

# Public Finance & Performance Committee Meeting

Wed 19 March 2025, 15:00 - 16:05

Virtual - MS Teams

## Agenda

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### 15:00 - 15:05 **1. Standing Items (15:00-15:05)** 5 min

#### **1.1. Welcome & Introductions**

*John Union*

#### **1.2. Apologies for Absence**

*John Union*

#### **1.3. Declarations of Interest**

*John Union*

#### **1.4. Minutes form the Finance & Performance Committee meeting held on February 19th 2025**

*John Union*

 1.4 - Public Finance and Performance Minutes 19.02.25.pdf (4 pages)

#### **1.5. Actions following the Finance & Performance Committee meeting held on February 19th 2025**

*John Union*

No Actions

#### **1.6. Chairs Actions since previous meeting**

*John Union*


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### 15:05 - 15:05 **2. Items for Review & Assurance (15:10-15:45)** 0 min

#### **2.1. Financial Report - Month 11 Position (including savings tracker)**

*Robert Mahoney*

20 minutes

 2.1 Public Finance Committee SUMMARY Finance Position Report for Month 11.pdf (15 pages)

#### **2.2. Operational Performance Update**

*Paul Bostock*

20 minutes

 2.2 - Operational Performance report cover paper - March 2025.pdf (7 pages)

 2.2a - Integrated Performance Report F&P committee March 25.pdf (47 pages)

Regan Nikki  
13/03/2025 15:07:55

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15:05 - 15:05 **3. Items for Approval / Ratification (15:45-15:55)**

0 min

**3.1. End of Life Care Business Case**

*Paul Bostock*

10 Minutes

 3.1 - Palliative and Supportive Care Business Case.pdf (4 pages)

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15:05 - 15:05 **4. Items for Information & Noting (15:55-15:55)**

0 min

**4.1. Monthly Monitoring Return - Month 10**

*Catherine Phillips*

 4.1 WG 2024 \_25 month 10 MMR Covering Report.pdf (2 pages)

 4.1a CV Financial Monitoring Returns 2024-25 - Month 10.pdf (13 pages)

 4.1b 2024-25 MMR Template - Cardiff Vale UHB Month 10.pdf (5 pages)

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15:05 - 15:05 **5. Any Other Business**

0 min

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15:05 - 15:05 **6. Private Agenda**

0 min

**6.1. Financial Update (including tracker)**

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15:05 - 15:05 **7. Review & Final Closure**

0 min

**7.1. Items to be deferred to Board / Committee and review of any actions to future meetings**

**7.2. To note the date, time and venue of the next committee meeting: Wednesday 16th April 2025 via MS Teams**

Regen Nikki  
13/03/2025 15:07:52

**Minutes of the Public Finance & Performance Committee Meeting  
19 February 2025  
Via MS Teams**

To view a recording of this meeting, please click [here](#).

|                       |    |  |
|-----------------------|----|--|
| <b>Chair:</b>         |    |  |
| John Union            | JU | Independent Member – Finance / Committee Chair |
| <b>Present:</b>       |    |  |
| Ceri Phillips         | CP | CAV UHB Vice Chair                             |
| Charles Janczewski    | CJ | CAV UHB Chair                                  |
| David Edwards         | DE | Independent Member - Digital                   |
| Sara Moseley          | SM | Independent Member – Third Sector              |
| Steve Riley           | SR | Independent Member – University                |
| Rachna Upadhyia       | RU | Independent Member - General                   |
| Mike Jones            | MJ | Independent Member – Trade Union               |
| <b>In Attendance:</b> |    |  |
| Andrew Gough          | AG | Deputy Director of Finance (Strategic)         |
| Robert Mahoney        | RM | Deputy Director of Finance (Operational)       |
| Matt Phillips         | MP | Director of Corporate Governance               |
| Paul Bostock          | PB | Chief Operating Officer                        |
| Suzanne Rankin        | SR | Chief Executive                                |
| <b>Secretariat:</b>   |    |  |
| Nikki Regan           | NR | Corporate Governance Officer                   |
| <b>Apologies:</b>     |    |  |
| Catherine Phillips    | CP | Executive Director of Finance                  |
| Rhian Thomas          | RT | Independent Member – Capital & Estates         |
| Akmal Hanuk           | AH | Independent Member – Local Community           |

| Ref:             | Agenda Item:   | Action: |
|------------------|--|---------|
| FPC<br>19/02/001 | <a href="#">Welcome &amp; Introduction (click to view)</a><br><br>The Committee Chair (CC) welcomed everyone to the meeting.   |         |
| FPC<br>19/02/002 | <a href="#">Apologies for Absence (click to view)</a><br><br>Apologies for Absence were noted.<br><br><b>The Finance and Performance Committee resolved that:</b><br>a) Apologies for Absence were noted.  |         |
| FPC<br>19/02/003 | <a href="#">Declarations of Interest (click to view)</a><br><br>No Declarations of Interest were noted.  |         |
| FPC<br>19/02/004 | <a href="#">Minutes of the Finance and Performance Meeting held on 21<sup>st</sup> January 2025 (click to view)</a><br><br>The minutes of the meeting held on 21 <sup>st</sup> January 2025 were received and confirmed as a true and accurate record.<br><br><b>The Finance Committee resolved that:</b><br>a) The minutes of the Finance and Performance Committee meeting held on 21 <sup>st</sup> January 2025 were held as a true and accurate record of the meeting. |         |
| FPC<br>19/02/005 | <b>Actions following the Finance &amp; Performance Meeting on 21<sup>st</sup> January 2025</b><br><br>The Action log had no actions outstanding.<br><br><b>The Finance and Performance Committee resolved that:</b>  |         |

|                  |   |  |
|------------------|---|--|
|                  | a) The Action Log for the Finance and Performance Committee was noted.  |  |
| FPC<br>19/02/006 | <p><a href="#">Chairs Action since previous meeting (click to view)</a></p> <p>There were no Chair's Actions taken since the last meeting</p>   |  |
| FPC<br>19/02/007 | <p><a href="#">Financial Report – Month 10 Position &amp; Savings Plan Progress (including Savings Tracker) – (click to view)</a></p> <p>The DDFO gave an update on the Financial Report for Month 10 and highlighted the following:</p> <ul style="list-style-type: none"> <li>• CAV UHB reached £27.5m overspend as of month 10 (end of January 2025), against a revised forecast year-end position of £27.7m. This marked an improvement in trajectory with only a £50k decline in the month.</li> <li>• The initial forecast deficit was £15.9m. CAV UHB received £6.8m from Welsh Government, which expected a reduction in the forecast deficit to £9.1m. However, CAV UHB failed to achieve £11m in savings against the target set for the year.</li> <li>• The main areas of increased spend included the number of beds kept open due to demand, overspend on planned care initiatives, and underachievement of savings targets.</li> <li>• Enhanced controls were put in place in response to the month 9 position, including a programme management office meeting twice a day and an executive group meeting daily. These controls have contributed to the improved performance.</li> </ul> <p>The UHB Chair requested that any movement away from the projected target should receive immediate action and be reported at the next public meeting. He emphasized the importance of learning lessons from the current year's expenditure management and taking proactive stances earlier in the year.</p> <p>The DDFO continued to highlight the following points:</p> <ul style="list-style-type: none"> <li>• The financial risk register showed reduced risk scores around managing budget pressures and achieving the cost improvement programme, though these remain high-risk areas.</li> <li>• The health board set a target of £47m in savings for the year but achieved £36m, falling short by £11m</li> <li>• The underlying deficit is assessed to be around £57.1m, which will be the starting point for planning assumptions for the next financial year.</li> <li>• There were significant concerns about cash flow, with an initial shortfall of £129m in unconfirmed cash at month 9. This has been reduced to around £20-30m due to recent confirmations of pay award funding and other allocations.</li> <li>• CAV UHB public sector payment compliance remained above the 95% target, though there may be a slight decline due to cash management measures, but the UHB is confident we can manage through to March 31<sup>st</sup></li> <li>• CAV UHB was actively managing capital deployment to ensure full utilization of the capital resource limit by year-end.</li> <li>• CAV UHB approximately pays £80-£85m via payroll each month</li> <li>• The financial plans are based on a planned deficit recognized by WG of £9.1m, with the current overspend being £27.553m. Enhanced controls were established to support meeting the revised year-end forecast.</li> </ul> <p><b>The Finance and Performance Committee resolved that:</b></p> <ol style="list-style-type: none"> <li>a) The Welsh Government control total of a planned deficit of £9.100m was noted;</li> <li>b) The month 10 operational overspend of £27.553m comprising an operational deficit of £9.561m, a savings gap of £10.409m and a planned deficit for the year to date of £7.583m was noted;</li> <li>c) The forecast out-turn deficit for 2024-25 of £27.7m was noted</li> <li>d) The delivery of the forecast is predicated on the confirmation of all expected income streams including Welsh Government anticipated allocations and LTA performance income was noted.</li> </ol> |  |
| FPC<br>19/02/008 | <p><b>Operational Performance Update</b></p> <p>The COO presented and highlighted the following points:</p> <ul style="list-style-type: none"> <li>• Winter challenges were ongoing, with the winter ward opened to manage the situation.</li> </ul>  |  |

Regan Nikk  
13/03/2025 15:07:15

|  |   |  |
|--|---|--|
|  | <ul style="list-style-type: none"> <li>• Average ambulance handover times for the year were 45 minutes, compared to the Welsh average of two hours.</li> <li>• Plans to de-escalate winter capacity towards Easter, focusing on 60-minute holds and 12-hour waits in the Emergency Unit.</li> <li>• Number of delayed patients has reduced, but lost bed days have increased due to patient complexity.</li> <li>• Adult social care has increased support to reduce assessment delays.</li> <li>• Focus on reducing length of stay, which is currently about a day and a half above the peer average.</li> <li>• 16% increase in demand for the single cancer pathway this year, with performance holding in the mid-60s and occasionally reaching 70%.</li> <li>• Detailed demand and capacity analysis ongoing for Cancer Care, with a summit planned in March to develop plans for achieving a 75% standard from Q2 onwards.</li> <li>• Approximately 2000 patients are expected to be waiting over two years by the end of March, above the target of 1320 for a planned care appointment.</li> <li>• Ophthalmology displayed significant capacity issues, with 50% of the long-waiting patients in this specialty.</li> <li>• Plans for Q1 of next year were being developed to address the increased cohort of patients.</li> <li>• Improvements in endoscopy, with the number of overdue surveillance procedures reduced from 2000 to 500, aiming to clear the backlog by the end of March.</li> <li>• Non-obstetric ultrasound backlog is reducing, with a trajectory to clear by March 2026.</li> <li>• Endoscopy remains a significant challenge, with a gap of about 37 sessions per week.</li> <li>• Adult mental health performance expected to improve in Q4 with additional staff.</li> <li>• Children’s mental health consistently delivering on standards since September.</li> <li>• Contract for 2024-2025 agreed, with a 6% settlement and £23 million of non-recurrent support for GPs across Wales.</li> <li>• Positive feedback from GPs on the funding solution</li> <li>• Community nurses looked after approximately 3600 patients monthly, equivalent to the capacity of 6 Llandough hospitals or 4 UHWs</li> </ul> <p>The UHB Chair discussed the health board being an outlier for Endoscopy during the meeting. He mentioned that the health board accounts for almost 40% of the backlog across Wales, highlighting the challenging position they are in.</p> <p>The COO acknowledged the significant backlog in endoscopy and noted the following points:</p> <ul style="list-style-type: none"> <li>• CAV UHB accounted for almost 40% of the backlog across Wales. He mentioned that while progress is being made, a complete solution is not expected this year or next year.</li> </ul> <p>The 156-week waits indicated that the committee and board need a clear timeline for when these will be resolved. He also highlighted the challenge of managing the 104-week waits, with a 30% increase in the cohort of patients expected next year without additional funding.</p> <ul style="list-style-type: none"> <li>• He suggested that the board development meeting next week would be an opportunity to discuss these issues further and determine a realistic plan for addressing the waiting lists.</li> </ul> <p><b>The Committee resolved that:</b></p> <p>a) The year-to-date position against key organisational performance indicators for 2024-25 and the update against the Operational Plan programmes was noted.</p> |  |
| <p>FPC<br/>19/02/009</p> <p><i>Elegan Nikk<br/>13/03/2025 15:07:52</i></p> | <p><b>Monthly Monitoring Return – Month 9</b></p> <p>The monthly monitoring return was noted.</p> <p><b>The Finance and Performance Committee resolved:</b></p> <p>a) The extracts from the UHBs Monthly Financial Monitoring Returns for Month 9 was noted</p>   |  |
| <p>FPC<br/>19/02/010</p>   | <p><b>Any Other Business</b></p>  |  |

|                          |   |  |
|--------------------------|---|--|
|                          | No further business was raised.   |  |
| <b>FPC<br/>19/02/011</b> | To note the date, time and venue of the next Committee meeting:<br><b>Wednesday 19<sup>th</sup> March 2025 via MS Teams</b> |  |

Regan Nikki  
13/03/2025 15:07:52

|  |  |                                     |                                     |                          |                             |                          |
|--|--|-------------------------------------|-------------------------------------|--------------------------|-----------------------------|--------------------------|
| Report Title:                            | Finance Report for the Period Ended 28 <sup>th</sup> February 2025 |                                     |                                     | Agenda Item no.          | 2.1                         |                          |
| Meeting:                                 | Finance Committee  | Public                              | <input checked="" type="checkbox"/> | Meeting Date:            | 19 <sup>th</sup> March 2025 |                          |
|  |  | Private                             | <input type="checkbox"/>            |                          |                             |                          |
| Status<br><i>(please tick one only):</i> | Assurance  | <input checked="" type="checkbox"/> | Approval                            | <input type="checkbox"/> | Information                 | <input type="checkbox"/> |
| Lead Executive:                          | <b>Executive Director of Finance</b>                               |                                     |                                     |                          |                             |                          |
| Report Author<br>(Title):                | <b>Deputy Director of Finance (Operational)</b>                    |                                     |                                     |                          |                             |                          |

## Main Report

### Background and current situation:

#### Summary

At Month 11 the UHB is reporting a year to date overspend of £27.591m.

This is comprised of:-

- £11.441m unidentified savings
- £7.808m operational overspend
- £8.342m planned deficit of (eleven twelfths of the annual planned deficit of £9.1m)

The recovery profile to be delivered in the final month of the year requires continuing oversight to achieve the 2024/25 plan.

**Table 1: Month 11 Financial Position 2024/25**

|   | Month 11 Position<br>£m | Forecast Year-End Position<br>£m |
|---|-------------------------|----------------------------------|
| Revised Planning Control (Deficit)                  | 8.342                   | 9.100                            |
| Savings Programme Deficit                           | 11.441                  | 11.200                           |
| Operational position (Surplus) / Deficit            | 7.808                   | 9.500                            |
| Further Recovery actions                            |                         | (2.100)                          |
| <b>Financial Position £m (Surplus) / Deficit £m</b> | <b>27.591</b>           | <b>27.700</b>                    |

#### Financial Plan Approved by Board and submitted to Welsh Government

The UHB's Financial Plan in 2024-25 reflected the following key components:

- Brought forward underlying deficit of £60.9m
- 2024-25 Demand and cost growth and unavoidable investments of £45.4m

This brought the UHB's draft 2024-25 position to £106.3m deficit before the following new funding and savings programmes:

- Additional Allocations of £37.3m
- Anticipated pass-through funding on Long Term Agreements of £5.9m (3.67%)
- Savings plans to reduce expenditure by £47.2m

The resulting 2024-25 planning deficit of £15.9m was approved by the UHB Board for submission to Welsh Government.

The submitted 2024-25 plan projects a deficit for the financial year and therefore represents a failure of the UHB's statutory requirement to deliver a balanced financial plan over a three-year rolling period. This also prevents approval of the plan by Ministers which is a breach of a second financial duty.

### Revision to Planned Deficit

Following a review and recognition of the additional unforeseen cost pressures and demand on services in 2024-25, the UHB relayed an Accountable Officer letter on the 2nd of December 2024 to advise Welsh Government of a revised forecast deficit of £34.5m.

Welsh Government issued a revised control target letter dated the 25th of November 2024 which indicated that additional funding of £50m would be allocated across the seven Health Boards on a fair-shares basis. For CVUHB, this resulted in an in-year recurrent allocation of £6.8m and a revised target control total of £9.1m. In view of this and the additional in year pressures, the UHB revised its year end forecast to a deficit of £27.7m as follows:

**Table 2 – Forecast Year End Outturn**

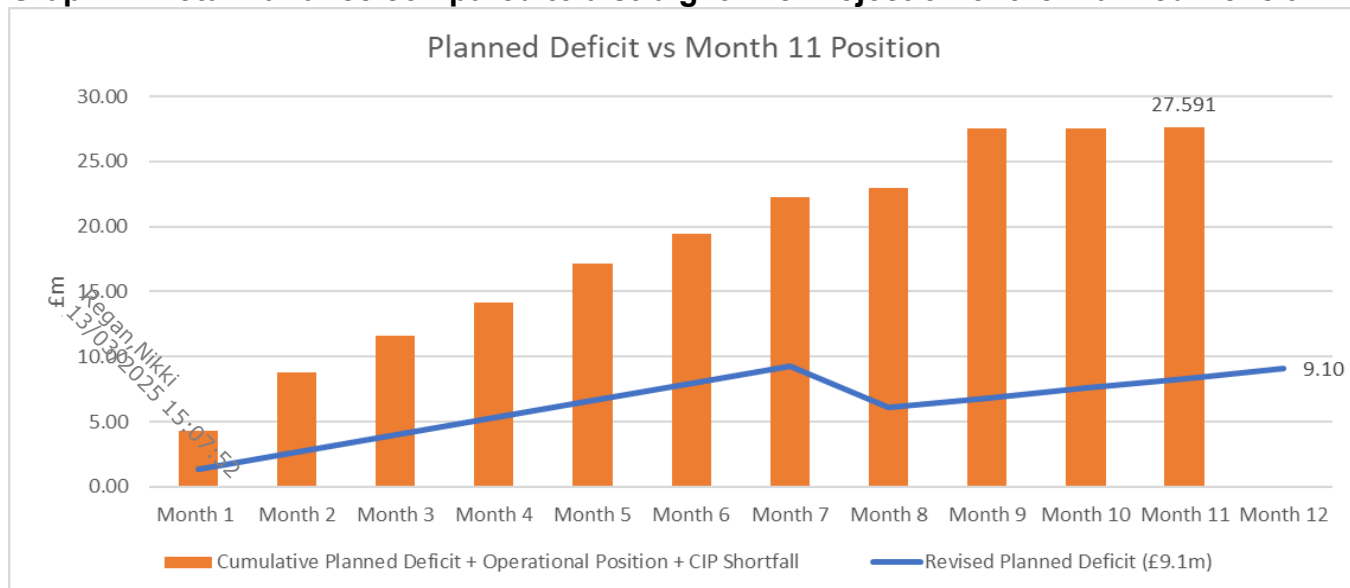
|  | 2024/25<br>£m |
|--|---------------|
| <b>Draft Planned Financial Position - Deficit £m</b> | <b>15.9</b>   |
| Additional In Year Recurrent Funding                 | (6.8)         |
| <b>Revised WG Control Target - Deficit £m</b>        | <b>9.1</b>    |
| Forecast Savings Programme Deficit                   | 11.2          |
| Forecast Operational Deficit                         | 9.5           |
| Further Recovery Actions                             | (2.1)         |
| <b>Revised Year-End Forecast Deficit £m</b>          | <b>27.7</b>   |

The revised projected financial out-turn has been noted by Welsh Government. This still has not been approved with the expectation that the UHB meets its £9.1m control total.

### Summary Financial Position and Outlook

Graph 1 shows the reported position at Month 11 This is £19.249m above the £8.342m profiled control total set by Welsh Government (£9.1m Annual).

**Graph 1– Total Variance compared to a straight-line Projection of the Planned Deficit**



This level of overspend continues to cause concern and has broadly been driven by three key factors:

- 80 beds that will continue to be open to the end of March that were not anticipated at the commencement of the financial year (£6m fully year effect).
- Planned Care initiatives to achieve target waiting times by the end of the financial year have cost £3m more than anticipated in plan.
- Cost reduction programmes have delivered £11.2m less than anticipated mainly reflecting the lack of progress the UHB has been able to make in workforce reshaping initiatives as a result of increasing service pressures.

The UHB has had a Recovery Scheme framework in place throughout 2024-25 including a number of schemes and review processes and this has been overseen by the UHB's Sustainability Board (CEO chaired).

A number of additional urgent control actions were implemented in January 2025 to slow expenditure run rates and eliminate unnecessary expenditure. This includes a daily Programme Management Office (PMO) which meets twice a day and a daily joint Executive/PMO meeting which convenes at the end of each weekday. The PMO has overseen:-

- Authorisation for any necessary remaining agency expenditure
- Authorisation for any necessary variable bank expenditure
- Authorisation for any training (outside the statutory training required for professional registration or clinical training to ensure patient safety and treatment continuity).

**The impact of the enhanced control actions combined with further clarification of final 2024-25 funding has contributed to an improved monthly financial performance with a reported £0.052m deterioration in Month 10 and a £0.037m deterioration in Month 11, giving confidence that the revised year end forecast out-turn of £27.7m will be met.**

Regan Nikki  
13/03/2025 15:07:52

## Financial Performance

Tables 3 and 4 below summarise the monthly and year to date financial performance of the UHB by major expenditure groups (Table 3) and by business units (Table 4).

