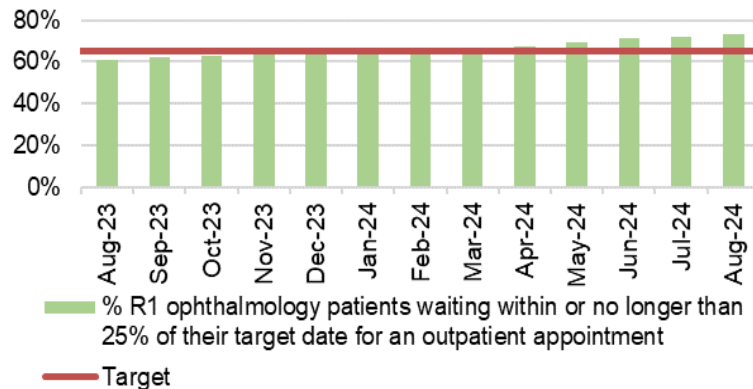
4. The percentage of patients waiting under 52 weeks for treatment decreased slightly in-month. In August 85.3% of patients were waiting under 52 weeks, compared with 85.4% in July 2024.

5. Delayed follow ups over 100%



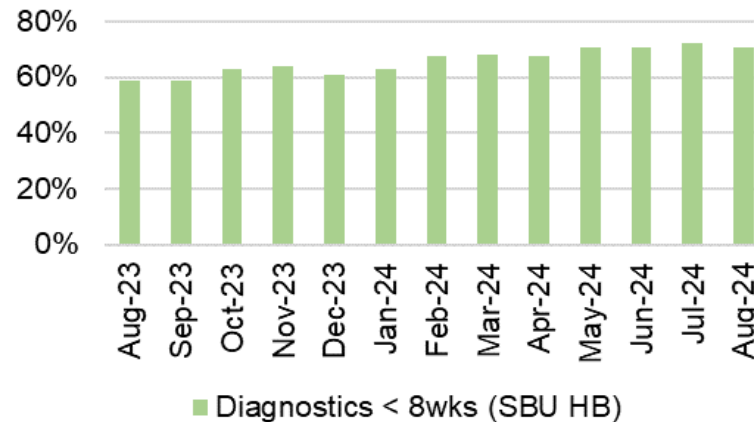
5. There were 39,908 patients waiting 100% over their target date in August 2024. The improvement is due to a change in reporting requirements and future trends will be built form August 2024.

6. R1 Ophthalmology



6. In August 2024 73.3% of Ophthalmology RI patients were waiting within their clinical target date or within 25% of their target date. This is a 1.1% increase on the figure reported in July 2024.

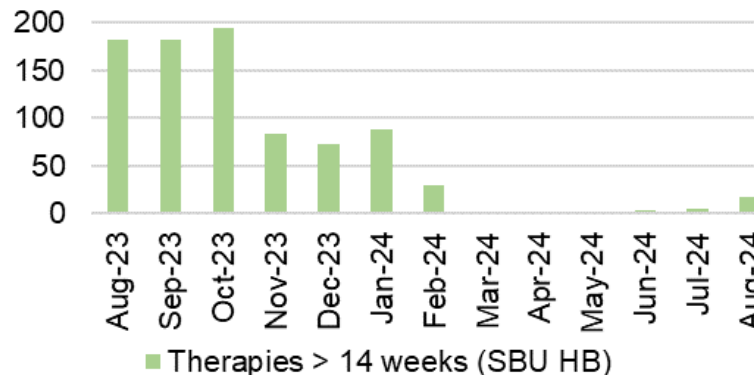
7. Percentage of Patients waiting 8 weeks for a diagnostic test



7. In August 2024, there was a reduction in the percentage of patients waiting less than 8 weeks for a diagnostic test. It decreased from 72.1% in July 2024 to 70.5% in August 2024.

More detail on the number of patients waiting by diagnostic test is provided later in this report.

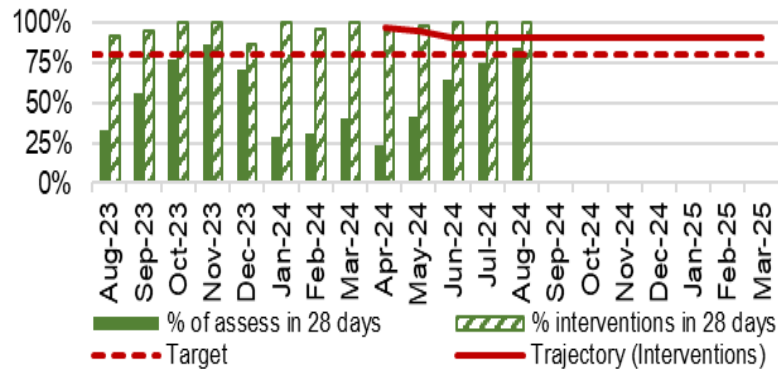
8. Patients waiting 14 weeks for therapy services



8. In August 2024, 99.71% of patients were waiting less than 14 weeks for therapy services; this is a deterioration when compared with the figure reported in July 2024. The 0.29% equates to 17 patients, all of which were in dietetics.

CAMHS

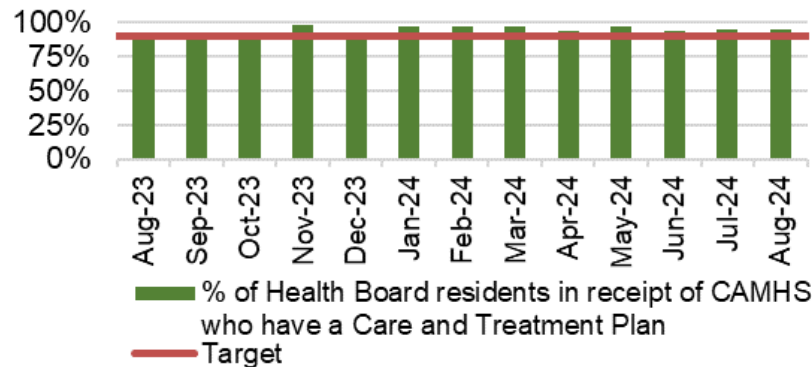
1. LPMHSS assessments with 28 days and therapeutic assessment within 28 days



1. The percentage of routine assessments undertaken within 28 days increased to 84% in August 2024 from 75% in July 2024.

In August 2024, 100% of therapeutic assessments were undertaken within 28 days. This is above the outlined trajectory for August 2024.

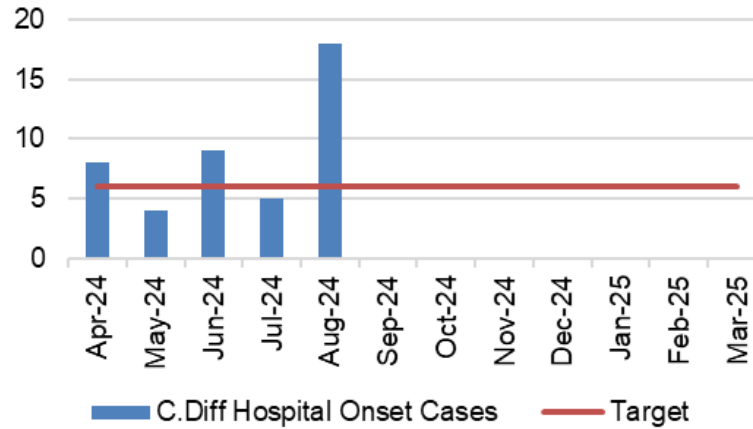
2. Residents in receipt of a valid care and treatment plan



2. The percentage of residents in receipt of a valid care and treatment plan remained above the 90% target, achieving 95% in August 2024.

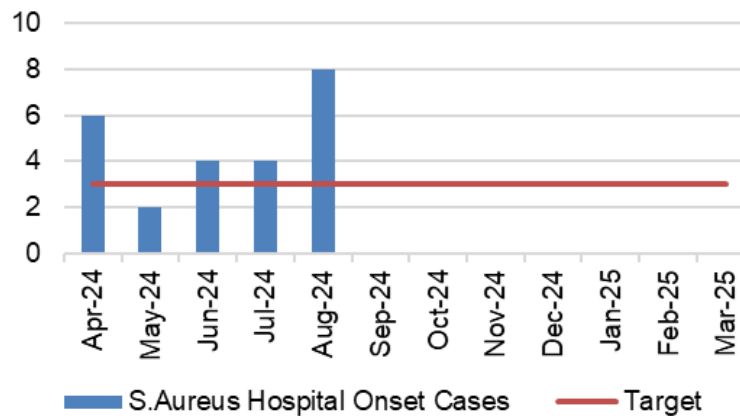
HEALTHCARE ACQUIRED INFECTIONS (HOSPITAL ONSET)

1. C. Difficile



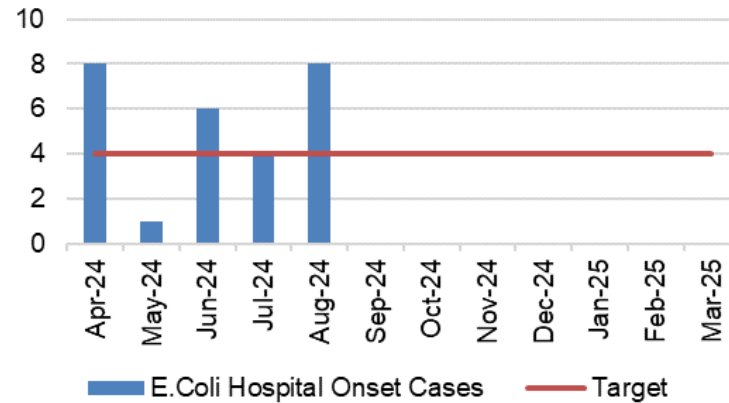
1. There were 18 hospital onset cases of C. Difficile reported in August 2024. This is 13 more than reported in July 2024 and is above the target of a maximum of 6 cases per month.

2. Staph aureus



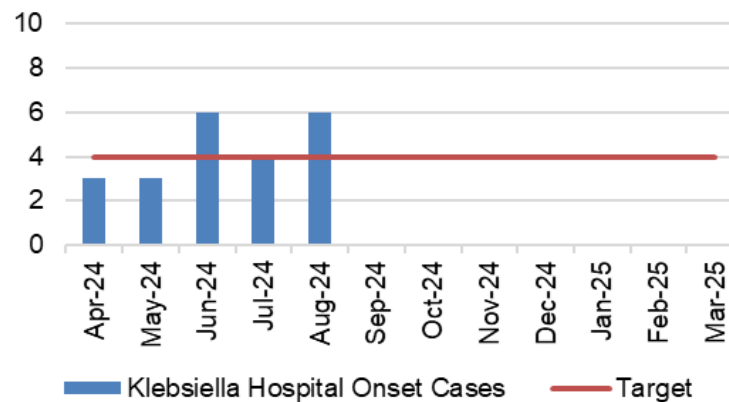
2. There were 8 hospital onset cases of Staph aureus reported in August 2024. This is 4 more than reported in July 2024 and is above the target of a maximum of 3 cases per month.

3. E-coli



3. There were 4 hospital onset cases of E.Coli reported in August 2024. This is 4 more than the figure reported in July 2024 and is above the target of a maximum of 4 cases per month.

4. Klebsiella



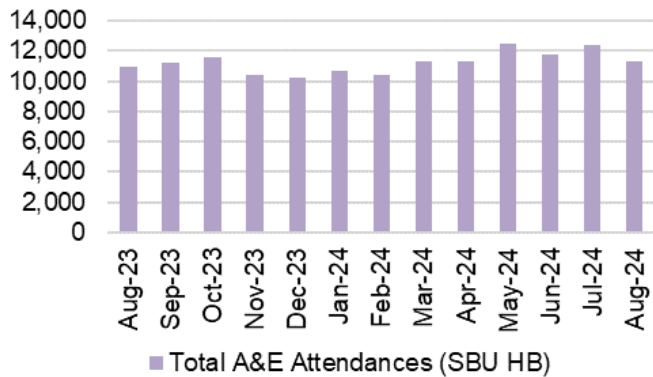
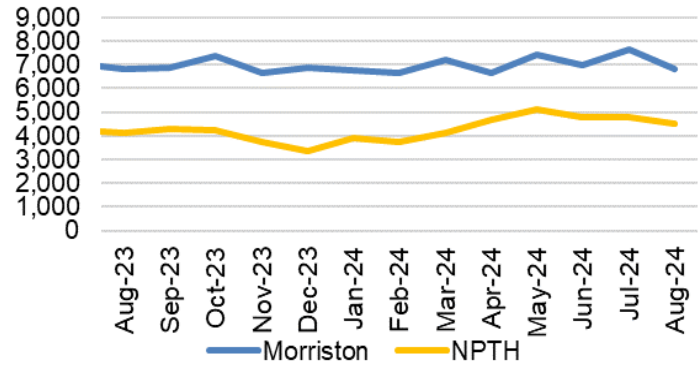
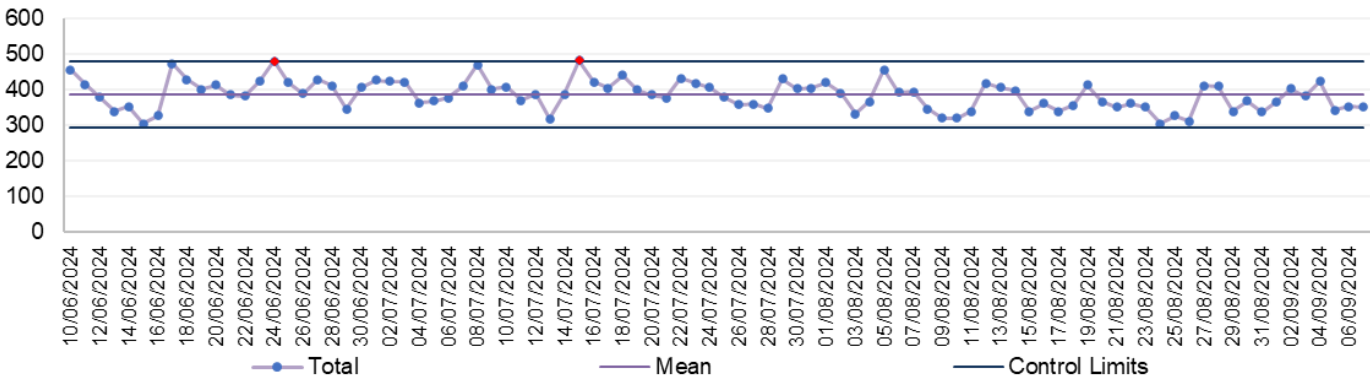
4. The number of hospital onset cases of Klebsiella reported increased to 6 in August 2024 from 4 in July 2024. This is above the target of a maximum of 4 cases per month.

2. UPDATES ON KEY SERVICE AREAS

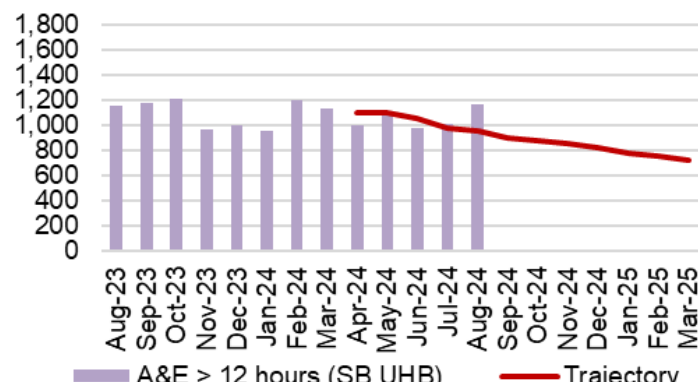
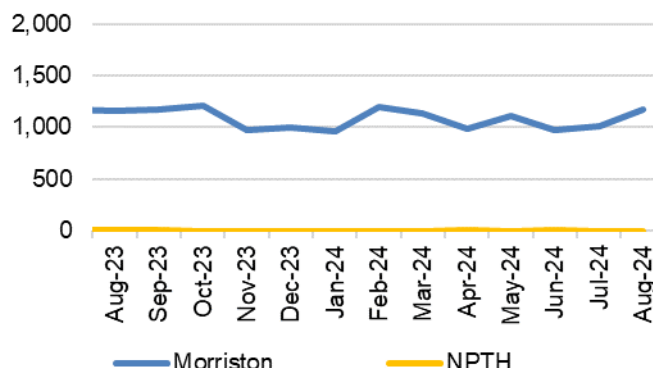
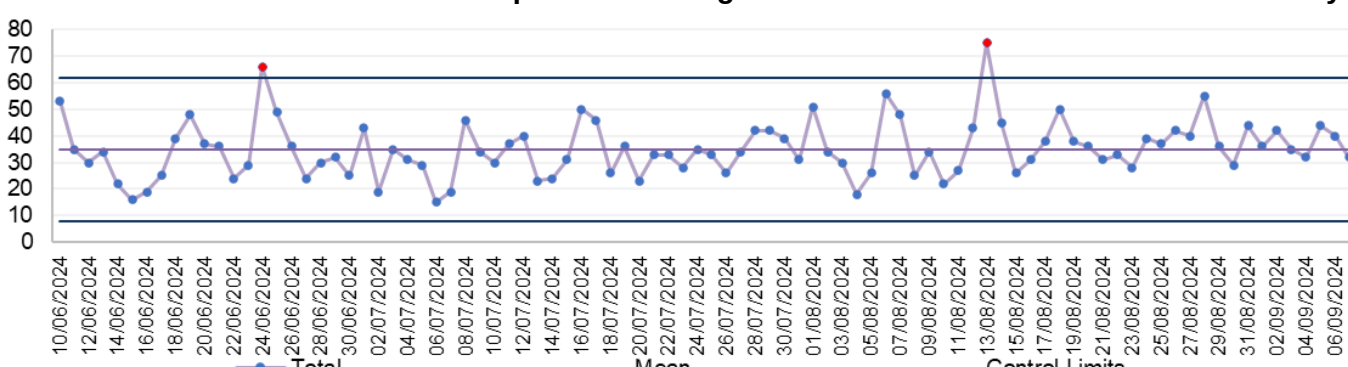
COVID Data																																																						
Description	Current Performance	Trend																																																				
1. Number of new COVID19 cases in Swansea Bay population area	<u>Number of new COVID cases</u> In August 2024, there were an additional 47 positive cases recorded bringing the cumulative total to 121,820 in Swansea Bay since March 2020.	Number of new COVID19 cases for Swansea Bay population <table><thead><tr><th>Month</th><th>New positive COVID19 cases</th></tr></thead><tbody><tr><td>Aug-22</td><td>200</td></tr><tr><td>Sep-22</td><td>200</td></tr><tr><td>Oct-22</td><td>150</td></tr><tr><td>Nov-22</td><td>150</td></tr><tr><td>Dec-22</td><td>400</td></tr><tr><td>Jan-23</td><td>200</td></tr><tr><td>Feb-23</td><td>250</td></tr><tr><td>Mar-23</td><td>350</td></tr><tr><td>Apr-23</td><td>150</td></tr><tr><td>May-23</td><td>50</td></tr><tr><td>Jun-23</td><td>50</td></tr><tr><td>Jul-23</td><td>100</td></tr><tr><td>Aug-23</td><td>100</td></tr><tr><td>Sep-23</td><td>100</td></tr><tr><td>Oct-23</td><td>150</td></tr><tr><td>Nov-23</td><td>50</td></tr><tr><td>Dec-23</td><td>200</td></tr><tr><td>Jan-24</td><td>150</td></tr><tr><td>Feb-24</td><td>50</td></tr><tr><td>Mar-24</td><td>50</td></tr><tr><td>Apr-24</td><td>50</td></tr><tr><td>May-24</td><td>50</td></tr><tr><td>Jun-24</td><td>50</td></tr><tr><td>Jul-24</td><td>50</td></tr><tr><td>Aug-24</td><td>47</td></tr></tbody></table>	Month	New positive COVID19 cases	Aug-22	200	Sep-22	200	Oct-22	150	Nov-22	150	Dec-22	400	Jan-23	200	Feb-23	250	Mar-23	350	Apr-23	150	May-23	50	Jun-23	50	Jul-23	100	Aug-23	100	Sep-23	100	Oct-23	150	Nov-23	50	Dec-23	200	Jan-24	150	Feb-24	50	Mar-24	50	Apr-24	50	May-24	50	Jun-24	50	Jul-24	50	Aug-24	47
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Ambulance responses <i>1. The percentage of emergency responses to red calls arriving within (up to and including) 8 minutes.</i> <i>2. The number of ambulance calls by category.</i> <i>3. The percentage of emergency responses to red calls arriving within 8 minutes (last 90 days)</i>	In August 2024, the number of red calls responded to within 8 minutes deteriorated to 44.9% from 46.5% in July 2024. In August 2024, the number of green calls increased by 4%, amber calls decreased by 1%, and red calls decreased by 0.5% compared with July 2024.	Ambulance response rates have seen a small deterioration in performance in August 2024. 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.																																																																																																																																																																																								
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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 August 2024, there were 670 ambulance to hospital handovers taking over 1 hour; this is an increase of 92 compared with 578 in July 2024. In August 2024, all 670 handovers over 1 hour were attributed to Morriston Hospital. The number of handover hours lost over 15 minutes have increased from 2,678 in July 2024 to 3,147 in August 2024.	Transformation of the urgent care pathways has been maintained with a focus on admission avoidance and length of stay reduction. Changes to medical staff rotas are being enacted and the first phases of the frailty model have been accelerated and implemented in July 2024 to reduce conveyance and admission where appropriate
	Trend	
	1. Number of ambulance handovers- HB total Handovers > 1 hr (SBU HB) Trajectory 2. Number of ambulance handovers over 1 hour- Hospital level Morriston Singleton 3. Number of ambulance handovers- HB total last 90 days Total Mean Control Limits Symbol Key: - Above or below control limits 8 or more points above or below the mean - Arun of 6 - increasing or decreasing points	

UNSCHEDULED CARE		
Description	Current Performance	Actions of Improvement
A&E Attendances 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)	In August 2024, there were 11,354 A&E attendances, which is a reduction of 1,036 when compared to July 2024. There were 6,827 attendances to A&E at Morriston hospital and 4,527 attendances to MIU at Neath Port Talbot hospital.	There is currently a medical SDEC model in place consisting of medics, GP's, therapies, plus co-location of OPAS, ACT, virtual wards, paramedics (WAST stack review and direct access) – pull & push model from ED.
	Trend	
	1. Number of A&E attendances- HB total  ■ Total A&E Attendances (SBU HB) 2. Number of A&E attendances- Hospital level  — Morriston — NPTH 3. Number of A&E attendances -HB total last 90 days  ● Total — Mean — Control Limits Symbol Key: ◆ Above or below control limits ▲ above or below the mean ● Arun of 6 ■ increasing or decreasing points	

UNSCHEDULED CARE		
Description	Current Performance	Actions of Improvement
A&E waiting times <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&E- Hospital level</i> <i>3. % of patients who spend less than 4 hours in A&E (last 90 days)</i>	The Health Board's performance against the 4-hour measure deteriorated from 79.12% in July 2024 to 76.61% in August 2024. Neath Port Talbot Hospital Minor Injuries Unit (MIU) has remained above the national target of 95% achieving 99.01% in August 2024. Morriston Hospital's performance deteriorated between July 2024 and August 2024, achieving 61.81% against the target.	A frailty model design has been agreed which anticipates a reduction in attendances and improved length of stay; this has been accelerated and implementation commenced in July ahead of September 2024 as scheduled. Implementation and additional recruitment is ongoing.
	Trend	
	1. % Patients waiting under 4 hours in A&E- HB total ■ A&E % < 4 hours (SB UHB) 2. % Patients waiting under 4 hours in A&E- Hospital level — Morriston — NPTH 3. % Patients waiting under 4 hours in A&E- HB total last 90 days ● Total — Mean — Control Limits Symbol Key: ◆ Above or below control limits ▲ 8 or more points above or below the mean ● Arun of 6 ● increasing or decreasing points	

UNSCHEDULED CARE		
Description	Current Performance	Actions of Improvement
A&E waiting times <i>1.Number of patients who spend 12 hours or more in A&E</i> <i>2.Number of patients who spend 12 hours or more in A&E- Hospital level</i> <i>3.Number of patients who spend 12 hours or more in A&E (last 90 days)</i>	In August 2024, performance against the 12-hour measure deteriorated when compared with July 2024, increasing from 1,013 to 1,167. This is an increase of 154 compared to July 2024. 1,166 patients waiting over 12 hours in August 2024 were attributed to Morriston Hospital and 1 was attributed to Neath Port Talbot Hospital.	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.
	Trend	
	1. Number of patients waiting over 12 hours in A&E- HB total  A&E > 12 hours (SB UHB) Trajectory 2. Number of patients waiting over 12 hours in A&E- Hospital level  Morriston NPTH 3. Number of patients waiting over 12 hours in A&E – HB total last 90 days  Total Mean Control Limits Symbol Key: ◆ Above or below control limits ▲ 8 or more points above or below the mean Arund of 6 ● increasing or decreasing points	

UNSCHEDULED CARE		
Description	Current Performance	Actions of Improvement
Emergency admissions 1. The number of emergency inpatient admissions 2. The number of emergency inpatient admissions- Hospital level 3. The number of emergency inpatient admissions (last 90 days)	In December 2023, there were 4,328 emergency admissions across the Health Board, which is 26 higher than November 2023. Singleton Hospital saw an in-month reduction, with 33 less admissions (from 308 in November 2023), Morriston Hospital saw an in-month increase from 3,871 admissions in November 2023 to 3,923 admissions in December 2023.	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
	Trend	
	1. Number of emergency admissions- HB total Emergency Admissions (SBU HB) 2. Number of emergency admissions- Hospital level Morriston Singleton NPTH 3. Number of emergency admissions- HB total last 90 days Total Mean Control Limits Symbol Key: ◆ Above or below control limits ▲ 8 or more points above or below the mean Arun of 6 ● increasing or decreasing points	

