

Appendix 1 Performance Dashboard – May 2020 “At a Glance”

STAYING HEALTHY - People in Wales are well informed and supported to manage their own physical and mental health	Target	Current		Previous	
		Period	Performance	Period	Performance
Of those women who had their initial assessment and gave birth within the same health board, the % of pregnant women who gave up smoking during pregnancy (by 36-38 weeks of pregnancy)	Annual Improvement	Mar-20	28.3%	Feb-20	15.1%
% of children who received 3 doses of the hexavalent '6 in 1' vaccine by age 1	95%	Q2 19/20	97.1%	Q1 19/20	96.9%
% of children who received 2 doses of the MMR vaccine by age 5		Q2 19/20	90.8%	Q1 19/20	97.1%
The % of adult smokers who make a quit attempt via smoking cessation services	5%	Q1-Q2 19/20	2.1%	Q1 19/20	1.1%
The % of those smokers who are CO-validated as quit at 4 weeks	40%	Q1-Q2 19/20	39.5%	Q1 19/20	38.5%
SAFE CARE - People in Wales are protected from harm and are supported to protect themselves from known harm	Target	Current		Previous	
		Period	Performance	Period	Performance
Amenable mortality per 100,000 of the European standardised population	Annual Reduction	2018	108.1	2017	106.5
% of in-patients with a positive sepsis screening who have received all elements of the 'Sepsis Six' first hour care bundle within one hour of positive screening	12 month Improvement Trend	Jan-20	52.5%	Dec-19	58.1%
% of patients who presented to the Emergency Department with a positive sepsis screening who have received all elements of the 'Sepsis Six' first hour care bundle within one hour of positive screening		Jan-20	43.1%	Dec-19	77.8%
The number of potentially preventable hospital acquired thrombosis	4 Qtr Reduction Trend	Q2 19/20	0	Q1 19/20	1
Total antibacterial items per 1,000 STAR-PUs (specific therapeutic group age related prescribing unit)		Q2 19/20	290.1	Q1 19/20	302.8
Cumulative rate of laboratory confirmed E.coli bacteraemia cases per 100,000 population	67 per 100,000 population	Mar-20	91.65	Feb-20	92.27
Cumulative rate of laboratory confirmed Aureus bacteraemia (MRSA & MSSA) cases per 100,000 population	20 per 100,000 population		31.67		32.64
Cumulative rate of laboratory confirmed C.difficile cases per 100,000 population	21 per 100,000 population		26.28		27.00
Number of Patient Safety Solutions Wales Alerts and Notices that were not assured within the agreed timescale	Zero	Q3 19/20	1	Q2 19/20	1
Of the serious incidents due for assurance, the % which were assured within the agreed timescales	Annual Reduction	Feb-20	31.6%	Jan-20	45.0%
Number of new never events	Zero	Feb-20	0	Jan-20	0
Local Measure: Number of incidents and severity reported	Annual Reduction	Mar-20	1363	Feb-20	1588
EFFECTIVE CARE - People in Wales receive the right care and support locally as possible and are enabled to contribute to making that care successful	Target	Current		Previous	
		Period	Performance	Period	Performance
Number of health board mental health delayed transfer of care	12 month Reduction Trend	Mar-20	8	Feb-20	6
Number of health board non-mental health delayed transfer of care		Mar-20	86	Feb-20	88
% of universal mortality reviews (UMRs) undertaken within 28 days of a death	95%	Mar-20	60.8%	Feb-20	75.5%
Crude hospital mortality rate (74 years of age or less)	12 month Reduction Trend	Feb-20	0.96%	Jan-20	0.96%
% compliance of the completed Level 1 Information Governance (Wales) training element of the Core Skills and Training Framework	85%	Feb-20	73.8%	Jan-20	73.2%
% of episodes clinically coded within one reporting month post episode discharge end date (current position)	95% in Month	Feb-20	61.4%	Jan-20	72.7%
% of clinical coding accuracy attained in the NWIS national clinical coding accuracy audit programme	Annual Improvement	2019/20	94.0%	2018/19	93.2%
All new medicines recommended by AWMSG and NICE, including interim recommendations for cancer medicines, must be made available where clinically appropriate, no later than two months from the publication of the NICE Final Appraisal Determination and the AWMSG appraisal recommendation	100%	Q2 19/20	98.5%	Q1 19/20	98.5%
Number of Health and Care Research Wales clinical research portfolio studies	Improvement >=10% previous year	Q1-Q2 19/20	34	2018/19	70
Number of Health and Care Research Wales commercially sponsored studies	Improvement >=5% previous year		3		9
Number of patients recruited in Health and Care Research Wales clinical research portfolio studies	Improvement >=10% previous year		715		3616
Number of patients recruited in Health and Care Research Wales commercially sponsored studies	Improvement >=5% previous year		4		41
DIGNIFIED CARE - People in Wales are treated with dignity and respect and treat others the same	Target	Current		Previous	
		Period	Performance	Period	Performance
Number of procedures postponed either on the day or the day before for specified non-clinical reasons (includes patient reasons)	>5% Reduction from 2017/18	Mar-20	322	Feb-20	277
The % of concerns that have received a final reply (under Regulation 24) or an interim reply (under Regulation 26) up to and including 30 working days from the date the concern was first received by the organisation	75%	Q3 19/20	48.6%	Q2 19/20	50.7%