**Table 3: Summary Financial Position for the period ended 28<sup>th</sup> February 2025**

| Income/Pay/Non Pay      | Memorandum  | Current     | Total     |
|-------------------------|-------------|-------------|-----------|
|                         | Annual      | Period      | Variance  |
|                         | Budget      | Actual      | (Fav)/Adv |
|                         | £m          | £m          | £m        |
| <b>In Month</b>         |             |             |           |
| Income                  | (1,884.670) | (186.810)   | (0.645)   |
| Pay                     | 894.971     | 80.645      | 0.804     |
| Non Pay                 | 989.699     | 105.444     | (0.880)   |
| Sub Total £m            | 0.000       | (0.721)     | (0.721)   |
| 2024/25 Planned Deficit | 9.100       | 0.758       | 0.758     |
| Variance to Plan £m     | 9.100       | 0.037       | 0.037     |
| <b>Cumulative</b>       |             |             |           |
| Income                  | (1,884.670) | (1,887.283) | (2.613)   |
| Pay                     | 894.971     | 900.351     | 5.380     |
| Non Pay                 | 989.699     | 1,006.181   | 16.482    |
| Sub Total £m            | 0.000       | 19.249      | 19.249    |
| 2024/25 Planned Deficit | 9.100       | 8.342       | 8.342     |
| Variance to Plan £m     | 9.100       | 27.591      | 27.591    |

**Table 4: Financial Performance for the period ended 28<sup>th</sup> February 2025**

| Clinical Board                             | Operational         | Savings Position    | Total               | Prior Month         |
|--|---------------------|---------------------|---------------------|---------------------|
|  | Position            | (Surplus) / Deficit | (Surplus) / Deficit | (Surplus) / Deficit |
|  | (Surplus) / Deficit |                     |                     |                     |
|  | Variance            | Variance            | Variance            | Variance            |
| Cumulative                                 | £m                  | £m                  | £m                  | £m                  |
| Clinical Diagnostics & Therapeutics        | (1,542)             | 676                 | (866)               | (202)               |
| Children & Women                           | 2,753               | 1,604               | 4,357               | 4,170               |
| Capital Estates and Facilities             | 96                  | 855                 | 952                 | 967                 |
| Executives                                 | (2,054)             | 96                  | (1,958)             | (1,737)             |
| Genomics                                   | (99)                | 0                   | (99)                | (93)                |
| Medicine                                   | 6,693               | 4,131               | 10,824              | 9,737               |
| Mental Health                              | 757                 | 1,557               | 2,314               | 2,669               |
| PCIC                                       | 2,284               | 14                  | 2,297               | 2,964               |
| Specialist                                 | 1,228               | (0)                 | 1,228               | 1,333               |
| Surgery                                    | 2,919               | 3,882               | 6,801               | 6,157               |
| Clinical Board budgets to be delegated     | (4,856)             |                     | (4,856)             | (4,414)             |
| <b>Sub-Total Delegated Position</b>        | <b>8,179</b>        | <b>12,815</b>       | <b>20,994</b>       | <b>21,551</b>       |
| Central Budgets                            | (28)                | (2,750)             | (2,778)             | (2,891)             |
| Commissioning                              | (343)               | 1,375               | 1,032               | 1,310               |
| Cost Improvement Themes                    | 0                   | 0                   | 0                   | 0                   |
| <b>Total (Surplus)/Deficit</b>             | <b>7,808</b>        | <b>11,441</b>       | <b>19,249</b>       | <b>19,970</b>       |
| Planned Deficit                            | 8,342               | 0                   | 8,342               | 7,583               |
| <b>Total Operational (Surplus)/Deficit</b> | <b>16,150</b>       | <b>11,441</b>       | <b>27,591</b>       | <b>27,553</b>       |

The UHBs revised control deficit from Welsh Government is profiled to be £8.342m overspent at Month 11. The Month 11 position is £19.249m greater than this at £27.591m. The operational deficit against plan improved by £1.753m in month from £9.561m to £7.808m during month 11 primarily due to variable pay improvements and confirmation of the following:

- Capitalisation of Fees for Rookwood
- Additional funding from NHS Executive
- Rebate of NWSSP fees
- VPAG funding for AWTCC

The non achievement of savings targets deteriorated from £10.409m to £11.441m in month reflecting both underperformance/slippage against established schemes and the shortfall in identified schemes.

A number of schemes were phased to deliver greater values in the latter part of the year than the year to date. This is reflected in an improving trend of savings delivery – this does not however improve the year end out-turn or compensate for unidentified savings.

Further schemes continue to be considered by the Sustainability Board.

Key UHB financial pressures are highlighted in the Summary Financial Position and Outlook (above).

At a Clinical Board level these pressures are manifested :-

**C&W:** Driven by increased medical pay spend (£2.905m) combined with additional costs of continuing healthcare which are £0.815m above plan.

**Medicine:** Driven by medical staff and registered nursing costs to support the additional bed base within the UHB which has been driven by increased numbers of emergency medical admissions. In addition, there are overspends against non-pay consumables and Drugs where the Clinical Board is working with the Pharmacy Team and non-pay due to the non delivery of savings schemes.

**Surgery:** Significant costs have been incurred in respect of planned care initiatives where costs have exceeded available funding. Theatre consumables pressures are under review alongside clinical coding.

**PCIC:** The position improved in month due to the confirmation of additional Welsh Government funding. Pressures remain in respect of GP prescribing.

**Mental Health:** The closure of capacity at Hafan Y Coed, due to the correction of structural building defects, has placed pressure on flex capacity and is financially impacting the Clinical Board through the requirement to place patients into out of area placements during the remedial period.

The in month improvement on the CD & T Clinical Board is driven by the capitalisation of costs in respect of the Rookwood mortuary and confirmation of additional funding from NHS Executive and through the Voluntary scheme for branded medicines Pricing, Access and Growth (VPAG).

Review meetings with the Clinical Boards are regularly held at which the financial position is discussed including the scope for improvements:-

- Executive Performance Reviews
- Financial Stocktakes with the Chief Operating Officer and Director of Finance
- Deep dives with the Deputy Director of Finance
- Monthly Joint Finance / Operational Leads meeting

## Welsh Government COVID 19 Allocations & Expenditure

Profiled Welsh Government funding at Month 11 is summarised in Table 5 below.

**Table 5: Summary of Month 11 COVID 19 Funding**

|   | <b>Funded by<br/>WG £m</b> | <b>Funding to<br/>Month 11 £m</b> |
|---|----------------------------|-----------------------------------|
| Health Protection/Vaccination & PPE             | 9.040                      | 8.287                             |
| Long Covid                                      | 1.144                      | 1.049                             |
| <b>Sub Total WG Funded Covid Expenditure £m</b> | <b>10.184</b>              | <b>9.335</b>                      |

Funding for local response costs is allocated to Clinical Boards through the UHB's Financial Plan. However, local response expenditure is no longer funded directly by Welsh Government and residual costs are reported within delegated clinical board positions and not included in table 5 above.

The UHB plan assumes that any underspends against Covid funding will be retained by the UHB.

Regan, Nikki  
13/03/2025 15:07:52

## Financial Risks

Table 6 summarises the Finance Department's Risk Register.

The key risk which feeds the UHB Corporate Risk Register is the failure of the UHB to deliver a breakeven position by 2024-25 year end with a current planned deficit of £9.1m and a forecast out-turn against the planned deficit of £27.7m.

**Table 6: Risk Register at February 2025**

| Finance Risk  | Rating | Comment  |
|---|--------|--|
| The submitted Financial Plan has a planned deficit of £15.9m for 2024/25. This does not allow the Minister to approve the an IMTP due to the lack of financial balance over a three year rolling period. However the 2024-25 Financial plan does require support from Welsh Government even in the absence of Ministerial approval. The planned deficit was amended to £9.1m at month 8 following confirmation of additional Welsh Government funding of £6.8m. | 15     | The UHB has developed a plan which has a deficit of £15.9m in 2024-25 and break even positions in FY 2026 and FY 2027 which the Minister is not able to approve. Support for the one year 2024-25 financial plan will be required. Welsh Government has not confirmed its support at the present time. Enhanced Monitoring meetings with Welsh Government at Executive level continue to discuss this issue. The planned deficit was amended to £9.1m at month 8 following confirmation of additional Welsh Government funding of £6.8m.   |
| Due to a planned deficit of £15.9m for 2024/25 the UHB is unable to achieve financial balance over a three year rolling period. This does not allow the Minister to approve the UHB IMTP (Three year plan) and has contributed to the UHB following Enhanced Monitoring arrangements by Welsh Government. The planned deficit was amended to £9.1m at month 8 following confirmation of additional Welsh Government funding of £6.8m.                           | 15     | The failure to submit a balance plan for 2024-25 means that the UHB cannot achieve its statutory duty to balance over a three year rolling period. The UHB has plans to return the UHB to financial balance in FY 2025 and 2026. Progress is monitored internally through established governance reporting and monitoring arrangements through operational teams, Finance Committee and Board Internal Audit provides assurance that controls are in place. Enhanced Monitoring meetings and Joint Executive meetings with Welsh Government maintain discussions over progress towards a financially balanced three year IMTP. |
| Achievement of Capital statutory breakeven duty<br><br>The Health Board has a capital allocation, which it should not exceed on a three year rolling basis.   | 8      | The current 2024-25 UHB Capital Plan is structured to remain within the Capital Resource Limit. Capital Management Group manages the capital programme and reports into the Management Executive. Governance reporting and monitoring arrangements through the Finance Committee, Board and WG. Internal Audit provides assurance that controls are in place.  |
| Failure to adequately manage budget pressures in line with the submitted £15.9m deficit plan for 2024-25. The planned deficit was amended to £9.1m at month 8 following confirmation of additional Welsh Government funding of £6.8m.   | 15     | The period to Month 11 has reported continuing financial pressures against the £47.2m savings target and operational pressures within delegated positions. The requirement to manage budget pressures is clearly communicated to primary budget holders. Enhanced monitoring of delegated financial positions is exercised through monthly meetings including Executive Performance Reviews with each Clinical Board; Monthly Finance meetings with all Clinical Boards and COOs Office; weekly Savings meetings of delegated budget holders; and bi weekly multi leadership Sustainability Board meetings chaired by the CEO. |
| A recurrent Cost Improvement Programme target of £47.2m has been set for 2024/25.<br><br>Failure to deliver this level of saving in 2024-25 impacts the ability of the UHB to meet its planned 2024/25 deficit of £15.9m. This combined with any savings which are achieved but non recurrently impacts the ability of the UHB to deliver financial balance in future financial years   | 15     | The CIP savings target has been clearly communicated and delegated to budget holders. At Month 10, only £20.4m of Green and Amber schemes against the £47.2m target have been identified as recurrent in nature. A CIP pipeline tracker is in place with a weekly monitoring progress across the organisation. Monthly Financial Clearance Meeting include specific focus on CIPs. Further focus is provided in Executive / Clinical Board Performance Reviews, bi weekly Sustainability Boards and weekly Savings meetings. Governance reporting and monitoring arrangements through the Finance Committee and Board.         |
| 2024-25 LTA framework in NHS Wales.   | 8      | LTAS have now been agreed with Commissioners, generally in line with the guideline 3.67% uplift recommended by Welsh Government. Elements of income will be contingent on improved LTA outturn performance and this remains a risk for the UHB.  |
| Remain within Cash limit  | 8      | The UHB will require cash support from WG for the 24/25 revised forecast deficit of £27.7m alongside working capital for any movements from the 2023/24 balance sheet. In addition outstanding allocations from previous financial years to be confirmed by WG in 2024-25 may bring forward the point of the year when cash controls will require consideration. Cash controls will include the careful management of creditor payment feeds and potential compromise the achievement of the UHB's payment performance targets.  |

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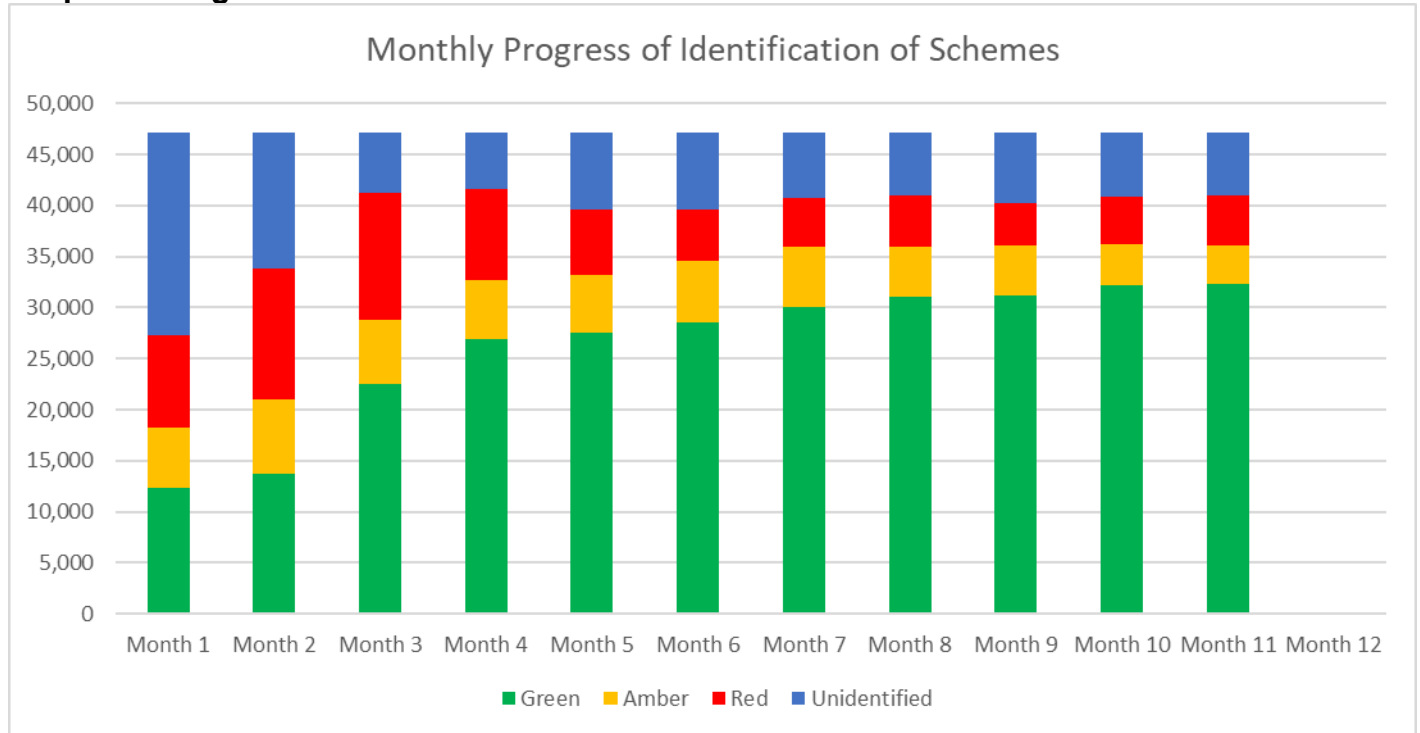
## Savings Programme Update

At month 11, the UHB had identified circa £36.000m (76%) of green and amber savings to deliver against the £47.2m savings target. Red schemes of £4.8m are also identified, however these are not expected to deliver in year.

The reported gap of £11.2m in identified savings incorporates red schemes and the unidentified balance. Red schemes are not included in accordance with the instruction from Welsh Government that red schemes are excluded from the Monthly Monitoring Returns savings tables.

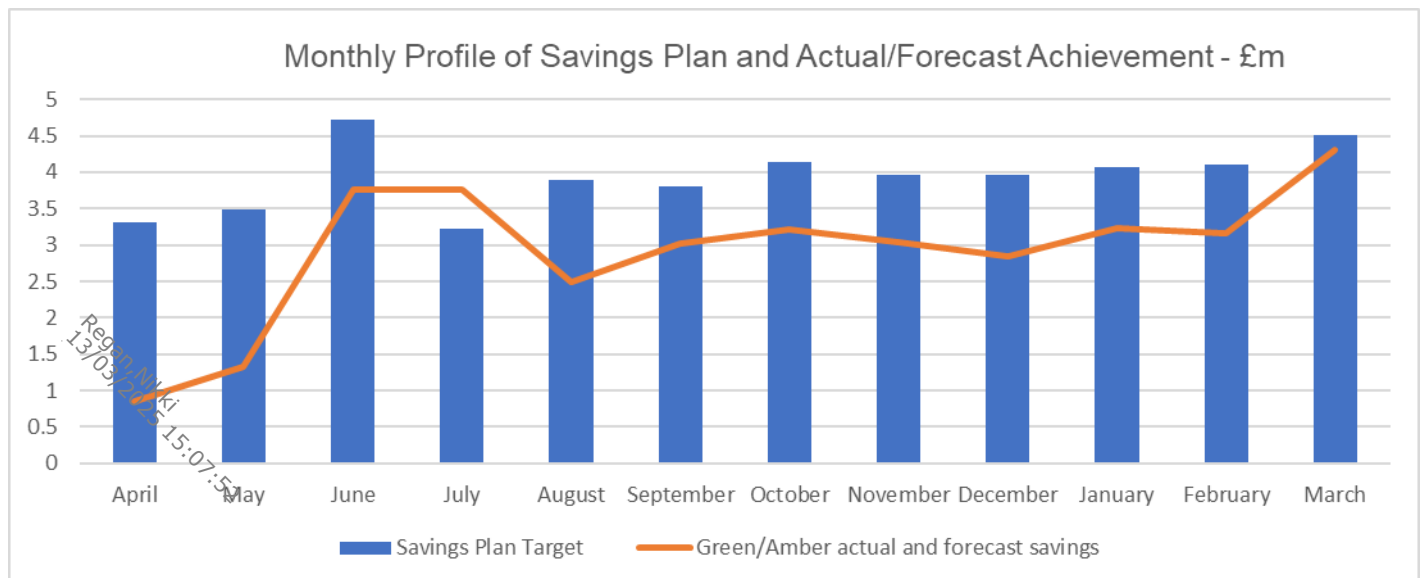
The progress in the identification of schemes during the year is shown in the graph below:

**Graph 2 - Progress in Identification of Schemes**



The profile of the Savings Plan and actual and forecast delivery is outlined in Graph 3 below:

**Graph 3 – Profile of Savings Plan and Actual/Forecast Achievement**



Further detail of the progress by Clinical Boards and Improvement Themes is provided in Table 7 below:

**Table 7: Savings Schemes**

| Clinical/Service Board                           | 24-25 Target<br>£'000 | Green<br>£'000 | Amber<br>£'000 | Sub Total Green and Amber<br>£'000 |
|--|-----------------------|----------------|----------------|------------------------------------|
| Capital Estates and Facilities                   | 947                   | 1,110          | 162            | 1,272                              |
| Children and Women                               | 1,304                 | 1,103          | 64             | 1,166                              |
| Clinical Diagnostics and Therapeutics            | 1,199                 | 1,546          | 92             | 1,638                              |
| Corporate Executives                             | 501                   | 987            | 0              | 987                                |
| Medicine   | 1,379                 | 134            | 300            | 434                                |
| Mental Health                                    | 1,079                 | 401            | 0              | 401                                |
| Primary, Community and Intermediate Care         | 2,423                 | 2,909          | 260            | 3,169                              |
| Specialist Services                              | 1,482                 | 1,793          | 0              | 1,793                              |
| Surgical Services                                | 1,689                 | 581            | 458            | 1,039                              |
| <b>Subtotal - Grip and Control</b>               | <b>12,000</b>         | <b>10,565</b>  | <b>1,336</b>   | <b>11,900</b>                      |
| Medicines Management                             | 4,530                 | 3,035          | 1,539          | 4,573                              |
| Reducing Length of Stay                          | 3,500                 | 3,129          | 0              | 3,129                              |
| Optimising Planned Care                          | 1,000                 | 135            | 0              | 135                                |
| Income Generation                                | 1,000                 | 851            | 20             | 871                                |
| Continuing Healthcare                            | 2,500                 | 2,262          | 0              | 2,262                              |
| Facilities and Estates / Service Reconfiguration | 500                   | 400            | 0              | 400                                |
| Value/Clinical Variation                         | 0                     | 0              | 0              | 0                                  |
| Procurement                                      | 5,000                 | 3,648          | 301            | 3,949                              |
| Recording Patient Care                           | 1,500                 | 0              | 0              | 0                                  |
| Other Digital Benefits                           | 0                     | 0              | 0              | 0                                  |
| Workforce - Temporary Pay                        | 7,403                 | 3,770          | 377            | 4,147                              |
| Workforce Reshaping                              | 8,268                 | 1,584          | 195            | 1,779                              |
| Corporate Opportunities                          | 0                     | 2,855          | 0              | 2,855                              |
| <b>Subtotal Cost Improvement Themes</b>          | <b>35,200</b>         | <b>21,669</b>  | <b>2,431</b>   | <b>24,100</b>                      |
| <b>Total Savings Position</b>                    | <b>47,200</b>         | <b>32,233</b>  | <b>3,767</b>   | <b>36,000</b>                      |

Key:

Green Schemes: Complete, appropriate to complexity, project plan in place, brief available reflecting timescales, milestones, enablers and risk considered. Complete project brief provides clear base for financial assessment.

Amber Schemes: Clear components of project plan in place with elements not fully confirmed and addressed.

Red schemes: Pipeline schemes yet to be finalised.

At Month 11, £19.761m of the identified green and amber schemes and £2.531m of red schemes were recurrent.