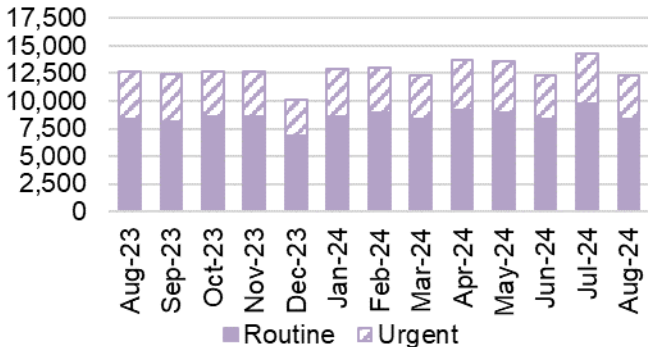
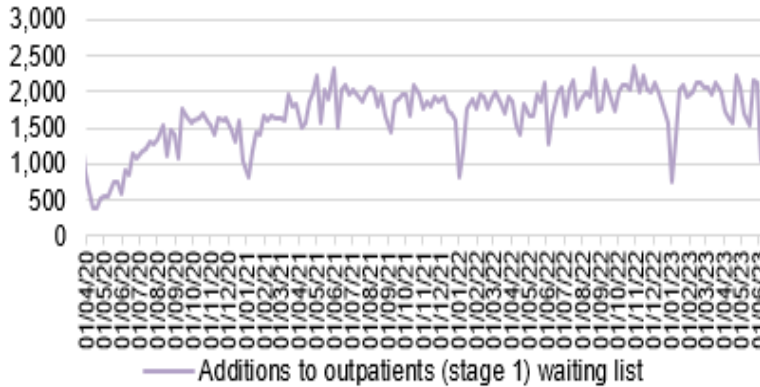
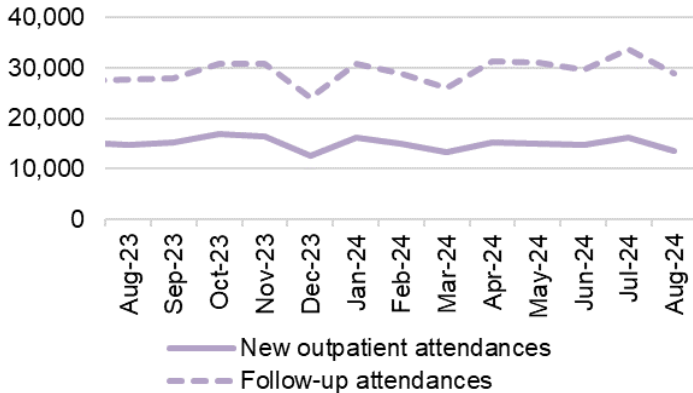
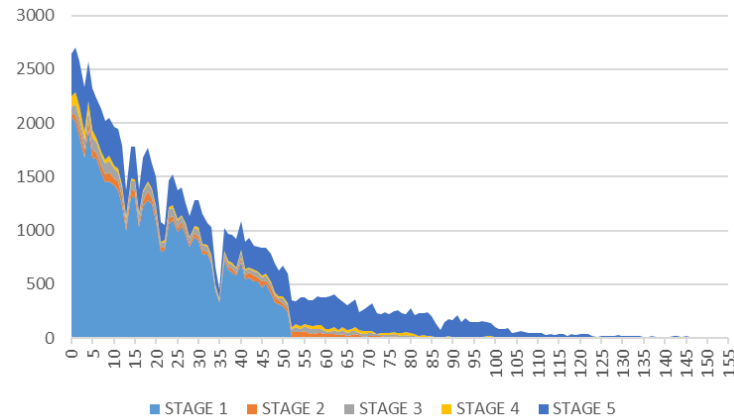
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Critical Care-Delayed Transfers of Care (DIOC)-Morrison Hospital <i>1.Total Critical Care delayed discharges (hours)</i> <i>2. Average lost bed days per day</i> <i>3.Percentage of patients delayed:</i> <i>Up to 8 hours</i> <i>Between 8 and 24 hours</i> <i>Over 24 hours</i>	In March 2024, there were a total of 76 admissions into the Intensive Care Unit (ICU) in Morrison Hospital, this is an increase when compared with 70 admissions in February 2024. March 2024, saw an increase in the number of delayed discharge hours from 1049.25 in February 2024 to 2903.1 in March 2024. The average lost bed days increased to 3.9 per day. The percentage of patients delayed over 24 hours increased to 52.73% in March from 26.53% in February 2024.	Delayed discharges from ICU are linked to capacity and flow constraints within the general wards and health/social-care system in general. Increased focus on flow through ICU as a result of capital works underway to meet burns requirements.																																																																																																																
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Clinically Optimised <i>The number of patients waiting at each site in the Health Board that are clinically optimised</i>	In August 2024, there were on average 246 patients who were deemed clinically optimised but were still occupying a bed in one of the Health Board’s Hospitals. In August, Morriston Hospital had the largest proportion of clinically optimised patients with 138, followed by Neath Port Talbot Hospital with 69. Actions of Improvement; Continued work is underway to implement opportunities to reduce the number of Clinically Optimised Patients in the Hospital. The implementation of the frailty model with further increase opportunities for reductions in delays.	The number of clinically optimised patients by site <table><caption>Estimated data for Clinically Optimised Patients</caption><thead><tr><th>Month</th><th>Morriston</th><th>Singleton</th><th>NPTH</th><th>Gorseinon</th></tr></thead><tbody><tr><td>Aug-23</td><td>140</td><td>20</td><td>75</td><td>25</td></tr><tr><td>Sep-23</td><td>150</td><td>10</td><td>100</td><td>10</td></tr><tr><td>Oct-23</td><td>160</td><td>10</td><td>95</td><td>15</td></tr><tr><td>Nov-23</td><td>180</td><td>10</td><td>100</td><td>20</td></tr><tr><td>Dec-23</td><td>150</td><td>10</td><td>85</td><td>25</td></tr><tr><td>Jan-24</td><td>130</td><td>35</td><td>65</td><td>20</td></tr><tr><td>Feb-24</td><td>170</td><td>35</td><td>65</td><td>25</td></tr><tr><td>Mar-24</td><td>110</td><td>50</td><td>65</td><td>30</td></tr><tr><td>Apr-24</td><td>120</td><td>40</td><td>55</td><td>25</td></tr><tr><td>May-24</td><td>150</td><td>25</td><td>55</td><td>25</td></tr><tr><td>Jun-24</td><td>130</td><td>25</td><td>60</td><td>25</td></tr><tr><td>Jul-24</td><td>135</td><td>10</td><td>65</td><td>20</td></tr><tr><td>Aug-24</td><td>138</td><td>15</td><td>70</td><td>25</td></tr></tbody></table>	Month	Morriston	Singleton	NPTH	Gorseinon	Aug-23	140	20	75	25	Sep-23	150	10	100	10	Oct-23	160	10	95	15	Nov-23	180	10	100	20	Dec-23	150	10	85	25	Jan-24	130	35	65	20	Feb-24	170	35	65	25	Mar-24	110	50	65	30	Apr-24	120	40	55	25	May-24	150	25	55	25	Jun-24	130	25	60	25	Jul-24	135	10	65	20	Aug-24	138	15	70	25
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Elective procedures cancelled due to lack of beds <i>The number of elective procedure cancelled across the hospital where the main cancellation reasons was lack of beds</i>	In August 2024, there were 19 elective procedures cancelled due to lack of beds on the day of surgery. This is 2 more cancellations than those seen in July 2024. Of the 19 cancelled procedures, 18 were attributed to Morriston Hospital and 1 was attributed to Neath Port Talbot Hospital.	Total number of elective procedures cancelled due to lack of beds <table><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>Aug-23</td><td>5</td><td>0</td><td>0</td></tr><tr><td>Sep-23</td><td>15</td><td>0</td><td>0</td></tr><tr><td>Oct-23</td><td>12</td><td>0</td><td>0</td></tr><tr><td>Nov-23</td><td>20</td><td>0</td><td>0</td></tr><tr><td>Dec-23</td><td>10</td><td>0</td><td>0</td></tr><tr><td>Jan-24</td><td>25</td><td>0</td><td>40</td></tr><tr><td>Feb-24</td><td>22</td><td>0</td><td>0</td></tr><tr><td>Mar-24</td><td>15</td><td>0</td><td>0</td></tr><tr><td>Apr-24</td><td>18</td><td>0</td><td>0</td></tr><tr><td>May-24</td><td>15</td><td>0</td><td>5</td></tr><tr><td>Jun-24</td><td>28</td><td>0</td><td>0</td></tr><tr><td>Jul-24</td><td>18</td><td>0</td><td>0</td></tr><tr><td>Aug-24</td><td>19</td><td>0</td><td>0</td></tr></tbody></table>	Month	Morriston	Singleton	NPTH	Aug-23	5	0	0	Sep-23	15	0	0	Oct-23	12	0	0	Nov-23	20	0	0	Dec-23	10	0	0	Jan-24	25	0	40	Feb-24	22	0	0	Mar-24	15	0	0	Apr-24	18	0	0	May-24	15	0	5	Jun-24	28	0	0	Jul-24	18	0	0	Aug-24	19	0	0														
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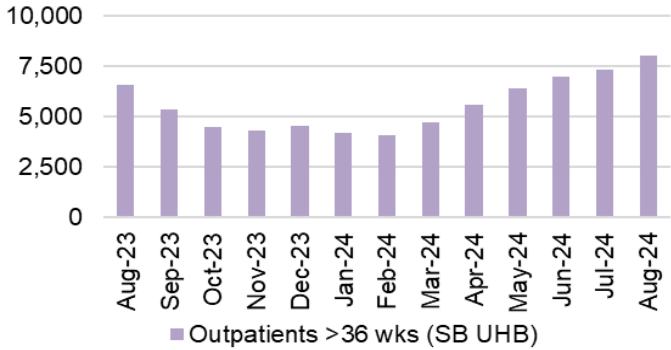
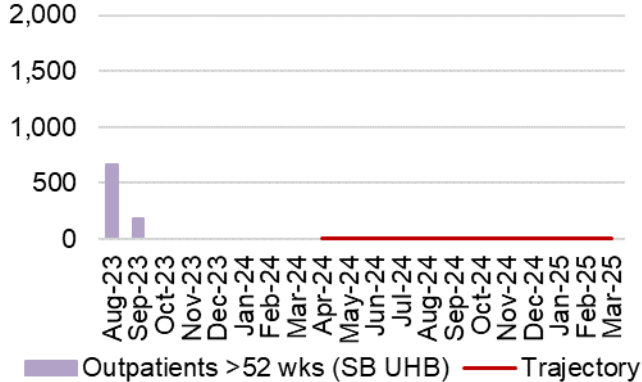
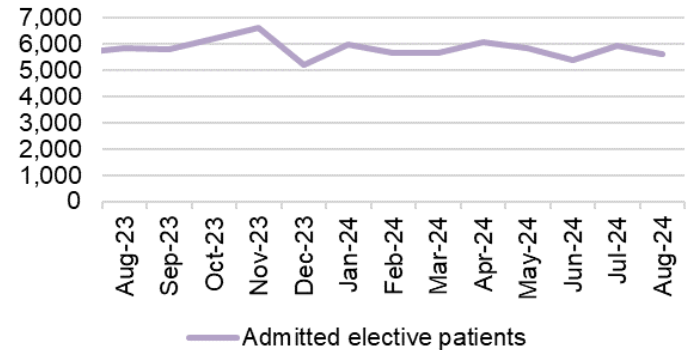
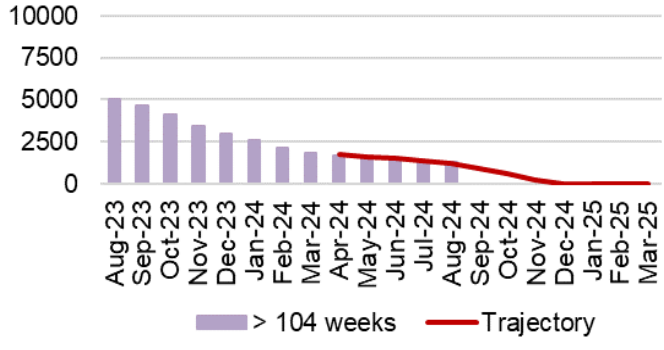
HEALTHCARE ACQUIRED INFECTIONS																																												
Description	Current Performance	Trend																																										
Healthcare Acquired Infections (HCAI) - E.coli bacteraemia- <i>Number of laboratory confirmed E.coli bacteraemia cases</i>	29 cases of <i>E. coli</i> bacteraemia were identified in August 2024, of which 12 were hospital acquired and 17 were community acquired. - The Health Board total is currently above the Welsh Government Profile target of 20 cases for August 2024. Actions of Improvement; Each Service Group has developed detailed action plans which reinforce the quality and safety guidelines to support the reduction of Infection rates	Number of healthcare acquired E.coli bacteraemia cases <table><caption>Number of healthcare acquired E.coli bacteraemia cases (SBU)</caption><thead><tr><th>Month</th><th>Number E.Coli cases (SBU)</th></tr></thead><tbody><tr><td>Aug-23</td><td>27</td></tr><tr><td>Sep-23</td><td>23</td></tr><tr><td>Oct-23</td><td>11</td></tr><tr><td>Nov-23</td><td>32</td></tr><tr><td>Dec-23</td><td>12</td></tr><tr><td>Jan-24</td><td>19</td></tr><tr><td>Feb-24</td><td>17</td></tr><tr><td>Mar-24</td><td>19</td></tr><tr><td>Apr-24</td><td>20</td></tr><tr><td>May-24</td><td>16</td></tr><tr><td>Jun-24</td><td>18</td></tr><tr><td>Jul-24</td><td>14</td></tr><tr><td>Aug-24</td><td>29</td></tr><tr><td>Sep-24</td><td>17</td></tr><tr><td>Oct-24</td><td>17</td></tr><tr><td>Nov-24</td><td>18</td></tr><tr><td>Dec-24</td><td>17</td></tr><tr><td>Jan-25</td><td>18</td></tr><tr><td>Feb-25</td><td>18</td></tr><tr><td>Mar-25</td><td>17</td></tr></tbody></table> Number E.Coli cases (SBU) Trajectory	Month	Number E.Coli cases (SBU)	Aug-23	27	Sep-23	23	Oct-23	11	Nov-23	32	Dec-23	12	Jan-24	19	Feb-24	17	Mar-24	19	Apr-24	20	May-24	16	Jun-24	18	Jul-24	14	Aug-24	29	Sep-24	17	Oct-24	17	Nov-24	18	Dec-24	17	Jan-25	18	Feb-25	18	Mar-25	17
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Healthcare Acquired Infections (HCAI)- S.aureus bacteraemia- <i>Number of laboratory confirmed S.aureus bacteraemias (MRSA & MSSA) cases</i>	- There were 14 cases of <i>Staph. aureus</i> bacteraemia in August 2024, of which 9 were hospital acquired and 5 were community acquired. - The Health Board total is currently above the Welsh Government Profile target of 6 cases for August 2024 Actions of Improvement; Each Service Group has developed detailed action plans which reinforce the quality and safety guidelines to support the reduction of Infection rates	Number of healthcare acquired S.aureus bacteraemia cases <table><caption>Number of healthcare acquired S.aureus bacteraemia cases (SBU)</caption><thead><tr><th>Month</th><th>Number of S.Aureus cases (SBU)</th></tr></thead><tbody><tr><td>Aug-23</td><td>10</td></tr><tr><td>Sep-23</td><td>10</td></tr><tr><td>Oct-23</td><td>10</td></tr><tr><td>Nov-23</td><td>14</td></tr><tr><td>Dec-23</td><td>18</td></tr><tr><td>Jan-24</td><td>11</td></tr><tr><td>Feb-24</td><td>8</td></tr><tr><td>Mar-24</td><td>8</td></tr><tr><td>Apr-24</td><td>13</td></tr><tr><td>May-24</td><td>7</td></tr><tr><td>Jun-24</td><td>7</td></tr><tr><td>Jul-24</td><td>12</td></tr><tr><td>Aug-24</td><td>14</td></tr><tr><td>Sep-24</td><td>6</td></tr><tr><td>Oct-24</td><td>6</td></tr><tr><td>Nov-24</td><td>6</td></tr><tr><td>Dec-24</td><td>6</td></tr><tr><td>Jan-25</td><td>5</td></tr><tr><td>Feb-25</td><td>5</td></tr><tr><td>Mar-25</td><td>5</td></tr></tbody></table> Number of S.Aureus cases (SBU) Trajectory	Month	Number of S.Aureus cases (SBU)	Aug-23	10	Sep-23	10	Oct-23	10	Nov-23	14	Dec-23	18	Jan-24	11	Feb-24	8	Mar-24	8	Apr-24	13	May-24	7	Jun-24	7	Jul-24	12	Aug-24	14	Sep-24	6	Oct-24	6	Nov-24	6	Dec-24	6	Jan-25	5	Feb-25	5	Mar-25	5
Month	Number of S.Aureus cases (SBU)																																											
Aug-23	10																																											
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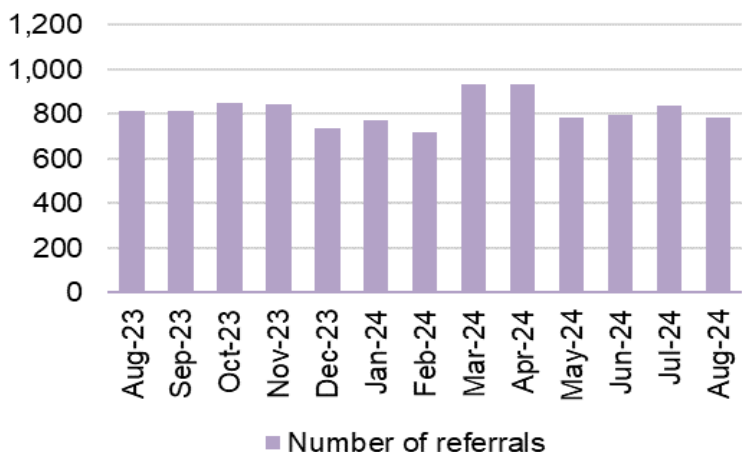
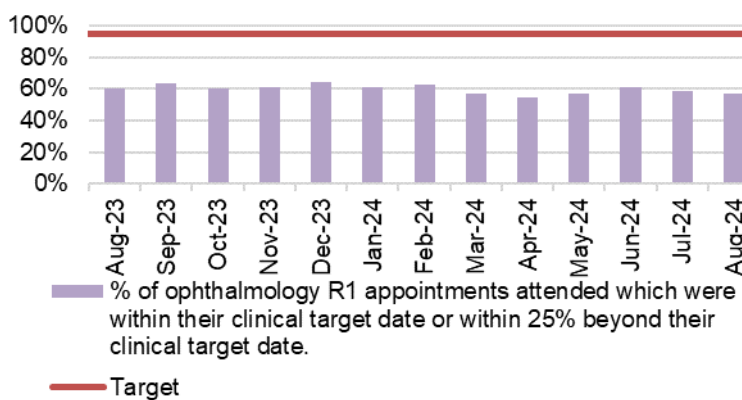
HEALTHCARE ACQUIRED INFECTIONS																																												
Description	Current Performance	Trend																																										
Healthcare Acquired Infections (HCAI)-<i>C.difficile</i>- <i>Number of laboratory confirmed C.difficile cases</i>	- There were 35 <i>Clostridium difficile</i> toxin positive cases in August 2024, of which 30 were hospital acquired and 5 were community acquired. - The Health Board total is currently above the Welsh Government Profile target of 8 cases for August 2024. Actions of Improvement; Each Service Group has developed detailed action plans which reinforce the quality and safety guidelines to support the reduction of Infection rates	Number of healthcare acquired C.difficile cases <table><thead><tr><th>Month</th><th>Number of C.diff cases (SBU)</th></tr></thead><tbody><tr><td>Aug-23</td><td>17</td></tr><tr><td>Sep-23</td><td>27</td></tr><tr><td>Oct-23</td><td>18</td></tr><tr><td>Nov-23</td><td>33</td></tr><tr><td>Dec-23</td><td>21</td></tr><tr><td>Jan-24</td><td>22</td></tr><tr><td>Feb-24</td><td>20</td></tr><tr><td>Mar-24</td><td>22</td></tr><tr><td>Apr-24</td><td>20</td></tr><tr><td>May-24</td><td>19</td></tr><tr><td>Jun-24</td><td>22</td></tr><tr><td>Jul-24</td><td>14</td></tr><tr><td>Aug-24</td><td>35</td></tr><tr><td>Sep-24</td><td>8</td></tr><tr><td>Oct-24</td><td>7</td></tr><tr><td>Nov-24</td><td>7</td></tr><tr><td>Dec-24</td><td>7</td></tr><tr><td>Jan-25</td><td>7</td></tr><tr><td>Feb-25</td><td>7</td></tr><tr><td>Mar-25</td><td>6</td></tr></tbody></table> Number of C.diff cases (SBU) Trajectory	Month	Number of C.diff cases (SBU)	Aug-23	17	Sep-23	27	Oct-23	18	Nov-23	33	Dec-23	21	Jan-24	22	Feb-24	20	Mar-24	22	Apr-24	20	May-24	19	Jun-24	22	Jul-24	14	Aug-24	35	Sep-24	8	Oct-24	7	Nov-24	7	Dec-24	7	Jan-25	7	Feb-25	7	Mar-25	6
Month	Number of C.diff cases (SBU)																																											
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Feb-25	7																																											
Mar-25	6																																											
Healthcare Acquired Infections (HCAI)-<i>Klebsiella sp</i>- <i>Number of laboratory confirmed Klebsiella sp cases</i>	- There were 12 cases of <i>Klebsiella sp</i> in August 2024, of which 9 were hospital acquired and 3 were community acquired. - The Health Board total is currently above the Welsh Government Profile target of 7 cases for August 2024. Actions of Improvement; Each Service Group has developed detailed action plans which reinforce the quality and safety guidelines to support the reduction of Infection rates	Number of healthcare acquired Klebsiella cases <table><thead><tr><th>Month</th><th>Number of Klebsiella cases (SBU)</th></tr></thead><tbody><tr><td>Aug-23</td><td>10</td></tr><tr><td>Sep-23</td><td>12</td></tr><tr><td>Oct-23</td><td>6</td></tr><tr><td>Nov-23</td><td>8</td></tr><tr><td>Dec-23</td><td>6</td></tr><tr><td>Jan-24</td><td>11</td></tr><tr><td>Feb-24</td><td>9</td></tr><tr><td>Mar-24</td><td>5</td></tr><tr><td>Apr-24</td><td>10</td></tr><tr><td>May-24</td><td>11</td></tr><tr><td>Jun-24</td><td>13</td></tr><tr><td>Jul-24</td><td>8</td></tr><tr><td>Aug-24</td><td>12</td></tr><tr><td>Sep-24</td><td>7</td></tr><tr><td>Oct-24</td><td>6</td></tr><tr><td>Nov-24</td><td>4</td></tr><tr><td>Dec-24</td><td>5</td></tr><tr><td>Jan-25</td><td>5</td></tr><tr><td>Feb-25</td><td>5</td></tr><tr><td>Mar-25</td><td>4</td></tr></tbody></table> Number of Klebsiella cases (SBU) Trajectory	Month	Number of Klebsiella cases (SBU)	Aug-23	10	Sep-23	12	Oct-23	6	Nov-23	8	Dec-23	6	Jan-24	11	Feb-24	9	Mar-24	5	Apr-24	10	May-24	11	Jun-24	13	Jul-24	8	Aug-24	12	Sep-24	7	Oct-24	6	Nov-24	4	Dec-24	5	Jan-25	5	Feb-25	5	Mar-25	4
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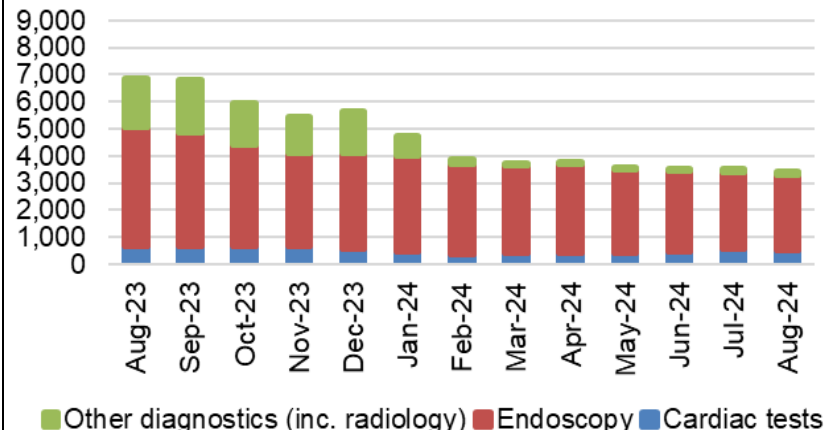
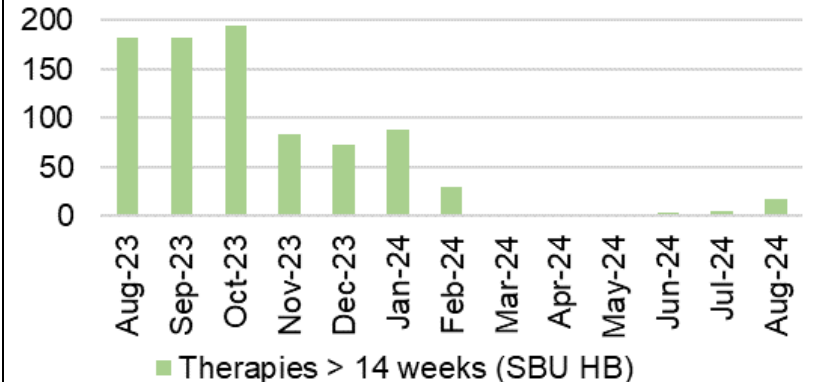
HEALTHCARE ACQUIRED INFECTIONS																																																																	
Description	Current Performance	Trend																																																															
Healthcare Acquired Infections (HCAI)- Aeruginosa- <i>Number of laboratory confirmed Aeruginosa cases</i>	- There were 3 cases of <i>P.Aeruginosa</i> reported in August 2024. - The Health Board total is currently above the Welsh Government Profile target of 2 cases for August 2024. Actions of Improvement; Each Service Group has developed detailed action plans which reinforce the quality and safety guidelines to support the reduction of Infection rates	Number of healthcare acquired Pseudomonas cases <table border="1"> <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>Aug-23</td><td>1</td><td></td></tr> <tr><td>Sep-23</td><td>2</td><td></td></tr> <tr><td>Oct-23</td><td>2</td><td></td></tr> <tr><td>Nov-23</td><td>2</td><td></td></tr> <tr><td>Dec-23</td><td>3</td><td></td></tr> <tr><td>Jan-24</td><td>2</td><td></td></tr> <tr><td>Feb-24</td><td></td><td></td></tr> <tr><td>Mar-24</td><td></td><td></td></tr> <tr><td>Apr-24</td><td></td><td>3</td></tr> <tr><td>May-24</td><td></td><td>0</td></tr> <tr><td>Jun-24</td><td></td><td>2</td></tr> <tr><td>Jul-24</td><td>1</td><td>1</td></tr> <tr><td>Aug-24</td><td>3</td><td>2</td></tr> <tr><td>Sep-24</td><td></td><td>2</td></tr> <tr><td>Oct-24</td><td></td><td>2</td></tr> <tr><td>Nov-24</td><td></td><td>2</td></tr> <tr><td>Dec-24</td><td></td><td>1</td></tr> <tr><td>Jan-25</td><td></td><td>1</td></tr> <tr><td>Feb-25</td><td></td><td>2</td></tr> <tr><td>Mar-25</td><td></td><td>3</td></tr> </tbody> </table> ■ Number of Pseudomonas cases (SBU) — Trajectory	Month	Number of Pseudomonas cases (SBU)	Trajectory	Aug-23	1		Sep-23	2		Oct-23	2		Nov-23	2		Dec-23	3		Jan-24	2		Feb-24			Mar-24			Apr-24		3	May-24		0	Jun-24		2	Jul-24	1	1	Aug-24	3	2	Sep-24		2	Oct-24		2	Nov-24		2	Dec-24		1	Jan-25		1	Feb-25		2	Mar-25		3
Month	Number of Pseudomonas cases (SBU)	Trajectory																																																															
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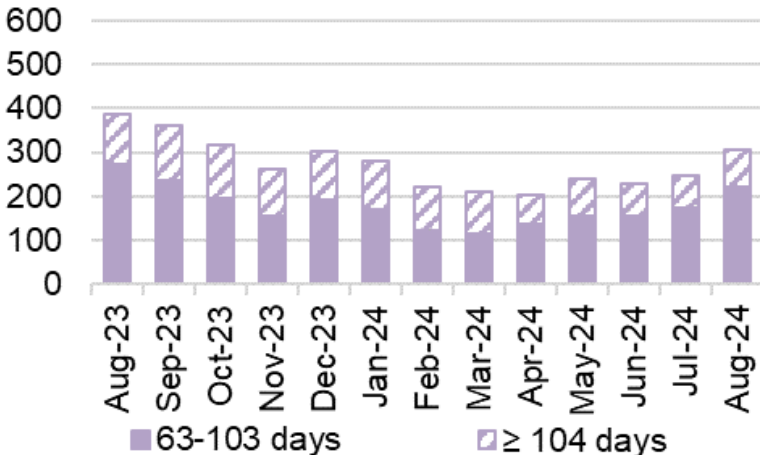
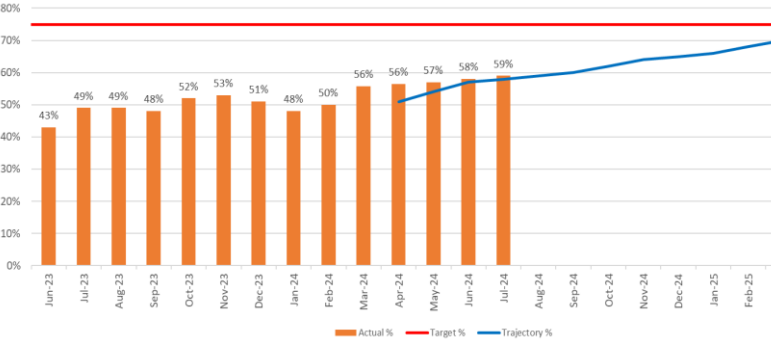
PLANNED CARE		
Description	Current Performance	Actions of Improvement
Referrals and shape of the waiting list 1. GP Referrals <i>The number of Stage 1 additions per week</i> 2. Stage 1 additions <i>The number of new patients that have been added to the outpatient waiting list</i> 3. Outpatient activity undertaken <i>Total number of patients seen each month</i> 4. Size of the waiting list <i>Total number of patients on the waiting list by stage as at August 2024.</i>	In August 2024, there were 12,326 referrals received. This is lower than the number that was received in July 2024 (14,282). Chart 4 shows the shape of the current waiting list and Chart 3 shows the outpatient activity undertaken over the last year. Trend 1. Number of GP referrals received by SBU Health Board  2. Number of stage 1 additions per week  3. Outpatient activity undertaken  4. Total size of the waiting list (August 2024) 	The number of referrals received has remained steady in recent months and is now showing a consistent pattern of demand. December is always seasonally low