% of people in Wales registered at a GP practice (age 65 years or over) who are diagnosed with dementia (Cwm Taf)	Annual Improvement	2018/19	50.0%	2017/18	48.7%
TIMELY CARE - People in Wales have timely access to services based on clinical need and are actively involved in decisions about their care	Target	Current		Previous	
		Period	Performance	Period	Performance
% of GP practices offering daily appointments between 17:00 and 18:30 hours on 5 days a week target	Annual Improvement	2018	94.9%	2017	95.1%
The % of patients waiting less than 26 weeks for treatment	95%	Apr-20	70.6%	Mar-20	79.4%
The number of patients waiting more than 36 weeks for treatment	Zero		7174		4504
The number of patients waiting more than 8 weeks for a specified diagnostic			6368		1810
The number of patients waiting more than 14 weeks for a specified therapy			110		13
The number of patients waiting for an outpatient follow-up (NOT BOOKED) who are delayed by over 100% past their agreed target date for planned care sub specialties	Reduction 15% against 2018/19	Mar-20	16470	Feb-20	13883
The number of patients waiting for an outpatient follow-up (BOOKED) who are delayed by 100% past their agreed target date for planned care sub specialties			2422		3874
% compliance with stroke quality improvement measures - QIM's	% patients who have directect admission to acute stroke unit (< 4 hrs)	Mar-20	44.6%	Feb-20	40.8%
	% of thrombolysed stroke patients with door to needle time of <= 45 mins		25.0%		70.0%
	% patients who receive a CT scan within 1 hr		69.6%		64.1%
	% patients assessed by stroke specialist consultant physician within 24 hrs		67.9%		73.1%
The % of emergency responses to red calls arriving within (up to and including) 8 minutes	65%	Feb-20	65.6%	Jan-20	62.4%
Local Measure: % of ambulance handovers within 15 minutes	Annual Improvement	Apr-20	67.4%	Mar-20	61%
Number of ambulance handovers over one hour	Zero		18		107
The % 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	95%		90.2%		80.3%
The number of patients who spend 12 hours or more in all hospital major and minor care facilities from arrival until admission, transfer or discharge	Zero		26		671
The % of patients newly diagnosed with cancer, not via the urgent route, that started definitive treatment within (up to & including) 31 days of diagnosis (regardless of referral route) (NUSC)	98%	Mar-20	91.4%	Feb-20	98.0%
The % of patients newly diagnosed with cancer, via the urgent suspected cancer route, that started definitive treatment within (up to & including) 62 days of receipt of referral (USC)	95%		69.0%		68.7%
The % of patients starting first definitive treatment within (up to & including) 62 days from point of suspicion (SCP)	12 month Improvement Trend		67.2%		65.5%
The % of mental health assessments undertaken within (up to and including) 28 days from the date of receipt of referral	80%	Mar-20	74.4%	Feb-20	79.9%
The % of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS			94.3%		89.6%
The % of qualifying patients (compulsory and informal/voluntary) who had their first contact with an Independent Mental Health Advocacy (IMHA) within 5 working days of their request for an IMHA	100%	Q3 19/20	100%	Q2 19/20	100%
INDIVIDUAL CARE - People in Wales are treated as individuals with their own needs and responsibilities	Target	Current		Previous	
		Period	Performance	Period	Performance
Number of calls to the mental health helpline CALL (Community Advice and Listening Line) by Welsh residents per 100,000 of the population	12 month Improvement Trend	Q3 19/20	54.4	Q2 19/20	57.7
Number of calls to the Wales dementia helpline by Welsh residents per 100,000 of the population (age 40+)			3		4.3
Number of calls to the DAN 24/7 helpline (drugs and alcohol) by Welsh residents per 100,000 of the population			37.7		30.1
The % of health board residents in receipt of secondary mental health services (all ages) who have a valid care and treatment plan (CTP)	90%	Mar-20	86.9%	Feb-20	86.1%
All health board residents who have been assessed under part 3 of the mental health measure to be sent a copy of their outcome assessment report up to and including 10 working days after the assessment has taken place	100%		100%		0%
OUR STAFF AND RESOURCES - People in Wales can find information about how their NHS is resourced and make careful use of them	Target	Current		Previous	
		Period	Performance	Period	Performance
The % of patients who did not attend a new outpatient appointment (for selected specialties) rolling 12 months	12 month Reduction Trend	Feb-20	7.5%	Jan-20	7.5%
The % of patients who did not attend a follow-up outpatient appointment (for selected specialties) rolling 12 months			10.0%		10.0%
% of headcount by organisation who have had a Personal Appraisal and Development Review (PADR)/medical appraisal in the previous 12 months (excluding doctors and dentists in training)	85%	Feb-20	62.3%	Jan-20	61.5%
% compliance for all completed Level 1 competencies within the Core Skills and Training Framework by organisation			68.8%		68.0%
% of sickness absence rate of staff	12 month Reduction Trend	Feb-20	5.97%	Jan-20	7.09%