## Achievement of financial sustainability and recurrent financial balance by the end of 2025/26

The revised planning deficit for 2024-25 is £9.1m. Key elements of financial performance in 2024-25 contribute to an increase in the UHB's underlying deficit from 2025-26 onwards. These include :-

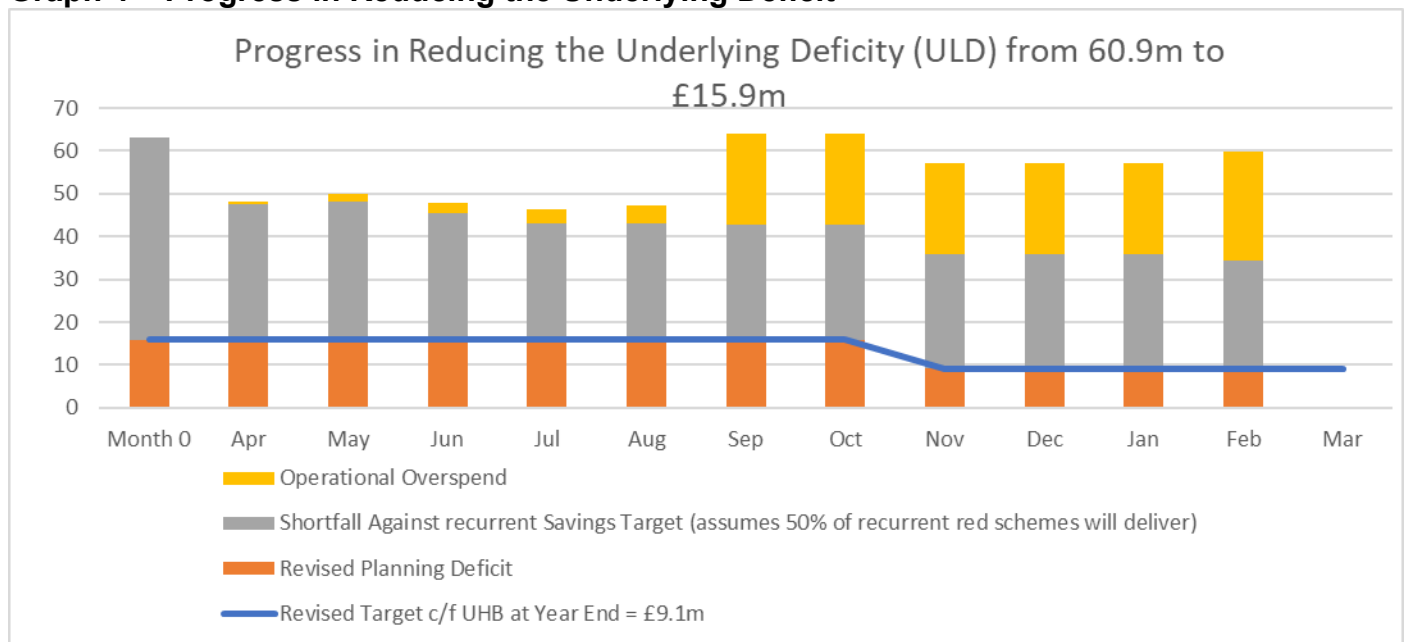
- The revised planning 2024-25 financial deficit of £9.1m
- Savings made non recurrently in 2024-25
- The full year effect of cost pressures including inflation.
- The full year effect of demand led pressures in 2024-25

The UHB has re-assessed its planning assumptions for the 2025/26 financial plan and this includes a review of its Underlying Deficit. Non recurrent savings made in 2024-25, combined with unidentified savings not delivered in 2024-25 add £25.4mm to the underlying deficit. The full year effect of demand and inflation pressures is assessed at £25.4m. The additional costs are abated by the additional £6.8m recurrent funding provided in 2024/25.

This projects an underlying deficit (ULD) for 2025-26 of £59.9m which is an increase of £2.8m from the 57.1m previously identified. The ULD forms the baseline moving into 2025/26, before the assessment of new year cost pressures and any additional funding available.

Graph 4 presents the current high level picture of the UHB's underlying position that is reviewed and updated as the financial plan is progressed throughout 2024-25.

### Graph 4 – Progress in Reducing the Underlying Deficit



The current assessment of the £59.9m underlying deficit (ULD) moving into 2024/25 is summarised below:

**Table 8 – Initial Assessment of Underlying Deficit**

|                                      | UHB<br>£m   |
|--------------------------------------|-------------|
| Operational ULD                      | 25.4        |
| Savings ULD                          | 25.4        |
| Initial Planned Deficit              | 15.9        |
| Additional In Year Recurrent Funding | (6.8)       |
| <b>Total ULD £m</b>                  | <b>59.9</b> |

## Cash Flow Forecast

The closing cash balance at the end of February was £9.096m.

The Finance Committee and Board approved a request to Welsh Government for £15.900m strategic cash support to cover the Month 7 Financial Forecast. Additional approval was provided by the Board to extend the application to Welsh Government for supplementary strategic cash support to cover the movement in the Forecast deficit from £15.9 to £27.7m.

The UHB relayed a letter to Welsh Government on the 28th of November requesting £15.900m strategic cash support from Welsh Government to cover the cash shortfall arising from the original planned forecast deficit and any further increase to the UHBs forecast deficit.

The letter from the Director General Health, Social Care & Early Years Group / NHS Wales Chief Executive dated 10<sup>th</sup> February 2025 confirms that at this stage Welsh Government will provide a maximum of £9.1m strategic cash only support reflecting the revised Cardiff & Vale UHB control total.

Further cash assistance is required in respect of medical negligence settlements, where associated cash support from the Welsh Risk Pool is provided after the initial payment by the UHB.

Welsh Government has now confirmed the of £9.1m strategic cash only support and a further £11.541m of revenue working balances cash support.

Welsh Government has advised the UHB that if further working capital cash needs to be drawn prior to March 2025, that the type of assistance must be detailed on UHB FIS forms and clearly identified as cash only support.

A significant number of outstanding cash allocations were confirmed over the last month and a relatively small number of outstanding revenue allocations with a cash drawing limit value of £4m remain to be confirmed as outlined in Table 9 below:

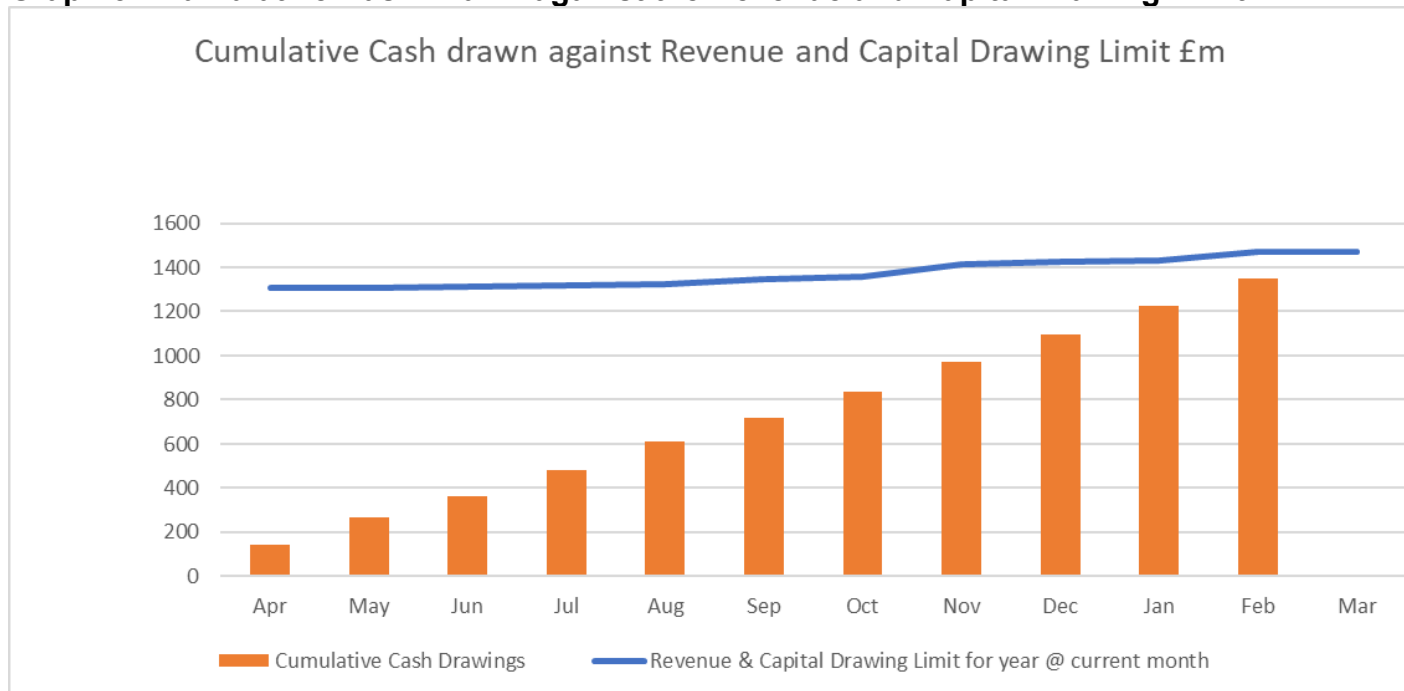
**Table 9 – Forecast Cash Support Required and Outstanding Allocations**

|  | Cash Request<br>£m |
|--|--------------------|
| Additional Strategic Cash Support based on revised forecast deficit of £27.7m                                  | 11.800             |
| Working Cash Support - Medical Negligence Settlements where WRP Reimbursement is outstanding                   | 11.000             |
| Working Cash Support - working balances capital based on month 9 forecast                                      | 12.000             |
| <b>Forecast Cash Support Request £m</b>  | <b>34.800</b>      |
| Unconfirmed anticipated allocations as at Month 9 (drawing Limit only i.e excludes depreciation & impairments) |                    |
| Outstanding Pay Award Allocations  | 1.366              |
| Other Outstanding Cash allocations ( drawing limit only)   | 2.593              |
| <b>Total Unconfirmed Cash as at Month 9 £m</b>   | <b>38.759</b>      |

Graph 5 below outlines Cumulative Cash Drawn against the Revenue and Capital Drawing Limit

In addition to cash drawn from Welsh Government, the UHB cashflow is dependent on the recovery of £630m annual income through LTA and other income agreements with Welsh commissioners, separate to Welsh Government funding flows.

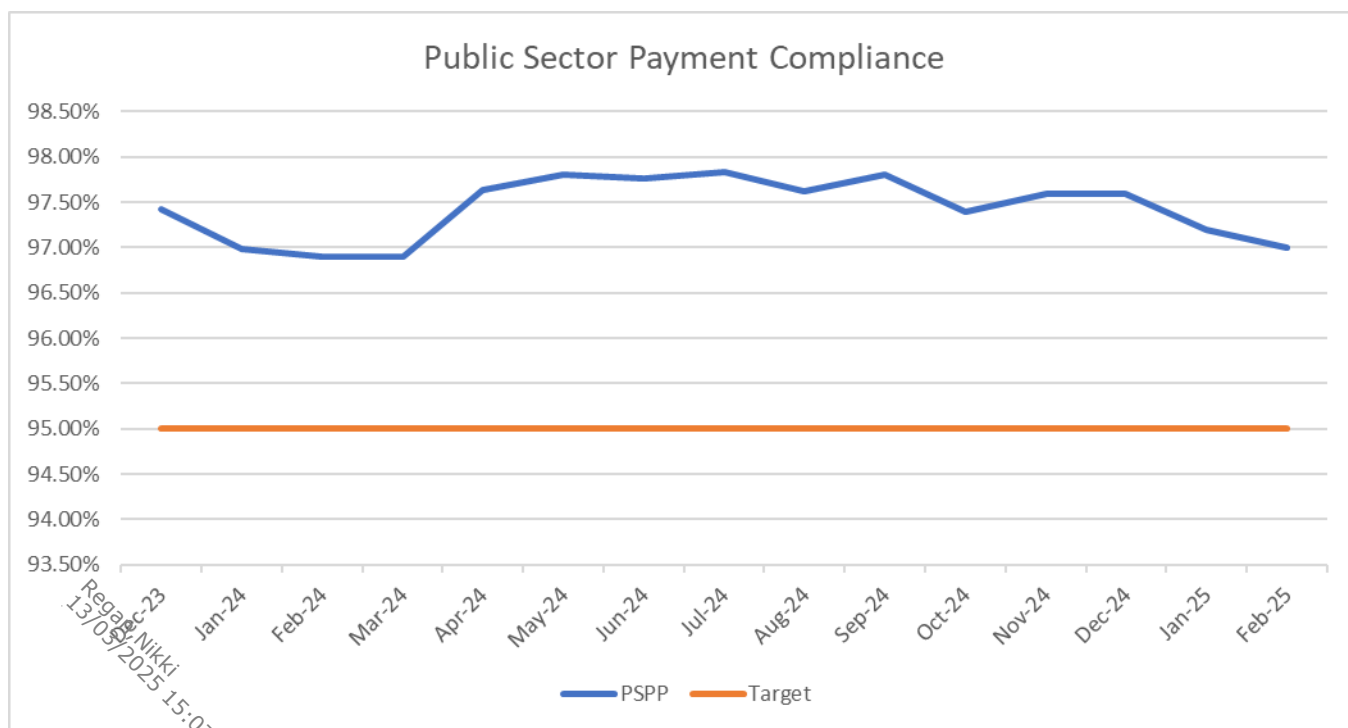
**Graph 5 - Cumulative Cash Drawn against the Revenue and Capital Drawing Limit**



**Public Sector Payment Compliance**

The UHB’s public sector payment compliance performance is above the target of 95%. Performance for the month to the end of February was 97.0% for the year to date as illustrated in Graph 6 below.

**Graph 6 – Public Sector Payment Compliance**



## Capital

Planned expenditure for the year reflects the CRL received from Welsh Government dated 27<sup>th</sup> February 2025 - £57.990m. This reflects the transfer of Whitchurch Hospital to Velindre NHS Trust which completed on the 12th of November 2024.

All schemes are expected to deliver in line with the revised allocations.

The capital programme is planned and monitored through the UHBs Capital Management Group (CMG) and the UHB forecasts that it will remain within its CRL in 2024-25.

## INCOME ASSUMPTIONS 2024/25 – REVENUE RESOURCE LIMIT

The UHBs confirmed Revenue Resource Limit as of March 13th 2025 was £1,449m with a further £1.5m of assumed allocations as detailed below:

**Table 10: Unconfirmed Anticipated Allocations**

|   | <b>Unconfirmed Allocations<br/>£m</b> |
|---|---------------------------------------|
| Depreciation, Impairments* see note 1                           | 2.087                                 |
| IFRS 16 Leases - revenue  | (4.541)                               |
| 2024/25 Pay Uplifts & Retrospective 2023/24 Medical Pay Uplifts | 1.366                                 |
| Vertex  | 1.039                                 |
| Clinical Excellence & Impact Awards                             | 0.900                                 |
| DPIF ePMA   | 0.873                                 |
| Other   | (0.219)                               |
| <b>Total Unconfirmed Allocations £m</b>                         | <b>1.505</b>                          |
| <b>Adjustments</b>  |                                       |
| Depreciation, Impairments* see note 1                           | (2.087)                               |
| IFRS 16 Leases - capital  | 4.541                                 |
| <b>Total Unconfirmed Allocations (Drawing Limit) £m</b>         | <b>3.959</b>                          |

Note 1 – there is no associated cash drawing with Depreciation & Impairment adjustments

Note 2. The table above excludes working cash and strategic cash requests

The UHB's financial forecast is based on confirmation of all unconfirmed allocations. The UHB's anticipated allocations are reported within the Monthly Monitoring Returns submitted to Welsh Government to allow Welsh Government to be sighted on the UHB financial assumptions.

## Executive Director Opinion and Key Issues to bring to the attention of the Board/Committee:

The UHB 2024-25 Financial Plan is based on a planned deficit of £9.1m. The month 11 position is a reported overspend of £27.591m, which is £19.249m above the £8.342m straight line profile of the planned deficit.

The enhanced variable pay and non pay controls established during January have seen an impact which supports the delivery of a forecast year end out-turn of £27.7m.

Public Sector Payments are above the 95% target.

The UHB forecasts that it will remain within its Capital Resource Limit.

## Recommendation:

At Month 11 the Committee are requested to:

- **NOTE** the Welsh Government control total of a planned deficit of £9.100m.
- **NOTE** the month 11 operational overspend of £27.591m comprising an operational deficit of £7.808m, a savings gap of £11.441m and a planned deficit for the year to date of £8.342m.
- **NOTE** the forecast out-turn deficit for 2024-25 of £27.7m.
- **NOTE** that delivery of the forecast is predicated on the confirmation of all expected income streams including Welsh Government anticipated allocations and LTA performance income.

## Link to Strategic Objectives of Shaping our Future Wellbeing:

Please tick as relevant

|    |   |  |    |   |  |
|----|---|--|----|---|--|
| 1. |  Putting People First          |  | 2. |  Providing Outstanding Quality |  |
| 3. |  Delivering in the Right Place |  | 4. |  Acting for the Future         |  |

## Five Ways of Working (Sustainable Development Principles) considered.

Please tick as relevant

|            |  |           |   |             |  |               |  |             |  |
|------------|--|-----------|---|-------------|--|---------------|--|-------------|--|
| Prevention |  | Long term | x | Integration |  | Collaboration |  | Involvement |  |
|------------|--|-----------|---|-------------|--|---------------|--|-------------|--|

## Impact Assessment:

Please state yes or no for each category. If yes please provide further details.

Risk: Yes

No

Safety: Yes/No

No

Financial: Yes

As detailed in the report.

Workforce: Yes/No

No

Legal: Yes/No

No

Reputational: Yes/No

Yes, if forecast financial position is not delivered.

Socio Economic: Yes/No

No

Equality and Health: Yes/No

No

|                          |                                   |
|--------------------------|-----------------------------------|
| Decarbonisation: Yes/No  |                                   |
| No                       |                                   |
| Approval/Scrutiny Route: |                                   |
| Finance Committee        | Date: 19 <sup>th</sup> March 2025 |
|                          |                                   |
|                          |                                   |
|                          |                                   |

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|  |                                   |   |                 |             |
|--|-----------------------------------|---|-----------------|-------------|
| Report Title:                            | Operational Performance Report    |   | Agenda Item no. | 2.2         |
| Meeting:                                 | Finance and Performance Committee |   | Public          | ✓           |
|  |                                   |   | Private         |             |
| Status<br><i>(please tick one only):</i> | Assurance                         | ✓ | Approval        | Information |
| Lead Executive:                          | Chief Operating Officer           |   |                 |             |
| Report Author<br>(Title):                | Head of Performance               |   |                 |             |

**Main Report**  
Background and current situation:

**Background and current situation:**

The Operations and Information Teams have redesigned the Integrated Performance Report to better meet the requirements of the Board, it's Committees and improve performance reporting for the Health Board as a whole, both internally and externally. This updated report incorporates progress against the Cabinet Secretary's priorities and our performance ambitions/IMTP priorities. It also includes performance against the updated NHS Performance Framework for 24/25.

The sections of the full report covering Operation Performance, which are pertinent to the Finance and Performance Committee are:  
Section 1: Ministerial Priorities  
Section 2: Quadruple Aim 2

**Executive Director Opinion and Key Issues to bring to the attention of the Board/Committee:**

**Urgent and Emergency Care**

As we moved through Q4 and the winter period, the Health Board has seen periods of intense operational pressures, following unseasonal pressure during Q2 and Q3. As a result, January saw increases in the average ambulance handover delay and the numbers of patients waiting 12 hours in the Emergency Unit. The most recent data shows February saw a reduction in the number of patients waiting 12 hours in EU and an improvement in the average ambulance handover time. The number of 1-hour ambulance handovers reduced for the second month in a row in February.

January saw an increase in both Flu and Covid-19 in the community and healthcare settings, impacting both patients presenting to hospital and the number of inpatient beds closed due to IP&C controls. The bed closure position improved in early February, but in the latter part of the month until the time of writing we have seen an increased number of closures with up to 108 beds closed across our acute sites due to IP&C controls for all conditions (including Flu, Covid-19 and gastrointestinal illness). Flu/Covid prevalence in inpatients and bed closures on the acute sites continues to be monitored and reported to the organization daily through the 'hot reports'.

We continue to review our EU and inpatient data, with deep dives at the COO led Operational Delivery Group following periods of exceptional escalation. We have reviewed, at cluster level, the recent increases in 'majors' attendances to our Emergency Unit and continue to review all breaches of 2-hours for ambulance holds, 4-hours for hip/stroke patient admissions and 24-hour EU waits.

Despite these challenges, the UHB is still the best performing Health Board in Wales regarding ambulance handover delays, as highlighted in the recent BBC News coverage, and we continue to make ambulance handovers an operational priority.

Performance against the standards within the National Falls and Fragility Fracture Audit Programme (FFFAP) has shown improvement against our historic trends. Rapid fracture pathway improvements have led to a significant reduction in the median time taken for patients to get to the ward. Compliance with the KPI for Admission to a Specialist Ward and Prompt Surgery remains well above the NHFD average. Time to specialist beds for hip fracture and stroke patients remain an operational priority and we are conducting regular analysis of breaches to improve implementation of the pathways. We have seen improvements in compliance with the 4-hour standard for admission to a specialist ward through the year and performance remains improved from Q1 where it dipped below 30%. Compliance has suffered though the seasonal pressures in the EU, despite this, monthly compliance in January was 36.2%, against the national annualized average of 9%.