PLANNED CARE		
Description	Current Performance	Actions of Improvement
Outpatient waiting times 1. Number of patients waiting more than 26 weeks for an outpatient appointment (stage 1)- Health Board Total 2. Number of patients waiting more than 26 weeks for an outpatient appointment (stage 1)- Hospital Level 3. Patients waiting over 26 weeks for an outpatient appointment by specialty 4. Percentage of patients waiting less than 26 weeks	The number of patients waiting over 26 weeks for a first outpatient appointment is still a challenge. August 2024 saw an in-month increase of 9% in the number of patients waiting over 26 weeks for an outpatient appointment. The number of breaches increased from 14,392 in July 2024. Ophthalmology has the largest proportion of patients waiting over 26 weeks for an outpatient appointment, followed by ENT and Orthopaedics. Chart 4 shows that the number of patients waiting less than 26 weeks for an outpatient appointment, this figure has decreased to 59.5%.	Service Group specific delivery trajectories have been developed to further support recovery and these are monitored by the Chief Operating Officer to ensure core capacity maximisation.
	Trend 1. Number of stage 1 over 26 weeks- HB total ■ Outpatients > 26 wks (SB UHB) 2. Number of stage 1 over 26 weeks- Hospital level — Morriston — Singleton — PCT — NPTH 3. Patients waiting over 26 weeks for an outpatient appointment by specialty as at August 2024 ■ Patients waiting over 26 weeks (SB UHB) 4. Percentage of patient waiting less than 26 weeks ■ % waiting < 26 wks (SBU HB)	

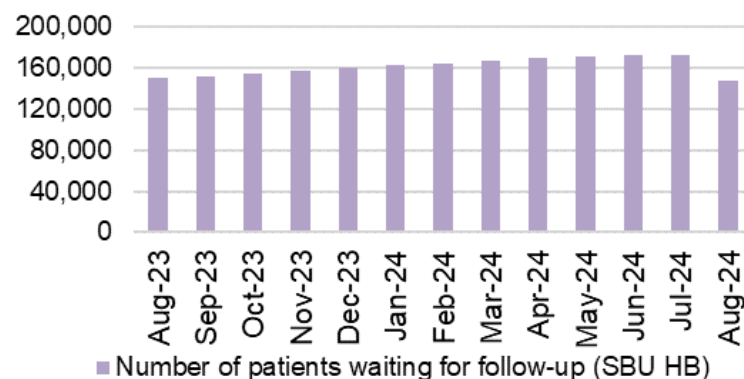
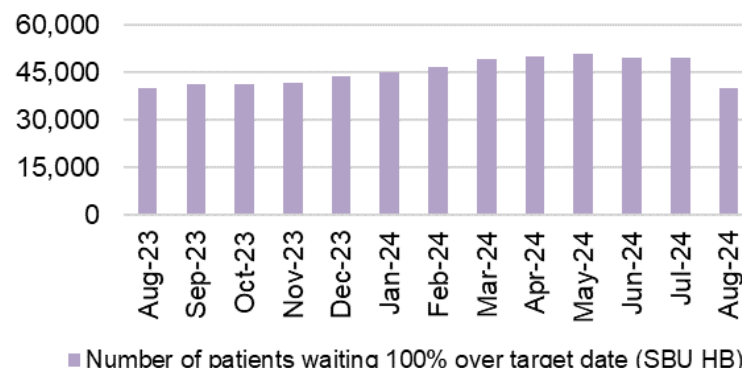
PLANNED CARE		
Description	Current Performance	Actions of Improvement
Patients waiting over 36 weeks for treatment 1. Number of patients waiting more than 36 weeks for treatment and the number of elective patients admitted for treatment- Health Board Total 2. Number of patients waiting more than 52 weeks for treatment at Stage 1 3. Number of elective admissions 4. Number of patients waiting more than 104 weeks for treatment	In August 2024, there were 8,015 patients waiting over 36 weeks at Stage 1, which is a 9% in-month increase from July 2024. 13,905 patients were waiting over 52 weeks at all stages in August 2024. In August 2024, there were 1,278 patients waiting over 104 weeks for treatment, which is a 0.5% reduction from July 2024.	Focus is now on reducing the numbers of longest waiting patients and improving the productivity and efficiency of existing theatres to increase capacity within existing resources. There were zero 4 year breaches and zero > 3 year breaches at the end of August 2024 as per plan.
	Trend	
	1. Number of patients waiting over 36 weeks at Stage 1- HB total  ■ Outpatients >36 wks (SB UHB)	2. Number of patients waiting over 52 weeks at Stage 1- HB total  ■ Outpatients >52 wks (SB UHB) — Trajectory
	3. Number of elective admissions  — Admitted elective patients	4. Number of patients waiting over 104 weeks- HB total  ■ > 104 weeks — Trajectory

PLANNED CARE																														
Description	Current Performance																													
Ophthalmology Referrals <i>Number of patients referred into secondary care Ophthalmology services</i>	In August 2024, there were 785 patients referred from Primary Care into secondary care ophthalmology services. This is a reduction on the number of patients referred in July 2024, which was 838.	Number of referrals into secondary care Ophthalmology service  <table><tr><th>Month</th><th>Number of referrals</th></tr><tr><td>Aug-23</td><td>820</td></tr><tr><td>Sep-23</td><td>810</td></tr><tr><td>Oct-23</td><td>850</td></tr><tr><td>Nov-23</td><td>840</td></tr><tr><td>Dec-23</td><td>750</td></tr><tr><td>Jan-24</td><td>780</td></tr><tr><td>Feb-24</td><td>720</td></tr><tr><td>Mar-24</td><td>920</td></tr><tr><td>Apr-24</td><td>930</td></tr><tr><td>May-24</td><td>790</td></tr><tr><td>Jun-24</td><td>800</td></tr><tr><td>Jul-24</td><td>840</td></tr><tr><td>Aug-24</td><td>785</td></tr></table> ■ Number of referrals	Month	Number of referrals	Aug-23	820	Sep-23	810	Oct-23	850	Nov-23	840	Dec-23	750	Jan-24	780	Feb-24	720	Mar-24	920	Apr-24	930	May-24	790	Jun-24	800	Jul-24	840	Aug-24	785
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Jun-24	800																													
Jul-24	840																													
Aug-24	785																													
Ophthalmology waiting times <i>Percentage of ophthalmology R1 appointments attended which were within their clinical target date or within 25% in excess of their clinical target</i>	In August 2024, 56.8% of Ophthalmology R1 appointments attended were within their clinical target date or within 25% of the target date. Actions of Improvement; 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	Percentage of ophthalmology R1 appointments attended which were within their clinical target date or within 25% in excess of their clinical target date  <table><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></tr><tr><td>Aug-23</td><td>60%</td></tr><tr><td>Sep-23</td><td>62%</td></tr><tr><td>Oct-23</td><td>60%</td></tr><tr><td>Nov-23</td><td>60%</td></tr><tr><td>Dec-23</td><td>62%</td></tr><tr><td>Jan-24</td><td>60%</td></tr><tr><td>Feb-24</td><td>62%</td></tr><tr><td>Mar-24</td><td>58%</td></tr><tr><td>Apr-24</td><td>55%</td></tr><tr><td>May-24</td><td>58%</td></tr><tr><td>Jun-24</td><td>60%</td></tr><tr><td>Jul-24</td><td>58%</td></tr><tr><td>Aug-24</td><td>56.8%</td></tr></table> ■ % of ophthalmology R1 appointments attended which were within their clinical target date or within 25% beyond their clinical target date. — Target	Month	% of ophthalmology R1 appointments attended which were within their clinical target date or within 25% beyond their clinical target date.	Aug-23	60%	Sep-23	62%	Oct-23	60%	Nov-23	60%	Dec-23	62%	Jan-24	60%	Feb-24	62%	Mar-24	58%	Apr-24	55%	May-24	58%	Jun-24	60%	Jul-24	58%	Aug-24	56.8%
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PLANNED CARE																																																										
Description	Current Performance	Trend																																																								
Diagnostics waiting times <i>The number of patients waiting more than 8 weeks for specified diagnostics</i>	In August there was a reduction in the number of patients waiting over 8 weeks for specified diagnostics. It decreased from 3,490 in July 2024 to 3,425 in August 2024. The following is a breakdown for the 8-week breaches by diagnostic test for August 2024: - Endoscopy= 2,756 - Cardiac tests= 555 - Other Diagnostics = 114 Actions of Improvement; Demand and capacity work has enabled significant improvement in access times for non-endoscopic diagnostics. Detailed demand and capacity model for endoscopy has been commissioned to ensure sustained improvement across all aspects of endoscopic diagnostics.	Number of patients waiting longer than 8 weeks for Diagnostics  <table><caption>Number of patients waiting longer than 8 weeks for Diagnostics</caption><thead><tr><th>Month</th><th>Other diagnostics (inc. radiology)</th><th>Endoscopy</th><th>Cardiac tests</th></tr></thead><tbody><tr><td>Aug-23</td><td>2,000</td><td>4,500</td><td>500</td></tr><tr><td>Sep-23</td><td>2,000</td><td>4,500</td><td>500</td></tr><tr><td>Oct-23</td><td>1,800</td><td>4,000</td><td>500</td></tr><tr><td>Nov-23</td><td>1,500</td><td>3,500</td><td>500</td></tr><tr><td>Dec-23</td><td>1,800</td><td>3,800</td><td>500</td></tr><tr><td>Jan-24</td><td>1,200</td><td>3,500</td><td>500</td></tr><tr><td>Feb-24</td><td>1,000</td><td>3,200</td><td>500</td></tr><tr><td>Mar-24</td><td>1,000</td><td>3,000</td><td>500</td></tr><tr><td>Apr-24</td><td>1,000</td><td>2,800</td><td>500</td></tr><tr><td>May-24</td><td>1,000</td><td>2,500</td><td>500</td></tr><tr><td>Jun-24</td><td>1,000</td><td>2,500</td><td>500</td></tr><tr><td>Jul-24</td><td>1,000</td><td>2,500</td><td>500</td></tr><tr><td>Aug-24</td><td>1,000</td><td>2,425</td><td>500</td></tr></tbody></table> ■ Other diagnostics (inc. radiology) ■ Endoscopy ■ Cardiac tests	Month	Other diagnostics (inc. radiology)	Endoscopy	Cardiac tests	Aug-23	2,000	4,500	500	Sep-23	2,000	4,500	500	Oct-23	1,800	4,000	500	Nov-23	1,500	3,500	500	Dec-23	1,800	3,800	500	Jan-24	1,200	3,500	500	Feb-24	1,000	3,200	500	Mar-24	1,000	3,000	500	Apr-24	1,000	2,800	500	May-24	1,000	2,500	500	Jun-24	1,000	2,500	500	Jul-24	1,000	2,500	500	Aug-24	1,000	2,425	500
	Month	Other diagnostics (inc. radiology)	Endoscopy	Cardiac tests																																																						
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Nov-23	1,500	3,500	500																																																							
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Jan-24	1,200	3,500	500																																																							
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Jul-24	1,000	2,500	500																																																							
Aug-24	1,000	2,425	500																																																							
Therapy waiting times <i>The number of patients waiting more than 14 weeks for specified therapies</i>	In August 2024, there were 17 patients waiting over 14 weeks for specified Therapies, which is 12 more than seen in July 2024. All 17 breaches were attributed to Dietetics.	Number of patients waiting longer than 14 weeks for therapies  <table><caption>Number of patients waiting longer than 14 weeks for therapies</caption><thead><tr><th>Month</th><th>Therapies > 14 weeks (SBU HB)</th></tr></thead><tbody><tr><td>Aug-23</td><td>180</td></tr><tr><td>Sep-23</td><td>180</td></tr><tr><td>Oct-23</td><td>190</td></tr><tr><td>Nov-23</td><td>80</td></tr><tr><td>Dec-23</td><td>70</td></tr><tr><td>Jan-24</td><td>85</td></tr><tr><td>Feb-24</td><td>30</td></tr><tr><td>Mar-24</td><td>0</td></tr><tr><td>Apr-24</td><td>0</td></tr><tr><td>May-24</td><td>0</td></tr><tr><td>Jun-24</td><td>0</td></tr><tr><td>Jul-24</td><td>5</td></tr><tr><td>Aug-24</td><td>17</td></tr></tbody></table> ■ Therapies > 14 weeks (SBU HB)	Month	Therapies > 14 weeks (SBU HB)	Aug-23	180	Sep-23	180	Oct-23	190	Nov-23	80	Dec-23	70	Jan-24	85	Feb-24	30	Mar-24	0	Apr-24	0	May-24	0	Jun-24	0	Jul-24	5	Aug-24	17																												
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Jul-24	5																																																									
Aug-24	17																																																									

CANCER				
Description	Current Performance		Trend	
Single Cancer Pathway backlog <i>The number of patients with an active wait status of more than 63 days</i>	Early September 2024 backlog by tumour site:		Number of patients with a wait status of more than 62 days 	
	Tumour Site	63 - 103 days		≥104 days
	Acute Leukaemia	0		0
	Brain/CNS	0		0
	Breast	5		2
	Children's cancer	0		0
	Gynaecological	26		12
	Haematological	4		3
	Head and neck	12		6
	Lower GI (Exl. BSW)	31		9
	BSW	13		16
	Lung	14		8
	Other	1		0
	Sarcoma	2		0
	Skin(c)	70		5
	Upper Gastrointestinal	14		9
Urological	29	14		
Grand Total	221	84		
Single Cancer Pathway backlog-patients waiting over 63 days	July 2024 saw a reduction in the number of patients waiting over 63 days. The following actions have been outlined to support backlog reduction;		Percentage of patients starting first definitive cancer treatment within 62 days from point of suspicion 	
	- Targeted work is underway to prioritise patients waiting >104 days - Milestone targets for OP access (10 days) and Decision to Treat (31 days) have also been set to reduce overall pathway waits. - Tumour site specific plans have been developed and will be enacted through TI governance. Note: backlog increased in May 2024 to reflect new reporting requirements for Bowel Screening Wales patients			

CANCER																																																		
Description	Current Performance	Trend																																																
USC First Outpatient Appointments <i>The number of patients at first outpatient appointment stage by days waiting</i>	Early September 2024 figures show total wait volumes for first outpatient appointment have decreased by 20% when compared with the previous week.	The number of patients waiting for a first outpatient appointment (by total days waiting) – Early September 2024 <table><tr><th>FIRST OPA</th><th>25-Aug</th><th>01-Sep</th></tr><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>10</td><td>2</td></tr><tr><td>Children's Cancer</td><td>4</td><td>7</td></tr><tr><td>Gynaecological</td><td>60</td><td>42</td></tr><tr><td>Haematological</td><td>5</td><td>5</td></tr><tr><td>Head and Neck</td><td>73</td><td>54</td></tr><tr><td>Lower GI</td><td>54</td><td>50</td></tr><tr><td>Lung</td><td>6</td><td>2</td></tr><tr><td>Other</td><td>249</td><td>149</td></tr><tr><td>Sarcoma</td><td>0</td><td>0</td></tr><tr><td>Skin</td><td>484</td><td>462</td></tr><tr><td>Upper GI</td><td>33</td><td>3</td></tr><tr><td>Urological</td><td>27</td><td>29</td></tr><tr><td></td><td>1005</td><td>805</td></tr></table>	FIRST OPA	25-Aug	01-Sep	Acute Leukaemia	0	0	Brain/CNS	0	0	Breast	10	2	Children's Cancer	4	7	Gynaecological	60	42	Haematological	5	5	Head and Neck	73	54	Lower GI	54	50	Lung	6	2	Other	249	149	Sarcoma	0	0	Skin	484	462	Upper GI	33	3	Urological	27	29		1005	805
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	Of the total number of patients awaiting a first outpatient appointment, 29% have been booked, which is lower than figures seen in the previous months' performance.																																																	
Radiotherapy waiting times <i>The percentage of patients receiving radiotherapy treatment</i>	Radiotherapy waiting times continue to be a challenge, with only the 7 day Elective Delay target being met in August 24.	Radiotherapy waiting times <table><tr><th>Measure</th><th>Target</th><th>August-24</th></tr><tr><td>Scheduled (14 Day Target)</td><td>80%</td><td>10%</td></tr><tr><td>Scheduled (21 Day Target)</td><td>100%</td><td>55%</td></tr><tr><td>Urgent SC (2 Day Target)</td><td>80%</td><td>30%</td></tr><tr><td>Urgent SC (7 Day Target)</td><td>100%</td><td>70%</td></tr><tr><td>Emergency (within 1 day)</td><td>80%</td><td>67%</td></tr><tr><td>Emergency (within 2 days)</td><td>100%</td><td>92%</td></tr><tr><td>Elective Delay (7 Day Target)</td><td>80%</td><td>94%</td></tr><tr><td>Elective Delay (14 Day Target)</td><td>100%</td><td>98%</td></tr></table>	Measure	Target	August-24	Scheduled (14 Day Target)	80%	10%	Scheduled (21 Day Target)	100%	55%	Urgent SC (2 Day Target)	80%	30%	Urgent SC (7 Day Target)	100%	70%	Emergency (within 1 day)	80%	67%	Emergency (within 2 days)	100%	92%	Elective Delay (7 Day Target)	80%	94%	Elective Delay (14 Day Target)	100%	98%																					
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FOLLOW-UP APPOINTMENTS																														
Description	Current Performance	Trend																												
Follow-up appointments <i>1. The total number of patients on the follow-up waiting list</i> <i>2. The number of patients waiting 100% over target for a follow-up appointment</i>	In August 2024, there was a total of 147,509 patients waiting for a follow up outpatient appointment.	1. Total number of patients waiting for a follow-up  <table><caption>1. Total number of patients waiting for follow-up (SBU HB)</caption><thead><tr><th>Month</th><th>Number of patients</th></tr></thead><tbody><tr><td>Aug-23</td><td>150,000</td></tr><tr><td>Sep-23</td><td>150,000</td></tr><tr><td>Oct-23</td><td>150,000</td></tr><tr><td>Nov-23</td><td>150,000</td></tr><tr><td>Dec-23</td><td>150,000</td></tr><tr><td>Jan-24</td><td>150,000</td></tr><tr><td>Feb-24</td><td>150,000</td></tr><tr><td>Mar-24</td><td>150,000</td></tr><tr><td>Apr-24</td><td>150,000</td></tr><tr><td>May-24</td><td>150,000</td></tr><tr><td>Jun-24</td><td>150,000</td></tr><tr><td>Jul-24</td><td>150,000</td></tr><tr><td>Aug-24</td><td>140,000</td></tr></tbody></table>	Month	Number of patients	Aug-23	150,000	Sep-23	150,000	Oct-23	150,000	Nov-23	150,000	Dec-23	150,000	Jan-24	150,000	Feb-24	150,000	Mar-24	150,000	Apr-24	150,000	May-24	150,000	Jun-24	150,000	Jul-24	150,000	Aug-24	140,000
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There was a total of 67,051 patients waiting for a follow-up past their target date in August 2024.																														
Of the 67,051 delayed follow-ups in August 2024, 13,072 had appointment dates and 53,979 were still waiting for an appointment.																														
In addition, 39,908 patients were waiting 100%+ over target date in August 2024.																														
Figures have reduced in August 2024 due to a change in reporting where some specialties are excluded from monitoring going forward. Future trends will be assessed from the August 2024 position.	2. Delayed follow-ups: Number of patients waiting 100% over target  <table><caption>2. Delayed follow-ups: Number of patients waiting 100% over target date (SBU HB)</caption><thead><tr><th>Month</th><th>Number of patients</th></tr></thead><tbody><tr><td>Aug-23</td><td>40,000</td></tr><tr><td>Sep-23</td><td>40,000</td></tr><tr><td>Oct-23</td><td>40,000</td></tr><tr><td>Nov-23</td><td>40,000</td></tr><tr><td>Dec-23</td><td>40,000</td></tr><tr><td>Jan-24</td><td>40,000</td></tr><tr><td>Feb-24</td><td>40,000</td></tr><tr><td>Mar-24</td><td>40,000</td></tr><tr><td>Apr-24</td><td>40,000</td></tr><tr><td>May-24</td><td>40,000</td></tr><tr><td>Jun-24</td><td>40,000</td></tr><tr><td>Jul-24</td><td>40,000</td></tr><tr><td>Aug-24</td><td>40,000</td></tr></tbody></table>	Month	Number of patients	Aug-23	40,000	Sep-23	40,000	Oct-23	40,000	Nov-23	40,000	Dec-23	40,000	Jan-24	40,000	Feb-24	40,000	Mar-24	40,000	Apr-24	40,000	May-24	40,000	Jun-24	40,000	Jul-24	40,000	Aug-24	40,000	
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Jul-24	40,000																													
Aug-24	40,000																													

STROKE																														
Description	Current Performance	Trend																												
Stroke Measures																														
1. % of patients who have a direct admission to an acute stroke unit within 4 hours	1. In August 2024, 20% of patients had a direct admission to an acute stroke unit within 4 hours. This is an improvement on the performance reported in July 2024.	1. % of patients who have a direct admission to an acute stroke unit within 4 hours <table><caption>% 4 hour admissions (Morr)</caption><thead><tr><th>Month</th><th>%</th></tr></thead><tbody><tr><td>Aug-23</td><td>20%</td></tr><tr><td>Sep-23</td><td>20%</td></tr><tr><td>Oct-23</td><td>30%</td></tr><tr><td>Nov-23</td><td>20%</td></tr><tr><td>Dec-23</td><td>10%</td></tr><tr><td>Jan-24</td><td>10%</td></tr><tr><td>Feb-24</td><td>10%</td></tr><tr><td>Mar-24</td><td>35%</td></tr><tr><td>Apr-24</td><td>25%</td></tr><tr><td>May-24</td><td>30%</td></tr><tr><td>Jun-24</td><td>20%</td></tr><tr><td>Jul-24</td><td>5%</td></tr><tr><td>Aug-24</td><td>20%</td></tr></tbody></table>	Month	%	Aug-23	20%	Sep-23	20%	Oct-23	30%	Nov-23	20%	Dec-23	10%	Jan-24	10%	Feb-24	10%	Mar-24	35%	Apr-24	25%	May-24	30%	Jun-24	20%	Jul-24	5%	Aug-24	20%
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2. % of patients who received a CT Scan within 1 hour	2. In August 2024, 29% of patients received a CT scan within 1 hour of being admitted, this is a deterioration on the figure reported in July 2024.	2. % of patients who received a CT Scan within 1 hour <table><caption>% 1 hr CT Scan (Morr)</caption><thead><tr><th>Month</th><th>%</th></tr></thead><tbody><tr><td>Aug-23</td><td>30%</td></tr><tr><td>Sep-23</td><td>55%</td></tr><tr><td>Oct-23</td><td>20%</td></tr><tr><td>Nov-23</td><td>30%</td></tr><tr><td>Dec-23</td><td>50%</td></tr><tr><td>Jan-24</td><td>55%</td></tr><tr><td>Feb-24</td><td>45%</td></tr><tr><td>Mar-24</td><td>40%</td></tr><tr><td>Apr-24</td><td>45%</td></tr><tr><td>May-24</td><td>50%</td></tr><tr><td>Jun-24</td><td>45%</td></tr><tr><td>Jul-24</td><td>50%</td></tr><tr><td>Aug-24</td><td>25%</td></tr></tbody></table>	Month	%	Aug-23	30%	Sep-23	55%	Oct-23	20%	Nov-23	30%	Dec-23	50%	Jan-24	55%	Feb-24	45%	Mar-24	40%	Apr-24	45%	May-24	50%	Jun-24	45%	Jul-24	50%	Aug-24	25%
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3. % of patients who are assessed by a stroke specialist consultant physician within 24 hours	3. 84.5% of patients were assessed by a stroke specialist consultant physician within 24 hours in August 2024, which is an increase of 3.4% from July 2024.	3. % of patients who are assessed by a stroke specialist consultant physician within 24 hours <table><caption>% assess within 24 hrs (Morr)</caption><thead><tr><th>Month</th><th>%</th></tr></thead><tbody><tr><td>Aug-23</td><td>95%</td></tr><tr><td>Sep-23</td><td>85%</td></tr><tr><td>Oct-23</td><td>90%</td></tr><tr><td>Nov-23</td><td>90%</td></tr><tr><td>Dec-23</td><td>85%</td></tr><tr><td>Jan-24</td><td>90%</td></tr><tr><td>Feb-24</td><td>90%</td></tr><tr><td>Mar-24</td><td>90%</td></tr><tr><td>Apr-24</td><td>90%</td></tr><tr><td>May-24</td><td>85%</td></tr><tr><td>Jun-24</td><td>85%</td></tr><tr><td>Jul-24</td><td>80%</td></tr><tr><td>Aug-24</td><td>84.5%</td></tr></tbody></table>	Month	%	Aug-23	95%	Sep-23	85%	Oct-23	90%	Nov-23	90%	Dec-23	85%	Jan-24	90%	Feb-24	90%	Mar-24	90%	Apr-24	90%	May-24	85%	Jun-24	85%	Jul-24	80%	Aug-24	84.5%
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4. % of thrombolysed stroke patients with a door to door needle time of less than or equal to 45 minutes	4. In August 2024, 0% of patients were thrombolysed in a time of less than or equal to 45 minutes.	4. % of thrombolysed stroke patients with a door to door needle time of less than or equal to 45 minutes <table><caption>45 mins thrombosis (Morr)</caption><thead><tr><th>Month</th><th>%</th></tr></thead><tbody><tr><td>Aug-23</td><td>75%</td></tr><tr><td>Sep-23</td><td>0%</td></tr><tr><td>Oct-23</td><td>0%</td></tr><tr><td>Nov-23</td><td>0%</td></tr><tr><td>Dec-23</td><td>0%</td></tr><tr><td>Jan-24</td><td>0%</td></tr><tr><td>Feb-24</td><td>5%</td></tr><tr><td>Mar-24</td><td>0%</td></tr><tr><td>Apr-24</td><td>0%</td></tr><tr><td>May-24</td><td>0%</td></tr><tr><td>Jun-24</td><td>0%</td></tr><tr><td>Jul-24</td><td>0%</td></tr><tr><td>Aug-24</td><td>65%</td></tr></tbody></table>	Month	%	Aug-23	75%	Sep-23	0%	Oct-23	0%	Nov-23	0%	Dec-23	0%	Jan-24	0%	Feb-24	5%	Mar-24	0%	Apr-24	0%	May-24	0%	Jun-24	0%	Jul-24	0%	Aug-24	65%
Month	%																													
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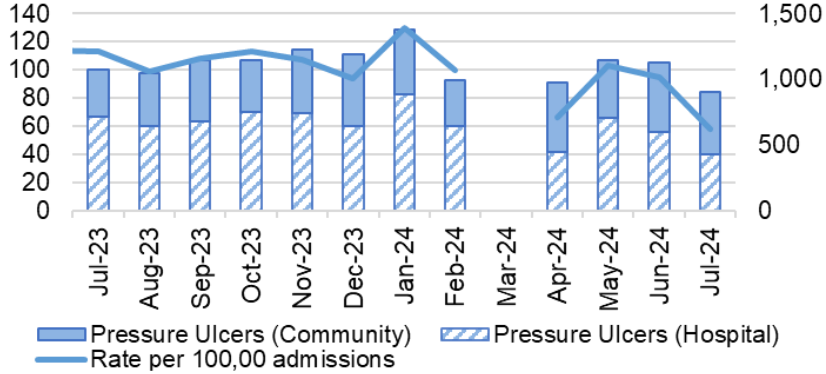
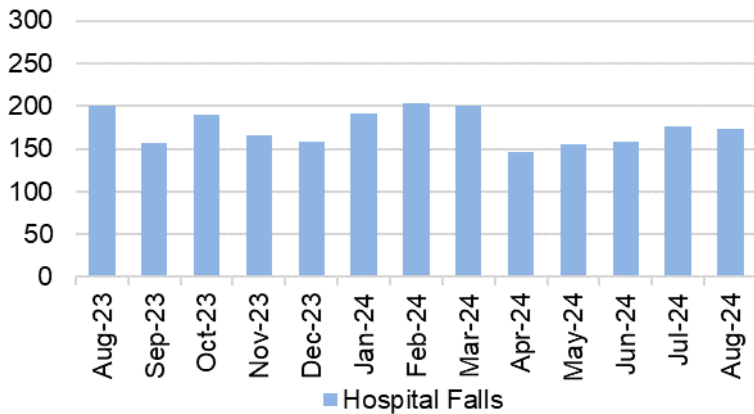
ADULT MENTAL HEALTH																																																																																																																																																																																															
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Adult Mental Health Measures: 1. % of MH assessments undertaken within 28 days from the date of receipt of referral (18 years and over) 2. % of therapeutic interventions started within 28 days following an assessment by LPMHSS (18 years and over) 3. % of health board residents in receipt of secondary mental health services who have a valid Care and Treatment Plan (CTP) (18 years and over) 4. % of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health	1. In August 2024, 95% of assessments were undertaken within 28 days of referral for patients 18 years and over. 2. In August 2024, the percentage of therapeutic interventions started within 28 days following an assessment by the Local Primary Mental Health Support Service (LPMHSS) was 100%. 3. 92% of residents in receipt of secondary care mental health services had a valid Care and Treatment Plan in August 2024. 4. In July 2024, 61% of patients waited less than 26 weeks for psychological therapy. This was below the national target of 95%.	1. % Mental Health assessments undertaken within 28 days from receipt of referral <table border="1"> <caption>Data for Chart 1: % Mental Health assessments undertaken within 28 days from receipt of referral</caption> <thead> <tr> <th>Month</th> <th>% assessments within 28 days (>18 yrs)</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>Aug-23</td><td>95%</td><td>75%</td></tr> <tr><td>Sep-23</td><td>95%</td><td>75%</td></tr> <tr><td>Oct-23</td><td>95%</td><td>75%</td></tr> <tr><td>Nov-23</td><td>95%</td><td>75%</td></tr> <tr><td>Dec-23</td><td>95%</td><td>75%</td></tr> <tr><td>Jan-24</td><td>95%</td><td>75%</td></tr> <tr><td>Feb-24</td><td>95%</td><td>75%</td></tr> <tr><td>Mar-24</td><td>95%</td><td>75%</td></tr> <tr><td>Apr-24</td><td>95%</td><td>75%</td></tr> <tr><td>May-24</td><td>85%</td><td>75%</td></tr> <tr><td>Jun-24</td><td>95%</td><td>75%</td></tr> <tr><td>Jul-24</td><td>95%</td><td>75%</td></tr> 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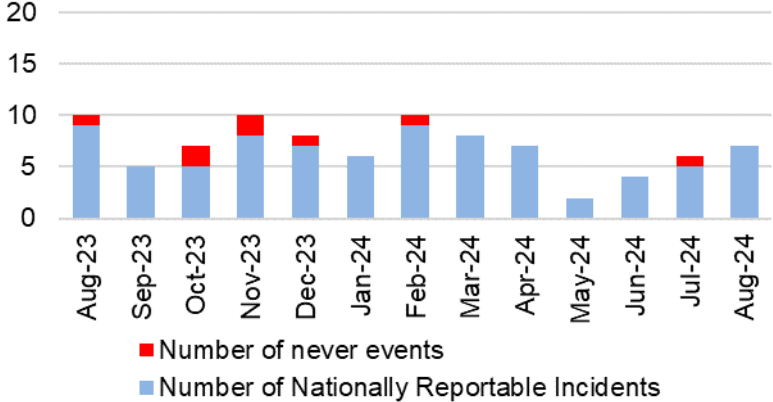
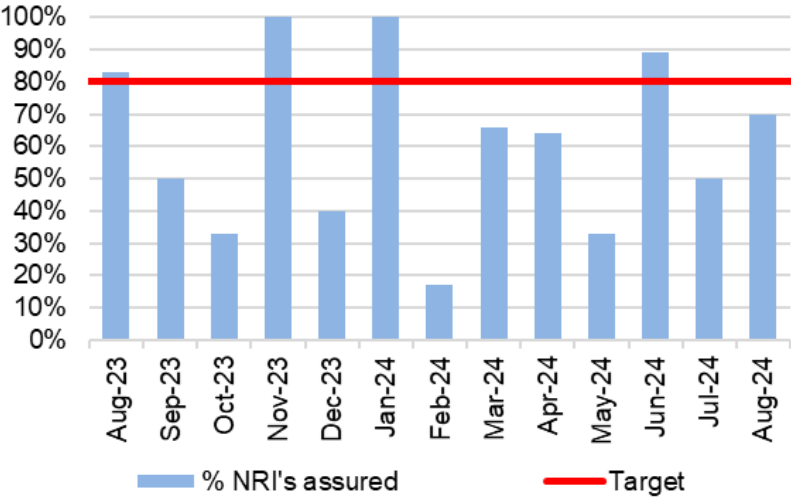
CHILD & ADOLESCENT MENTAL HEALTH (CAMHS)		
Description	Current Performance	Trend
1. Crisis - % Urgent Assessment by CAMHS undertaken within 48 Hours from receipt of referral	1. In August 2024, 100% of CAMHS patients received an assessment within 48 hours.	1. Crisis- assessment within 48 hours
2. Primary CAMHS (P-CAMHS) - % Routine Assessment by CAMHS undertaken within 28 days from receipt of referral	2. 84% of routine assessments were undertaken within 28 days from referral in August 2024 against a target of 80%.	2. and 3. P-CAMHS % assessments and therapeutic interventions within 28 days
3. Primary CAMHS (P-CAMHS) - % Therapeutic interventions started within 28 days following assessment by LPMHSS	3. 100% of therapeutic interventions were started within 28 days following assessment by LPMHSS in August 2024.	
4. NDD - % Neurodevelopmental Disorder patients receiving a Diagnostic Assessment within 26 weeks	4. 30% of NDD patients received a diagnostic assessment within 26 weeks in August 2024 against a target of 80%.	4. NDD- assessment within 26 weeks
5. Specialist CAMHS (S-CAMHS) - % Routine Assessment by SCAMHS undertaken within 28 days from receipt of referral	5. SCAMHS figures now included in illustration 2 and 3 combined. <i>*All routine assessments are now under PCAMHS*</i>	