From October 2024 the SSNAP dataset and measures has changed – the new dataset has an increased focus on imaging and hyperacute stroke management, changes to the measurement of rehabilitation and an extension to the community dataset and the ongoing rehabilitation of patients. We continue to measure our performance of against the acute stroke pathway on a daily and weekly basis, through the hot report and COO led operational meetings. The UHB has held a further stroke summit continuing our focus on the stroke pathway. We are also working with colleagues in the NHS Executive around what KPIs will be the focus in Wales. We will continue to update Finance & Performance Committee and Board on the impact of the changes. Our analysis of the latest data has shown that our door-to-ward performance decreased in January, impacted by seasonal operational pressures, while the percentage of patients receiving their CT scan within 1 hour improved. Time to CT scan is one of the metrics which has been revised in the new SSNAP dataset, and performance against the new 20-minute standard has varied from 17.7% - 8.5% since October 2024, with 11.1% of patients scanned within 20 minutes in January.

## **Hospital Flow and Discharge**

The proportion of beds occupied by long length-of-stay patients has fluctuated in recent months as additional beds have been opened and closed in line with our operational plan. The number of delayed pathways of care has reduced since the high point in February 2024. In December we reported our lowest position of 144 delays, but seasonal pressures and associated operational challenges in January and February saw the number of delays increase although not to the volume seen last year. The February census showed 163 delays across all patient groups.

We continue to work with colleagues across the health and social care system to reduce delays in patient's care pathways. Reducing the time patients spend in hospital is a current operational focus. The ongoing work focusses on patients and family, our clinicians, integrated discharge service, hub and flow teams. It is anticipated that this work will result in an improved experience and shorter length of stay for patients, and deliver operation benefits such as improved flow, taking some pressure out of the Emergency Unit.

Delayed Pathways of Care (POCD) remain an area of national focus and our monthly delays are highlighted in Section 1 of the accompanying IPR – we are currently delivering our commitment to reduce against the same period in 23/24.

In addition to the monthly POCD census, patients with a length of stay >7 and >21 days in acute beds forms part of our weekly 'hot' reporting and end of month snapshots are provided in the IPR. We have seen a fluctuating picture as we moved through the year, but the season pressures through January have seen an increase in the length of time many patients are spending in hospital. The number on long length of stay patients reduced during February.

## **Cancer**

Our Single Cancer Pathways compliance has remained above 60% since September 2023 and we reported compliance of over 70% for August, September and October 2024. In January, our most recently reported position 65.6% of patients with Cancer received their first definitive treatment within

62 days. The SCP standard of 75% was met for Brain/CNS, Upper GI, Skin and lung tumour sites. October 2024 saw the highest recorded number of referrals received, accommodating this increase in demand has contributed to the recent reduction in performance and increase in the backlog through subsequent months. The backlog is forecast to reduce in March and April. The cancer PTL is tracked daily through Cancer services and operational teams, with weekly oversight of KPIs by the Cancer Delivery Group. Teams are currently refreshing their demand and capacity work to describe what is required to consistently meet the outpatient, diagnostic and treatment standards.

Every quarter the UHB submits a refreshed position on our historic data to capture any treatments from previous months which have been confirmed as cancer since the original submission. The table below shows the rolling 12-month position including the latest data refresh:

| SCP compliance                         | Jan-24 | Feb-24 | Mar-24 | Apr-24 | May-24 | Jun-24 | Jul-24 | Aug-24 | Sep-24 | Oct-24 | Nov-24 | Dec-24 | Jan-25 |
|--|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Original submission                    | 64.4%  | 60.8%  | 62.3%  | 63.7%  | 62.1%  | 64.6%  | 63.1%  | 68.4%  | 70.9%  | 72.5%  | 66.8%  | 66.7%  | 65.6%  |
| Compliance following quarterly refresh | 63.5%  | 60.2%  | 62.3%  | 66.0%  | 64.4%  | 63.6%  | 64.8%  | 70.2%  | 73.1%  |        |        |        |        |

## Planned Care

The numbers of patients waiting on an RTT waiting list has reduced this during Q4. We continue to focus on long-waiting cohorts and Cancer pathways with weekly scrutiny against the national standards and ministerial ambitions.

At the end of February there were 2,414 patients waiting 2 years for treatment. This is a significant reduction from the previous month and is the lowest number of 2-year waits reported since July 2021 as long waits increased following the Covid-19 pandemic. We are clear that there are still too many patients waiting too long for treatment across a number of key services and continue to work to reduce the length of time patients are waiting for treatment. Four-year waits were eradicated in September 2024, and we have maintained this position. The number of patients waiting over 3-years increased to 45 in February, but the number of specialties with 3-year waits remains reduced to two (Ophthalmology and Spines). As discussed previous Board sessions we have received additional, non-recurrent, financial resource to further improve our 2-year wait position. We submitted an initial trajectory to reduce to 1,326 2-year waits by the end of March 2025, through funding additional activity; in-house and through insourcing/outsourcing. This was reforecast in December, when the volume of available capacity was clearer and we are currently working to deliver our updated position of 1,800 2-year waits at the end of Q4. Our activity and breach numbers are monitored weekly with Welsh Government and weekly updates provided to the Chair, CEO and COO.

Last year we did not deliver our commitment to reduce 52-week outpatient waits to fewer than 9000. Our work to eliminate 3-year outpatient waits and reduce the number of 2-year waits has improved outpatient waiting times, but we continue to see high volumes of 52-week outpatient waits within some of our treatment specialties where we are focusing on reducing long waits across the pathway. We continue to address outpatient waits through activity, validation and pathway redesign to ensure only those who need secondary care intervention are referred. This is not a UHB wide issue and we have seen a reduction in the number of specialties reporting 52-week waits. We continue to work with specialties, particularly in Paediatrics, Medicine and Specialised services, to reduce to or maintain their outpatient waits below 52 weeks.

We have seen a reduction in the number of 100% delayed follow-up outpatient appointments over the last year. We have widened our focus to all patients who are delayed, not just those who are 100% beyond their follow-up target. This year we are tracking the total number of patients who are a delayed follow-up as we work to reduce this cohort of patients. At the time of writing there are 48,749 patients who are past their target date for a follow-up appointment, of these 10 were over 2 years past their target date as shown below:

| Overdue Follow-up Outpatients |                         |            |            |            |            |            |            |            |       |
|-------------------------------|-------------------------|------------|------------|------------|------------|------------|------------|------------|-------|
| Clinical Board                | Months past target date | 07/02/2024 | 27/01/2025 | 03/02/2025 | 10/02/2025 | 17/02/2025 | 24/02/2025 | 03/03/2025 | Trend |
| Total                         | Total overdue           | 61658      | 49760      | 49523      | 48926      | 48573      | 48203      | 48749      |       |
|                               | Over 12 months          | 12351      | 2323       | 2133       | 2112       | 2145       | 2301       | 2136       |       |
|                               | Over 18 months          | 2948       | 93         | 104        | 91         | 90         | 91         | 90         |       |
|                               | Over 24 months          | 1271       | 8          | 11         | 11         | 11         | 10         | 10         |       |
| Surgery                       | Total overdue           | 31552      | 25044      | 24762      | 24405      | 24369      | 24167      | 24017      |       |
|                               | Over 12 months          | 7610       | 2109       | 1894       | 1838       | 1868       | 1978       | 1776       |       |
|                               | Over 18 months          | 1523       | 71         | 85         | 73         | 69         | 68         | 65         |       |
|                               | Over 24 months          | 643        | 5          | 8          | 7          | 7          | 4          | 3          |       |
| Children & Women              | Total overdue           | 10114      | 7875       | 8001       | 7877       | 7731       | 7676       | 7863       |       |
|                               | Over 12 months          | 1597       | 18         | 18         | 17         | 18         | 39         | 44         |       |
|                               | Over 18 months          | 500        | 6          | 3          | 1          | 2          | 1          | 2          |       |
|                               | Over 24 months          | 173        | 1          | 0          | 0          | 0          | 0          | 0          |       |
| Specialist                    | Total overdue           | 10063      | 8811       | 8760       | 8682       | 8602       | 8529       | 8722       |       |
|                               | Over 12 months          | 1939       | 138        | 171        | 197        | 191        | 210        | 230        |       |
|                               | Over 18 months          | 464        | 9          | 10         | 10         | 10         | 11         | 9          |       |
|                               | Over 24 months          | 196        | 0          | 1          | 1          | 1          | 2          | 1          |       |
| Medicine                      | Total overdue           | 9879       | 7949       | 7917       | 7880       | 7782       | 7755       | 8064       |       |
|                               | Over 12 months          | 1183       | 52         | 44         | 54         | 62         | 68         | 80         |       |
|                               | Over 18 months          | 455        | 6          | 5          | 6          | 8          | 10         | 13         |       |
|                               | Over 24 months          | 257        | 2          | 2          | 3          | 3          | 4          | 6          |       |

Clinical Boards are working through their action plans to reduce these numbers with specific focus on the longest delays. The table above shows the reduction in the total number of delayed appointments and the impact of the focused work on the longest delays. There remains a small group of patients who have been given appointments in the coming weeks and others who have had their follow-up target extended following clinical validation and notes reviews. We continue to validate the waiting lists and work is ongoing to refine our patient management systems to improve data quality of follow-up outpatient lists.

Our Planned Care Programme is revising its approach Outpatient Transformation, this includes the appointment of a Clinical Lead for Outpatients and alignment with the national Clinical Implementation Networks (CINs) to drive best practice. The use of See on Symptoms (SOS) and Patient Initiated Follow-up (PIFU) pathways is an important tool in the management of follow-up services and we continue to develop their use across our services with additional clinical support from specialties who have successfully implemented these pathways. SOS, PIFU and utilization of outpatient clinics will be an area of significant focus as we move through the remainder of this year and into 25/26.

### Diagnosics

The waiting list position for Diagnostics deteriorated through Q1 and Q2, with particular challenges in Radiology and Endoscopy. As part of the £2.8m community diagnostic hub investment to improve imaging waiting times we will continue to use mobile solutions. Since September, we have seen a small improvement in the 8-week position with reductions in Endoscopy and non-obstetric ultrasound during Q3, continued into Q4.

Endoscopy capacity has been focused on Cancer, Urgent and long waiting surveillance patients. The service has an improvement plan, with additional theatre and insourcing capacity, aligned to a longer-term workforce plan to further address the deterioration in the length of wait. The number of 8-week waits increased through the first half of the year, albeit at a slower rate than last year. November saw the first reduction in the number of 8-week waits for the first time since February 2023. To clear the backlog of patients and create enough core capacity is going to require significant investment and support from Welsh Government. Looking forwards, consideration is being given to scale of the opportunity that might be available through the Llantrisant Health Park regional proposals.

At the end of January, 16,088 patients had waited 8 weeks or longer for their treatment, equating to 61% of patients on a diagnostic waiting list. This is over our commitment to Welsh Government.

| Diagnostic                              |                                  | Apr-24 | May-24 | Jun-24 | Jul-24 | Aug-24 | Sep-24 | Oct-24 | Nov-24 | Dec-24 | Jan-25 | Longest wait (weeks) | Median wait (weeks) | Total waiting list | % under 8w | % over 8w |
|---|----------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------------------|---------------------|--------------------|------------|-----------|
| Cardiology                              | Myocardial Perfusion Scanning    | 15     | 20     | 23     | 15     | 15     | 12     | 5      | 3      | 0      | 1      | 16                   | 4                   | 18                 | 94.4%      | 5.6%      |
|   | Echo Cardiogram                  | 4      | 0      | 0      | 0      | 0      | 2      | 1      | 0      | 0      | 0      | 6                    | 1                   | 660                | 100.0%     | 0.0%      |
|   | Dobutamine Stress Echocardiogram | 22     | 10     | 25     | 21     | 6      | 17     | 0      | 1      | 0      | 0      | 5                    | 2                   | 32                 | 100.0%     | 0.0%      |
|   | Stress Test                      | 1      | 3      | 1      | 0      | 0      | 0      | 0      | 1      | 0      | 0      | 7                    | 1                   | 20                 | 100.0%     | 0.0%      |
|   | Blood Pressure Monitoring        | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 6                    | 2                   | 67                 | 100.0%     | 0.0%      |
|   | Heart Rhythm Recording           | 0      | 3      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 4                    | 1                   | 185                | 100.0%     | 0.0%      |
|   | Diagnostic Angiography           | 78     | 71     | 33     | 30     | 56     | 66     | 55     | 55     | 52     | 48     | 34                   | 14                  | 66                 | 27.3%      | 72.7%     |
|   | Trans Oesophageal Echocardiogram | 5      | 2      | 0      | 0      | 0      | 3      | 0      | 0      | 0      | 0      | 5                    | 2                   | 8                  | 100.0%     | 0.0%      |
|   | Cardiac CT                       | 151    | 134    | 107    | 36     | 14     | 6      | 3      | 6      | 8      | 7      | 54                   | 2                   | 65                 | 89.2%      | 10.8%     |
|   | Cardiac MRI                      | 203    | 198    | 214    | 209    | 217    | 215    | 186    | 184    | 195    | 183    | 76                   | 14                  | 269                | 32.0%      | 68.0%     |
| Diagnostic Electrophysiology (EP Study) | 2                                | 2      | 2      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 6      | 6                    | 1                   | 100.0%             | 0.0%       |           |
| Diagnostic Endoscopy                    | Cystoscopy                       | 160    | 119    | 122    | 147    | 94     | 93     | 100    | 100    | 128    | 158    | 97                   | 8                   | 310                | 49.0%      | 51.0%     |
|   | Colonoscopy                      | 1536   | 1565   | 1626   | 1712   | 1788   | 1892   | 1949   | 1995   | 1992   | 1992   | 129                  | 32                  | 2532               | 21.3%      | 78.7%     |
|   | Flexible Sigmoidoscopy           | 1120   | 1131   | 1176   | 1195   | 1246   | 1271   | 1320   | 1319   | 1302   | 1280   | 116                  | 47                  | 1475               | 13.2%      | 86.8%     |
|   | Gastroscopy                      | 2499   | 2603   | 2692   | 2761   | 2864   | 2949   | 2979   | 2845   | 2748   | 2565   | 130                  | 39                  | 3080               | 16.7%      | 83.3%     |
|   | Bronchoscopy                     | 19     | 25     | 14     | 14     | 11     | 12     | 12     | 13     | 17     | 14     | 138                  | 79                  | 17                 | 17.6%      | 82.4%     |
| Imaging                                 | Fluoroscopy                      | 37     | 30     | 45     | 30     | 30     | 34     | 26     | 15     | 6      | 9      | 11                   | 3                   | 109                | 91.7%      | 8.3%      |
| Neurophysiology                         | Nerve Conduction Studies         | 0      | 0      | 0      | 0      | 0      | 1      | 0      | 0      | 0      | 0      | 7                    | 1                   | 127                | 100.0%     | 0.0%      |
|   | Electromyography                 | 0      | 1      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 6                    | 1                   | 105                | 100.0%     | 0.0%      |
| Physiological Measurement               | Urodynamic Tests                 | 35     | 74     | 76     | 58     | 57     | 71     | 69     | 88     | 74     | 95     | 50                   | 8                   | 187                | 49.2%      | 50.8%     |
|   | Vascular Technology              | 0      | 0      | 0      | 0      | 0      | 2      | 2      | 0      | 0      | 0      | 7                    | 2                   | 175                | 100.0%     | 0.0%      |
| Radiology                               | MRI                              | 1116   | 1045   | 892    | 974    | 1054   | 1019   | 865    | 716    | 882    | 944    | 105                  | 5                   | 2614               | 63.9%      | 36.1%     |
|   | Non-Obstetric Ultrasound         | 7773   | 8130   | 8808   | 9036   | 9462   | 9469   | 9114   | 9153   | 9315   | 8711   | 108                  | 15                  | 12675              | 31.3%      | 68.7%     |
|   | CT                               | 21     | 26     | 20     | 14     | 24     | 27     | 14     | 8      | 24     | 48     | 58                   | 2                   | 1521               | 96.8%      | 3.2%      |
|   | Nuclear Medicine                 | 38     | 53     | 62     | 72     | 78     | 49     | 44     | 54     | 27     | 33     | 27                   | 2                   | 149                | 77.9%      | 22.1%     |
| Total                                   |                                  | 14835  | 15245  | 15938  | 16324  | 17016  | 17210  | 16744  | 16556  | 16770  | 16088  |                      |                     | 26467              | 39.2%      | 60.8%     |

The above table shows the scale of the impact that long waits for endoscopy and non-obstetric US are having on performance, while a number of modalities report zero or small numbers of patients waiting over the 8-week standard.

## Mental Health

Demand for adult and children's Mental Health services remains high, including an increased presentation of patients with complex mental health and behavioral needs. Part 1a compliance for adults has, as forecast, remained low throughout this year as a result of capacity issues within the team. An additional WTE has been in post since October and two further WTE positions have been appointed to, we expect the increase in capacity to show improved performance as we move through Q4. Our Part 1b compliance remains strong with >99% of patients receiving interventions within 28 days on the vast majority of months. Part 2 compliance remains challenged, an improvement trajectory has been shared with NHS Executive colleagues, with Part 1 service developments supporting improvements.




For children and young people, Part 1a remains compliant, our latest information from January 2025 shows 95% of assessments were completed within 28 days. Part 1b has made a strong return to compliance in September, as per our forecast and compliance with the 80% standard has since been maintained. As part of the improvement work we have seen the size of waiting list and average wait reduce.

## Primary and Community Care

We continue to see a high number of GP practices in high escalation (level 3 and 4), reflecting the pressures on all parts of our health system. Our primary care teams continue to support practices as required.

Through this year greater visibility will be brought the activity carried out in Primary and Community Care. Work is ongoing to provide high level data across a number of services; this data will be updated as available and is intended to demonstrate the volume of activity undertaken through primacy and

community care services. The latest available data shows over two million GP appointments have been offered so far this year in Cardiff and the Vale.

| GMS activity  |                               | December 2024 | Year to date 24/25 |
|---|-------------------------------|---------------|--------------------|
|  | Calls to GP surgeries         | 317,460       | 3,435,463          |
|  | GP appointments offered       | 237,102       | 2,372,042          |
|  | Items issued via prescription | 727,694       | 6,617,790          |

Source: Primary Care Information Portal. Note: *The analyses and associated visualizations presented within this tile of the Primary Care Information Portal (PCIP) are a product of source data that has been provided at the initial stages of a quality improvement process and as such the completeness, accuracy, and validity of this source data (and hence any analyses/visualizations derived from such data) cannot be guaranteed. Please note there is a lag in receiving this national dataset.*

We continue to see high utilisation of our Urgent Primary Care Centers across Cardiff and the Vale. Total utilization across all 6 sites was 88% in February, with 3,579 consultations in month.

Our community teams and integrated services continue to support patients out of hospital, including 18,210 District Nursing visits in January – c7,500 more than our reported attendances to EU in the same period. These services continue to provide vital support to patients in the community allowing them to remain at home and reducing the demand for secondary cares services.

| Community and Integrated Service teams   | January 2025 | Year to date 24/25 |
|--|--------------|--------------------|
| District Nursing visits to patients  | 18,210       | 176,702            |
| Cardiff CRT and Vale CRS - Patients supported to avoid hospital admission        | 56           | 450                |
| Cardiff CRT and Vale CRS - Patients supported with early discharge from hospital | 87           | 982                |
| Cardiff CRT and Vale CRS - Patients supported with Therapy in the community      | 492          | 4370               |
| Patients supported by Community Nursing to remain at home                        | 3,734        | 35429              |
| Wound healing service referrals  | 99           | 799                |
| Continence service referrals   | 236          | 1696               |

### Recommendation:

The Finance and Performance Committee is asked to **NOTE** the year to date position against key organisational performance indicators for 2024-25 and the update against the Operational Plan programmes.

Link to Strategic Objectives of Shaping our Future Wellbeing:  
Please tick as relevant

|    |   |   |   |   |
|----|---|---|---|---|
| 1. |  Putting People First | 3 |  Providing Outstanding Quality | ✓ |
|----|---|---|---|---|

2



Delivering in the Right Places ✓



Acting for the Future

4.

**Five Ways of Working (Sustainable Development Principles) considered**

*Please tick as relevant*

|            |           |   |             |   |               |             |
|------------|-----------|---|-------------|---|---------------|-------------|
| Prevention | Long term | ✓ | Integration | ✓ | Collaboration | Involvement |
|------------|-----------|---|-------------|---|---------------|-------------|

**Impact Assessment:**

*Please state yes or no for each category. If yes please provide further details.*

Risk: No

Safety: No

Financial: No

Workforce: No

Legal: No

Reputational: No

Socio Economic: No

Equality and Health: No

Decarbonisation: No

**Approval/Scrutiny Route:**

|                      |       |
|----------------------|-------|
| Committee/Group/Exec | Date: |
|                      |       |
|                      |       |

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# Cardiff and Vale Integrated Performance Report

2024/25

March 2025

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# Report Contents

1. [Cabinet Secretary Priorities](#)

2. [Cardiff and Vale Performance Report](#)

*Click on a hyperlink to navigate directly to the section required*

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The Cabinet Secretary for Health and Social Services has set out National Programmes of work covering the priority areas of delivery. These priority areas are:

- Enhanced Care in the Community, with a focus on reducing delayed pathways of care
- Primary and Community Care, with a focus on improving access and shifting resources into primary and community care
- Urgent and Emergency Care, with a focus on delivery of the 6 goals programme
- Planned Care and Cancer, with a focus on reducing the longest waits
- Mental Health, including CAMHS, with a focus on delivery of the national programme

Further to these priority areas the Welsh Government and NHS Wales have identified 8 Key Performance Indicators across Urgent and Emergency Care, Cancer, Diagnostics, Elective Care and Mental Health Services.

Section 1 provides an overview of the Health Board performance of the Key Performance Indicators outlined by Welsh Government and Health Board commitments related to the delivery of the priority areas.

For a more in-depth view on performance for each priority, please follow the links in the NHS Performance Report column.

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| Priority                       | Aim  | C&V Commitment                       | Commitment to meet national standard? | By When | In Month Performance against C&V commitment | Link in Performance Report           |
|--------------------------------|--|--------------------------------------|---------------------------------------|---------|---|--------------------------------------|
| Enhanced Care in the Community | <p><b>Measure:</b> Number of delayed transfers of care.</p> <p><b>National standard/ambition:</b> 12 month reduction trend</p> <p><b>Reporting period:</b> Monthly</p>   | Reduction against 23/24              | Yes                                   | Mar-25  | 163<br>Feb-25                               | <a href="#">Hyperlink to section</a> |
| Primary and Community Care     | <p><b>Measure:</b> General Medical Services – Number of GP practices achieving core access standards</p> <p><b>National standard/ambition:</b> 100%</p> <p><b>Reporting period:</b> Annual – in month position for information</p>   | 100%                                 | Yes                                   | Mar-25  | 98.2%<br>Apr-24                             | <a href="#">Hyperlink to section</a> |
|                                | <p><b>Measure:</b> General Dental Services - % of contract value fulfilled</p> <p><b>National standard:</b> 30% of contract value by end Q2, 100% Q4</p> <p><b>Reporting period:</b> Monthly</p>   | 25% Q1<br>50%Q2<br>75% Q3<br>100% Q4 | Yes                                   | Mar-25  | 84.5%<br>(Apr-24 to Jan-25)                 | <a href="#">Hyperlink to section</a> |
| Urgent and Emergency Care      | <p><b>Measure:</b> Number of patients who spend 12 hours or more in all major and minor emergency care facilities from arrival until admission, transfer or discharge</p> <p><b>National standard/ambition:</b> 20% reduction by September 2024, further 20% reduction by March 2025</p> <p><b>Reporting period:</b> Monthly</p> | 670<br>Sept-24<br><br>532<br>Mar-25  | Yes                                   | Mar-25  | 801<br>Feb-25                               | <a href="#">Hyperlink to section</a> |
|                                | <p><b>Measure:</b> Number of ambulance patient handovers over 1 hour</p> <p><b>National standard/ambition:</b> 30% reduction by December 2024</p> <p><b>Reporting period:</b> Monthly</p>  | 232                                  | Yes                                   | Dec-24  | 385<br>Feb-25                               | <a href="#">Hyperlink to section</a> |

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| Priority      | Aim  | C&V Commitment | Commitment to meet national standard? | By When | In Month Performance against C&V commitment | Link in Performance Report           |
|---------------|--|----------------|---------------------------------------|---------|---|--------------------------------------|
| Mental Health | <p><b>Measure:</b> Percentage of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS for people age under 18 years</p> <p><b>National standard/ambition:</b> 80% by end of December 2024</p> <p><b>Reporting period:</b> Monthly</p>    | 80%            | Yes                                   | Dec-24  | 93%<br>Jan-25                               | <a href="#">Hyperlink to section</a> |
|               | <p><b>Measure:</b> Percentage of therapeutic interventions started within (up to and including) 28 days following an assessment by LPMHSS for adults age 18 years and over</p> <p><b>National standard/ambition:</b> 80% by end of December 2024</p> <p><b>Reporting period:</b> Monthly</p> | 99%            | Yes                                   | Dec-24  | 99%<br>Jan-25                               | <a href="#">Hyperlink to section</a> |

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Performance Key: Meeting standard / trajectory off target/trajectory

| Priority                | Aim   | C&V Commitment  | Commitment to meet national standard? | By When | In Month Performance against C&V commitment | Link in Performance Report           |
|-------------------------|---|---|---------------------------------------|---------|---|--------------------------------------|
| Planned Care and Cancer | <p><b>Measure:</b> Number of patients waiting more than 52 weeks for a new outpatient appointment</p> <p><b>National standard/ambition:</b> 40% reduction by end of September 2024, 0 by end of March 2025</p> <p><b>Reporting period:</b> Monthly</p>  | <p><b>16,004</b><br/>Sep-24</p> <p><b>15,925</b><br/>Mar-25</p> | No                                    |         | <p><b>16,439</b><br/>Jan-25</p>             | <a href="#">Hyperlink to section</a> |
|                         | <p><b>Measure:</b> Number of patients waiting more than 104 weeks for referral to treatment</p> <p><b>National standard/ambition:</b> 0 by end of December 2024</p> <p><b>Reporting period:</b> Monthly</p>   | <p><b>4,447</b><br/>Dec-24</p>                                  | No                                    |         | <p><b>3,581</b><br/>Jan-25</p>              | <a href="#">Hyperlink to section</a> |
|                         | <p><b>Measure:</b> Percentage of patients starting their first definitive treatment within 62 days from point of suspicion (regardless of the referral route)</p> <p><b>National standard/ambition:</b> 60% by end of December 2024, 70% by end of March 2025</p> <p><b>Reporting period:</b> Monthly</p> | <p><b>70%</b><br/>Mar-25</p>                                    | Yes                                   | Dec-24  | <p><b>65.6%</b><br/>Jan-25</p>              | <a href="#">Hyperlink to section</a> |
|                         | <p><b>Measure:</b> Number of patients waiting more than 8 weeks for a specified diagnostic</p> <p><b>National standard/ambition:</b> 95% of patients waiting less than 8 weeks by end of December 2024</p> <p><b>Reporting period:</b> Monthly</p>  | <p><b>14,796</b><br/>Dec-24</p>                                 | No                                    |         | <p><b>16,088</b><br/>Jan-25</p>             | <a href="#">Hyperlink to section</a> |

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Performance Key: Meeting standard / trajectory off target/trajectory

## Section 2: Cardiff and Vale Performance Report

The Performance Report section provides detail of UHB performance across the quadruple aims.

Detail on what is included under each quadruple aim is provided below.

A summary of performance is provided against the priority UHB ambition under each aim, including detail of annual plan commitments. Performance against the relevant NHS Performance Frameworks measures is provided under each aim.

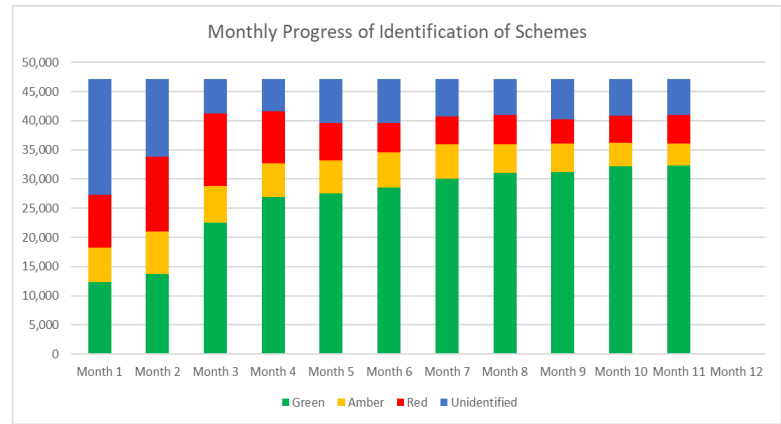

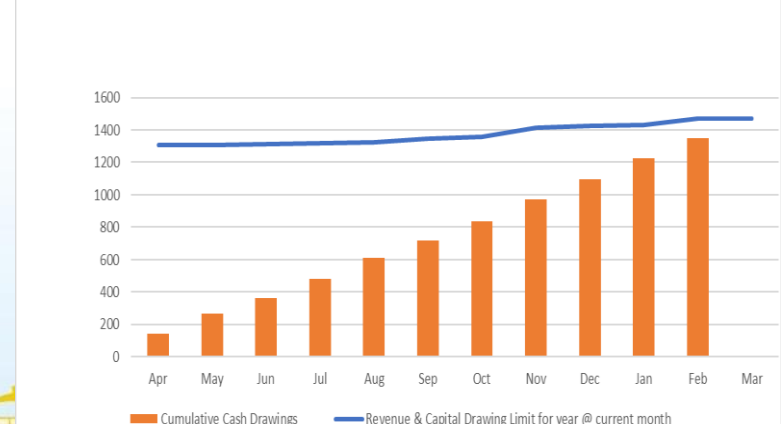
National Performance Framework monitoring data is available from DHCW showing performance across all Welsh Health Boards and Trusts (where relevant). This information can be accessed by clicking [here](#).

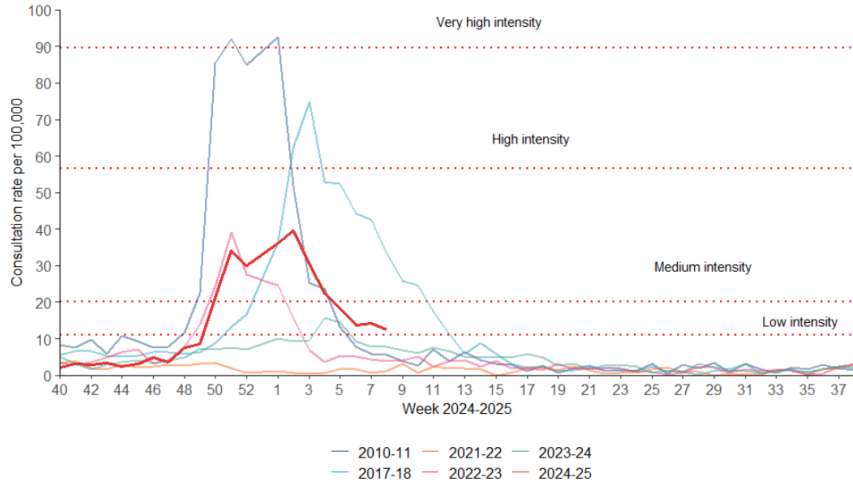
### [Return to Main Menu](#)

| Number | Aim   | Contents   |
|--------|---|--|
| Aim 1  | People in Wales have improved health and well-being with better prevention and self-management  | <a href="#">Public Health</a>  |
| Aim 2  | People in Wales have better quality and more accessible health and social care services, enabled by digital and supported by engagement                 | Urgent and Emergency Care<br><a href="#">Inpatient Flow, Discharge and Front Door Alternatives to Admission</a><br><a href="#">Community and Urgent Primary Care</a><br><a href="#">Priority Services</a><br><a href="#">RTT Waiting Times</a><br>Planned Care<br><a href="#">Cancer, Diagnostics and Therapies</a><br><a href="#">Primary and Community Care</a><br><a href="#">Whole System Evaluation and Supporting Patients Whilst Waiting</a><br><a href="#">Mental Health</a> |
| Aim 3  | The health and social care workforce in Wales is motivated and sustainable  | <a href="#">People and Culture</a>   |
| 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. | <a href="#">Quality, Safety and Experience</a><br><a href="#">Financial Performance</a>  |

Financial Performance

| Priority   | Performance Summary   | Reported Period                      | Data   |  |             |                                      |       |   |            |                                    |      |                              |     |                          |       |                                     |             |          |  |  |                            |                                      |                                    |       |       |                           |        |        |  |       |       |                          |  |         |   |               |               |
|--|---|--------------------------------------|--|--|-------------|--------------------------------------|-------|---|------------|------------------------------------|------|------------------------------|-----|--------------------------|-------|-------------------------------------|-------------|----------|--|--|----------------------------|--------------------------------------|------------------------------------|-------|-------|---------------------------|--------|--------|--|-------|-------|--------------------------|--|---------|---|---------------|---------------|
| <p><b>Deliver 2024/25 Draft Financial Plan</b></p>   | <p><b>Financial Plan Approved by Board and submitted to Welsh Government</b></p> <p>The UHBs initial draft 2024-25 planning deficit was £15.9m. Following a review of the additional unforeseen cost pressures and demand on services in 2024-25, the UHB relayed an Accountable Officer letter on the 2nd December 2024 to advise Welsh Government of a revised forecast deficit of £34.5m.</p> <p>Welsh Government issued a revised control target letter dated the 25th November 2024 which indicated that additional funding of £50m would be allocated across the seven Health Boards on a fair-shares basis. For CVUHB, this results in an in-year recurrent allocation of £6.8m and a revised target control total of £9.1m. On this basis the UHB's revised year end forecast is £27.7m as follows:</p> <table border="1"> <thead> <tr> <th></th> <th>2024/25<br/>£m</th> </tr> </thead> <tbody> <tr> <td><b>Draft Planned Financial Position £m</b></td> <td><b>15.9</b></td> </tr> <tr> <td>Additional In Year Recurrent Funding</td> <td>(6.8)</td> </tr> <tr> <td><b>Revised WG Control Target (deficit) £m</b></td> <td><b>9.1</b></td> </tr> <tr> <td>Forecast Savings Programme Deficit</td> <td>11.2</td> </tr> <tr> <td>Forecast Operational Deficit</td> <td>9.5</td> </tr> <tr> <td>Further Recovery Actions</td> <td>(2.1)</td> </tr> <tr> <td><b>Revised Year-End Forecast £m</b></td> <td><b>27.7</b></td> </tr> </tbody> </table> <p>The reported position at month 11 is an overspend of £27.591m per the table opposite.</p> |                                      | 2024/25<br>£m  | <b>Draft Planned Financial Position £m</b> | <b>15.9</b> | Additional In Year Recurrent Funding | (6.8) | <b>Revised WG Control Target (deficit) £m</b> | <b>9.1</b> | Forecast Savings Programme Deficit | 11.2 | Forecast Operational Deficit | 9.5 | Further Recovery Actions | (2.1) | <b>Revised Year-End Forecast £m</b> | <b>27.7</b> | Feb 2025 | <table border="1"> <thead> <tr> <th></th> <th>Month 11<br/>Position<br/>£m</th> <th>Forecast Year-<br/>End Position<br/>£m</th> </tr> </thead> <tbody> <tr> <td>Revised Planning Control (Deficit)</td> <td>8.342</td> <td>9.100</td> </tr> <tr> <td>Savings Programme Deficit</td> <td>11.441</td> <td>11.200</td> </tr> <tr> <td>Operational position (Surplus) / Deficit</td> <td>7.808</td> <td>9.500</td> </tr> <tr> <td>Further Recovery actions</td> <td></td> <td>(2.100)</td> </tr> <tr> <td><b>Financial Position £m (Surplus) / Deficit £m</b></td> <td><b>27.591</b></td> <td><b>27.700</b></td> </tr> </tbody> </table> |  | Month 11<br>Position<br>£m | Forecast Year-<br>End Position<br>£m | Revised Planning Control (Deficit) | 8.342 | 9.100 | Savings Programme Deficit | 11.441 | 11.200 | Operational position (Surplus) / Deficit | 7.808 | 9.500 | Further Recovery actions |  | (2.100) | <b>Financial Position £m (Surplus) / Deficit £m</b> | <b>27.591</b> | <b>27.700</b> |
|  | 2024/25<br>£m   |                                      |  |  |             |                                      |       |   |            |                                    |      |                              |     |                          |       |                                     |             |          |  |  |                            |                                      |                                    |       |       |                           |        |        |  |       |       |                          |  |         |   |               |               |
| <b>Draft Planned Financial Position £m</b>   | <b>15.9</b>   |                                      |  |  |             |                                      |       |   |            |                                    |      |                              |     |                          |       |                                     |             |          |  |  |                            |                                      |                                    |       |       |                           |        |        |  |       |       |                          |  |         |   |               |               |
| Additional In Year Recurrent Funding   | (6.8)   |                                      |  |  |             |                                      |       |   |            |                                    |      |                              |     |                          |       |                                     |             |          |  |  |                            |                                      |                                    |       |       |                           |        |        |  |       |       |                          |  |         |   |               |               |
| <b>Revised WG Control Target (deficit) £m</b>  | <b>9.1</b>  |                                      |  |  |             |                                      |       |   |            |                                    |      |                              |     |                          |       |                                     |             |          |  |  |                            |                                      |                                    |       |       |                           |        |        |  |       |       |                          |  |         |   |               |               |
| Forecast Savings Programme Deficit   | 11.2  |                                      |  |  |             |                                      |       |   |            |                                    |      |                              |     |                          |       |                                     |             |          |  |  |                            |                                      |                                    |       |       |                           |        |        |  |       |       |                          |  |         |   |               |               |
| Forecast Operational Deficit   | 9.5   |                                      |  |  |             |                                      |       |   |            |                                    |      |                              |     |                          |       |                                     |             |          |  |  |                            |                                      |                                    |       |       |                           |        |        |  |       |       |                          |  |         |   |               |               |
| Further Recovery Actions   | (2.1)   |                                      |  |  |             |                                      |       |   |            |                                    |      |                              |     |                          |       |                                     |             |          |  |  |                            |                                      |                                    |       |       |                           |        |        |  |       |       |                          |  |         |   |               |               |
| <b>Revised Year-End Forecast £m</b>  | <b>27.7</b>   |                                      |  |  |             |                                      |       |   |            |                                    |      |                              |     |                          |       |                                     |             |          |  |  |                            |                                      |                                    |       |       |                           |        |        |  |       |       |                          |  |         |   |               |               |
|  | Month 11<br>Position<br>£m  | Forecast Year-<br>End Position<br>£m |  |  |             |                                      |       |   |            |                                    |      |                              |     |                          |       |                                     |             |          |  |  |                            |                                      |                                    |       |       |                           |        |        |  |       |       |                          |  |         |   |               |               |
| Revised Planning Control (Deficit)   | 8.342   | 9.100                                |  |  |             |                                      |       |   |            |                                    |      |                              |     |                          |       |                                     |             |          |  |  |                            |                                      |                                    |       |       |                           |        |        |  |       |       |                          |  |         |   |               |               |
| Savings Programme Deficit  | 11.441  | 11.200                               |  |  |             |                                      |       |   |            |                                    |      |                              |     |                          |       |                                     |             |          |  |  |                            |                                      |                                    |       |       |                           |        |        |  |       |       |                          |  |         |   |               |               |
| Operational position (Surplus) / Deficit   | 7.808   | 9.500                                |  |  |             |                                      |       |   |            |                                    |      |                              |     |                          |       |                                     |             |          |  |  |                            |                                      |                                    |       |       |                           |        |        |  |       |       |                          |  |         |   |               |               |
| Further Recovery actions   |   | (2.100)                              |  |  |             |                                      |       |   |            |                                    |      |                              |     |                          |       |                                     |             |          |  |  |                            |                                      |                                    |       |       |                           |        |        |  |       |       |                          |  |         |   |               |               |
| <b>Financial Position £m (Surplus) / Deficit £m</b>  | <b>27.591</b>   | <b>27.700</b>                        |  |  |             |                                      |       |   |            |                                    |      |                              |     |                          |       |                                     |             |          |  |  |                            |                                      |                                    |       |       |                           |        |        |  |       |       |                          |  |         |   |               |               |
| <p><b>Achieve financial sustainability and recurrent financial balance by the end of 2025/26</b></p> | <p>The planned deficit for 2024-25 is £15.9m. Key elements of financial performance in 2024-25 contribute to an increase in the UHB's underlying deficit from 2025-26 onwards. These include :the planned 2024-25 financial deficit of £15.9m; savings made non recurrently in 2024-25 ;the full year effect of cost pressures including inflation and the full year effect of demand led pressures in 2024-25</p> <p>Non recurrent savings made in 2024-25, combined with unidentified savings not delivered in 2024-25 add £25.4m to the underlying deficit. The full year effect of demand and inflation pressures is currently assessed at £25.4m. The additional costs are abated by the additional £6.8m recurrent funding provided in 2024/25. This projects an underlying deficit for 2025-26 of £59.9m before the assessment of new year cost pressures and the additional funding available.</p>  | Feb. 2025                            | <p>Progress in Reducing the Underlying Deficity (ULD) from 60.9m to £15.9m</p> |  |             |                                      |       |   |            |                                    |      |                              |     |                          |       |                                     |             |          |  |  |                            |                                      |                                    |       |       |                           |        |        |  |       |       |                          |  |         |   |               |               |
| <p><b>Management of operational budget pressures</b></p>   | <p>The UHB reported a £7.808m operational overspend at month 11, which is an improvement of £1.753m from the £9.561m reported at month 10.</p> <p>A number of additional urgent control actions were implemented in January 2025 to slow expenditure run rates and eliminate unnecessary expenditure. This includes a daily Programme Management Office (PMO) which meets twice a day and a daily joint Executive/PMO meeting which convenes at the end of each weekday. The PMO has overseen:-</p> <ul style="list-style-type: none"> <li>• Authorisation for any necessary remaining agency expenditure</li> <li>• Authorisation for any necessary variable bank expenditure</li> <li>• Authorisation for any training (outside the statutory training required for professional registration or clinical training to ensure patient safety).</li> </ul>  | Feb. 2025                            | <p>Planned Cumulative Operational Position vs Month 11 Position</p>            |  |             |                                      |       |   |            |                                    |      |                              |     |                          |       |                                     |             |          |  |  |                            |                                      |                                    |       |       |                           |        |        |  |       |       |                          |  |         |   |               |               |