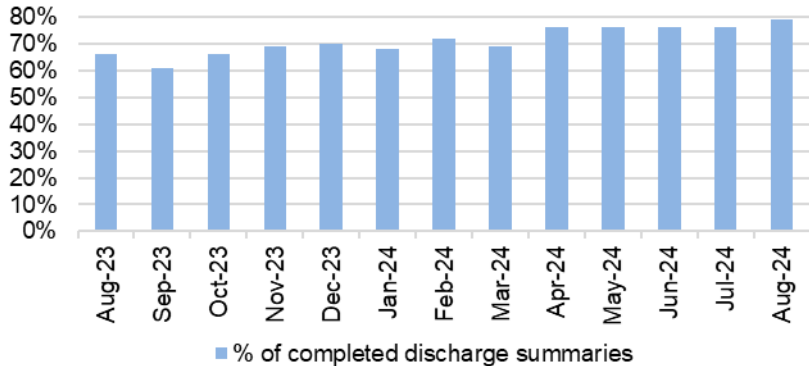
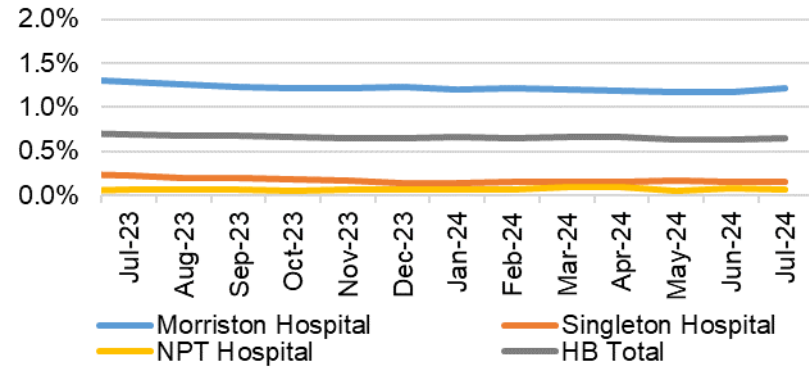
4. NHS DELIVERY FRAMEWORK MEASURES & MINISTERIAL PRIORITY TRAJECTORIES

FRACTURED NECK OF FEMUR (#NOF)		
Description	Current Performance	Trend
Fractured Neck of Femur (#NOF) 1. Prompt orthogeriatric assessment- % patients receiving an assessment by a senior geriatrician within 72 hours of presentation 2. Prompt surgery - % patients undergoing surgery the day following presentation with hip fracture 3. NICE compliant surgery - % of operations consistent with the recommendations of NICE CG124 4. Prompt mobilisation after surgery - % patients out of bed (standing or hoisted) by the day after operation	1. Prompt orthogeriatric assessment- In July 2024, 97.5% of patients in Morriston hospital received an assessment by a senior geriatrician within 72 hours.	1. Prompt orthogeriatric assessment
	2. Prompt surgery- In July 2024, 30.7% of patients had surgery the day following presentation with a hip fracture. This is a 0.9% deterioration from July 2023 which was 31.6%.	2. Prompt surgery
	3. NICE compliant surgery- 70.0% of operations were consistent with the NICE recommendations in July 2024. This is 2.9% less than in July 2023.	3. NICE compliant Surgery
	4. Prompt mobilisation- In July 2024, 85.4% of patients were out of bed the day after surgery. This is 4% more than in July 2023.	4. Prompt mobilisation

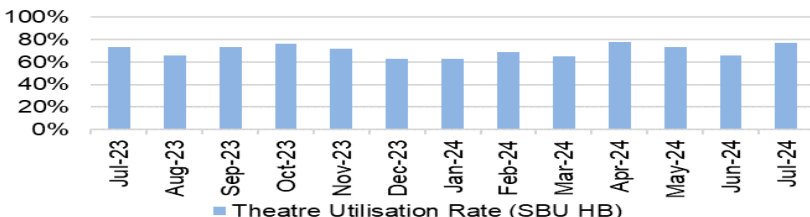
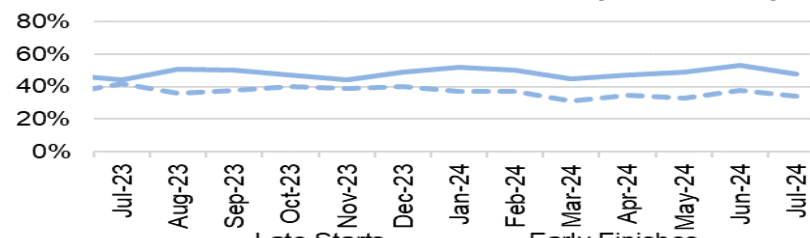
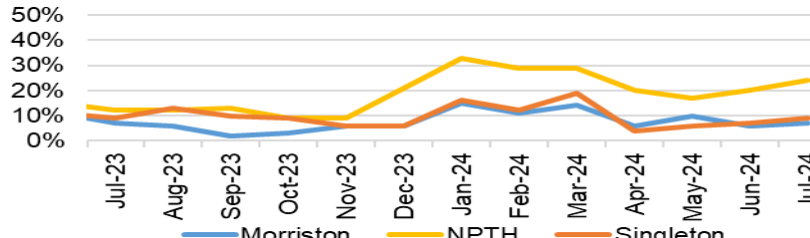
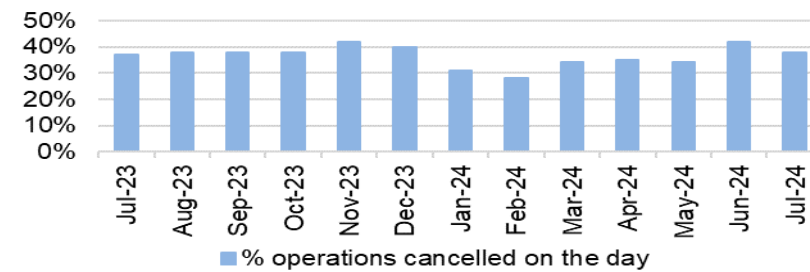
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5. <i>Not delirious when tested- % patients (<4 on 4AT test) when tested in the week after operation</i>	5. Not delirious when tested- 76.2% of patients were not delirious in the week after their operation in July 2024.	5. Not delirious when tested <table><caption>5. Not delirious when tested (Estimated Data)</caption><thead><tr><th>Month</th><th>Morryston (%)</th><th>All-Wales (%)</th><th>Eng, Wal & N. Ire (%)</th></tr></thead><tbody><tr><td>Jul-23</td><td>75</td><td>60</td><td>60</td></tr><tr><td>Aug-23</td><td>75</td><td>60</td><td>60</td></tr><tr><td>Sep-23</td><td>75</td><td>60</td><td>60</td></tr><tr><td>Oct-23</td><td>75</td><td>60</td><td>60</td></tr><tr><td>Nov-23</td><td>75</td><td>60</td><td>60</td></tr><tr><td>Dec-23</td><td>75</td><td>60</td><td>60</td></tr><tr><td>Jan-24</td><td>75</td><td>60</td><td>60</td></tr><tr><td>Feb-24</td><td>75</td><td>60</td><td>60</td></tr><tr><td>Mar-24</td><td>75</td><td>60</td><td>60</td></tr><tr><td>Apr-24</td><td>75</td><td>60</td><td>60</td></tr><tr><td>May-24</td><td>75</td><td>60</td><td>60</td></tr><tr><td>Jun-24</td><td>75</td><td>60</td><td>60</td></tr><tr><td>Jul-24</td><td>76.2</td><td>60</td><td>60</td></tr></tbody></table>	Month	Morryston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)	Jul-23	75	60	60	Aug-23	75	60	60	Sep-23	75	60	60	Oct-23	75	60	60	Nov-23	75	60	60	Dec-23	75	60	60	Jan-24	75	60	60	Feb-24	75	60	60	Mar-24	75	60	60	Apr-24	75	60	60	May-24	75	60	60	Jun-24	75	60	60	Jul-24	76.2	60	60
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6. <i>Return to original residence- % patients discharged back to original residence, or in that residence at 120 day follow-up</i>	6. Return to original residence- 74.0% of patients in April 2024 were discharged back to their original residence. This is 6.2% more than in April 2023.	6. Return to original residence <table><caption>6. Return to original residence (Estimated Data)</caption><thead><tr><th>Month</th><th>Morryston (%)</th><th>All-Wales (%)</th><th>Eng, Wal & N. Ire (%)</th></tr></thead><tbody><tr><td>Apr-23</td><td>65</td><td>70</td><td>70</td></tr><tr><td>May-23</td><td>68</td><td>70</td><td>70</td></tr><tr><td>Jun-23</td><td>70</td><td>70</td><td>70</td></tr><tr><td>Jul-23</td><td>70</td><td>70</td><td>70</td></tr><tr><td>Aug-23</td><td>70</td><td>70</td><td>70</td></tr><tr><td>Sep-23</td><td>70</td><td>70</td><td>70</td></tr><tr><td>Oct-23</td><td>70</td><td>70</td><td>70</td></tr><tr><td>Nov-23</td><td>70</td><td>70</td><td>70</td></tr><tr><td>Dec-23</td><td>70</td><td>70</td><td>70</td></tr><tr><td>Jan-24</td><td>70</td><td>70</td><td>70</td></tr><tr><td>Feb-24</td><td>70</td><td>70</td><td>70</td></tr><tr><td>Mar-24</td><td>70</td><td>70</td><td>70</td></tr><tr><td>Apr-24</td><td>74.0</td><td>70</td><td>70</td></tr></tbody></table>	Month	Morryston (%)	All-Wales (%)	Eng, Wal & N. Ire (%)	Apr-23	65	70	70	May-23	68	70	70	Jun-23	70	70	70	Jul-23	70	70	70	Aug-23	70	70	70	Sep-23	70	70	70	Oct-23	70	70	70	Nov-23	70	70	70	Dec-23	70	70	70	Jan-24	70	70	70	Feb-24	70	70	70	Mar-24	70	70	70	Apr-24	74.0	70	70
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Feb-24	70	70	70																																																							
Mar-24	70	70	70																																																							
Apr-24	74.0	70	70																																																							
7. <i>30 day mortality rate (Case mix Adjusted)</i>	7. 30 day mortality rate- In Q1 24-25 the mortality rate for Morryston Hospital was 5.6%, which is consistent with the figure reported in the same period in the previous year and is 0.2% higher than the national average for the quarter.	7. 30 day mortality rate <table><caption>7. 30 day mortality rate (Estimated Data)</caption><thead><tr><th>Quarter</th><th>Morryston (Casemix Adjusted) (%)</th><th>National Average (%)</th></tr></thead><tbody><tr><td>Q1 21-22</td><td>7.0</td><td>8.0</td></tr><tr><td>Q2 21-22</td><td>6.5</td><td>7.5</td></tr><tr><td>Q3 21-22</td><td>6.8</td><td>7.8</td></tr><tr><td>Q4 21-22</td><td>6.5</td><td>7.2</td></tr><tr><td>Q1 22-23</td><td>6.5</td><td>6.8</td></tr><tr><td>Q2 22-23</td><td>6.0</td><td>6.5</td></tr><tr><td>Q3 22-23</td><td>6.0</td><td>6.2</td></tr><tr><td>Q4 22-23</td><td>6.0</td><td>6.0</td></tr><tr><td>Q1 23-24</td><td>5.8</td><td>5.8</td></tr><tr><td>Q2 23-24</td><td>6.5</td><td>5.5</td></tr><tr><td>Q3 23-24</td><td>6.0</td><td>5.2</td></tr><tr><td>Q4 23-24</td><td>5.0</td><td>5.0</td></tr><tr><td>Q1 24-25</td><td>5.6</td><td>5.4</td></tr></tbody></table>	Quarter	Morryston (Casemix Adjusted) (%)	National Average (%)	Q1 21-22	7.0	8.0	Q2 21-22	6.5	7.5	Q3 21-22	6.8	7.8	Q4 21-22	6.5	7.2	Q1 22-23	6.5	6.8	Q2 22-23	6.0	6.5	Q3 22-23	6.0	6.2	Q4 22-23	6.0	6.0	Q1 23-24	5.8	5.8	Q2 23-24	6.5	5.5	Q3 23-24	6.0	5.2	Q4 23-24	5.0	5.0	Q1 24-25	5.6	5.4														
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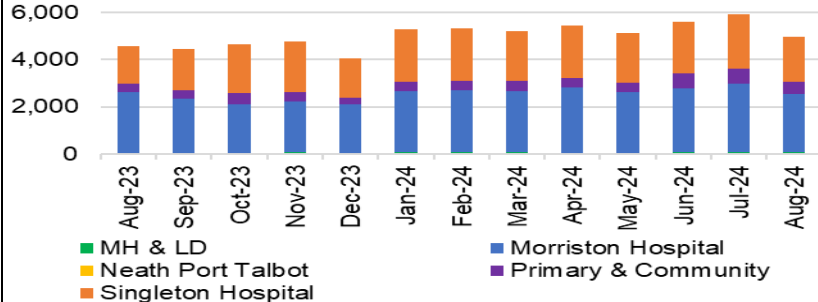
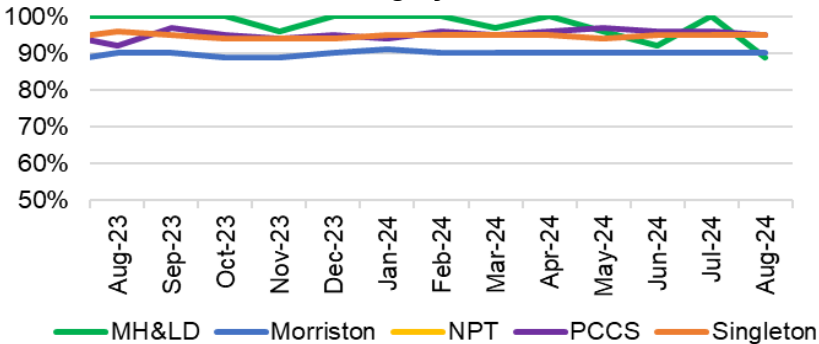
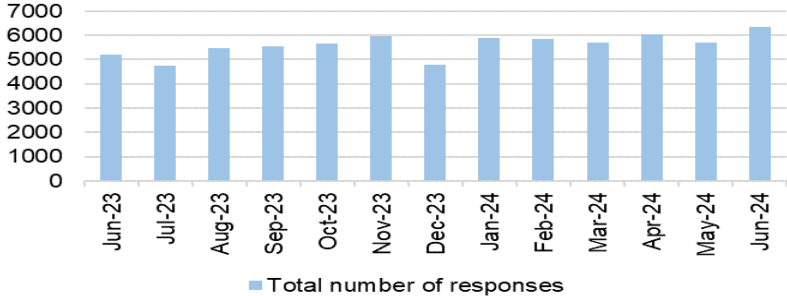
PRESSURE ULCERS		
Description	Current Performance	Trend
Number of pressure ulcers 1. Total number of pressure ulcers developed in hospital and in the community 2. Rate of pressure ulcers per 100,000 admission	1. In July 2024 there were 84 cases of healthcare acquired pressure ulcers, 44 of which were community acquired and 40 were hospital acquired. There were 14 grade 3+ pressure ulcers in July 2024, 8 of which were community acquired and 6 were hospital acquired. 2. The rate per 100,000 admissions was 625 in July 2024.	Total number of hospital and community acquired Pressure Ulcers (PU) and rate per 100,000 admissions  *March 24 data not available
INPATIENT FALLS		
Description	Current Performance	Trend
Inpatient Falls The total number of inpatient falls	The number of Falls reported via Datix web for Swansea Bay UHB was 173 in August 2024. This is 1.7% less than July 2024 where 176 falls were recorded.	Number of inpatient Falls 

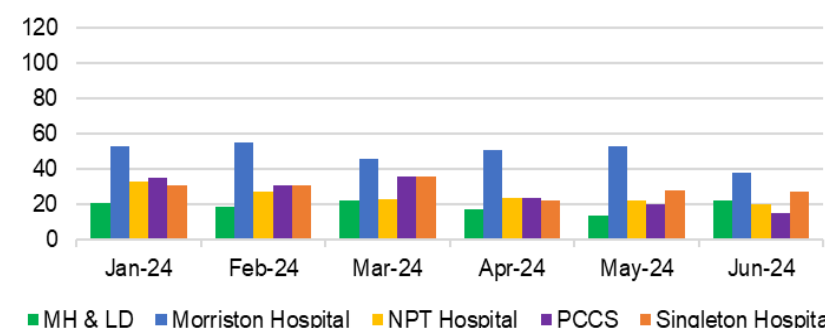
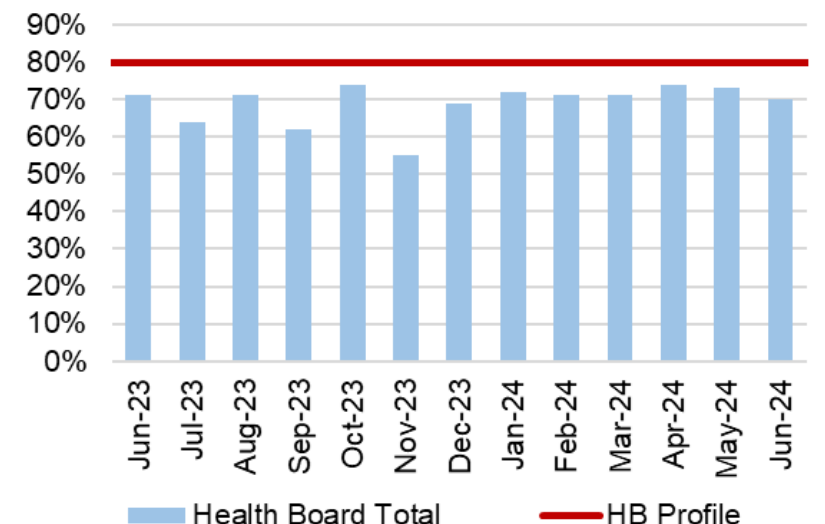
NATIONALLY REPORTABLE INCIDENTS		
Description	Current Performance	Trend
Nationally Reportable Incidents (NRI's)- <i>1. The number of Nationally reportable incidents</i> <i>2. The number of Never Events</i> <i>3. Of the nationally reportable incidents due for assurance, the percentage which were assured within the agreed timescales</i>	1. The Health Board reported 7 Nationally Reportable Incidents for the month of August 2024 to Welsh Government. The Service Group breakdown is as follows; - Morriston – 4 - NPTS – 2 - PCT -1	1. and 2. Number of nationally reportable incidents and never events  ■ Number of never events ■ Number of Nationally Reportable Incidents
	2. There were no new Never Events reported in August 2024.	3. % of nationally reportable incidents closed within the agreed timescales  ■ % NRI's assured — Target
	3. In August 2024, 70% of the NRI's were closed within the agreed timescale.	