|   | Priority  | Performance Summary   | Reported Period  | Data   |
|---|---|---|------------------|--|
|   | <p><b>Delivery of recurrent £47.2m savings target</b></p> | <p>£36.145m Green and Amber schemes identified at month 11 of which £19.761m were recurrent savings. Savings Graph 1 illustrates progress in the identification of savings.</p> <p>The planned profile and actual/forecast delivery of savings is outlined in Savings Graph 2.</p>                                      | <p>Feb. 2025</p> | <p><b>Savings Graph 1- Progress in Identification of Savings Schemes</b></p>  <p><b>Savings Graph 2- Profile of Savings Plan and Actual/Forecast Achievement</b></p>  |
| <p>Regan, Nikki<br/>13/03/2025 15:07:52</p> | <p><b>Remain within Cash Limit</b></p>                    | <p>The UHB forecasts to remain within its 2024/25 cash limit, on the assumption that all anticipated allocations are fully funded and that working capital cash is provided for movement in working balances.</p> <p>The UHB is continuing to actively plan and manage its cashflow in the final month of the year.</p> | <p>Feb. 2025</p> | <p><b>Cumulative Cash drawn against Revenue and Capital Drawing Limit £m</b></p>    |

| Priority          | Performance Summary   | Reported Period | On target?   | Data  |
|-------------------|---|-----------------|--------------|---|
| Health Protection | <p><b>Seasonal respiratory infections</b></p> <p><b>Immunisation</b> – COVID-19 and influenza</p> <ul style="list-style-type: none"> <li>The Covid-19 autumn winter booster campaign is underway, and it has delivered 79,631 vaccines since the 1st of October when the campaign started for a total eligible population of 154,079 in Cardiff and the Vale. The vaccine uptake is officially at 47.97%, this is among the highest of all Health Boards, and slightly higher than the Welsh average of 47.23%.</li> <li>With regards to Influenza the uptake of vaccines in the over 65 is at 70.1% which is in line with Welsh average.</li> </ul> <p><b>Surveillance</b></p> <ul style="list-style-type: none"> <li>Surveillance indicators suggest that the peak of the influenza season has passed, however there remains potential for further increases in influenza B cases</li> <li>COVID-19 case numbers have fallen in recent weeks</li> <li>XEC remains the most prevalent variant of Covid-19 in Wales</li> <li>There is currently <b>1</b> Covid-19 outbreak and <b>0</b> incidents in hospitals in C&amp;V UHB; and <b>2</b> influenza outbreaks and <b>0</b> incidents.</li> <li>Since the start of April 2024, in C&amp;V UHB there have been <b>92</b> influenza incidents or outbreaks, with <b>279</b> bed days lost. In the same period there have been <b>187</b> Covid-19 incidents or outbreaks, with <b>726</b> bed days lost. Combined, influenza and Covid-19 incidents and outbreaks have led to the <b>loss of 1,005 bed days</b>, representing an estimated opportunity cost of <b>£502,500</b> to the UHB since 1 April 2024</li> <li>RSV incidence in children aged up to 5y is now at baseline levels</li> </ul> | Week 8          | Below target | <p><a href="#">Wales COVID-19 vaccination surveillance weekly report.pdf</a></p> <p>Infant COVID-19 vaccination.<br/> <a href="https://public.tableau.com/app/profile/public.health.wales.health.protection/viz/RapidCOVID-19virology-Public/Vaccination">https://public.tableau.com/app/profile/public.health.wales.health.protection/viz/RapidCOVID-19virology-Public/Vaccination</a></p> <p>Weekly COVID-19 vaccination report by health board<br/> <a href="https://www2.nphs.wales.nhs.uk/CommunitySurveillanceDocs.nsf/3dc04669c9e1ea880257062003b246b/cf7a9a9adcd8bb0a8025866b003a51a1/\$FILE/Wales%20COVID-19%20vaccination%20surveillance%20weekly%20report.pdf">https://www2.nphs.wales.nhs.uk/CommunitySurveillanceDocs.nsf/3dc04669c9e1ea880257062003b246b/cf7a9a9adcd8bb0a8025866b003a51a1/\$FILE/Wales%20COVID-19%20vaccination%20surveillance%20weekly%20report.pdf</a></p>  <p>Source: <a href="#">PHW weekly ARI summary</a> (new from Nov 2024)</p> |

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For areas of underperformance please see cover paper for details on actions being taken

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C&V Priorities and Annual Plan Commitments

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| Priority          | Performance Summary  | Reported Period | On target?   | Data  |
|-------------------|--|-----------------|--------------|---|
| Health Protection | <p><b>Routine childhood immunisation</b></p> <ul style="list-style-type: none"> <li>81.5% of children are up to date with vaccination at age 4, which although an improvement, is below the target of 95% and a Welsh average of 85.7%, uptake of all childhood vaccinations at age 5 is 85.2% which is still below the Welsh average of 87.8%</li> <li>The WHC target of 90% uptake of MMR in schools by the end of July 2024 was not reached we have restarted action on this with our local authority colleagues.</li> </ul>  | Jul-Sep 2024    | Below target | <p>Cardiff &amp; Vale UHB quarterly COVER trends</p> <p>Source quarterly <a href="#">COVER</a> data</p> |
| Health Protection | <p><b>Health Protection System</b></p> <ul style="list-style-type: none"> <li>The Cardiff and Vale Health Protection Plan (2024) was fully signed off via partnership governance processes (completed April 2024)</li> <li>An updated action plan for 2024/26 is nearing completion, which further strengthens the agreed approach and has been produced in collaboration with partners across the regional system, seeking views on where the partnership has added value and where there is still the opportunity for further collaborative working.</li> <li>The UHB is undertaking a range of preparedness actions in response to the World Health Organization's declaration of a public health emergency of international concern in relation to the upsurge of Mpox cases in the Democratic Republic of Congo and surrounding countries; actions include a review of pathways across primary and secondary care. UHB teams and members of the regional partnership, including SRS, participated in a national tabletop exercise on 5th September 2024 to test our response.</li> <li>Planning for future pandemic response is underway, with workshops gathering learning from COVID-19 currently underway. The UHB will participate in Exercise Pegasus, a Tier 1 exercise recently announced by UK government, in Autumn 2025.</li> </ul> | Q4 2024/25      | On target    | n/a   |

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| Priority           | Performance Summary  | Reported Period | On target?   | Data  |      |                      |         |                   |       |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |
|--------------------|--|-----------------|--|---|------|----------------------|---------|-------------------|-------|---------|------|------|------|------|---------|------|------|------|------|---------|------|------|------|------|---------|------|------|------|------|---------|------|------|------|------|---------|------|------|------|------|---------|------|------|------|------|---------|------|------|------|------|---------|------|------|------|------|---------|------|------|------|------|---------|------|------|------|------|---------|------|------|------|------|
| Health Improvement | <p><b>Healthy weight:</b></p> <ul style="list-style-type: none"> <li>77.5% of reception aged children in Cardiff and Vale of Glamorgan are categorised as healthy weight (Child Measurement Programme, 2022/23) this is in line with the English average. Data produced annually.</li> <li>40% of adults in Cardiff and Vale of Glamorgan are a healthy weight, as compared to 36% of the Welsh average (NSfW, 2021/22+2022/23); 39% are eating five portions of fruit/vegetables a day, compared to 30% in Wales (NSfW, 2021/22+2022/23) and 68% are meeting physical activity guidelines of being active for at least 150 minutes per week, as compared to 57% in Wales (NSfW, 2021/22+2022/23)*. There are no comparable data in other UK countries due to different methodologies being used.</li> <li>Differences remain between our most and least deprived communities with levels of healthy weight lower, and consumption of fruit and vegetables/physical activity levels also lower in the most deprived areas of Cardiff and Vale.</li> </ul> <p><b>Weight management services</b></p> <ul style="list-style-type: none"> <li>Dietetics developed an Investment Plan to outline how services will meet the new Ministerial target of a 10% increase in Level 2 and Level 3 end to end services by the end of financial year. Baseline findings are 1,386 patients for Level 2 and 160 patients for Level 3.</li> </ul> | Q4 2023/24      | <p><b>Healthy weight:</b></p> <p>On target</p> <p><b>Weight management services:</b></p> <p>Below target</p> | <table border="1"> <caption>Cardiff and Vale of Glamorgan Child Measurement Programme - Healthy Weight trend - Reception Year children</caption> <thead> <tr> <th>Year</th> <th>Cardiff and Vale UHB</th> <th>Cardiff</th> <th>Vale of Glamorgan</th> <th>Wales</th> </tr> </thead> <tbody> <tr><td>2011/12</td><td>77.5</td><td>75.0</td><td>75.0</td><td>75.0</td></tr> <tr><td>2012/13</td><td>77.5</td><td>75.0</td><td>75.0</td><td>75.0</td></tr> <tr><td>2013/14</td><td>77.5</td><td>75.0</td><td>75.0</td><td>75.0</td></tr> <tr><td>2014/15</td><td>77.5</td><td>75.0</td><td>75.0</td><td>75.0</td></tr> <tr><td>2015/16</td><td>77.5</td><td>75.0</td><td>75.0</td><td>75.0</td></tr> <tr><td>2016/17</td><td>77.5</td><td>75.0</td><td>75.0</td><td>75.0</td></tr> <tr><td>2017/18</td><td>77.5</td><td>75.0</td><td>75.0</td><td>75.0</td></tr> <tr><td>2018/19</td><td>77.5</td><td>75.0</td><td>75.0</td><td>75.0</td></tr> <tr><td>2019/20</td><td>77.5</td><td>75.0</td><td>75.0</td><td>75.0</td></tr> <tr><td>2020/21</td><td>77.5</td><td>75.0</td><td>75.0</td><td>75.0</td></tr> <tr><td>2021/22</td><td>77.5</td><td>75.0</td><td>75.0</td><td>75.0</td></tr> <tr><td>2022/23</td><td>77.5</td><td>75.0</td><td>75.0</td><td>75.0</td></tr> </tbody> </table> | Year | Cardiff and Vale UHB | Cardiff | Vale of Glamorgan | Wales | 2011/12 | 77.5 | 75.0 | 75.0 | 75.0 | 2012/13 | 77.5 | 75.0 | 75.0 | 75.0 | 2013/14 | 77.5 | 75.0 | 75.0 | 75.0 | 2014/15 | 77.5 | 75.0 | 75.0 | 75.0 | 2015/16 | 77.5 | 75.0 | 75.0 | 75.0 | 2016/17 | 77.5 | 75.0 | 75.0 | 75.0 | 2017/18 | 77.5 | 75.0 | 75.0 | 75.0 | 2018/19 | 77.5 | 75.0 | 75.0 | 75.0 | 2019/20 | 77.5 | 75.0 | 75.0 | 75.0 | 2020/21 | 77.5 | 75.0 | 75.0 | 75.0 | 2021/22 | 77.5 | 75.0 | 75.0 | 75.0 | 2022/23 | 77.5 | 75.0 | 75.0 | 75.0 |
| Year               | Cardiff and Vale UHB   | Cardiff         | Vale of Glamorgan  | Wales   |      |                      |         |                   |       |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |
| 2011/12            | 77.5   | 75.0            | 75.0   | 75.0  |      |                      |         |                   |       |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |
| 2012/13            | 77.5   | 75.0            | 75.0   | 75.0  |      |                      |         |                   |       |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |
| 2013/14            | 77.5   | 75.0            | 75.0   | 75.0  |      |                      |         |                   |       |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |
| 2014/15            | 77.5   | 75.0            | 75.0   | 75.0  |      |                      |         |                   |       |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |
| 2015/16            | 77.5   | 75.0            | 75.0   | 75.0  |      |                      |         |                   |       |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |
| 2016/17            | 77.5   | 75.0            | 75.0   | 75.0  |      |                      |         |                   |       |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |
| 2017/18            | 77.5   | 75.0            | 75.0   | 75.0  |      |                      |         |                   |       |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |
| 2018/19            | 77.5   | 75.0            | 75.0   | 75.0  |      |                      |         |                   |       |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |
| 2019/20            | 77.5   | 75.0            | 75.0   | 75.0  |      |                      |         |                   |       |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |
| 2020/21            | 77.5   | 75.0            | 75.0   | 75.0  |      |                      |         |                   |       |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |
| 2021/22            | 77.5   | 75.0            | 75.0   | 75.0  |      |                      |         |                   |       |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |
| 2022/23            | 77.5   | 75.0            | 75.0   | 75.0  |      |                      |         |                   |       |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |         |      |      |      |      |

*For areas of underperformance please see cover paper for details on actions being taken*

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C&V Priorities and Annual Plan Commitments

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| Priority           | Performance Summary  | Reported Period | On target?   | Data  |
|--------------------|--|-----------------|--------------|---|
| Health improvement | <p><b>Diabetes</b></p> <ul style="list-style-type: none"> <li>Percentage of patients (aged 12 years and over) with diabetes who received all eight NICE recommended care processes                             <ul style="list-style-type: none"> <li>General downward trend since Spring 2024, in CVUHB and across Wales.</li> <li>Whilst overall completion rates is c. 45%, some processes (e.g. HbA1c check) are substantially higher percentage uptake compared to others (e.g. urine albumin) - some of this may be data artefact rather than actual lack of care process completion.</li> </ul> </li> </ul> | Jan 2025        | Below target | Downward/static trend – January 2025 45.53% CVUHB |

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*For areas of underperformance please see cover paper for details on actions being taken. Note that the diabetes performance measure is listed under Quadruple Aim 2*



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C&V Priorities and Annual Plan Commitments

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| Priority           | Performance Summary  | Reported Period | On target?   | Data   |         |         |        |          |               |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |
|--------------------|--|-----------------|--|--|---------|---------|--------|----------|---------------|----------|----|----|----|----|----------|----|----|----|----|----------|----|----|----|----|----------|----|----|----|----|----------|----|----|----|----|----------|----|----|----|----|----------|----|----|----|----|----------|----|----|----|----|----------|----|----|----|----|----------|----|----|----|----|----------|----|----|----|----|----------|----|----|----|----|
| Health Improvement | <p><b>Tobacco</b></p> <ul style="list-style-type: none"> <li>13% of Cardiff and Vale of Glamorgan smoke.</li> <li>NHS Wales Performance Measure - Percentage of adult smokers who make a quit attempt via smoking cessation services - Target = 5% annually.</li> <li>In Quarter 2- 24/25 (the most up to date data received) 0.5 % of smokers set a firm quit date. This is below target. 37 % of these quit smoking at 4 weeks,- CO Validated (in total from Help Me Quit [HMQ], Pharmacy Level 3 and Hospital Smoking Cessation Service combined) . Although still below target, this is an improvement from the previous quarter. This breaks down by service as follows:                     <ul style="list-style-type: none"> <li>HMQ community – 41% of Treated Smokers had quit smoking at 4 weeks.</li> <li>Level 3 Pharmacy –18% of Treated Smokers had quit smoking at 4 weeks.</li> <li>Hospital Service - 49% of Treated Smokers had quit smoking at 4 weeks.</li> </ul> </li> <li>CO validation was re introduced for quits in April 24 by Welsh Gov. This has resulted in a drop in recorded 4 week quits. In Q2 there were an additional 31 self reported quits that have not been included in reporting across all services. For example Pharmacy L3 have reported 16 self reported quits that have not been recorded. Communications have been shared with all services to publicise this change, and CO monitors supplied where necessary.</li> <li>A new Smoking Cessation Adviser started in post at the beginning of Dec. They will work with pregnant women and birthing people and will be part of the Help Me Quit community team at the Public Health Team. We will keep this model under close review. We are working towards implementing an 'opt out' model.</li> <li>A varied programme of commissioned communications activity has been delivered</li> <li>Plans are in place to promote HMQ on No Smoking Day – March 12th</li> </ul> | Q2 24/25        | <p>Smokers setting quit date:</p> <p>Below target for percentage of adult smokers who make a quit attempt</p> <p>Below target for 4 week quits</p> | <p>Graph showing 4 week quit rates by service, in %'s</p> <table border="1"> <caption>Approximate data from the 4-week quit rates graph</caption> <thead> <tr> <th>Quarter</th> <th>HMQ (%)</th> <th>L3 (%)</th> <th>Hosp (%)</th> <th>QTR total (%)</th> </tr> </thead> <tbody> <tr> <td>Q1 22/23</td> <td>78</td> <td>30</td> <td>78</td> <td>65</td> </tr> <tr> <td>Q2 22/23</td> <td>75</td> <td>88</td> <td>78</td> <td>75</td> </tr> <tr> <td>Q3 22/23</td> <td>72</td> <td>35</td> <td>85</td> <td>65</td> </tr> <tr> <td>Q4 22/23</td> <td>78</td> <td>35</td> <td>85</td> <td>65</td> </tr> <tr> <td>Q1 23/24</td> <td>70</td> <td>25</td> <td>45</td> <td>60</td> </tr> <tr> <td>Q2 23/24</td> <td>75</td> <td>25</td> <td>85</td> <td>68</td> </tr> <tr> <td>Q3 23/24</td> <td>78</td> <td>40</td> <td>75</td> <td>70</td> </tr> <tr> <td>Q4 23/24</td> <td>78</td> <td>55</td> <td>45</td> <td>70</td> </tr> <tr> <td>Q1 24/25</td> <td>40</td> <td>10</td> <td>60</td> <td>35</td> </tr> <tr> <td>Q2 24/25</td> <td>40</td> <td>18</td> <td>48</td> <td>38</td> </tr> <tr> <td>Q3 24/25</td> <td>40</td> <td>40</td> <td>40</td> <td>40</td> </tr> <tr> <td>Q4 24/25</td> <td>40</td> <td>40</td> <td>40</td> <td>40</td> </tr> </tbody> </table> | Quarter | HMQ (%) | L3 (%) | Hosp (%) | QTR total (%) | Q1 22/23 | 78 | 30 | 78 | 65 | Q2 22/23 | 75 | 88 | 78 | 75 | Q3 22/23 | 72 | 35 | 85 | 65 | Q4 22/23 | 78 | 35 | 85 | 65 | Q1 23/24 | 70 | 25 | 45 | 60 | Q2 23/24 | 75 | 25 | 85 | 68 | Q3 23/24 | 78 | 40 | 75 | 70 | Q4 23/24 | 78 | 55 | 45 | 70 | Q1 24/25 | 40 | 10 | 60 | 35 | Q2 24/25 | 40 | 18 | 48 | 38 | Q3 24/25 | 40 | 40 | 40 | 40 | Q4 24/25 | 40 | 40 | 40 | 40 |
| Quarter            | HMQ (%)  | L3 (%)          | Hosp (%)   | QTR total (%)  |         |         |        |          |               |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |
| Q1 22/23           | 78   | 30              | 78   | 65   |         |         |        |          |               |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |
| Q2 22/23           | 75   | 88              | 78   | 75   |         |         |        |          |               |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |
| Q3 22/23           | 72   | 35              | 85   | 65   |         |         |        |          |               |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |
| Q4 22/23           | 78   | 35              | 85   | 65   |         |         |        |          |               |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |
| Q1 23/24           | 70   | 25              | 45   | 60   |         |         |        |          |               |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |
| Q2 23/24           | 75   | 25              | 85   | 68   |         |         |        |          |               |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |
| Q3 23/24           | 78   | 40              | 75   | 70   |         |         |        |          |               |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |
| Q4 23/24           | 78   | 55              | 45   | 70   |         |         |        |          |               |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |
| Q1 24/25           | 40   | 10              | 60   | 35   |         |         |        |          |               |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |
| Q2 24/25           | 40   | 18              | 48   | 38   |         |         |        |          |               |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |
| Q3 24/25           | 40   | 40              | 40   | 40   |         |         |        |          |               |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |
| Q4 24/25           | 40   | 40              | 40   | 40   |         |         |        |          |               |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |          |    |    |    |    |

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For areas of underperformance please see cover paper for details on actions being taken

## Smoking and substance misuse

### NHS Wales Performance Framework measures

| No. | Performance Measure  | Reported Period | Performance Standard  | In Month Performance  | Trend |      |    |    |
|-----|--|-----------------|---|-----------------------|-------|------|----|----|
|     |  |                 |   |                       | Q1    | Q2   | Q3 | Q4 |
| 1.  | Percentage of adult smokers who make a quit attempt via smoking cessation services   | 2024/25         | 0.8% (per quarter)<br>National target is 1.25% per quarter, 5% per year | 0.5%<br>Below target  | 0.5%  | 0.5% |    |    |
| 2.  | Percentage of adult smokers who make a quit attempt via smoking cessation services who are CO-validated as quit at 4 weeks. <b>CO validated quits are being recorded from 1.4.24 as per guidance from Welsh Gov.</b> | 2024/25         | 40%   | 37%<br>Below target   | 33%   | 37%  |    |    |
| 3.  | Percentage of people who have been referred to health board services who have completed treatment for substance misuse (drugs and alcohol)   | 2024/25         | 4 quarter improvement   | 32.8%<br>Below Target | 32.8% |      |    |    |

### Chair’s objectives

| No. | Performance Measure  | Reported Period | Performance Standard | In Month Performance                          | Trend |     |     |    |
|-----|--|-----------------|----------------------|---|-------|-----|-----|----|
|     |  |                 |                      |   | Q1    | Q2  | Q3  | Q4 |
| n/a | % of pregnant people undergoing CO testing at their initial booking appointment                          | 2024/25         | 100%                 | 94%<br>Below target<br>Average for 23/24: 90% | 92%   | 94% | 94% |    |
| n/a | % of pregnant smokers who are referred to smoking cessation support following initial booking assessment | 2024/25         | 100%                 | 15%<br>Below target<br>Average for 23/24: 46% | 16%   | 15% | 16% |    |



## Immunisation and vaccination

*NHS Wales Performance Framework measures and Chair’s objectives*

| No. | Performance Measure   | Reported Period                | Performance Standard | In Month Performance  | Trend    |          |            |          |
|-----|---|--------------------------------|----------------------|-----------------------|----------|----------|------------|----------|
|     |   |                                |                      |                       | Jan-Mar  | Apr-Jun  | Jul-Sept   | Oct-Dec  |
| 4.  | Percentage of children who are up to date with the scheduled vaccinations by age 5 ('4 in 1' preschool booster, the Hib/MenC booster and the second MMR dose)   | Apr-Jun 24                     | 95%                  | 85.2%<br>Below target | 84.1%    | 85.8%    | 85.2%      |          |
| 5.  | Percentage of children receiving the Human Papillomavirus (HPV) vaccination by the age of 15<br><i>Applicable during: 01.04.2023 - 30.06.2023 and 01.01.2024 - 31.03.2024 (still awaiting data for the 2024 HPV campaign) (still awaiting end of campaign data for the 2024 HPV campaign)</i> | 1 January 2024 to 30 June 2024 | 90%                  | 62.1%<br>Below target |          | 62.1%    |            |          |
| 6.  | Percentage uptake of the influenza vaccination amongst adults aged 65 years and over<br><br><i>Applicable during: 01.09.2024 - 31.03.2025 (autumn booster campaign underway)</i>  | 1 Sep 24 to 31 Mar 25          | 75%                  | 70.1%<br>Below target | 26/11/24 | 31/12/24 | 04/02/2025 | 27/02/25 |
|     |   |                                |                      |                       | 61.2%    | 66.9%    | 69.7%      | 70.1%    |
| 7.  | Percentage uptake of the COVID-19 vaccination for those eligible<br><br><i>Applicable during: Spring Booster 01.04.2024 - 30.06.2024 Autumn Booster 01.09.2024 - 31.03.2025 (autumn booster campaign underway)</i>  | 1 Sep 24 to 31 Mar 25          | 75%                  | 48.0%<br>Below target | 28/11/24 | 2/1/25   | 06/02/25   | 20/02/25 |
|     |   |                                |                      |                       | 30.89%   | 43.0%    | 47.9%      | 48.0%    |

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## Weight Management Services

*Chair’s objectives – to note measures updated for 24/25*

| No. | Performance Measure  | Reported Period | Performance Standard              | In Month Performance | Trend |      |  |  |
|-----|--|-----------------|-----------------------------------|----------------------|-------|------|--|--|
|     |  |                 |                                   |                      | Q1    | Q2   |  |  |
| n/a | Increase L2 service capacity (against current service standard – Q1 24/25) by 10% by the end of Q4 24/25 | Jul 2024        | 10% increase on Q1 24/25 (=1,584) | n/a                  | 1440  | 1680 |  |  |
| n/a | Increase L3 service capacity (against current service standard – Q1 24/25) by 10% by the end of Q4 24/25 | Jul 2024        | 10% increase on Q1 24/25 (=176)   | n/a                  | 160   | 160  |  |  |

## Diabetes

*NHS Wales Performance Framework measure*

| No. | Performance Measure  | Reported Period                     | Performance Standard | In Month Performance | Trend |
|-----|--|-------------------------------------|----------------------|----------------------|-------|
| 12. | Percentage of patients (aged 12 years and over) with diabetes who received all eight NICE recommended care processes | See Quadruple Aim 2, measure no. 12 |                      |                      |       |

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## Screening

### *NHS Wales Performance Framework measures*

| No.    | Performance Measure  | Reported Period | Performance Standard | In Month Performance           | Trend   |        |        |        |        |        |        |        |        |
|--------|--|-----------------|----------------------|--------------------------------|---|--------|--------|--------|--------|--------|--------|--------|--------|
| 8.     | Percentage of patients offered an index colonoscopy procedure within 4 weeks of booking their Specialist Screening Practitioner assessment appointment | Dec-24          | 90%                  | <b>7.4%</b><br>Below standard  | <table border="1"> <tr> <th>Sep-24</th> <th>Oct-24</th> <th>Nov-24</th> <th>Dec-24</th> </tr> <tr> <td>19.00%</td> <td>23.70%</td> <td>12.30%</td> <td>7.40%</td> </tr> </table>  | Sep-24 | Oct-24 | Nov-24 | Dec-24 | 19.00% | 23.70% | 12.30% | 7.40%  |
| Sep-24 | Oct-24   | Nov-24          | Dec-24               |                                |   |        |        |        |        |        |        |        |        |
| 19.00% | 23.70%   | 12.30%          | 7.40%                |                                |   |        |        |        |        |        |        |        |        |
| 9.     | Percentage of well babies entering the new-born hearing screening programme who complete screening within 4 weeks                                      | Dec-24          | 90%                  | <b>79.8%</b><br>Above standard | <table border="1"> <tr> <th>Sep-24</th> <th>Oct-24</th> <th>Nov-24</th> <th>Dec-24</th> </tr> <tr> <td>99.20%</td> <td>98.40%</td> <td>97.60%</td> <td>79.80%</td> </tr> </table> | Sep-24 | Oct-24 | Nov-24 | Dec-24 | 99.20% | 98.40% | 97.60% | 79.80% |
| Sep-24 | Oct-24   | Nov-24          | Dec-24               |                                |   |        |        |        |        |        |        |        |        |
| 99.20% | 98.40%   | 97.60%          | 79.80%               |                                |   |        |        |        |        |        |        |        |        |
| 10.    | Percentage of eligible new-born babies who have a conclusive bloodspot screening result by day 17 of life  | Jan-25          | 95%                  | <b>96.2%</b><br>Above standard | <table border="1"> <tr> <th>Oct-24</th> <th>Nov-24</th> <th>Dec-24</th> <th>Jan-25</th> </tr> <tr> <td>95.50%</td> <td>96.70%</td> <td>96.90%</td> <td>96.20%</td> </tr> </table> | Oct-24 | Nov-24 | Dec-24 | Jan-25 | 95.50% | 96.70% | 96.90% | 96.20% |
| Oct-24 | Nov-24   | Dec-24          | Jan-25               |                                |   |        |        |        |        |        |        |        |        |
| 95.50% | 96.70%   | 96.90%          | 96.20%               |                                |   |        |        |        |        |        |        |        |        |

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| Priority   | Performance Summary   | Reporting Period                          | Performance against standard   | Data  |
|--|---|---|--|---|
| <p><b>Primary, Community and Out of Hospital Care</b></p>      | <p><b>Urgent Primary Care Centre Utilisation – Maintain 90% utilisation</b><br/>In February utilisation was 88%, this is below our commitment – work ongoing to right size the capacity across all clusters is expected to bring utilisation back above 90%</p> <p><b>Safe@home referrals – Increase to 6 accepted referrals per day in Q1 to 30 per day in Q4</b><br/>Q1 - 200 referrals were accepted by S@H – Capacity to accept 6 referrals per day from July 2024. Next update end of Q4</p> <p><b>Community visits – 95% of face-to-face visits within 8 hours</b><br/>Q2 to date 92% compliance with 8-hour standard</p>   | <p>Feb-25</p> <p>Q1</p> <p>Jan-25</p>     | <p>88% utilisation<br/><b>Below standard</b></p> <p>200 accepted referrals Q1<br/><b>Below standard</b></p> <p>92%<br/><b>Above standard</b></p>   | <p>UPCC Utilisation</p>   |
| <p><b>Emergency Department and Same Day Emergency Care</b></p> | <p><b>Ambulance handover delays – eliminate 2-hour delays. Reduce lost minutes per arrival to &lt;20. National Commitment to reduce 1-hour delays by 30% by December</b><br/>In February we reported 10 2-hour ambulance delays, above our ambition of 0<br/>In February we reported 385 1-hour ambulance delays, above our trajectory to reduce by 30% by Q3.<br/>In February lost minutes per arrival decreased to 27</p> <p><b>ED waits - No patients waiting &gt;24 hours in ED, 93% of patients waiting &lt;12 hours in ED in Q1 (94% Q2, 95% Q3, 95% Q4)</b><br/>In February we reported a decrease in patients waiting 12-hours in EU compared to January. This equates to 92.2% of attendances waiting less than 12-hours and below our ambition for Q3</p> <p><b>SDEC units – Increase attendances compared to the same period 23/24</b><br/>In January we reported an increase in activity compared to December, but below our January 2024 activity. A drop in medical SDEC has been noted and the team have identified a potential underreporting of attendances which is being investigated – attendances are forecast to increase</p> | <p>Feb-25</p> <p>Feb-25</p> <p>Jan-25</p> | <p>10<br/>2-hour delays<br/><b>Above standard</b></p> <p>385<br/>1-hour delays<br/><b>Above standard</b></p> <p>27 minutes<br/>lost/arrival<br/><b>Above standard</b></p> <p>92.2% patients &lt;12h<br/><b>Below standard</b></p> <p>1786<br/>SDEC attends<br/><b>Below standard</b></p> | <p>Ambulance handover &gt;1 hour</p> <p>EU more than 12 hours</p> <p>Number of patients seen in SDECs</p> |
| <p><b>Reducing time in hospital and Continuity of Care</b></p> | <p><b>Length of stay - &lt;20% patients in acute beds to have a LOS &gt;21 days, &lt;40% patients in acute beds to have a LOS &gt;7 days</b><br/>This data is a monthly snapshot taken at on the final Friday of each month. At the end of February 59.6% of patients in acute beds had a LOS of &gt;7 days, 34% &gt;21 days – a decrease from January’s snapshot but above our ambition</p> <p><b>Pathway of Care Delays – Reduction in number of POCD compared to same period in 23/24</b><br/>In February 2025 the number of POCDs was 163 – this is below the number of delays reported in January 2025</p>   | <p>Feb-25</p> <p>Feb-25</p>               | <p>59.6%<br/>&gt;7d<br/><b>Above standard</b></p> <p>34.0%<br/>&gt;21d<br/><b>Above standard</b></p> <p>163<br/><b>Below standard</b></p>  | <p>Delayed Pathways of Care</p>   |

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| Priority  | Performance Summary   | Reporting Period | Performance against standard  | Data  |
|---|---|------------------|---|---|
| <p><b>High Impact Pathways - Stroke</b></p>       | <p><b>CT scan – 70% of patients scanned within 1 hour of arrival at EU</b><br/>In January 51.9% of patients were received their CT scan within 1 hour of arrival at EU, below our ambition.</p> <p><b>Thrombolysis – 20% thrombolysis rate</b><br/>In January 4.9% of stroke patients were thrombolysed, below our ambition. We are clinically reviewing internally and working with colleagues from NHS Executive</p> <p><b>Admission – 80 % of patients admitted directly to the stroke unit within 4 hours</b><br/>In January 32.9% of patients were admitted directly to the Stroke Unit within 4 hours. Door-to-ward pathways continue to be impacted by operational pressures within the Emergency Unit</p> <p>Our door-to-ward and CT Stoke performance measures are below our ambitions for performance on the stroke pathway. We have seen considerable improvements compared to last year – a business case for development of the service has been approved and will allow more sustainable improvements to be embedded</p> <p>Overall Stroke performance is assessed through the Sentinel Stroke National Audit Programme (SSNAP) – which uses metrics across the whole patient pathway. In the most recent assessment period UHW received a grade B.</p> <p>The SSNAP dataset has been updated and will be presented here when the data has been validated and released for October and November</p> | <p>Jan-25</p>    | <p>51.9%<br/>CT<br/>Below standard</p> <p>4.9%<br/>Thrombolysis<br/>Below standard</p> <p>32.9%<br/>Door-to-ward<br/>Below standard</p> | <p>The data section for the stroke pathways includes three line charts. Each chart plots monthly performance (blue line) against a standard (orange horizontal line) from March 2024 to March 2025. The first chart, 'CT Scan within 1 hour', shows a standard at 70% and performance fluctuating between approximately 45% and 60%. The second chart, 'Stroke patient thrombolysis rate', shows a standard at 20% and performance fluctuating between approximately 10% and 30%. The third chart, 'Direct admission to stroke unit within 4 hours', shows a standard at 80% and performance fluctuating between approximately 40% and 60%.</p> |
| <p><b>High Impact pathways – Hip fracture</b></p> | <p><b>Hip Fracture Door to Ward time – 60% of patients admitted to the ward within 4 hours Q1, 65% Q2, 70% Q3, 75% Q4</b><br/>Door to Ward time is the first KPI used by the National Hip Fracture Database to monitor national performance across the patient pathway. In January our annualised compliance showed 39% of patients were admitted to the ward within 4 hours. This is below our ambition but well above the national average of 8.5%. Our recent breach analysis has shown a high number of 'clinical exceptions' as part of our recorded door to ward and time to theatre breaches which can impact our performance as these times are still recorded in our compliance data.</p>  | <p>Jan-25</p>    | <p>39.0%<br/>(Annualised)<br/>Below standard</p>  | <p>The data section for the hip fracture pathway includes one line chart titled 'Admitted within 4 hours'. It plots monthly performance (blue line) against a standard (orange horizontal line) from March 2024 to March 2025. The standard is set at 60%, and the performance fluctuates between approximately 40% and 50%.</p>  |

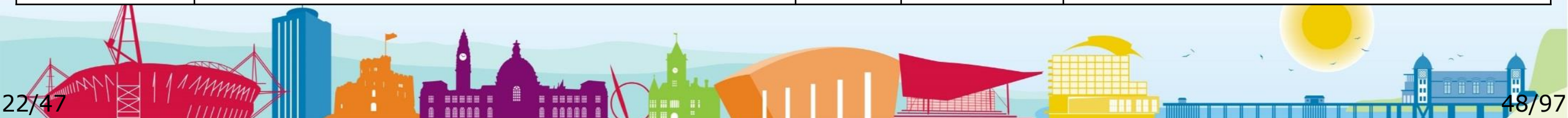
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| Priority                   | Performance Summary   | Reporting Period | Performance against standard  | Data   |
|----------------------------|---|------------------|---|--|
| Primary and Community Care | <p><b>GMS access – 100% of practices achieving core access standards</b><br/>In January 100% of practices met the standard – the official data is provided annual but our monthly tracking data will be updated here for information</p> <p><b>GDS access – 25% of contract value by end Q1, 50% Q2, 75% Q3, 100% Q4</b><br/>At the end of January 84.5% of the contract value had been delivered.</p> <p><b>Pharmacy access – 95% of practices providing Clinical Community Pharmacy Service (CCPS) in Q1, 10% increase PIP sites each Quarter</b><br/>In January 100% of practices were providing CCPS services</p> <p><b>Optometry – 95% of practices providing WGOS1+2</b><br/>All practices are currently providing WGOS 1&amp;2</p> | Jan-25           | 100%<br>At standard   | <p>GDS contract value fulfillment</p>                      |
|                            |   | Jan-25           | 84.5%<br>At standard<br>(Apr-24 - Jan-25)<br><br>100%<br>Above standard |  |
| Cancer                     | <p><b>Single Cancer Pathway – 70% of patients to receive their first definitive treatment within 62 days by Q3, as per nationally submitted trajectory</b><br/>In January 65.6% of patients received their first definitive treatment within 62 days. This was below our trajectory and ambition of 70% by December and we will aim to remain on trajectory to meet 70% by March 2025.</p>  | Jan-25           | 65.6%<br>At standard, but below SCP standard of 75%                     | <p>% cancer patients starting treatment within 62 days</p> |

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| Priority   | Performance Summary  | Reporting Period | Performance against standard   | Data |
|--|--|------------------|--|------|
| <p><b>Outpatient and Treatment waiting times</b></p> | <p><b>Outpatient waiting times – Reduction in the number of patients waiting 52 weeks for a first outpatient appointment</b><br/>In January there were 16,439 patients waiting 52 weeks for their first outpatient appointment. This is above the Welsh Government ambition. Improvement actions for planned care are outlined in the cover paper</p> <p><b>Treatment waiting times – Reduction in the number of patients waiting 104 weeks for treatment</b><br/>In January there were 3,581 patients waiting 104 weeks for treatment. This is above the Welsh Government ambition.</p> <p>We are currently reviewing our trajectories for reducing the number of long waiting patients aligned to our ongoing demand and capacity work and additional funding released by Welsh Government to further reduce the number of patients waiting over 104 weeks</p> | <p>Jan-25</p>    | <p>16,439 patients<br/><b>Above standard</b></p> <p>3,581 patients<br/><b>Above standard</b></p>                           |      |
| <p><b>Diagnostics and Therapies</b></p>              | <p><b>Diagnostics – Reduction in the number of patients waiting over 8 weeks for a specified diagnostic</b><br/>In January 16,088 patients were waiting over 8 weeks for a specified diagnostic, A decrease from December but above our trajectory, A diagnostic update was brought to the most recent Board development session and the key specialties and actions are outlined in the cover paper</p> <p><b>Therapies – No patients waiting over 14 weeks for Therapy – Q3</b><br/>In January 273 patients were waiting over 14 weeks for therapies, a increase from December and above our commitment for Q3. Breaches are concentrated in OT, Dietetics and Physiotherapy and team are working to bring the specific services back into balance. Physiotherapy has seen a significant reduction in waits over the past two months</p>                       | <p>Jan-25</p>    | <p>16,088 patients<br/>Diagnostics<br/><b>Above standard</b></p> <p>273 patients<br/>Therapies<br/>Above standard (Q3)</p> |      |

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| Priority                          | Performance Summary  | Reporting Period | Performance against standard  | Data |
|-----------------------------------|--|------------------|---|------|
| <p><b>Waiting times</b></p>       | <p><b>Cardiothoracic Surgery – Reduce wait for outpatients to &lt;16 weeks Q2, reduce wait to treatment to &lt;52 weeks Q2</b><br/>                     In January there were 63 patients waiting over 16 weeks for a new outpatient appointment and 23 patients waiting over 52 weeks for surgery</p> <p><b>Neurosurgery – Reduce wait for treatment to &lt;40 weeks Q3, reduce wait for outpatients to &lt;18 weeks Q4</b><br/>                     In January there were 12 patients waiting over 18 weeks for a new outpatient appointment and 10 patients waiting over 40 weeks for surgery</p> | <p>Jan-25</p>    | <p>63 Outpatients<br/><b>Above standard</b></p> <p>24 patients Treatment<br/><b>Above standard (Q3)</b></p> <p>10 patients Treatment<br/><b>Above standard (Q4)</b></p> |      |
| <p><b>Intensive Care Unit</b></p> | <p><b>Delayed Transfers of Care – Reduce the % DTOC bed occupancy against the same period in 23/24</b><br/>                     October saw a decrease in ITU DTOCs compared to September and our performance remained above our ambition to reduce from 23/24 levels due to increased operational pressures through the month. Data for Q4 is currently unavailable, the service are working to provide this dataset</p>  | <p>Oct-24</p>    | <p>12.0%<br/><b>Above standard</b></p>  |      |

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| Priority                                     | Performance Summary  | Reporting Period | Performance against standard   | Data   |
|--|--|------------------|--|--|
| <p><b>Paediatric waiting times</b></p>       | <p><b>New Outpatient waits – 0 patients waiting over 52 weeks for outpatients in Q1</b><br/>                     In January there were 0 patients waiting over 52 weeks for a new outpatient appointment</p> <p><b>Therapy waits – 0 patients waiting over 14 weeks for Therapies in Q3</b><br/>                     In January there were 205 paediatric patients waiting over 14 weeks for Therapies (85 in Dietetics and 120 in Occupational Therapy)</p>   | <p>Jan-25</p>    | <p>0<br/>Meeting standard</p> <p>205<br/>Above standard</p>  | <p>Paediatric patients waiting &gt;14 weeks for therapies</p>  |
| <p><b>Emotional Health and Wellbeing</b></p> | <p><b>Percentage of Local Primary Mental Health Support Service (LPMHSS) assessments undertaken within (up to and including) 28 days from the date of receipt of referral for under 18s – 80% compliance with the Standard of &lt;28 days in Q1</b><br/>                     In January 93% of assessments were completed within 28 days</p> <p><b>Percentage of therapeutic interventions started within (up to and including) 28 days following an assessment by Local Primary Mental Health Support Service (LPMHSS) for under 18s – 80% compliance with standard in Q3</b><br/>                     In January 92% of interventions were started within 28 days, this is above the standard for Q3 and in line with the forecasts for the early part of this year</p> <p><b>Percentage of patients with a valid Care and Treatment plan – 80% compliance with standard in Q3</b><br/>                     In January 92% of patients had a valid Care and Treatment Plan, above our ambition</p> | <p>Jan-25</p>    | <p>93% Part 1a<br/>Above standard</p> <p>92% Part 1b<br/>Above standard</p> <p>92% Part 2<br/>Above standard</p> | <p>LPMHSS assessments started 28 days &lt; 18 years</p> <p>Therapeutic interventions started 28 days &lt; 18 years</p> <p>Valid Treatment Plan &lt; 18 Years</p> |
| <p><b>Neurodevelopment</b></p>               | <p><b>Neurodevelopment assessment - Reduce the longest wait to 140 weeks in Q4</b><br/>                     In January the longest wait for a neurodevelopment assessment was 195 weeks, this is above our ambition for delivery in Q4 but is improved from 23/24</p>  | <p>Jan-25</p>    | <p>195<br/>Above standard (Q4)</p>   | <p>Neurodevelopment assessment weeks wait</p>  |