DISCHARGE SUMMARIES																																																																								
Description	Current Performance	Trend																																																																						
Discharge Summaries <i>Percentage of discharge summaries approved and sent to patients' doctor following discharge</i>	The latest data shows that in August 2024, the percentage of completed discharge summaries was 79%.	% discharge summaries approved and sent  <table><caption>% of completed discharge summaries</caption><thead><tr><th>Month</th><th>% of completed discharge summaries</th></tr></thead><tbody><tr><td>Aug-23</td><td>65%</td></tr><tr><td>Sep-23</td><td>60%</td></tr><tr><td>Oct-23</td><td>65%</td></tr><tr><td>Nov-23</td><td>68%</td></tr><tr><td>Dec-23</td><td>68%</td></tr><tr><td>Jan-24</td><td>67%</td></tr><tr><td>Feb-24</td><td>70%</td></tr><tr><td>Mar-24</td><td>68%</td></tr><tr><td>Apr-24</td><td>75%</td></tr><tr><td>May-24</td><td>75%</td></tr><tr><td>Jun-24</td><td>75%</td></tr><tr><td>Jul-24</td><td>75%</td></tr><tr><td>Aug-24</td><td>79%</td></tr></tbody></table>	Month	% of completed discharge summaries	Aug-23	65%	Sep-23	60%	Oct-23	65%	Nov-23	68%	Dec-23	68%	Jan-24	67%	Feb-24	70%	Mar-24	68%	Apr-24	75%	May-24	75%	Jun-24	75%	Jul-24	75%	Aug-24	79%																																										
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CRUDE MORTALITY																																																																								
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Crude Mortality Rate	July 2024 reports the crude mortality rate for the Health Board at 0.65%, which is 0.1% higher than the figure reported in June 2024.	Crude hospital mortality rate by Hospital (74 years of age or less)  <table><caption>Crude hospital mortality rate by Hospital (74 years of age or less)</caption><thead><tr><th>Month</th><th>Morriston Hospital</th><th>Singleton Hospital</th><th>NPT Hospital</th><th>HB Total</th></tr></thead><tbody><tr><td>Jul-23</td><td>1.30%</td><td>0.20%</td><td>0.05%</td><td>0.65%</td></tr><tr><td>Aug-23</td><td>1.25%</td><td>0.15%</td><td>0.05%</td><td>0.65%</td></tr><tr><td>Sep-23</td><td>1.20%</td><td>0.15%</td><td>0.05%</td><td>0.65%</td></tr><tr><td>Oct-23</td><td>1.20%</td><td>0.15%</td><td>0.05%</td><td>0.65%</td></tr><tr><td>Nov-23</td><td>1.20%</td><td>0.15%</td><td>0.05%</td><td>0.65%</td></tr><tr><td>Dec-23</td><td>1.20%</td><td>0.15%</td><td>0.05%</td><td>0.65%</td></tr><tr><td>Jan-24</td><td>1.20%</td><td>0.15%</td><td>0.05%</td><td>0.65%</td></tr><tr><td>Feb-24</td><td>1.20%</td><td>0.15%</td><td>0.05%</td><td>0.65%</td></tr><tr><td>Mar-24</td><td>1.20%</td><td>0.15%</td><td>0.05%</td><td>0.65%</td></tr><tr><td>Apr-24</td><td>1.20%</td><td>0.15%</td><td>0.05%</td><td>0.65%</td></tr><tr><td>May-24</td><td>1.20%</td><td>0.15%</td><td>0.05%</td><td>0.65%</td></tr><tr><td>Jun-24</td><td>1.20%</td><td>0.15%</td><td>0.05%</td><td>0.65%</td></tr><tr><td>Jul-24</td><td>1.21%</td><td>0.15%</td><td>0.07%</td><td>0.65%</td></tr></tbody></table>	Month	Morriston Hospital	Singleton Hospital	NPT Hospital	HB Total	Jul-23	1.30%	0.20%	0.05%	0.65%	Aug-23	1.25%	0.15%	0.05%	0.65%	Sep-23	1.20%	0.15%	0.05%	0.65%	Oct-23	1.20%	0.15%	0.05%	0.65%	Nov-23	1.20%	0.15%	0.05%	0.65%	Dec-23	1.20%	0.15%	0.05%	0.65%	Jan-24	1.20%	0.15%	0.05%	0.65%	Feb-24	1.20%	0.15%	0.05%	0.65%	Mar-24	1.20%	0.15%	0.05%	0.65%	Apr-24	1.20%	0.15%	0.05%	0.65%	May-24	1.20%	0.15%	0.05%	0.65%	Jun-24	1.20%	0.15%	0.05%	0.65%	Jul-24	1.21%	0.15%	0.07%	0.65%
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WORKFORCE																																												
Description	Current Performance	Trend																																										
Staff sickness rates- <i>Percentage of sickness absence rate of staff</i>	Our in-month sickness performance improved to 6.67% in August 2024 from 7.10% in July 2024.	% of full time equivalent (FTE) days lost to sickness absence (12 month rolling and in-month) <table><caption>Estimated data for Staff Sickness Rates Trend</caption><thead><tr><th>Month</th><th>% sickness rate (12 month rolling)</th><th>% sickness rate (in-month)</th></tr></thead><tbody><tr><td>Aug-23</td><td>7.1%</td><td>7.1%</td></tr><tr><td>Sep-23</td><td>7.1%</td><td>6.8%</td></tr><tr><td>Oct-23</td><td>7.2%</td><td>7.1%</td></tr><tr><td>Nov-23</td><td>7.3%</td><td>7.2%</td></tr><tr><td>Dec-23</td><td>7.5%</td><td>7.4%</td></tr><tr><td>Jan-24</td><td>7.4%</td><td>7.3%</td></tr><tr><td>Feb-24</td><td>7.2%</td><td>7.0%</td></tr><tr><td>Mar-24</td><td>7.0%</td><td>6.7%</td></tr><tr><td>Apr-24</td><td>6.9%</td><td>6.6%</td></tr><tr><td>May-24</td><td>7.1%</td><td>6.8%</td></tr><tr><td>Jun-24</td><td>7.3%</td><td>7.2%</td></tr><tr><td>Jul-24</td><td>7.2%</td><td>7.1%</td></tr><tr><td>Aug-24</td><td>7.07%</td><td>6.67%</td></tr></tbody></table>	Month	% sickness rate (12 month rolling)	% sickness rate (in-month)	Aug-23	7.1%	7.1%	Sep-23	7.1%	6.8%	Oct-23	7.2%	7.1%	Nov-23	7.3%	7.2%	Dec-23	7.5%	7.4%	Jan-24	7.4%	7.3%	Feb-24	7.2%	7.0%	Mar-24	7.0%	6.7%	Apr-24	6.9%	6.6%	May-24	7.1%	6.8%	Jun-24	7.3%	7.2%	Jul-24	7.2%	7.1%	Aug-24	7.07%	6.67%
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The following table provides the top 5 absence reasons by full time equivalent (FTE) days lost in August 2024.																																												
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THEATRE EFFICIENCY																																																									
Description	Current Performance	Trend																																																							
Theatre Efficiency <i>1. Theatre Utilisation Rates</i> <i>2. % of theatre sessions starting late</i> <i>3. % of theatre sessions finishing early</i> <i>4. % of theatre sessions cancelled at short notice (<28 days)</i> <i>5. % of operations cancelled on the day</i>	In July 2024 the Theatre Utilisation rate was 77%. This is 11% higher than June 2024 and is 8% higher than the figure reported in July 2023 (69%).	1. Theatre Utilisation Rates  <table><caption>Theatre Utilisation Rate (SBU HB)</caption><thead><tr><th>Month</th><th>Rate (%)</th></tr></thead><tbody><tr><td>Jul-23</td><td>69</td></tr><tr><td>Aug-23</td><td>65</td></tr><tr><td>Sep-23</td><td>70</td></tr><tr><td>Oct-23</td><td>75</td></tr><tr><td>Nov-23</td><td>70</td></tr><tr><td>Dec-23</td><td>60</td></tr><tr><td>Jan-24</td><td>60</td></tr><tr><td>Feb-24</td><td>65</td></tr><tr><td>Mar-24</td><td>60</td></tr><tr><td>Apr-24</td><td>75</td></tr><tr><td>May-24</td><td>70</td></tr><tr><td>Jun-24</td><td>65</td></tr><tr><td>Jul-24</td><td>77</td></tr></tbody></table>	Month	Rate (%)	Jul-23	69	Aug-23	65	Sep-23	70	Oct-23	75	Nov-23	70	Dec-23	60	Jan-24	60	Feb-24	65	Mar-24	60	Apr-24	75	May-24	70	Jun-24	65	Jul-24	77																											
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11% of theatre sessions were cancelled at short notice in July 2024. This is 2% higher than the figures reported in both June 2024 and July 2023.	4. % theatre sessions cancelled at short notice (<28 days)  <table><caption>% theatre sessions cancelled at short notice (<28 days)</caption><thead><tr><th>Month</th><th>Morriston (%)</th><th>NPTH (%)</th><th>Singleton (%)</th></tr></thead><tbody><tr><td>Jul-23</td><td>10</td><td>15</td><td>10</td></tr><tr><td>Aug-23</td><td>10</td><td>15</td><td>10</td></tr><tr><td>Sep-23</td><td>10</td><td>15</td><td>10</td></tr><tr><td>Oct-23</td><td>10</td><td>15</td><td>10</td></tr><tr><td>Nov-23</td><td>10</td><td>15</td><td>10</td></tr><tr><td>Dec-23</td><td>10</td><td>15</td><td>10</td></tr><tr><td>Jan-24</td><td>15</td><td>35</td><td>15</td></tr><tr><td>Feb-24</td><td>10</td><td>30</td><td>10</td></tr><tr><td>Mar-24</td><td>15</td><td>30</td><td>15</td></tr><tr><td>Apr-24</td><td>10</td><td>20</td><td>10</td></tr><tr><td>May-24</td><td>10</td><td>20</td><td>10</td></tr><tr><td>Jun-24</td><td>10</td><td>20</td><td>10</td></tr><tr><td>Jul-24</td><td>10</td><td>25</td><td>10</td></tr></tbody></table>	Month	Morriston (%)	NPTH (%)	Singleton (%)	Jul-23	10	15	10	Aug-23	10	15	10	Sep-23	10	15	10	Oct-23	10	15	10	Nov-23	10	15	10	Dec-23	10	15	10	Jan-24	15	35	15	Feb-24	10	30	10	Mar-24	15	30	15	Apr-24	10	20	10	May-24	10	20	10	Jun-24	10	20	10	Jul-24	10	25	10
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Jul-24	10	25	10																																																						
Of the operations cancelled in July 2024, 38% of them were cancelled on the day. This is 4% lower than the figure reported in June 2024 (42%).	5. % of operations cancelled on the day  <table><caption>% of operations cancelled on the day</caption><thead><tr><th>Month</th><th>Rate (%)</th></tr></thead><tbody><tr><td>Jul-23</td><td>35</td></tr><tr><td>Aug-23</td><td>35</td></tr><tr><td>Sep-23</td><td>35</td></tr><tr><td>Oct-23</td><td>35</td></tr><tr><td>Nov-23</td><td>45</td></tr><tr><td>Dec-23</td><td>40</td></tr><tr><td>Jan-24</td><td>30</td></tr><tr><td>Feb-24</td><td>25</td></tr><tr><td>Mar-24</td><td>35</td></tr><tr><td>Apr-24</td><td>35</td></tr><tr><td>May-24</td><td>35</td></tr><tr><td>Jun-24</td><td>45</td></tr><tr><td>Jul-24</td><td>35</td></tr></tbody></table>	Month	Rate (%)	Jul-23	35	Aug-23	35	Sep-23	35	Oct-23	35	Nov-23	45	Dec-23	40	Jan-24	30	Feb-24	25	Mar-24	35	Apr-24	35	May-24	35	Jun-24	45	Jul-24	35																												
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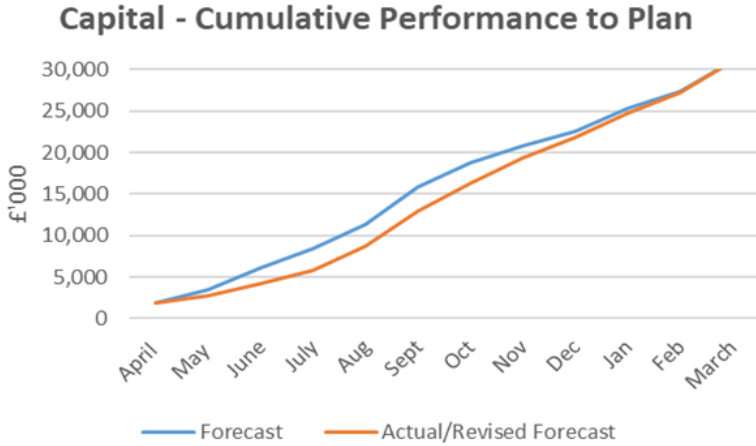
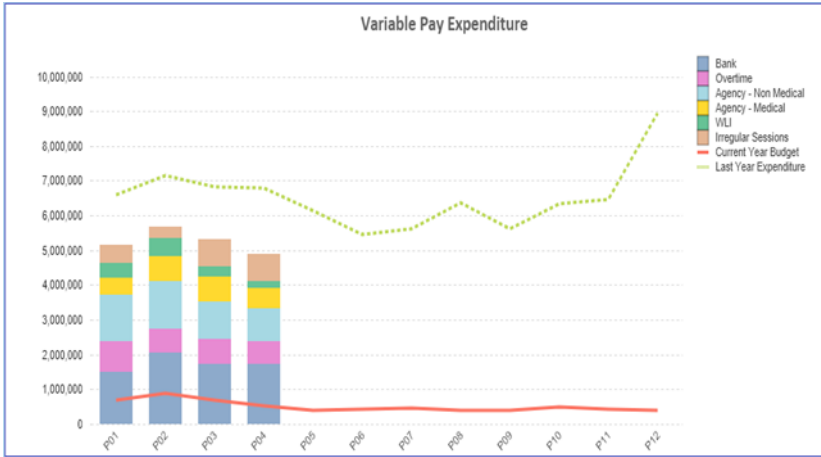
PATIENT EXPERIENCE		
Description	Current Performance	Trend
Patient experience 1. Number of friends and family surveys completed 2. Percentage of patients/ service users who would recommend and highly recommend 3. Number of Service User feedback experience responses completed and recorded on CIVICA	Health Board Friends & Family patient satisfaction level in August 2024 was 93% and 4,913 surveys were completed. ➤ Singleton/ Neath Port Talbot Hospitals Service Group completed 1,945 surveys in August 2024, with a recommended score of 95%. ➤ Morriston Hospital completed 2,445 surveys in August 2024, with a recommended score of 90%. ➤ Primary & Community Care completed 518 surveys for August 2024, with a recommended score of 95%. ➤ The Mental Health Service Group completed 83 surveys for August 2024, with a recommended score of 89%.	1. Number of friends and family surveys completed  2. % of patients/ service users who would recommend and highly recommend  3. Number of Service User experience responses 
	There were 6,340 feedback experience responses completed and recorded on CIVICA in June 2024. This is 638 more than the figure reported in May 2024. Of the responses recorded, 5,111 were targeted and 1,229 were passive.	

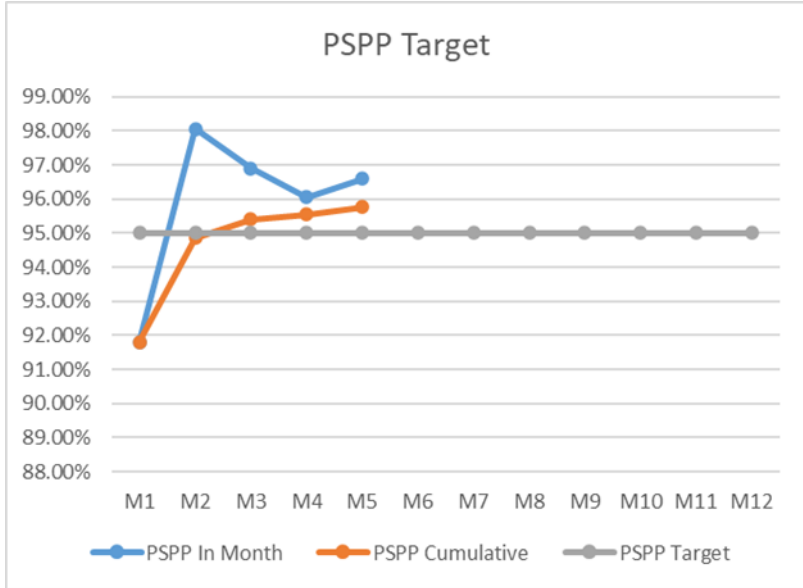
COMPLAINTS																																																							
Description	Current Performance	Trend																																																					
Patient concerns <i>1. Number of formal complaints received</i> <i>2. Percentage of concerns that have received a final reply or an interim reply up to and including 30 working days from the date the concern was first received by the organisation</i>	1. In June 2024, the Health Board received 130 formal complaints; this is a reduction of 40% when compared with June 2023 figures (217).	1. Number of formal complaints received  <table border="1"><caption>Estimated data for Figure 1: Number of formal complaints received</caption><thead><tr><th>Month</th><th>MH & LD</th><th>Morriston Hospital</th><th>NPT Hospital</th><th>PCCS</th><th>Singleton Hospital</th></tr></thead><tbody><tr><td>Jan-24</td><td>20</td><td>50</td><td>30</td><td>30</td><td>30</td></tr><tr><td>Feb-24</td><td>20</td><td>50</td><td>25</td><td>25</td><td>25</td></tr><tr><td>Mar-24</td><td>20</td><td>45</td><td>20</td><td>30</td><td>30</td></tr><tr><td>Apr-24</td><td>20</td><td>50</td><td>20</td><td>20</td><td>20</td></tr><tr><td>May-24</td><td>15</td><td>50</td><td>20</td><td>20</td><td>25</td></tr><tr><td>Jun-24</td><td>20</td><td>35</td><td>15</td><td>15</td><td>25</td></tr></tbody></table>	Month	MH & LD	Morriston Hospital	NPT Hospital	PCCS	Singleton Hospital	Jan-24	20	50	30	30	30	Feb-24	20	50	25	25	25	Mar-24	20	45	20	30	30	Apr-24	20	50	20	20	20	May-24	15	50	20	20	25	Jun-24	20	35	15	15	25											
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2. The overall Health Board rate for responding to concerns within 30 working days was 70% in June 2024, against the Welsh Government target of 75% and Health Board target of 80%. Below is a breakdown of performance against the 30-day response target: <table border="1"><thead><tr><th></th><th>30 day response rate</th></tr></thead><tbody><tr><td>Neath Port Talbot Hospital</td><td>85%</td></tr><tr><td>Morriston Hospital</td><td>66%</td></tr><tr><td>Mental Health & Learning Disabilities</td><td>64%</td></tr><tr><td>Primary, Community and Therapies</td><td>80%</td></tr><tr><td>Singleton Hospital</td><td>63%</td></tr></tbody></table>		30 day response rate	Neath Port Talbot Hospital	85%	Morriston Hospital	66%	Mental Health & Learning Disabilities	64%	Primary, Community and Therapies	80%	Singleton Hospital	63%	2. Response rate for concerns within 30 days  <table border="1"><caption>Estimated data for Figure 2: Response rate for concerns within 30 days</caption><thead><tr><th>Month</th><th>Health Board Total (%)</th><th>HB Profile (%)</th></tr></thead><tbody><tr><td>Jun-23</td><td>70</td><td>80</td></tr><tr><td>Jul-23</td><td>65</td><td>80</td></tr><tr><td>Aug-23</td><td>70</td><td>80</td></tr><tr><td>Sep-23</td><td>65</td><td>80</td></tr><tr><td>Oct-23</td><td>75</td><td>80</td></tr><tr><td>Nov-23</td><td>55</td><td>80</td></tr><tr><td>Dec-23</td><td>70</td><td>80</td></tr><tr><td>Jan-24</td><td>70</td><td>80</td></tr><tr><td>Feb-24</td><td>70</td><td>80</td></tr><tr><td>Mar-24</td><td>70</td><td>80</td></tr><tr><td>Apr-24</td><td>75</td><td>80</td></tr><tr><td>May-24</td><td>75</td><td>80</td></tr><tr><td>Jun-24</td><td>70</td><td>80</td></tr></tbody></table>	Month	Health Board Total (%)	HB Profile (%)	Jun-23	70	80	Jul-23	65	80	Aug-23	70	80	Sep-23	65	80	Oct-23	75	80	Nov-23	55	80	Dec-23	70	80	Jan-24	70	80	Feb-24	70	80	Mar-24	70	80	Apr-24	75	80	May-24	75	80	Jun-24	70	80
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FINANCE UPDATES

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

Description	Current Performance	Trend																																																																	
Revenue Financial Position – expenditure incurred against revenue resource limit	- Health Board Plan submitted at end March 2024 reported a £50.1m planned deficit but control total set by Welsh Government is £17.1m. - In Month 5 there is an in-month overspend of £6.9m (Month 4 £7.1m). - YTD at Month 5 is an overspend of £39.8m. - Overall, the Health Board YTD position is £18.9m off the delivery of the £50.1m deficit plan. - In the graph the orange bars illustrate the potential financial change required to be able to deliver the £50.1m. - The yellow line depicted the level required if the HB were to achieve the £17.1m control total. Savings: Savings were overachieved in month by £1.5m and so reduced the operational run rate value. But overall, there remains a shortfall in delivery of the £26.1m targets YTD of £2.1m. Operational Run Rate: After over achievement of savings: in month Mth 5 the main drives for the £2.7m were variable pay, deterioration in JCC performance and increase in secondary care drugs expenditure and other areas of clinical consumables. Overall, the YTD is £16.8m over.	Financial Performance 2024/25 <table><caption>Financial Performance 2024/25 Data (Estimated)</caption><thead><tr><th>Month</th><th>Health Board Position</th><th>Required Hit Plan Target £50.1m</th><th>Target Profile £17.1m</th><th>Target Profile £50.1m</th></tr></thead><tbody><tr><td>M1</td><td>9,500</td><td></td><td>1,500</td><td>4,200</td></tr><tr><td>M2</td><td>8,800</td><td></td><td>1,500</td><td>4,200</td></tr><tr><td>M3</td><td>7,500</td><td></td><td>1,500</td><td>4,200</td></tr><tr><td>M4</td><td>7,200</td><td></td><td>1,500</td><td>4,200</td></tr><tr><td>M5</td><td>6,800</td><td></td><td>1,500</td><td>4,200</td></tr><tr><td>M6</td><td></td><td>1,500</td><td>1,500</td><td>4,200</td></tr><tr><td>M7</td><td></td><td>1,500</td><td>1,500</td><td>4,200</td></tr><tr><td>M8</td><td></td><td>1,500</td><td>1,500</td><td>4,200</td></tr><tr><td>M9</td><td></td><td>1,500</td><td>1,500</td><td>4,200</td></tr><tr><td>M10</td><td></td><td>1,500</td><td>1,500</td><td>4,200</td></tr><tr><td>M11</td><td></td><td>1,500</td><td>1,500</td><td>4,200</td></tr><tr><td>M12</td><td></td><td>1,500</td><td>1,500</td><td>4,200</td></tr></tbody></table>	Month	Health Board Position	Required Hit Plan Target £50.1m	Target Profile £17.1m	Target Profile £50.1m	M1	9,500		1,500	4,200	M2	8,800		1,500	4,200	M3	7,500		1,500	4,200	M4	7,200		1,500	4,200	M5	6,800		1,500	4,200	M6		1,500	1,500	4,200	M7		1,500	1,500	4,200	M8		1,500	1,500	4,200	M9		1,500	1,500	4,200	M10		1,500	1,500	4,200	M11		1,500	1,500	4,200	M12		1,500	1,500	4,200
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Description	Current Performance	Trend
Capital Financial Position – expenditure incurred against capital resource limit	- The forecast outturn capital position for 2024/25 is balanced. The balanced position mitigates any non-receipt of allocations which are anticipated from Welsh Government. - 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.	Capital - Cumulative Performance to Plan 
Description	Current Performance	Trend
Workforce Spend – workforce expenditure profile	- The pay budgets are overspent by £1.011m in August. - Variable pay has increased in August by circa. £666k. Broken down as follows; Agency – Non-Medical were underspent by £91k, offset by overspend in Bank £463k, WLI £193k, Agency Medical £50k, Irregular Sessions £46k & Overtime £5k. Work is required to bring spend down in line with the current year budget.	Variable Pay Expenditure 

Description	Current Performance	Trend																																																				
PSPP – pay 95% of Non-NHS invoices within 30 days of receipt of goods or valid invoice	The cumulative PSPP compliance has improved this month and is above target at 95.76%. In August compliance was above target at 96.60% (July – 96.05%).	Percentage of non-NHS invoices paid within 30 days of receipt of goods or valid invoice  <table><caption>PSPP Target Data</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>91.80</td><td>91.80</td><td>95.00</td></tr><tr><td>M2</td><td>98.00</td><td>94.80</td><td>95.00</td></tr><tr><td>M3</td><td>97.00</td><td>95.20</td><td>95.00</td></tr><tr><td>M4</td><td>96.00</td><td>95.50</td><td>95.00</td></tr><tr><td>M5</td><td>96.60</td><td>95.76</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	91.80	91.80	95.00	M2	98.00	94.80	95.00	M3	97.00	95.20	95.00	M4	96.00	95.50	95.00	M5	96.60	95.76	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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	Although the PSPP was achieved this month, there were still delays in authorisation and receipting.																																																					

5. TABLE OF ALL MEASURES

HARM FROM COVID ITSELF

Chart 1 Number of new COVID19 cases

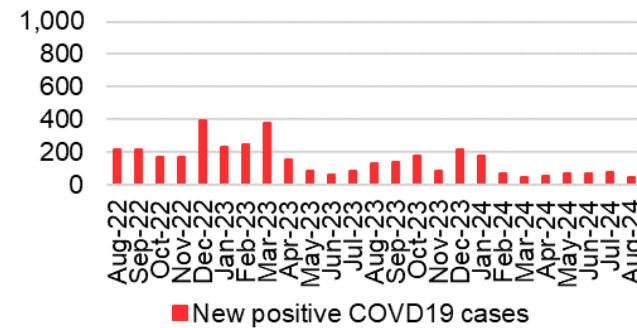


Chart 2: Number of new COVID19 cases (cumulative)

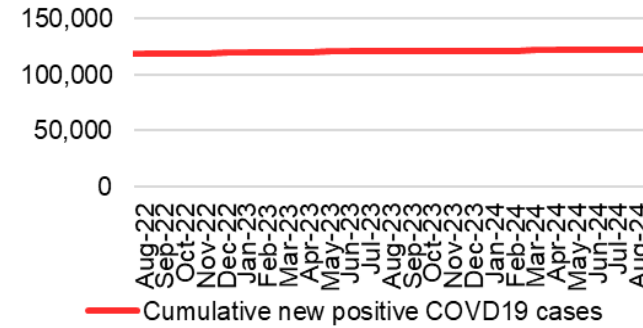


Chart 3: Number of COVID19 tests completed and positivity rate

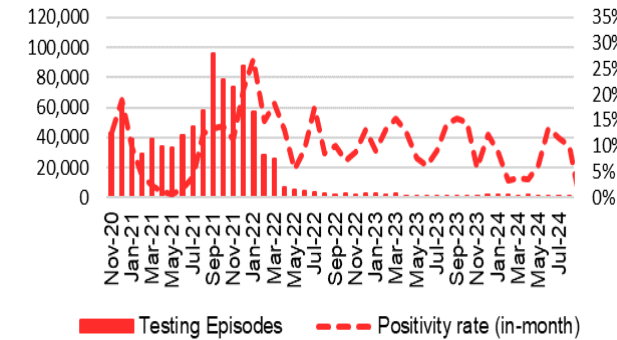


Chart 4: Number of staff referred for Antigen testing

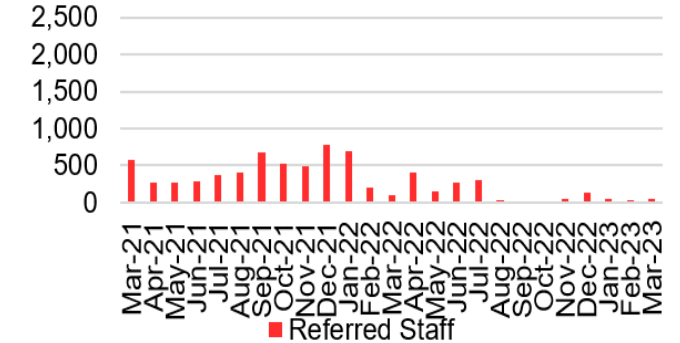


Chart 5: Outcome of staff COVID19/ antigen tests

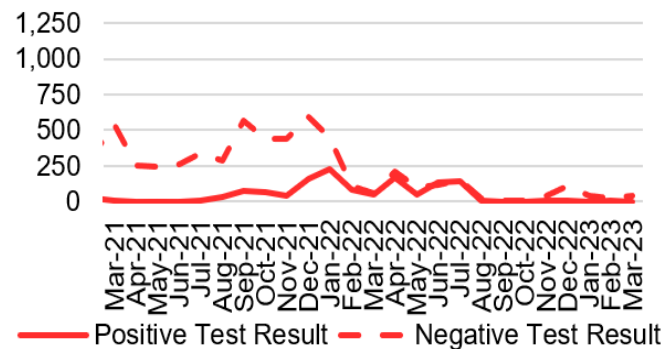


Chart 6: Number of COVID19 related incidents

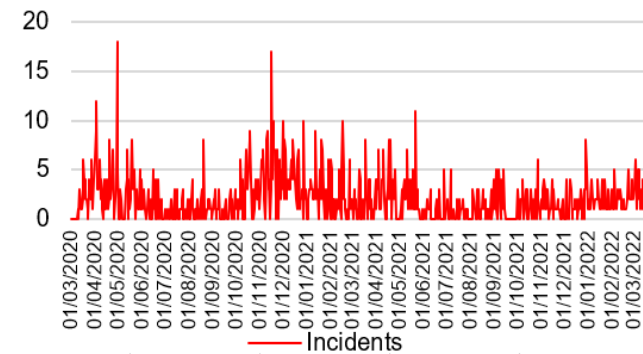


Chart 7: Number of COVID19 related serious incidents

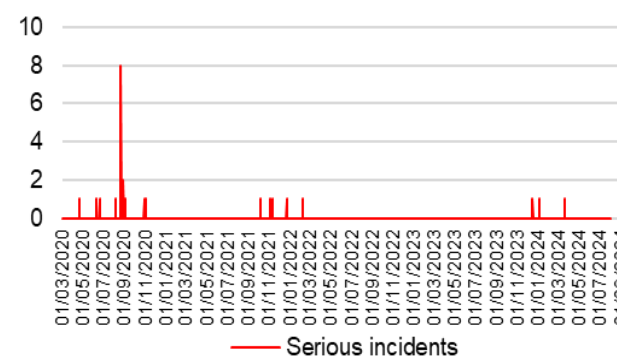


Chart 8: Number of COVID19 related complaints

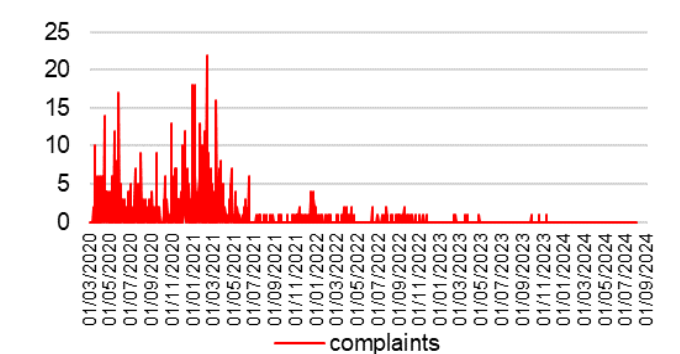


Chart 9: Number of COVID19 related risks

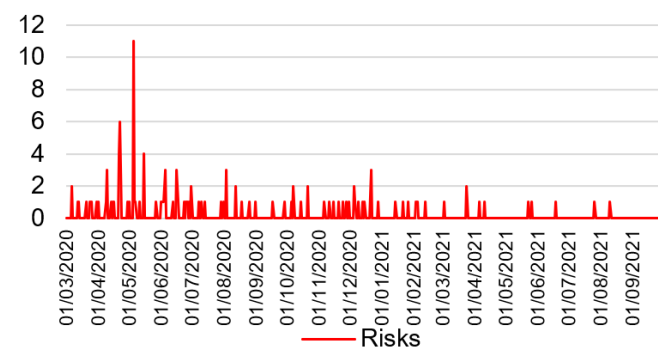


Chart 10: Number of staff self-isolating (asymptomatic)

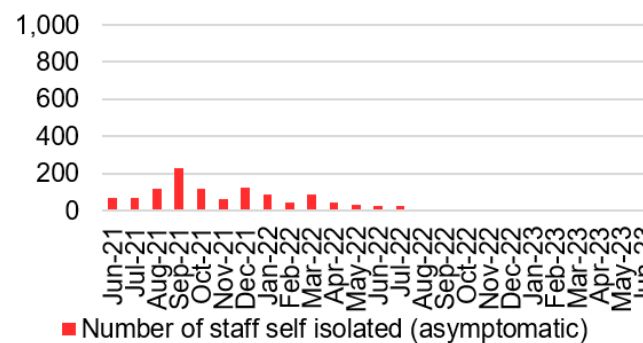


Chart 11: Number of staff self isolating (symptomatic)

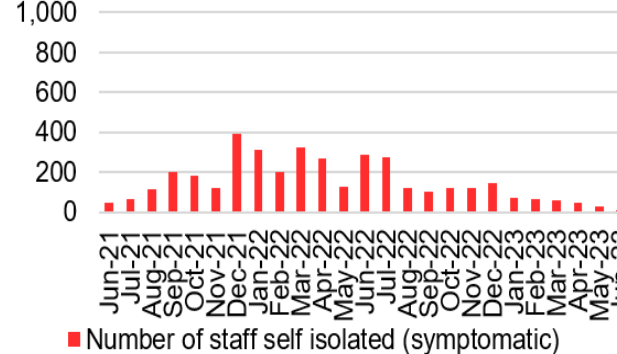


Chart 12: % staff sickness

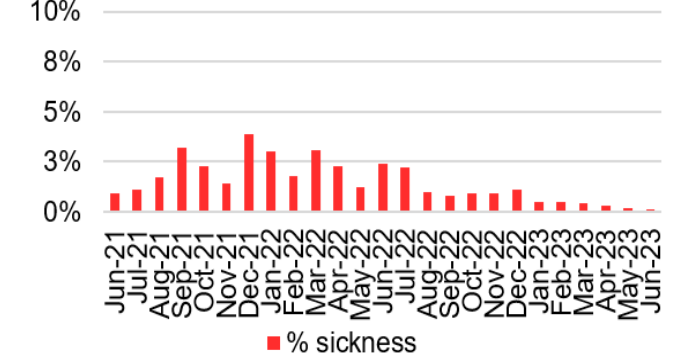


Chart 13: Bed Occupancy for suspected and confirmed COVID19 cases

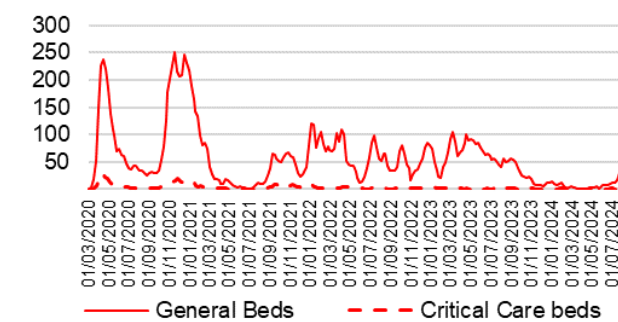


Chart 14: Number of hospital deaths with any mention of COVID19

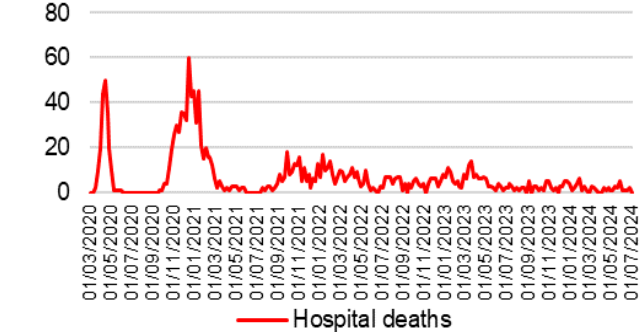


Chart 15: Number of weekly registered deaths with any mention of COVID19 (ONS data)

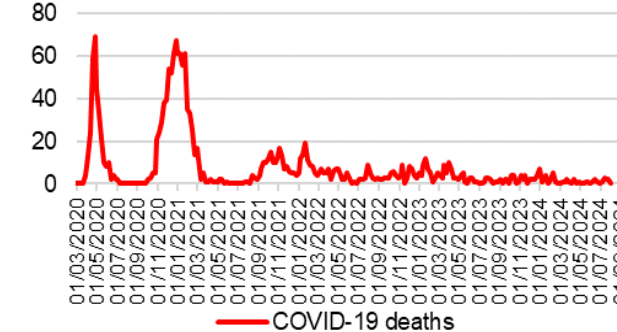
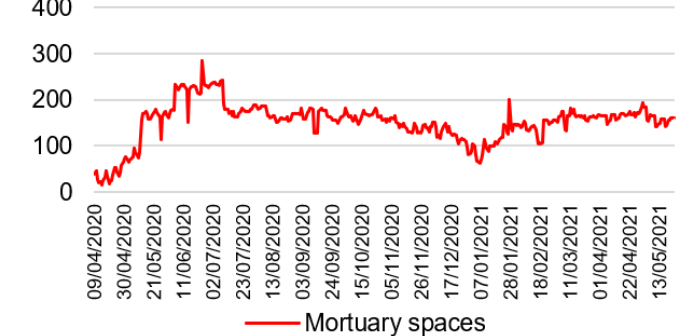


Chart 16: Number of mortuary spaces



HARM FROM OVERWHELMED NHS AND SOCIAL CARE SYSTEM

Unscheduled Care- Overview

Chart 1: GP Out of Hours/ 111

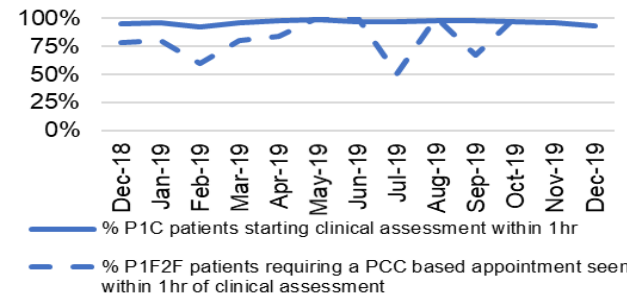


Chart 2: % red calls responded to within 8 minutes

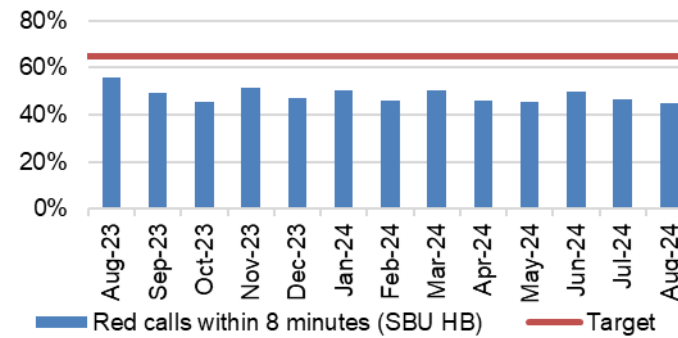


Chart 3: Number of ambulance handovers over 1 hour

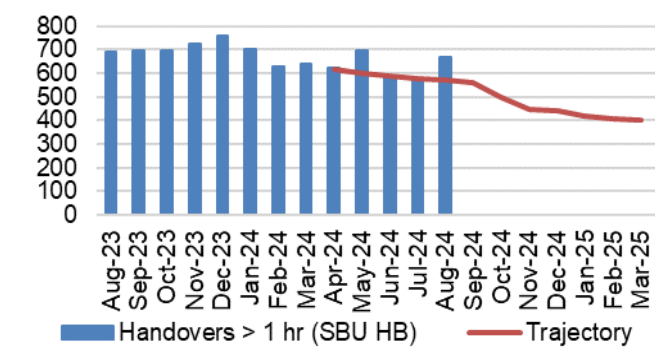


Chart 4: Lost hours- notification to ambulance handover over 15 minutes

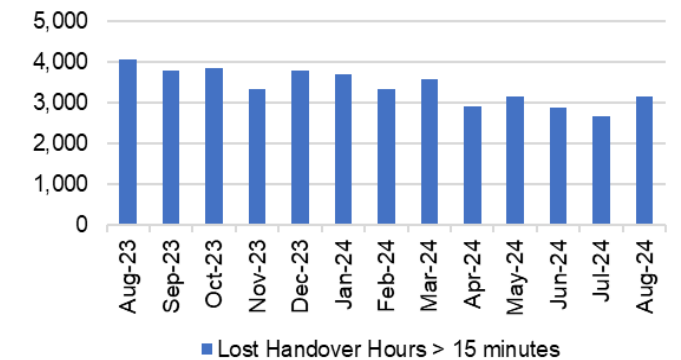


Chart 5: A&E Attendances

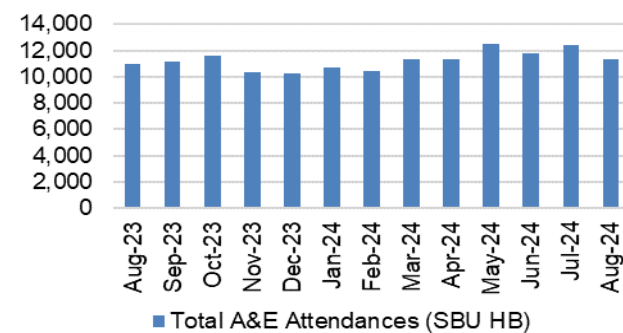


Chart 6: % patients who spend less than 4 hours in A&E

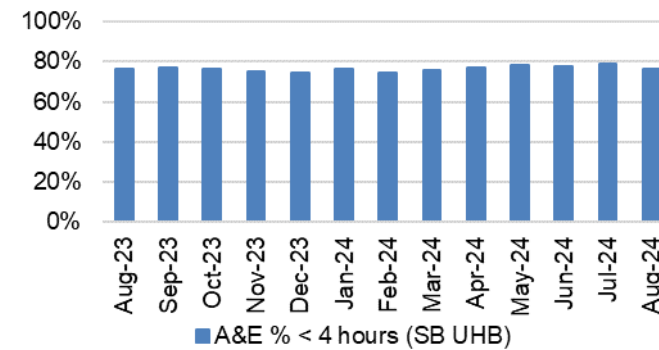


Chart 7: Number of patients waiting over 12 hours in A&E

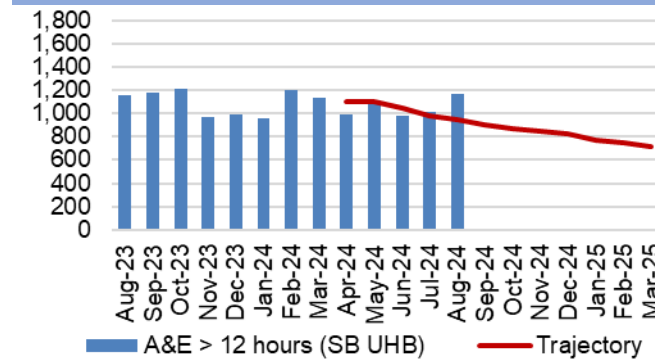


Chart 8: Number of emergency admissions

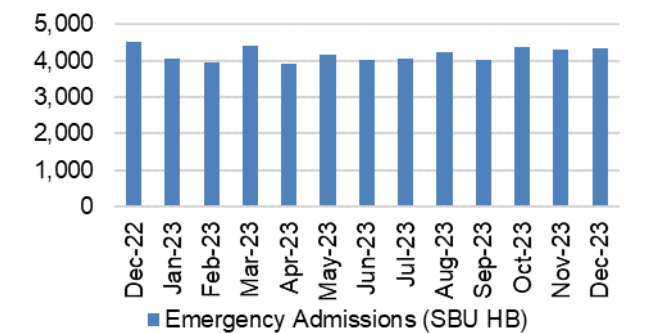


Chart 9: Elective procedures cancelled due to lack of beds

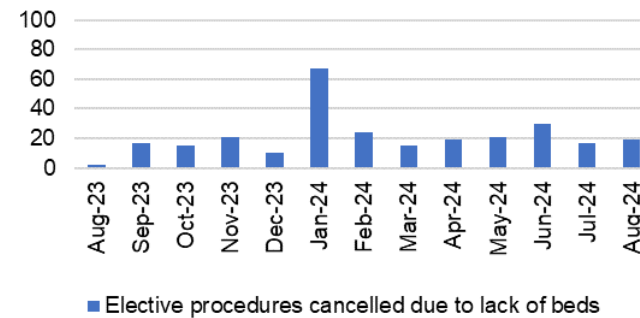


Chart 10: Number of clinically optimised patients

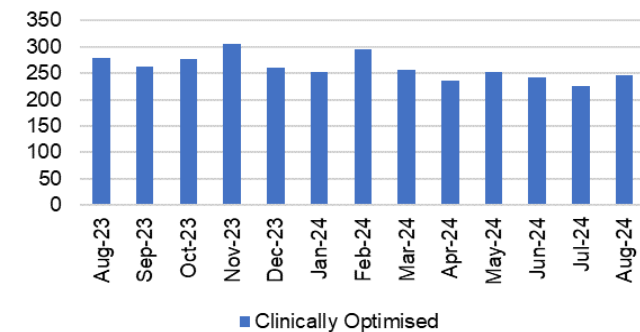


Chart 11: Delay reason for clinically optimised patients

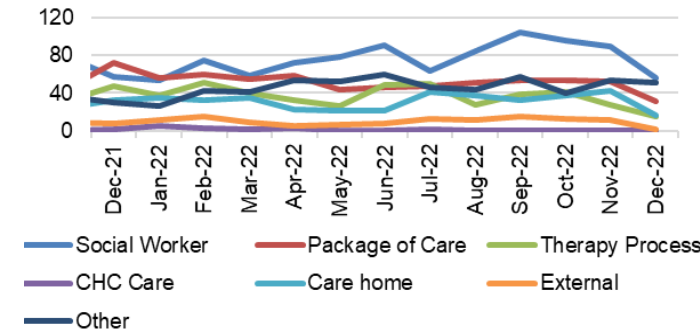


Chart 12: Average lost bed days (per day)

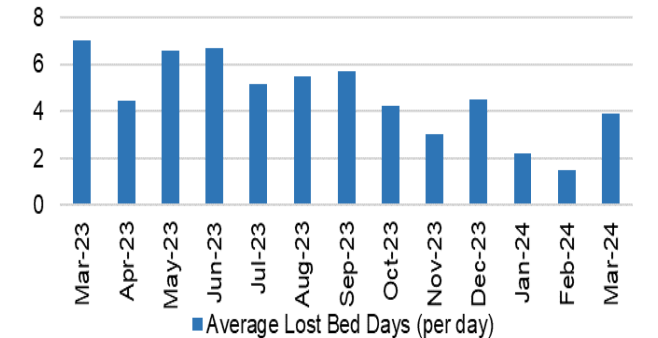


Chart 13: % of thrombolysed stroke patients with a door to door needle time of less than or equal to 45 minutes

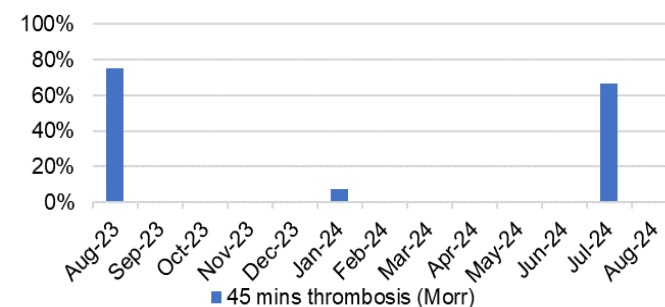


Chart 14: Direct admission to Acute Stroke Unit within 4 hours

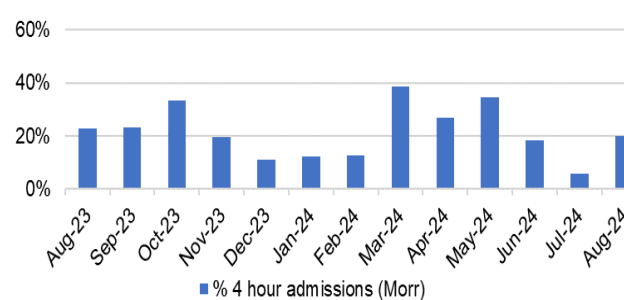


Chart 15: % of stroke patients receiving CT scan with 1 hour

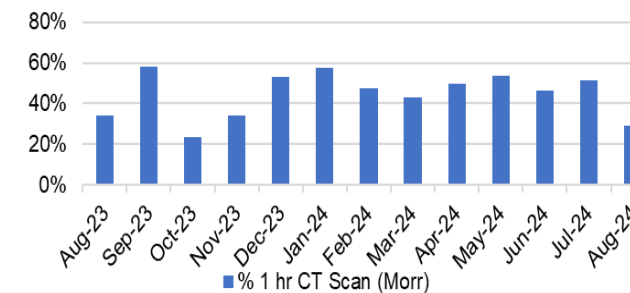
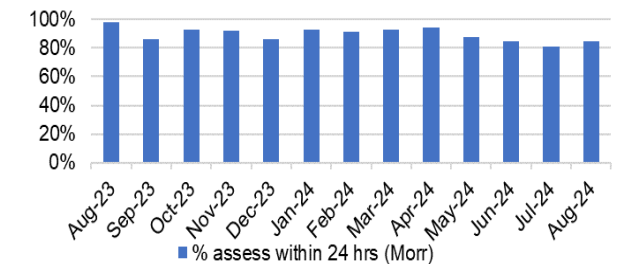


Chart 16: % stroke patients receiving consultant assessment within 24 hours



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)

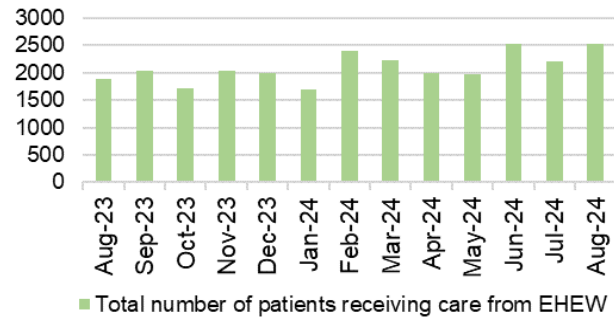


Chart 2: GMS - Escalation Levels

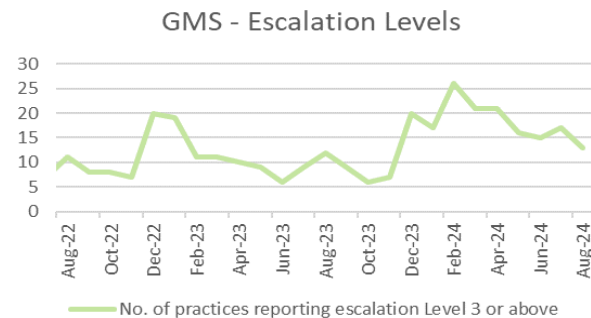


Chart 3: GMS - Sustainability

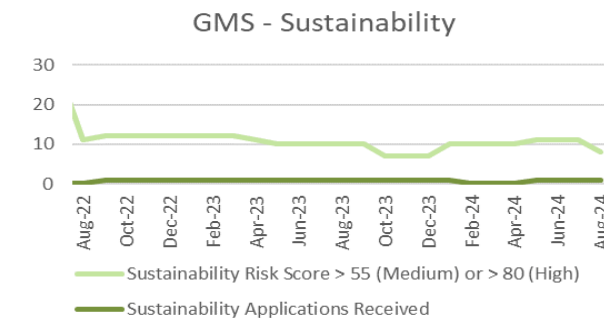


Chart 4: Number and percentage of adult dental patients re-attending NHS Primary Dental Care between 6-9 months

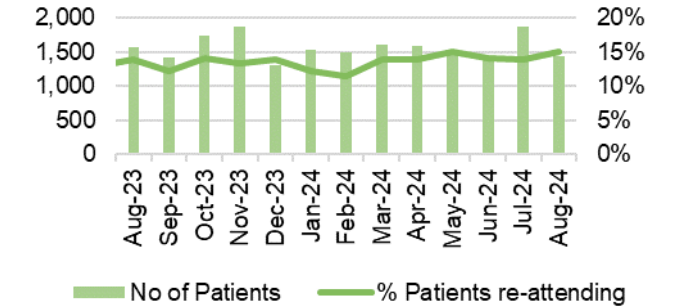


Chart 5: General Dental Services - Activity

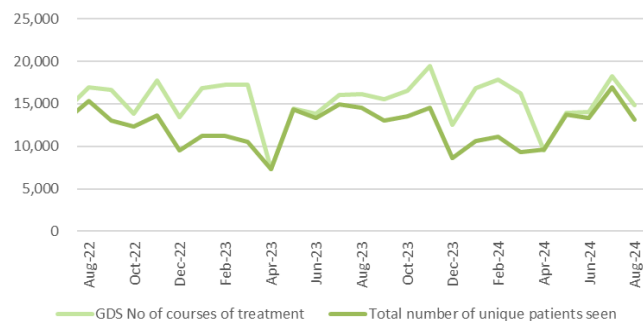


Chart 6: General Dental Services - New Patients

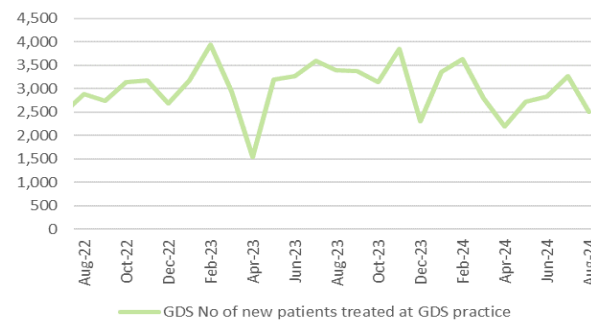


Chart 7: General Dental Services - ACORNs/FV

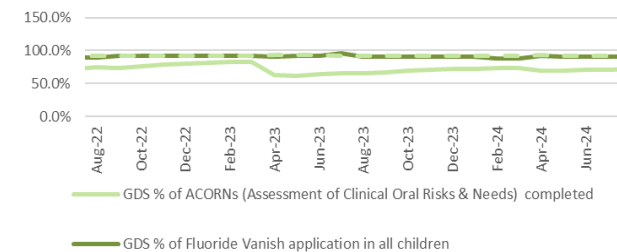


Chart 8: Optometry Activity – sight tests

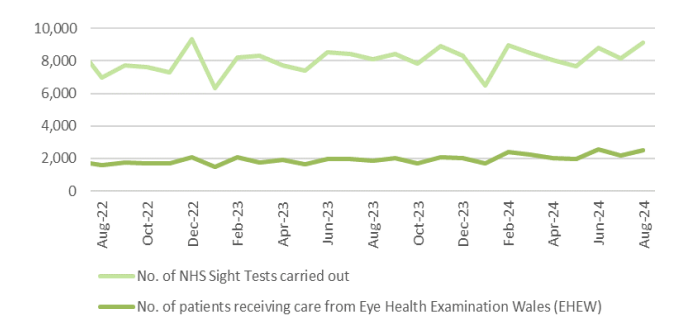


Chart 9: Optometry Activity – low vision care

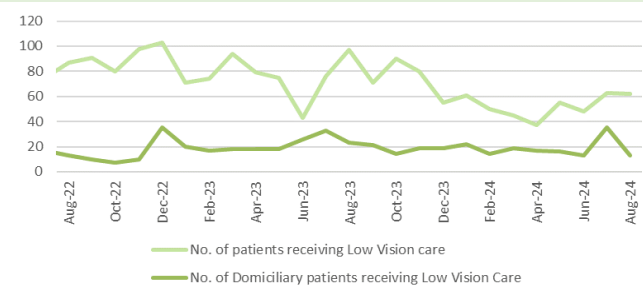


Chart 10: Community Pharmacy – Escalation levels

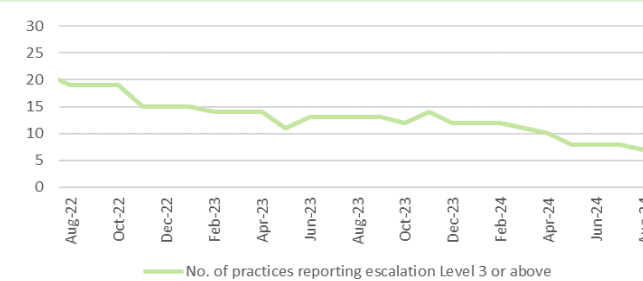


Chart 11: Common Ailment Scheme – No. consultations provided

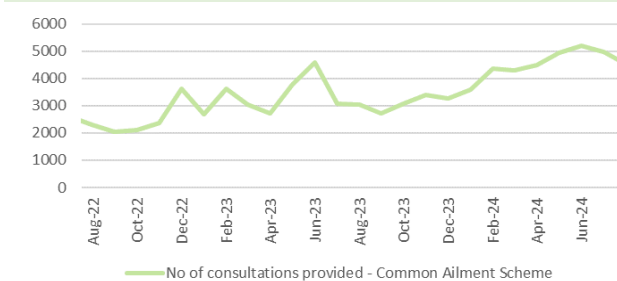


Chart 12: % of patients with a RTT (referral to stage 1) of 26 weeks or less for Restorative Dentistry

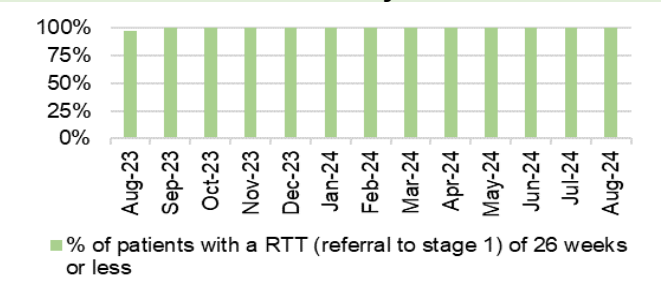


Chart 13: Podiatry - Total number of patients waiting > 14 weeks

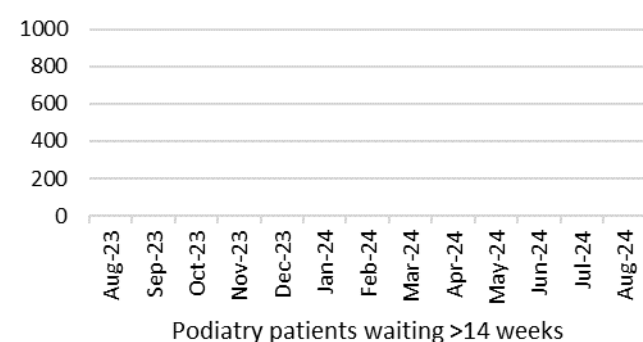


Chart 14: Dietetics - Total number of patients waiting > 14 weeks

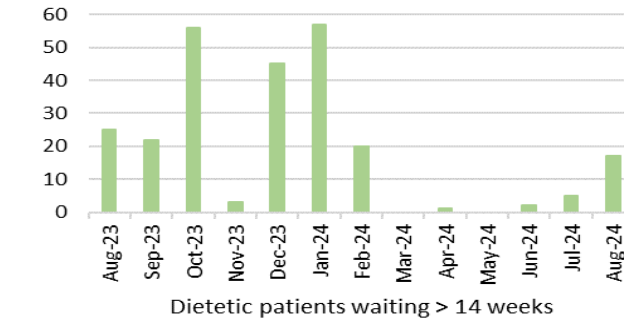


Chart 15: Audiology- Total number of patients waiting > 14 weeks

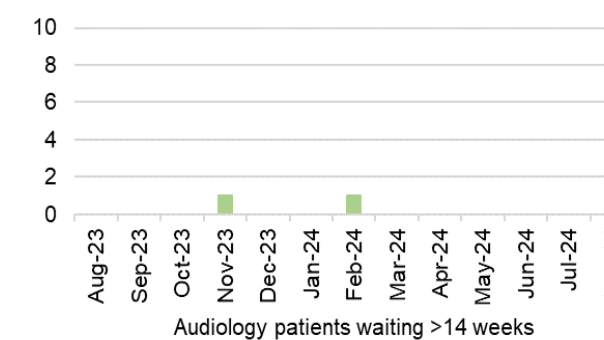
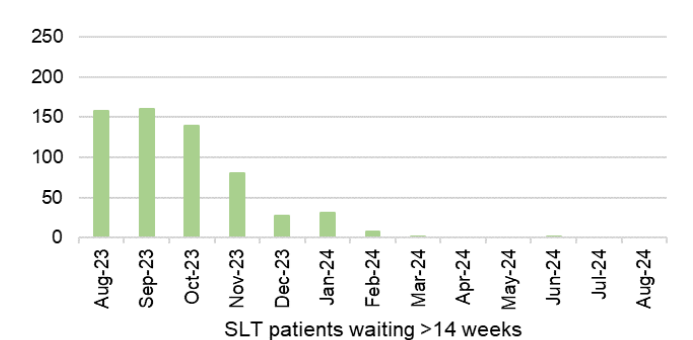


Chart 16: Speech & Language Therapy- Number of patients waiting > 14 weeks



Harm from reduction in non-Covid activity

Planned Care Overview

Chart 1: Number of GP Referrals into secondary care

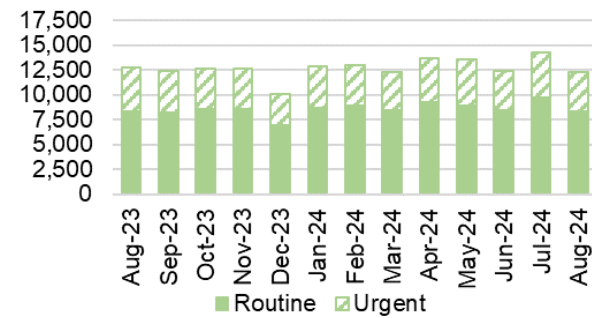


Chart 2: Number of patients waiting over 26 weeks for an outpatient appointment

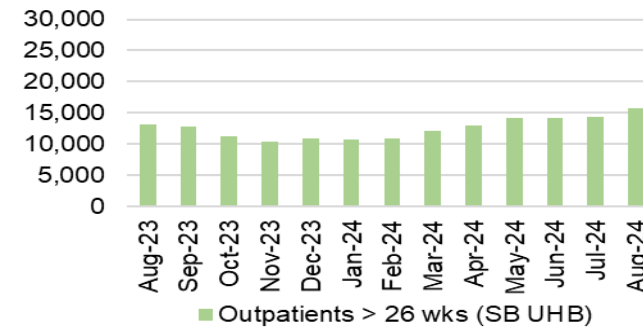


Chart 3: Number of patients waiting over 36 weeks for treatment at stage 1

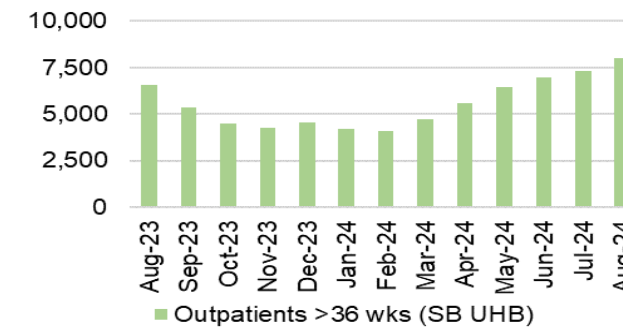


Chart 4: Number of patients waiting over 52 weeks for treatment

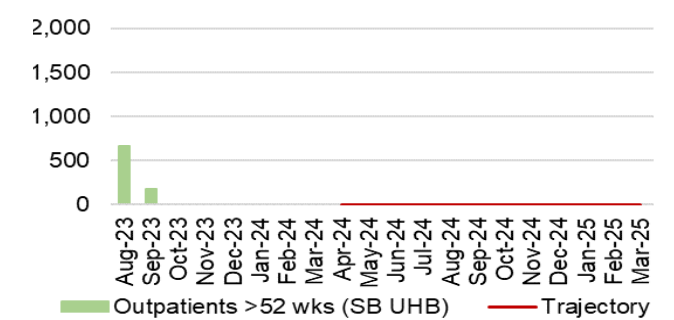


Chart 5: Number of patients waiting for reportable diagnostics over 8 weeks

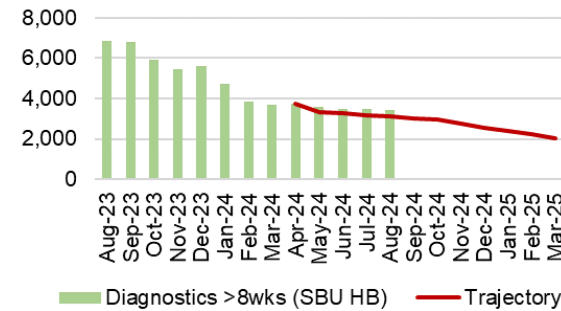


Chart 6: Number of patients waiting for reportable Cardiac diagnostics over 8 weeks

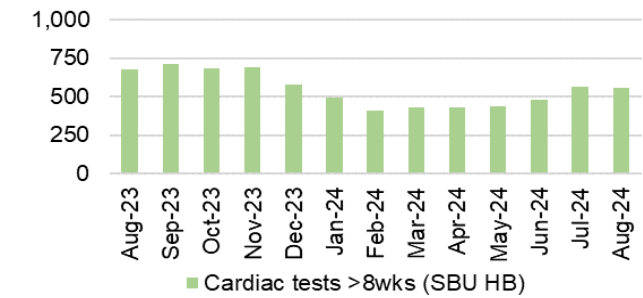


Chart 7: Number of patients waiting more than 14 weeks for Therapies

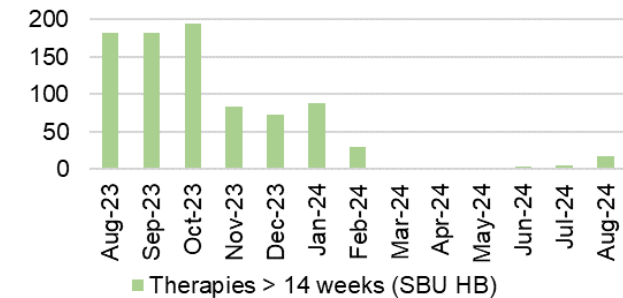


Chart 8: Cancer referrals

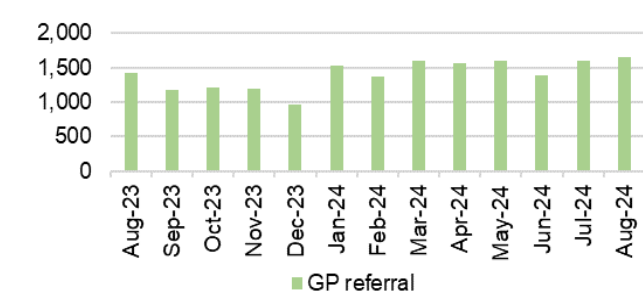


Chart 9: Single Cancer Pathway- % of patients starting definitive treatment within 62 days from point of suspicion

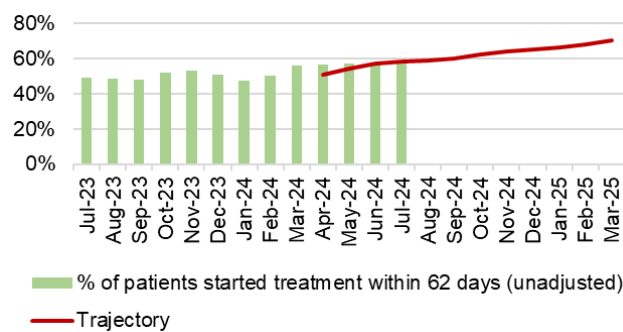


Chart 10: Number of new cancer patients starting definitive treatment

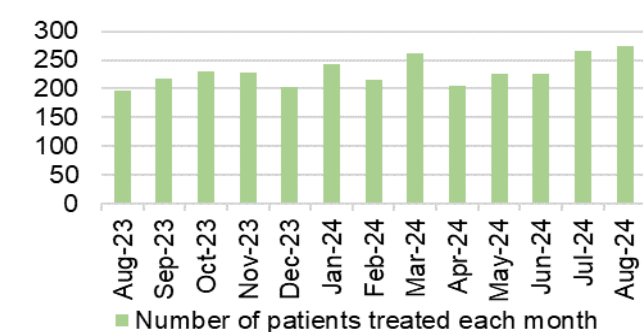


Chart 11: Single Cancer Pathway backlog- patients waiting over 63 days

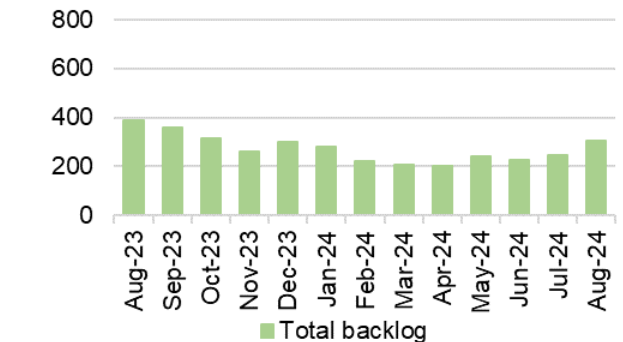


Chart 12: Number of patients waiting for an outpatient follow-up who are delayed past their target date

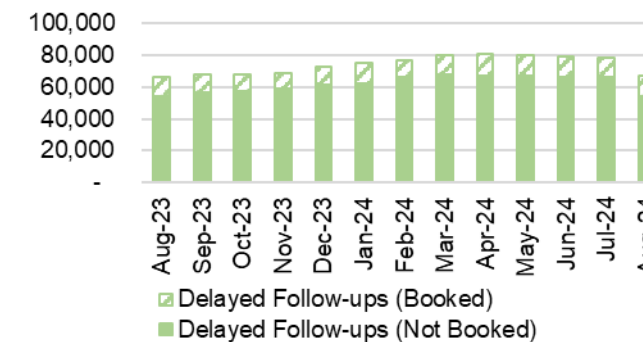


Chart 13: Number of patients without a documented clinical review date

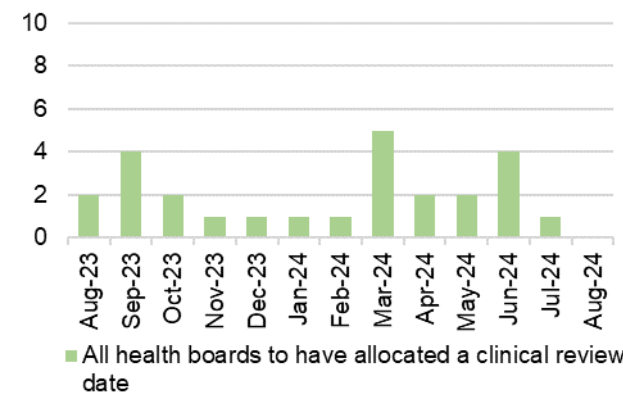


Chart 14: Ophthalmology patients without an allocated health risk factor

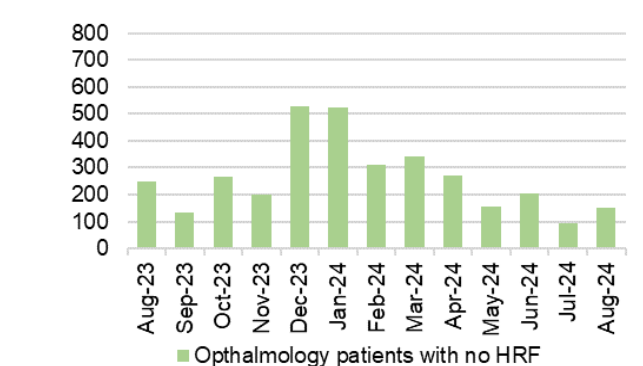


Chart 15: Total number of patients on the follow-up waiting list

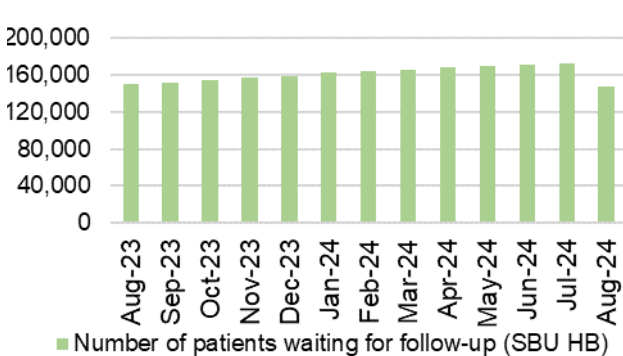
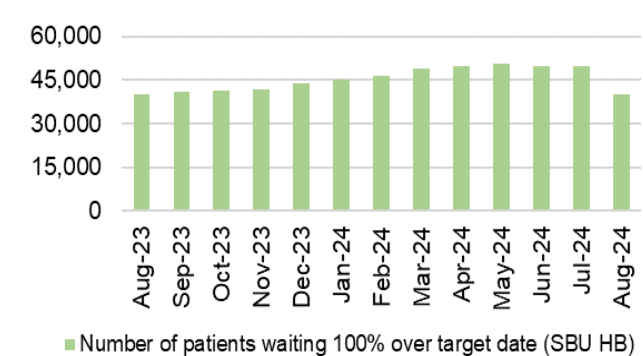


Chart 16: Number of patients delayed by over 100%



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

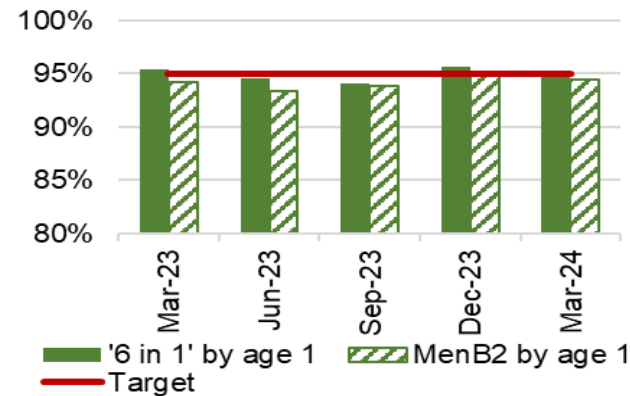


Chart 2: % children who received PCV2 vaccine and Rotavirus vaccine by age 1

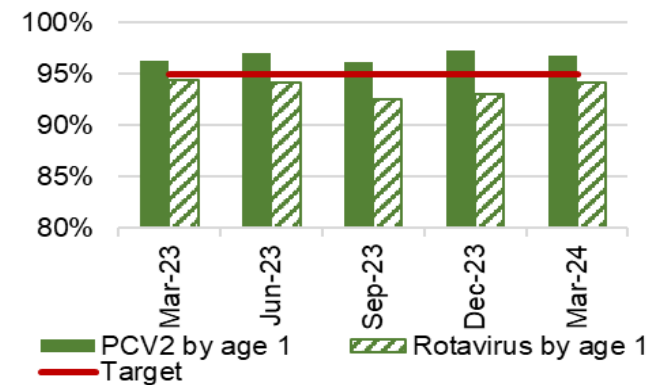


Chart 3: % children who received MMR1 vaccine and PCVf3 vaccine by age 2

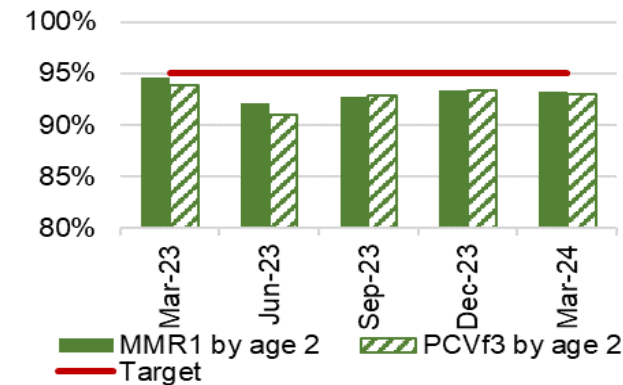


Chart 4: % children who received MenB4 vaccine and Hib/MenC vaccine by age 2

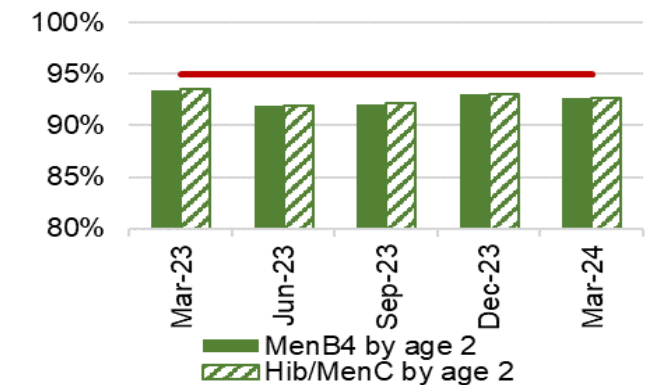


Chart 5: % children who are up to date in schedule by age 4

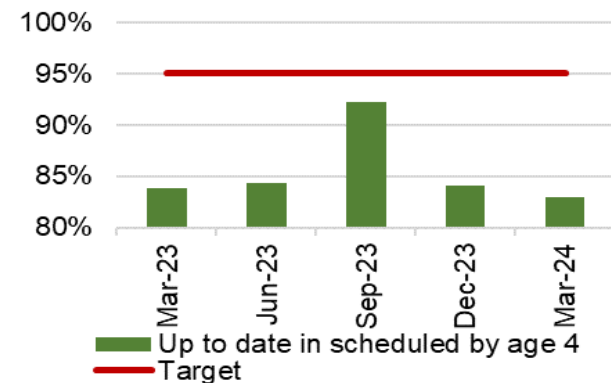


Chart 6: % children who received 2 doses of the MMR vaccine and 4 in 1 vaccine by age 5

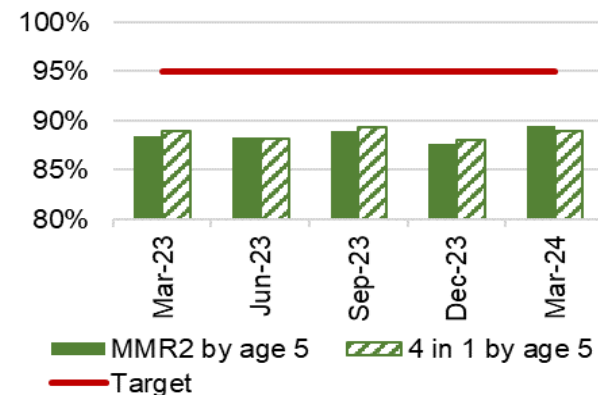


Chart 7: % children who received MMR vaccine and teenage booster by age 16

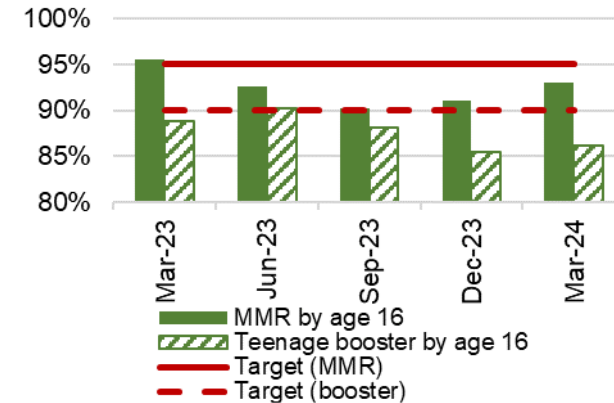


Chart 8: % children who received MenACWY vaccine by age 16

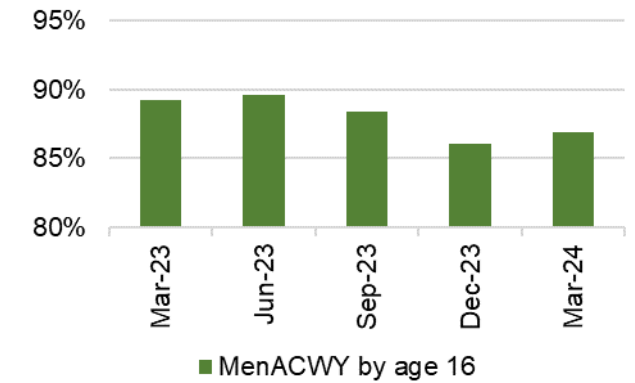
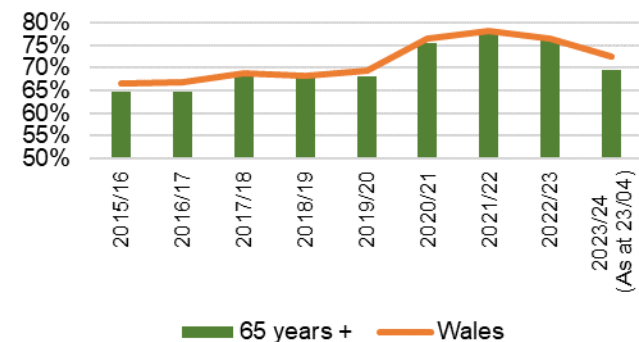
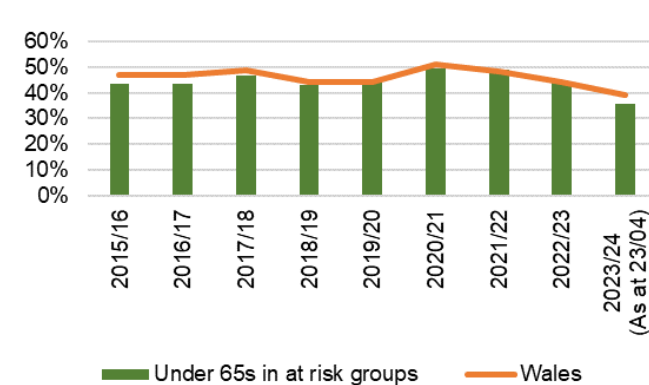


Chart 9: Influenza uptake for amongst 65 year olds and over



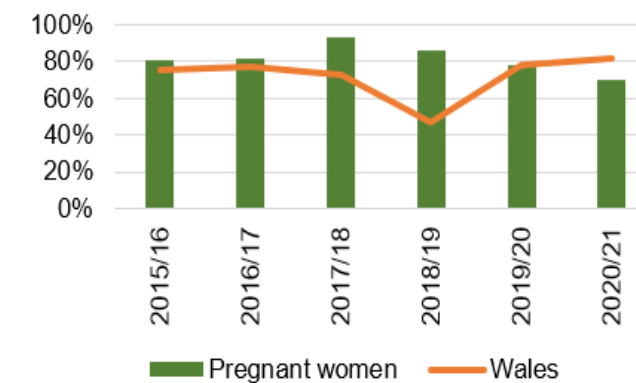
Data prior to April 2019 relates to Abertawe Bro Morgannwg University Health Board

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



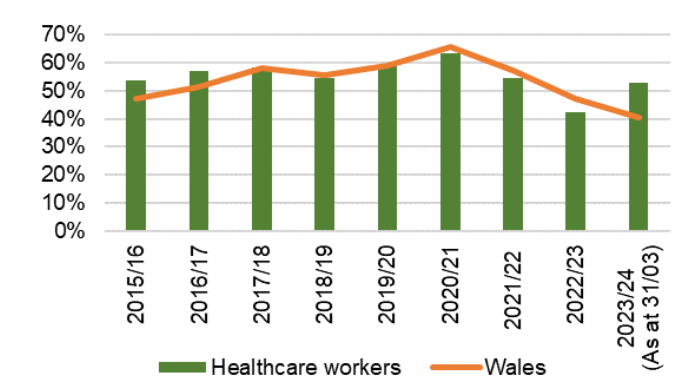
Data prior to April 2019 relates to Abertawe Bro Morgannwg University Health Board

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

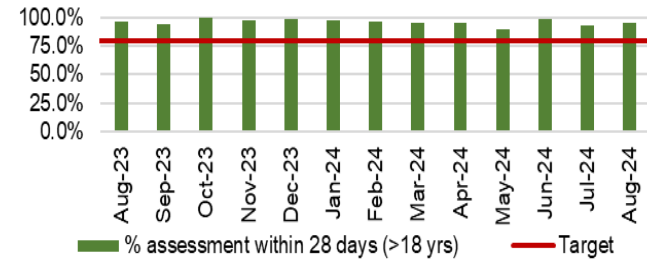


Chart 2: % of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS

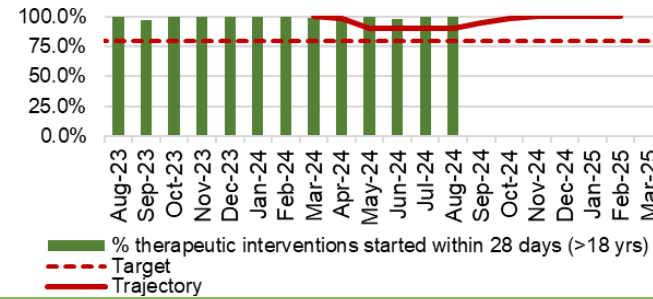


Chart 3: % of health board residents in receipt of secondary mental health services (all ages) who have a valid care and treatment plan

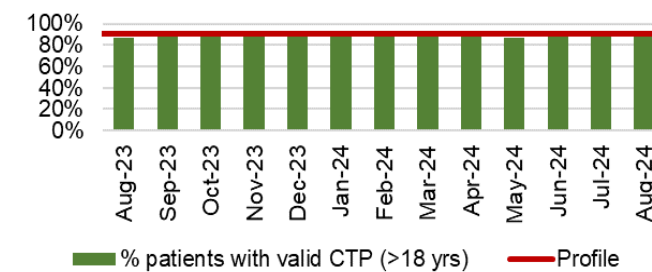


Chart 4: % of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health

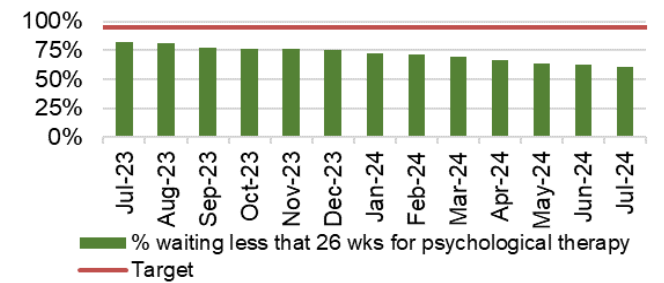


Chart 5: 95% of those admitted 0900-2100 will receive a gate-keeping assessment by the CRHTS prior to admission

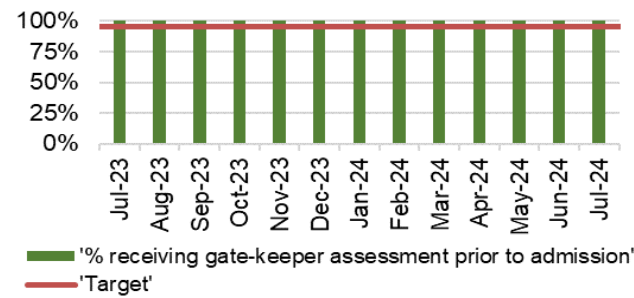


Chart 6: 100% of those admitted without a gate keeping assessment will receive a follow up assessment by CRHTS within 24hrs of admission

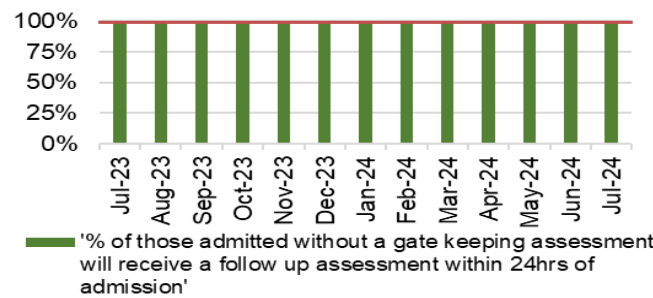


Chart 7: % of patients waiting under 14 weeks for Therapies

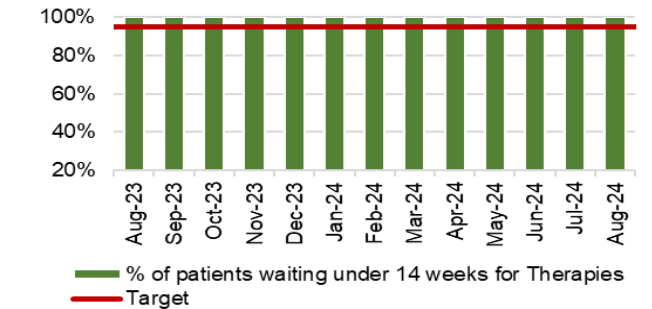


Chart 8: Number of Mental Health Delayed Transfers of Care (DTOCs)

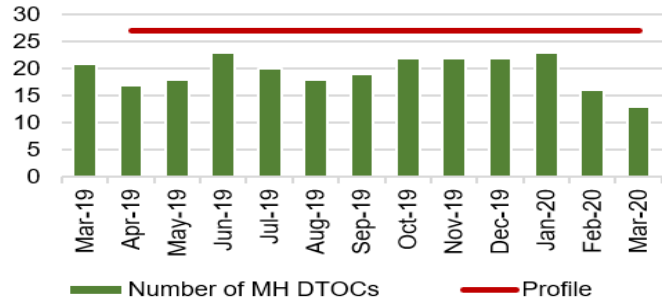


Chart 9: Number of patients detained under the Mental Health Act as a percentage of all admissions

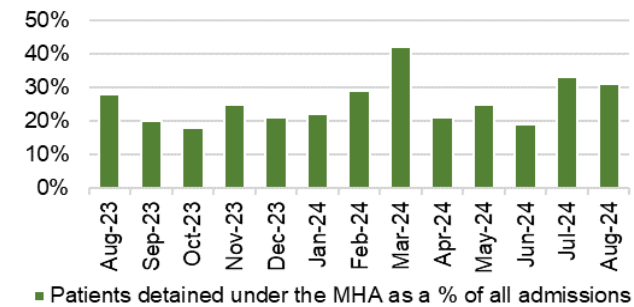


Chart 10: Number of patients subject to Deprivation of Liberty Safeguards (DOLS)

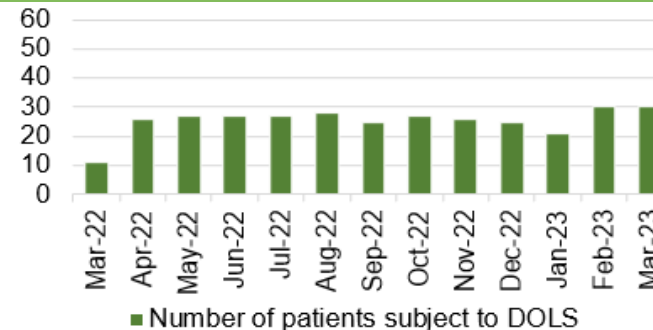


Chart 11: Number of Nationally Reportable Incidents

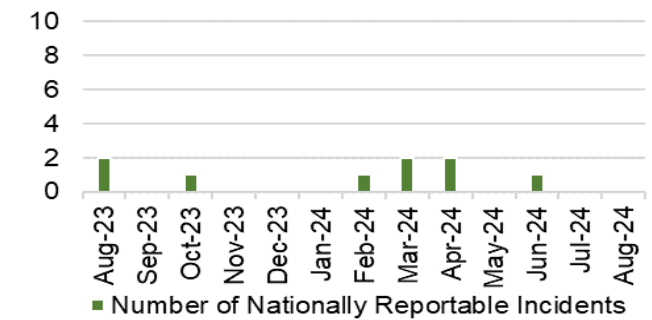
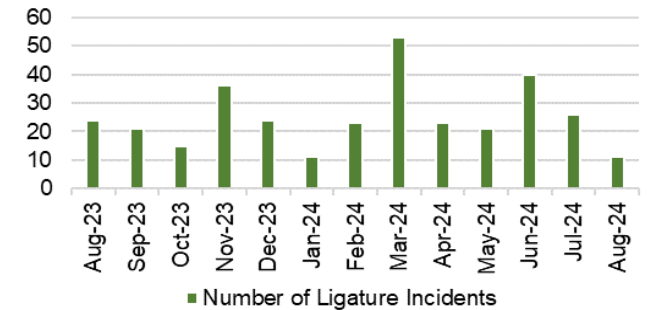


Chart 12: Number of ligature incidents



Child & Adolescent Mental Health Services (CAMHS)

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

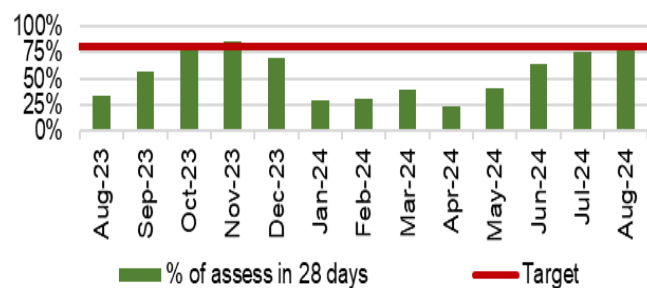


Chart 14: Neuro-developmental disorder assessment and intervention received within 26 weeks

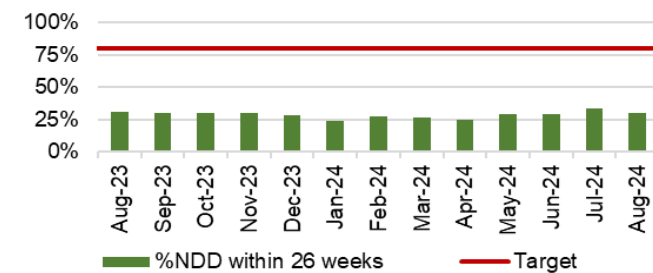


Chart 15: Assessment and intervention within 28 days

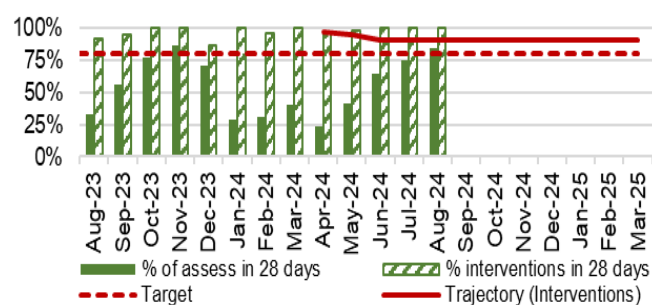
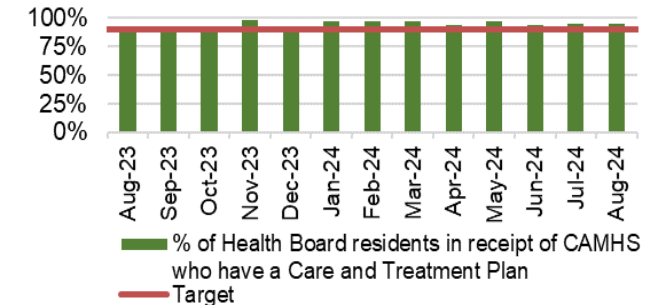


Chart 16: % of residents with a Care and Treatment Plan



APPENDIX 1: INTEGRATED PERFORMANCE DASHBOARD

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	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24
COVID19 related measures	Number of new COVID19 cases	Local	Aug-24	47		Reduce					132	139	175	80	214	174	70	45	51	64	70	73	47
	Number of staff referred for Antigen Testing	Local	Mar-23	18,230		Reduce																	
	Number of staff awaiting results of COVID19 test	Local	Aug-24	0		Reduce					0	0	0	0	0	0	0	0	0	0	0	0	0
	Number of COVID19 related incidents	Local	Aug-24	5		Reduce					33	37	35	21	43	35	21	17	28	24	25	6	5
	Number of COVID19 related serious incidents	Local	Aug-24	0		Reduce					0	0	0	0	1	1	0	1	0	0	0	0	0
	Number of COVID19 related complaints	Local	Aug-24	0		Reduce					0	1	1	1	0	0	0	0	0	0	0	0	0
	Number of COVID19 related risks	Local	Oct-21	0		Reduce																	
	Number of staff self isolated (asymptomatic)	Local	Jun-23	0		Reduce																	
	Number of staff self isolated (symptomatic)	Local	Jun-23	7		Reduce																	
	% sickness	Local	Jun-23	0.1%		Reduce																	
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	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24
Unscheduled Care	% of emergency responses to red calls arriving within (up to and including) 8 minutes	National	Aug-24	45%	65%	65%	✗	39.5% (Dec-22)	3rd (Dec-22)		56%	49%	46%	52%	47%	50%	46%	50%	46%	46%	50%	47%	45%
	Number of ambulance handovers over one hour	National	Aug-24	670	↑ trajectory	570	✗	6,798 (Dec-22)	1st (Dec-22)		694	695	696	724	762	704	629	638	625	695	590	578	670
	Handover hours lost over 15 minutes	Local	Aug-24	3147							4,075	3,807	3,868	3,343	3,787	3,693	3,344	3,573	2,905	3,158	2,890	2,678	3,147
	% 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	Aug-24	77%	Month on month improvement		✗	63.1% (Dec-22)	4th (Dec-22)		76%	77%	77%	75%	75%	77%	74%	76%	77%	78%	78%	79%	77%
	Number of patients who spend 12 hours or more in all hospital major and minor care facilities from arrival until admission, transfer or discharge	National	Aug-24	1167	↑ trajectory	950	✗	12,099 (Dec-22)	4th (Dec-22)		1,156	1,180	1,207	969	994	959	1,197	1,132	994	1,115	980	1,013	1,167
Stroke	Direct admission to Acute Stroke Unit (<4 hrs)	Local	Aug-24	20.0%							22.7%	23.3%	33.3%	19.6%	11.1%	12.3%	12.5%	38.5%	26.9%	34.5%	18.4%	5.9%	20.0%
	CT Scan (<1 hrs) (local)	Local	Aug-24	29.3%							34.1%	58.1%	23.8%	34.0%	52.8%	57.6%	47.5%	42.9%	50.0%	53.6%	46.2%	51.4%	29.3%
	Assessed by a Stroke Specialist Consultant Physician (< 24 hrs)	Local	Aug-24	84.5%							97.7%	86.0%	92.9%	92.0%	86.1%	93.2%	91.5%	92.9%	94.4%	87.5%	84.6%	81.1%	84.5%
	Thrombolysis door to needle <= 45 mins	Local	Aug-24	0.0%							75.0%	0.0%	0.0%	0.0%	0.0%	7.7%	0.0%	0.0%	0.0%	0.0%	0.0%	66.7%	0.0%
	% stroke patients who receive mechanical thrombectomy	Local	Aug-24	3.6%	10%		✗	2.1% (Nov-22)	4th (Nov-22)		6.3%	9.1%	0.0%	6.7%	4.5%	0.0%	0.0%	2.0%	11.0%	0.0%	2.6%	2.8%	3.6%
Nationally Reportable Incidents and risks	% compliance against the therapy target of an average of 16.1 minutes if speech and language therapist input per stroke patient	Local	Aug-24	38.4%	12 month ↑		✗	50.7% (Nov-22)	4th (Nov-22)		47.3%	72.0%	71.6%	69.5%	57.0%	49.4%	35.2%	31.3%	41.5%	45.7%	40.4%	23.8%	38.4%
	Of the nationally reportable incidents due for assurance, the % which were assured within the agreed timescales	National	Aug-24	70.0%		80%	✗				83%	50%	33%	100%	40%	100%	17%	66%	64%	33%	89%	50%	70%
	Number of new Never Events	Local		0		0	✓				1	0	2	2	1	0	1	0	0	0	0	1	0
	Number of risks with a score greater than 20	Local	Aug-24	149		12 month ↓	✗				146	152	140	170	146	141	147	149	152	153	154	153	149
	Number of risks with a score greater than 16	Local		320		12 month ↓	✓				316	322	304	363	305	296	310	318	316	311	309	320	320
Pressure Ulcers	Number of pressure ulcers acquired in hospital	Local	Jul-24	40		12 month ↓	✓				60	63	70	69	60	83	60		42	66	56	40	
	Number of pressure ulcers developed in the community			44		12 month ↓	✓				38	44	37	45	51	46	33		49	41	49	44	
	Total number of pressure ulcers		Jul-24	84		12 month ↓	✓				98	107	107	114	111	129	93		91	107	105	84	
	Number of grade 3+ pressure ulcers acquired in hospital			6		12 month ↓	✓				4	4	6	5	5	2	1		3	4	2	6	
	Number of grade 3+ pressure ulcers acquired in community		Jul-24	8		12 month ↓	✓				7	11	5	13	10	3	7		9	9	11	8	
Pressure Ulcers	Total number of grade 3+ pressure ulcers	Local	Jul-24	14		12 month ↓	✓				11	15	11	18	15	5	8		12	13	13	14	

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	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24
Infection control	Cumulative cases of E.coli bacteraemias per 100k pop	National	Aug-24	59.7	<67		✓	67.80 (Dec-22)	3rd (Dec-22)		76.5	75.7	69.6	73.3	69.1	69.3	68.1	67.0	60.3	54.6	54.4	52.3	59.7
	Number of E.Coli bacteraemia cases (Hospital)		Aug-24	12	≤ 234 (Cumulative)	11	✗				18	8	5	21	6	9	7	8	12	6	9	5	12
	Number of E.Coli bacteraemia cases (Community)			17		9	✗				9	15	6	11	6	10	10	11	7	10	9	9	17
	Total number of E.Coli bacteraemia cases			29		20	✗				27	23	11	32	12	19	17	19	19	16	18	14	29
	Cumulative cases of S.aureus bacteraemias per 100k pop		Aug-24	32.4	<20		✗	27.76 (Dec-22)	6th (Dec-22)		40.4	38.9	37.6	37.2	38.8	39.0	37.9	36.8	38.1	29.7	27.2	29.7	32.4
	Number of S.aureus bacteraemias cases (Hospital)		Aug-24	9	≤ 71 (Cumulative)	4	✗				6	7	6	8	9	7	5	5	9	4	4	8	9
	Number of S.aureus bacteraemias cases (Community)			5		2	✗				4	3	4	6	8	4	2	3	4	3	3	4	5
	Total number of S.aureus bacteraemias cases			14		6	✗				10	10	10	14	17	11	7	8	13	7	7	12	14
	Cumulative cases of C.difficile per 100k pop		Aug-24	68.4	<25		✗	36.68 (Dec-22)	5th (Dec-22)		52.0	57.3	56.9	62.5	62.6	64.3	64.7	65.2	63.5	60.9	63.8	58.5	68.4
	Number of C.difficile cases (Hospital)		Aug-24	30	≤ 95 (Cumulative)	5	✗				14	20	14	15	13	15	15	19	14	10	17	10	30
	Number of C.difficile cases (Community)			5		3	✗				3	7	4	18	8	7	5	3	6	9	5	4	5
	Total number of C.difficile cases			35		8	✗				17	27	18	33	21	22	20	22	20	19	22	14	35
	Cumulative cases of Klebsiella per 100k pop		Aug-24	33.0							22.6	25.1	24.1	24.2	23.5	25.0	25.4	24.5	31.7	32.8	35.6	32.8	33.0
	Number of Klebsiella cases (Hospital)		Aug-24	9	≤ 71 (Cumulative)	4	✗				4	7	5	4	1	6	2	3	5	6	8	5	9
	Number of Klebsiella cases (Community)			3		3	✓				6	5	1	4	5	5	7	2	5	5	5	3	3
	Total number of Klebsiella cases			12		7	✗	63 Total (Dec-22)	2nd (Dec-22)		10	12	6	8	6	11	9	5	10	11	13	8	12
	Cumulative cases of Aeruginosa per 100k pop		Aug-24	3.7							6.1	6.1	6.1	6.1	6.5	6.2	5.7	5.2	0.0	1.6	1.1	2.3	3.7
	Number of Aeruginosa cases (Hospital)		Aug-24	2	≤ 21 (Cumulative)	1	✗				0	1	2	2	3	2	0	0	0	1	0	2	2
	Number of Aeruginosa cases (Community)			1		1	✓				1	1	0	0	0	0	0	0	0	0	0	0	1
	Total number of Aeruginosa cases			3		2	✗	8 Total (Dec-22)	4th (Dec-22)		1	2	2	2	3	2	0	0	0	1	0	2	3
	Hand Hygiene Audits- compliance with WHO 5 moments	Local	Aug-24	93.9%		95%	✗				95%	96%	97%	95%	97%	98%	97%	88%	90%	91%	86%	91%	94%
Inpatient Falls	Number of Inpatient Falls	Local	Aug-24	173		12 month ↓	✓				200	157	190	166	158	192	203	201	146	155	158	176	173
NEWS	% patients with completed NEWS scores & appropriate responses actioned	Local	Aug-24	82%		98%	✗				85.2%	82.0%	89.6%	89.9%	85.7%	91.6%	85.5%	93.5%	81.6%	90.3%	87.3%	82.0%	81.7%
Coding	% of episodes clinically coded within 1 month of discharge	National	Jun-24	70%	12 month ↑		✗				61%	69%	76%	66%	76%	78%	70%	64%	48%	59%	70%	69%	
E-TOC	% of completed discharge summaries (total signed and sent)	Local	Aug-24	79%		100%	✗				66%	61%	66%	69%	70%	68%	72%	69%	76%	76%	76%	76%	79%
Workforce	Agency spend as a % of the total pay bill	Local	Aug-24	2.3%	12 month ↓		✓	5.9% (Sep-22)	7th out of 12 organisations (Sep-22)		5.3%	4.1%	3.4%	4.6%	4.1%	3.9%	3.7%			3.5%	2.9%	2.4%	2.3%
	% of headcount by organisation who have had a PADR/medical appraisal in the previous 12 months (excluding doctors and dentists in training)	National	Aug-24	74%	85%		✗	63.3% (Sep-22)	9th out of 12 organisations (Sep-22)		67%	66%	66%	66%	67%	69%	69%	70%	73%	73%	72%	73%	74%
	% compliance for all completed Level 1 competency with the Core Skills and Training Framework	Local	Aug-24	89%	85%		✓	81.8% (Sep-22)	8th out of 12 organisations (Sep-22)		88%	87%	88%	89%	88%	86%	90%	87%	90%	90%	90%	90%	89%
	% workforce sickness absence (12 month rolling)	National	Aug-24	7.07%	12 month ↓		✗	7.11% (Sep-22)	11th out of 12 organisations (Sep-22)		7.08%	7.08%	7.05%	7.09%	6.96%	6.96%	6.99%	6.96%	7.00%	7.05%	7.09%	7.27%	7.07%

		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	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24
Primary Care	% adult dental patients in the health board population re-attending NHS primary dental care between 6 and 9 months	Local	Aug-24	15.0%							13.9%	12.2%	14.0%	13.3%	13.9%	12.2%	11.4%	13.9%	13.9%	15.0%	14.0%	13.9%	15.0%
Cancer	% of patients starting definitive treatment within 62 days from point of suspicion (without adjustments)	National	Jun-24	58.6%	↑ trajectory	58%	✓	53.9% (Nov-22)	4th out of 6 organisations (Nov-22)		48.6%	47.9%	51.7%	53.3%	51.0%	47.5%	50.4%	55.8%	56.4%	57.0%	57.9%	58.6%	
Radiotherapy waiting times	Scheduled (14 Day Target)	Local	Aug-24	10%	80%		✗				44%	20%	10%	12%	17%	25%	28%	15%	17%	15%	7%	16%	10%
	Scheduled (21 Day Target)	Local	Aug-24	55%	100%		✗				83%	76%	42%	61%	77%	67%	81%	59%	62%	51%	49%	64%	55%
	Urgent SC (2 Day Target)	Local	Aug-24	30%	80%		✗				27%	33%	53%	31%	39%	26%	52%	50%	15%	20%	3%	28%	30%
	Urgent SC (7 Day Target)	Local	Aug-24	70%	100%		✗				91%	78%	73%	77%	65%	85%	79%	82%	64%	49%	58%	75%	70%
	Emergency (within 1 day)	Local	Aug-24	67%	80%		✗				92%	100%	100%	100%	100%	100%	67%	91%	88%	75%	80%	100%	67%
	Emergency (within 2 days)	Local	Aug-24	92%	100%		✗				100%	100%	100%	100%	100%	100%	100%	96%	100%	100%	100%	100%	92%
	Elective Delay (7 Day Target)	Local	Aug-24	94%	80%		✓				96%	98%	98%	95%	97%	99%	98%	98%	94%	85%	89%	92%	94%
	Elective Delay (14 Day Target)	Local	Aug-24	98%	100%		✗				100%	100%	100%	100%	97%	100%	100%	100%	98%	94%	100%	99%	98%
Planned Care	Number of patients waiting > 8 weeks for a diagnostic endoscopy	Local	Aug-24	2,756				15,517 (Nov-22)	7th (Nov-22)		4,415	4,148	3,737	3,427	3,553	3,509	3,311	3,238	3,281	3,066	2,963	2,865	2,756
	Number of patients waiting > 8 weeks for a specified diagnostics	National	Aug-24	3,425	↑ trajectory	3,115	✗	42,566 (Nov-22)	4th (Nov-22)		6,861	6,800	5,939	5,429	5,616	4,705	3,870	3,687	3,746	3,576	3,493	3,490	3,425
	Number of patients waiting > 14 weeks for a specified therapy	National	Aug-24	17	↑ trajectory			9,584 (Nov-22)	2nd (Nov-22)		183	182	195	84	73	88	29	1	1	0	4	5	17
	% of patients waiting < 26 weeks for treatment	Local	Aug-24	59.55%	95%			56% (Nov-22)	6th (Nov-22)		61.0%	60.7%	62.0%	62.6%	61.0%	60.8%	61.3%	60.6%	60.3%	59.9%	60.3%	60.9%	59.5%
	Number of patients waiting > 26 weeks for first outpatient appointment	Local	Aug-24	15,745							13,121	12,786	11,169	10,425	10,889	10,722	10,938	12,095	13,045	14,205	14,262	14,392	15,745
	Number of patients waiting > 36 weeks for first outpatient appointment	National	Aug-24	8,015	↑ trajectory						6,558	5,327	4,508	4,282	4,546	4,184	4,102	4,739	5,575	6,420	6,949	7,324	8,015
	Number of patients waiting > 52 weeks for first outpatient appointment	National	Aug-24	0	↑ trajectory	0	✓	85,301 (Nov-22)	3rd (Nov-22)		665	180	0	0	0	0	0	0	0	0	0	0	0
	Number of patients waiting > 52 weeks for treatment	National	Aug-24	13,905	↑ trajectory						14,877	14,417	13,942	13,453	13,386	13,318	13,211	13,181	12,898	13,259	13,623	13,622	13,905
	Number of patients waiting > 104 weeks for treatment	National	Aug-24	1,278	↑ trajectory	1,223	✗	49,594 (Nov-22)	5th (Nov-22)		4,999	4,645	4,097	3,460	2,969	2,566	2,175	1,831	1,725	1,579	1,477	1,284	1,278
	The number of patients waiting for a follow-up outpatient appointment	Local	Aug-24	147,509							150,060	152,025	154,704	157,285	159,226	162,964	164,581	166,438	169,049	170,254	171,913	172,898	147,509
Activity	The number of patients waiting for a follow-up outpatients appointment who are delayed over 100%	National	Aug-24	39,908	↑ trajectory			224,552 (Nov-22)	5th (Nov-22)		39,938	41,048	41,188	41,727	43,784	44,976	46,482	48,969	49,837	50,646	49,585	49,591	39,908
	% of ophthalmology R1 appointments attended which were within their clinical target date or within 25% beyond their clinical target date	National	Aug-24	57%	95%		✗	64.9% (Nov-22)	1st (Nov-22)		60.3%	63.7%	60.2%	61.5%	64.7%	61.3%	62.9%	57.3%	54.6%	56.7%	61.3%	59.1%	56.8%
	Number of GP referrals	Local	Aug-24	12,326	12 month ↓		✓				12,698	12,383	12,644	12,622	10,102	12,876	12,976	12,269	13,687	13,540	12,365	14,282	12,326
	Number of patients referred from primary care into secondary care Ophthalmology Services	National	Aug-24	785	↑ trajectory						812	815	851	843	735	775	721	936	932	783	794	838	785
	% of patients who did not attend a new outpatient appointment	Local	Aug-24	9%	12 month ↓		✓				9.6%	10.6%	9.7%	10.0%	9.7%	9.3%	8.9%	9.5%	8.9%	8.7%	8.5%	7.8%	8.7%
	% of patients who did not attend a follow-up outpatient appointment	Local	Aug-24	8%	12 month ↓		✓				8.0%	8.1%	7.7%	7.6%	8.0%	8.2%	7.2%	7.3%	7.3%	7.9%	7.4%	7.1%	7.6%
	Theatre Utilisation rates	Local	Aug-24	77%		90%	✗				66%	73%	76%	72%	63%	63%	69%	65%	78%	73%	66%	77%	
	% of theatre sessions starting late	Local	Aug-24	34%		<25%	✗				36%	38%	40%	39%	40%	37%	37%	31%	35%	33%	38%	34%	
	% of theatre sessions finishing early	Local	Aug-24	48%		<20%	✗				51%	50%	47%	44%	49%	52%	50%	45%	47%	49%	53%	48%	
	% of theatre sessions finishing early	Local	Aug-24	48%		<20%	✗				51%	50%	47%	44%	49%	52%	50%	45%	47%	49%	53%	48%	
Patient experience	Number of friends and family surveys completed	National	Aug-24	4,913	Month on month improvement		✗				5,188	4,084	5,738	5,792	4,004	5,211	5,232	5,427	5,579	5,344	5,535	5,853	4,913
	% of who would recommend and highly recommend	Local	Aug-24	93%		90%	✓				92%	92%	92%	92%	92%	93%	92%	92%	93%	92%	93%	93%	93%
	% of all-Wales surveys scoring 9 out of 10 on overall satisfaction	Local	Aug-24	93%		90%	✓				92%	92%	93%	93%	93%	93%	93%	92%	93%	93%	93%	94%	93%
Complaints	Number of new formal complaints received	Local	Jun-24	130		12 month ↓ trend	✓				155	171	164	171	108	181	168	167	140	145	130		
	% concerns that had final reply (Reg 24)/interim reply (Reg 26) within 30 working days of concern received	Local	Jun-24	70%		80%	✗				71%	62%	74%	55%	69%	72%	71%	71%	74%	73%	70%		
	% of acknowledgements sent within 2 working days	Local	Jun-24	100%		100%	✓				100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		

		Harm from wider societal actions/lockdown																						
Sub Domain	Measure	National or Local Target	Report Period	Current Performance	National Target	Annual Plan/ Local Profile	Profile Status	Welsh Average/ Total	SBU's all-Wales rank	Performance Trend	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	
	% children who received 3 doses of the hexavalent '6 in 1' vaccine by age 1	National	Q4 23/24	95.0%	95%			94.7% (Q2 22/23)	2nd (Q2 22/23)			94.1%			95.6%			95.0%						
	% of children who received 2 doses of the MMR vaccine by age 5	National	Q4 23/24	69.5%	95%			90.0% (Q2 22/23)	5th (Q2 22/23)			88.9%			87.6%			89.5%						
Influenza	% uptake of influenza among 65 year olds and over	National	Mar-24	69.5%	75%			78.0% (Mar-22)	3rd (Mar-22)	Data collection restarts October 2023			58.1%		68.0%	69.1%	69.4%	69.5%	Data collection restarts October 2024					
	% uptake of influenza among under 65s in risk groups	Local	Mar-24	35.5%	55%			48.2% (Mar-22)	4th (Mar-22)				25.3%		33.5%	34.8%	35.4%	35.5%						
	% uptake of influenza among children 2 to 3 years old	Local	Mar-24	38.0%	50%			47.6% (Mar-22)	5th (Mar-22)				22.7%		35.1%	38.9%	38.0%	38.0%						
	% uptake of influenza among healthcare workers	Local	Mar-24	52.7%	60%			65.6% (2020/21)	6th out of 10 organisations (2020/21)				13.8%		38.6%	38.6%	38.6%	52.7%						
Covid Booster	% uptake of the Spring COVID-19 vaccination for those eligible	National	Jun-24	59.9%	75%		✗				Data collection restarts Apr-24								43.2%	57.1%	59.9%	Available Apr 2025		
	% uptake of the Autumn COVID-19 vaccination for those eligible	National	Mar-24	50.5%	75%		✗				Data collection for Autumn	16.1%	38.1%	45.8%	50.0%	50.6%	50.5%	50.5%	Available Sep-24					
CAMHS	% of urgent assessments undertaken within 48 hours from receipt of referral (Crisis)	Local	Aug-24	100%	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	Aug-24	30%	80%		✗	31.4% (Nov-22)	3rd (Nov-22)		31%	30%	30%	30%	29%	24%	28%	26%	25%	29%	29%	33%	30%	
	% Patients waiting less than 28 days for a first outpatient appointment for CAMHS	National	Aug-24	84%	80%		✗	83.2% (Nov-22)	5th (Nov-22)		33%	56%	77%	86%	70%	29%	31%	40%	23%	41%	64%	75%	84%	
	P-CAMHS - % of Routine Assessment by CAMHS undertaken within 28 days from receipt of referral	National	Aug-24	84%	80%		✗	66.8% (Nov-22)	5th (Nov-22)		33%	56%	77%	86%	70%	29%	31%	40%	23%	41%	64%	75%	84%	
	P-CAMHS - % of therapeutic interventions started within 28 days following assessment by LPMHSS	National	Aug-24	100%	80%	90%	✔	34.4% (Nov-22)	4th (Nov-22)		91%	95%	100%	100%	86%	100%	96%	100%	97%	98%	100%	100%	100%	
	S-CAMHS - % of Routine Assessment by SCAMHS undertaken within 28 days from receipt of referral	Local	Feb-23	82%	80%																			
	% residents in receipt of CAMHS to have a valid Care and Treatment Plan (CTP)	National	Aug-24	95%	90%		✔	63.8% (Nov-22)	1st (Nov-22)		93%	92%	92%	98%	92%	97%	97%	97%	94%	97%	94%	95%	95%	
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	Aug-24	95%	80%		✔	86.9% (Nov-22)	3rd (Nov-22)		96%	94%	100%	97%	98%	97%	96%	95%	95%	90%	99%	93%	95%	
	% of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS (over 18 years of age)	National	Aug-24	100%	80%	90%	✔	73.1% (Nov-22)	2nd (Nov-22)		100%	97%	100%	100%	100%	100%	100%	99%	100%	100%	98%	100%	100%	
	% patients waiting < 26 weeks to start a psychological therapy in Specialist Adult Mental Health	National	Jul-24	61%	80%		✗	73.9% (Nov-22)	2nd (Nov-22)		81%	77%	76%	76%	76%	73%	71%	69%	66%	64%	63%	61%		
	% residents in receipt of secondary MH services (all ages) who have a valid care and treatment plan (CTP)	National	Aug-24	92%	90%		✔	84.2% (Nov-22)	2nd (Nov-22)		87%	88%	89%	90%	88%	88%	89%	89%	90%	87%	90%	92%	92%	
	% 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	Jul-24	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	Jul-24	100%	100%		✔	90.9% (Nov-22)	1st (Nov-22)		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		