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| Priority                                | Performance Summary  | Reporting Period | Performance against standard          | Data  |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
|---|--|------------------|---------------------------------------|---|-------|-----------------|-----------------|--------|----|----|--------|----|----|--------|----|----|--------|----|----|--------|----|----|--------|----|----|--------|----|----|--------|----|----|--------|----|----|--------|----|----|--------|----|----|--------|----|----|--------|----|----|
| <b>Mental Health Measures – Part 1a</b> | <p><b>Percentage of Local Primary Mental Health Support Service (LPMHSS) assessments undertaken within (up to and including) 28 days from the date of receipt of referral for adults aged 18 years and over – 80% compliance with the Standard of &lt;28 days in Q2</b></p> <p>In January 41% of patients received their assessment within 28 days – this is in line with our forecast position but below the standard we are looking to achieve by the end of Q2. Referrals to the service remain high.</p> | Jan-25           | 41%<br>Part 1a<br>Below standard (Q2) | <p>LPMHSS assessments started 28 days - Adults</p> <table border="1"> <caption>Approximate data for LPMHSS assessments started 28 days - Adults</caption> <thead> <tr> <th>Month</th> <th>Performance (%)</th> <th>Standard Q2 (%)</th> </tr> </thead> <tbody> <tr><td>Mar-24</td><td>55</td><td>80</td></tr> <tr><td>Apr-24</td><td>18</td><td>80</td></tr> <tr><td>May-24</td><td>20</td><td>80</td></tr> <tr><td>Jun-24</td><td>15</td><td>80</td></tr> <tr><td>Jul-24</td><td>12</td><td>80</td></tr> <tr><td>Aug-24</td><td>18</td><td>80</td></tr> <tr><td>Sep-24</td><td>22</td><td>80</td></tr> <tr><td>Oct-24</td><td>18</td><td>80</td></tr> <tr><td>Nov-24</td><td>25</td><td>80</td></tr> <tr><td>Dec-24</td><td>28</td><td>80</td></tr> <tr><td>Jan-25</td><td>41</td><td>80</td></tr> <tr><td>Feb-25</td><td>35</td><td>80</td></tr> <tr><td>Mar-25</td><td>30</td><td>80</td></tr> </tbody> </table> | Month | Performance (%) | Standard Q2 (%) | Mar-24 | 55 | 80 | Apr-24 | 18 | 80 | May-24 | 20 | 80 | Jun-24 | 15 | 80 | Jul-24 | 12 | 80 | Aug-24 | 18 | 80 | Sep-24 | 22 | 80 | Oct-24 | 18 | 80 | Nov-24 | 25 | 80 | Dec-24 | 28 | 80 | Jan-25 | 41 | 80 | Feb-25 | 35 | 80 | Mar-25 | 30 | 80 |
| Month                                   | Performance (%)  | Standard Q2 (%)  |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Mar-24                                  | 55   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Apr-24                                  | 18   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| May-24                                  | 20   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Jun-24                                  | 15   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Jul-24                                  | 12   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Aug-24                                  | 18   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Sep-24                                  | 22   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Oct-24                                  | 18   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Nov-24                                  | 25   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Dec-24                                  | 28   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Jan-25                                  | 41   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Feb-25                                  | 35   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Mar-25                                  | 30   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| <b>Mental Health Measures – Part 1b</b> | <p><b>Percentage of therapeutic interventions started within (up to and including) 28 days following an assessment by Local Primary Mental Health Support Service (LPMHSS) for adults – 80% compliance with standard in Q1</b></p> <p>In January 99% of therapeutic interventions were started within 28 days of assessment, above the standard and in line with our trajectory submitted to Welsh Government.</p>   | Jan-25           | 99%<br>Part 1b<br>Above standard      | <p>LPMHSS interventions started 28 days - Adults</p> <table border="1"> <caption>Approximate data for LPMHSS interventions started 28 days - Adults</caption> <thead> <tr> <th>Month</th> <th>Trajectory (%)</th> <th>Performance (%)</th> </tr> </thead> <tbody> <tr><td>Mar-24</td><td>98</td><td>99</td></tr> <tr><td>Apr-24</td><td>98</td><td>99</td></tr> <tr><td>May-24</td><td>98</td><td>99</td></tr> <tr><td>Jun-24</td><td>98</td><td>99</td></tr> <tr><td>Jul-24</td><td>98</td><td>99</td></tr> <tr><td>Aug-24</td><td>98</td><td>99</td></tr> <tr><td>Sep-24</td><td>98</td><td>99</td></tr> <tr><td>Oct-24</td><td>98</td><td>99</td></tr> <tr><td>Nov-24</td><td>98</td><td>99</td></tr> <tr><td>Dec-24</td><td>98</td><td>99</td></tr> <tr><td>Jan-25</td><td>98</td><td>99</td></tr> </tbody> </table>  | Month | Trajectory (%)  | Performance (%) | Mar-24 | 98 | 99 | Apr-24 | 98 | 99 | May-24 | 98 | 99 | Jun-24 | 98 | 99 | Jul-24 | 98 | 99 | Aug-24 | 98 | 99 | Sep-24 | 98 | 99 | Oct-24 | 98 | 99 | Nov-24 | 98 | 99 | Dec-24 | 98 | 99 | Jan-25 | 98 | 99 |        |    |    |        |    |    |
| Month                                   | Trajectory (%)   | Performance (%)  |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Mar-24                                  | 98   | 99               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Apr-24                                  | 98   | 99               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| May-24                                  | 98   | 99               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Jun-24                                  | 98   | 99               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Jul-24                                  | 98   | 99               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Aug-24                                  | 98   | 99               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Sep-24                                  | 98   | 99               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Oct-24                                  | 98   | 99               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Nov-24                                  | 98   | 99               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Dec-24                                  | 98   | 99               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Jan-25                                  | 98   | 99               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| <b>Mental Health Measures – Part 2</b>  | <p><b>Percentage of patients with a valid Care and Treatment plan – 80% compliance with standard in Q3</b></p> <p>In January 58% of patients had a valid Care and Treatment plan, a small decrease from April following focused work from the teams. Performance remains below the standard for Q3 – the RAMP protocol and Part 1 schemes have been approved though the Mental Health Liaison Committee to support longer term improvements in compliance</p>  | Jan-25           | 58%<br>Part 2<br>Below standard (Q3)  | <p>Valid Treatment Plan - Adults</p> <table border="1"> <caption>Approximate data for Valid Treatment Plan - Adults</caption> <thead> <tr> <th>Month</th> <th>Performance (%)</th> <th>Standard Q3 (%)</th> </tr> </thead> <tbody> <tr><td>Mar-24</td><td>55</td><td>80</td></tr> <tr><td>Apr-24</td><td>58</td><td>80</td></tr> <tr><td>May-24</td><td>55</td><td>80</td></tr> <tr><td>Jun-24</td><td>58</td><td>80</td></tr> <tr><td>Jul-24</td><td>60</td><td>80</td></tr> <tr><td>Aug-24</td><td>60</td><td>80</td></tr> <tr><td>Sep-24</td><td>60</td><td>80</td></tr> <tr><td>Oct-24</td><td>60</td><td>80</td></tr> <tr><td>Nov-24</td><td>60</td><td>80</td></tr> <tr><td>Dec-24</td><td>58</td><td>80</td></tr> <tr><td>Jan-25</td><td>58</td><td>80</td></tr> <tr><td>Feb-25</td><td>55</td><td>80</td></tr> <tr><td>Mar-25</td><td>52</td><td>80</td></tr> </tbody> </table>                             | Month | Performance (%) | Standard Q3 (%) | Mar-24 | 55 | 80 | Apr-24 | 58 | 80 | May-24 | 55 | 80 | Jun-24 | 58 | 80 | Jul-24 | 60 | 80 | Aug-24 | 60 | 80 | Sep-24 | 60 | 80 | Oct-24 | 60 | 80 | Nov-24 | 60 | 80 | Dec-24 | 58 | 80 | Jan-25 | 58 | 80 | Feb-25 | 55 | 80 | Mar-25 | 52 | 80 |
| Month                                   | Performance (%)  | Standard Q3 (%)  |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Mar-24                                  | 55   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Apr-24                                  | 58   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| May-24                                  | 55   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Jun-24                                  | 58   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Jul-24                                  | 60   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Aug-24                                  | 60   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Sep-24                                  | 60   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Oct-24                                  | 60   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Nov-24                                  | 60   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Dec-24                                  | 58   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Jan-25                                  | 58   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Feb-25                                  | 55   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |
| Mar-25                                  | 52   | 80               |                                       |   |       |                 |                 |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |        |    |    |

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| No.      | Performance Measure  | Reported Period | Performance Standard   | In Month Performance              | Trend   |        |        |        |        |          |          |          |          |
|----------|--|-----------------|--|-----------------------------------|---|--------|--------|--------|--------|----------|----------|----------|----------|
| 11.      | Percentage of GP practices that have achieved all standards set out in the National Access Standards for In-hours  | 2023/24         | 100%   | <b>100%</b><br>Above standard     | <table border="1"> <tr> <td>19/20</td> <td>20/21</td> <td>21/22</td> <td>22/23</td> </tr> <tr> <td>93.4%</td> <td>95.0%</td> <td>96.5%</td> <td>98.2%</td> </tr> </table>                 | 19/20  | 20/21  | 21/22  | 22/23  | 93.4%    | 95.0%    | 96.5%    | 98.2%    |
| 19/20    | 20/21  | 21/22           | 22/23  |                                   |   |        |        |        |        |          |          |          |          |
| 93.4%    | 95.0%  | 96.5%           | 98.2%  |                                   |   |        |        |        |        |          |          |          |          |
| 12.      | Percentage of patients (aged 12 years and over) with diabetes who received all eight NICE recommended care processes   | Dec-24          | Improvement compared to the same month in the previous year  | <b>45.4%</b><br>Above standard    | <table border="1"> <tr> <td>Sep-24</td> <td>Oct-24</td> <td>Nov-24</td> <td>Dec-24</td> </tr> <tr> <td>46.90%</td> <td>46.30%</td> <td>46.20%</td> <td>45.40%</td> </tr> </table>         | Sep-24 | Oct-24 | Nov-24 | Dec-24 | 46.90%   | 46.30%   | 46.20%   | 45.40%   |
| Sep-24   | Oct-24   | Nov-24          | Dec-24   |                                   |   |        |        |        |        |          |          |          |          |
| 46.90%   | 46.30%   | 46.20%          | 45.40%   |                                   |   |        |        |        |        |          |          |          |          |
| 13.      | Percentage of the primary care dental services (GDS) contract value delivered (for courses of treatment for new, new urgent and historic patients)   | Apr-24/Jan-25   | A month on month increase towards a minimum of 30% contract value delivered by 30 September 2024 and 100% by 31 March 2025 | <b>84.5%</b><br>Above standard    | <table border="1"> <tr> <td>Oct-24</td> <td>Nov-24</td> <td>Dec-24</td> <td>Jan-25</td> </tr> <tr> <td>61.00%</td> <td>69.70%</td> <td>77.60%</td> <td>84.50%</td> </tr> </table>         | Oct-24 | Nov-24 | Dec-24 | Jan-25 | 61.00%   | 69.70%   | 77.60%   | 84.50%   |
| Oct-24   | Nov-24   | Dec-24          | Jan-25   |                                   |   |        |        |        |        |          |          |          |          |
| 61.00%   | 69.70%   | 77.60%          | 84.50%   |                                   |   |        |        |        |        |          |          |          |          |
| 14.      | Number of consultations delivered through the Pharmacist Independent Prescribing Service (PIPS)  | Dec-24          | Increase compared to the same month in the previous year   | <b>2,390</b><br>Above standard    | <table border="1"> <tr> <td>Sep-24</td> <td>Oct-24</td> <td>Nov-24</td> <td>Dec-24</td> </tr> <tr> <td>1777</td> <td>2070</td> <td>2085</td> <td>2390</td> </tr> </table>                 | Sep-24 | Oct-24 | Nov-24 | Dec-24 | 1777     | 2070     | 2085     | 2390     |
| Sep-24   | Oct-24   | Nov-24          | Dec-24   |                                   |   |        |        |        |        |          |          |          |          |
| 1777     | 2070   | 2085            | 2390   |                                   |   |        |        |        |        |          |          |          |          |
| 15.      | Percentage of Local Primary Mental Health Support Service (LMPHSS) assessments undertaken within (up to and including) 28 days from the date of receipt of referral for people aged under 18 years     | Jan-25          | 80%  | <b>93%</b><br>Above standard      | <table border="1"> <tr> <td>Oct-24</td> <td>Nov-24</td> <td>Dec-24</td> <td>Jan-25</td> </tr> <tr> <td>96%</td> <td>99%</td> <td>99%</td> <td>93%</td> </tr> </table>                     | Oct-24 | Nov-24 | Dec-24 | Jan-25 | 96%      | 99%      | 99%      | 93%      |
| Oct-24   | Nov-24   | Dec-24          | Jan-25   |                                   |   |        |        |        |        |          |          |          |          |
| 96%      | 99%  | 99%             | 93%  |                                   |   |        |        |        |        |          |          |          |          |
| 16.      | Percentage of therapeutic interventions started within (up to and including) 28 days following an assessment by Local Primary Mental Health Support Service (LPMHSS) for people aged under 18 years    | Jan-25          | 80%  | <b>92%</b><br>Above standard      | <table border="1"> <tr> <td>Oct-24</td> <td>Nov-24</td> <td>Dec-24</td> <td>Jan-25</td> </tr> <tr> <td>88%</td> <td>84%</td> <td>80%</td> <td>92%</td> </tr> </table>                     | Oct-24 | Nov-24 | Dec-24 | Jan-25 | 88%      | 84%      | 80%      | 92%      |
| Oct-24   | Nov-24   | Dec-24          | Jan-25   |                                   |   |        |        |        |        |          |          |          |          |
| 88%      | 84%  | 80%             | 92%  |                                   |   |        |        |        |        |          |          |          |          |
| 17.      | Percentage of Local Primary Mental Health Support Service (LPMHSS) assessments undertaken within (up to and including) 28 days from the date of receipt of referral for adults aged 18 years and over  | Jan-25          | 80%  | <b>40.6%</b><br>Below standard    | <table border="1"> <tr> <td>Oct-24</td> <td>Nov-24</td> <td>Dec-24</td> <td>Jan-25</td> </tr> <tr> <td>19.1%</td> <td>23.0%</td> <td>26.0%</td> <td>40.6%</td> </tr> </table>             | Oct-24 | Nov-24 | Dec-24 | Jan-25 | 19.1%    | 23.0%    | 26.0%    | 40.6%    |
| Oct-24   | Nov-24   | Dec-24          | Jan-25   |                                   |   |        |        |        |        |          |          |          |          |
| 19.1%    | 23.0%  | 26.0%           | 40.6%  |                                   |   |        |        |        |        |          |          |          |          |
| 18.      | Percentage of therapeutic interventions started within (up to and including) 28 days following an assessment by Local Primary Mental Health Support Service (LPMHSS) for adults aged 18 years and over | Jan-25          | 80%  | <b>99.4%</b><br>Above standard    | <table border="1"> <tr> <td>Oct-24</td> <td>Nov-24</td> <td>Dec-24</td> <td>Jan-25</td> </tr> <tr> <td>100.0%</td> <td>100.0%</td> <td>100.0%</td> <td>99.4%</td> </tr> </table>          | Oct-24 | Nov-24 | Dec-24 | Jan-25 | 100.0%   | 100.0%   | 100.0%   | 99.4%    |
| Oct-24   | Nov-24   | Dec-24          | Jan-25   |                                   |   |        |        |        |        |          |          |          |          |
| 100.0%   | 100.0%   | 100.0%          | 99.4%  |                                   |   |        |        |        |        |          |          |          |          |
| 19.      | Percentage of emergency responses to red calls arriving within (up to and including) 8 minutes   | Jan-25          | 65%  | <b>49%</b><br>Below standard      | <table border="1"> <tr> <td>Oct-24</td> <td>Nov-24</td> <td>Dec-24</td> <td>Jan-25</td> </tr> <tr> <td>50%</td> <td>43%</td> <td>49%</td> <td>49%</td> </tr> </table>                     | Oct-24 | Nov-24 | Dec-24 | Jan-25 | 50%      | 43%      | 49%      | 49%      |
| Oct-24   | Nov-24   | Dec-24          | Jan-25   |                                   |   |        |        |        |        |          |          |          |          |
| 50%      | 43%  | 49%             | 49%  |                                   |   |        |        |        |        |          |          |          |          |
| 20.      | Median emergency response time to amber calls  | Jan-25          | 12 month reduction trend   | <b>02:04:11</b><br>Above standard | <table border="1"> <tr> <td>Oct-24</td> <td>Nov-24</td> <td>Dec-24</td> <td>Jan-25</td> </tr> <tr> <td>01:54:59</td> <td>01:57:37</td> <td>02:39:41</td> <td>02:04:11</td> </tr> </table> | Oct-24 | Nov-24 | Dec-24 | Jan-25 | 01:54:59 | 01:57:37 | 02:39:41 | 02:04:11 |
| Oct-24   | Nov-24   | Dec-24          | Jan-25   |                                   |   |        |        |        |        |          |          |          |          |
| 01:54:59 | 01:57:37   | 02:39:41        | 02:04:11   |                                   |   |        |        |        |        |          |          |          |          |

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| No.    | Performance Measure  | Reported Period | Performance Standard  | In Month Performance            | Trend   |        |        |        |        |        |        |        |        |
|--------|--|-----------------|---|---------------------------------|---|--------|--------|--------|--------|--------|--------|--------|--------|
| 21.    | Median time from arrival at an emergency department to triage by a clinician   | Dec-24          | 15 minutes or less  | <b>10</b><br>Below standard     | <table border="1"> <tr> <th>Sep-24</th> <th>Oct-24</th> <th>Nov-24</th> <th>Dec-24</th> </tr> <tr> <td>15</td> <td>9</td> <td>12</td> <td>10</td> </tr> </table>                  | Sep-24 | Oct-24 | Nov-24 | Dec-24 | 15     | 9      | 12     | 10     |
| Sep-24 | Oct-24   | Nov-24          | Dec-24  |                                 |   |        |        |        |        |        |        |        |        |
| 15     | 9  | 12              | 10  |                                 |   |        |        |        |        |        |        |        |        |
| 22.    | Median time from arrival at an emergency department to assessment by a clinical decision maker   | Dec-24          | 60 minutes or less  | <b>78</b><br>Above standard     | <table border="1"> <tr> <th>Sep-24</th> <th>Oct-24</th> <th>Nov-24</th> <th>Dec-24</th> </tr> <tr> <td>75</td> <td>71</td> <td>83</td> <td>78</td> </tr> </table>                 | Sep-24 | Oct-24 | Nov-24 | Dec-24 | 75     | 71     | 83     | 78     |
| Sep-24 | Oct-24   | Nov-24          | Dec-24  |                                 |   |        |        |        |        |        |        |        |        |
| 75     | 71   | 83              | 78  |                                 |   |        |        |        |        |        |        |        |        |
| 23.    | Percentage 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 | Jan-25          | Improvement compared to the same month in the previous year, towards the national target of 95% | <b>63.2%</b><br>Below standard  | <table border="1"> <tr> <th>Oct-24</th> <th>Nov-24</th> <th>Dec-24</th> <th>Jan-25</th> </tr> <tr> <td>61.4%</td> <td>58.9%</td> <td>60.1%</td> <td>63.2%</td> </tr> </table>     | Oct-24 | Nov-24 | Dec-24 | Jan-25 | 61.4%  | 58.9%  | 60.1%  | 63.2%  |
| Oct-24 | Nov-24   | Dec-24          | Jan-25  |                                 |   |        |        |        |        |        |        |        |        |
| 61.4%  | 58.9%  | 60.1%           | 63.2%   |                                 |   |        |        |        |        |        |        |        |        |
| 24.    | Number of patients who spend 12 hours or more in all hospital major and minor emergency care facilities from arrival until admission, transfer, or discharge       | Jan-25          | Reduction compared to the same month in the previous year, towards the national target of zero  | <b>1,054</b><br>Above standard  | <table border="1"> <tr> <th>Oct-24</th> <th>Nov-24</th> <th>Dec-24</th> <th>Jan-25</th> </tr> <tr> <td>1108</td> <td>1022</td> <td>953</td> <td>1054</td> </tr> </table>          | Oct-24 | Nov-24 | Dec-24 | Jan-25 | 1108   | 1022   | 953    | 1054   |
| Oct-24 | Nov-24   | Dec-24          | Jan-25  |                                 |   |        |        |        |        |        |        |        |        |
| 1108   | 1022   | 953             | 1054  |                                 |   |        |        |        |        |        |        |        |        |
| 25.    | Percentage of patients starting their first definitive cancer treatment within 62 days from point of suspicion (regardless of the referral route)                  | Jan-25          | 12 month improvement trend towards a national target of 80% by 31 March 2026                    | <b>65.6%</b><br>Below standard  | <table border="1"> <tr> <th>Oct-24</th> <th>Nov-24</th> <th>Dec-24</th> <th>Jan-25</th> </tr> <tr> <td>72.5%</td> <td>66.8%</td> <td>66.7%</td> <td>65.6%</td> </tr> </table>     | Oct-24 | Nov-24 | Dec-24 | Jan-25 | 72.5%  | 66.8%  | 66.7%  | 65.6%  |
| Oct-24 | Nov-24   | Dec-24          | Jan-25  |                                 |   |        |        |        |        |        |        |        |        |
| 72.5%  | 66.8%  | 66.7%           | 65.6%   |                                 |   |        |        |        |        |        |        |        |        |
| 26.    | Number of patients waiting more than 8 weeks for a specified diagnostic  | Jan-25          | 0   | <b>16,088</b><br>Above standard | <table border="1"> <tr> <th>Oct-24</th> <th>Nov-24</th> <th>Dec-24</th> <th>Jan-25</th> </tr> <tr> <td>16744</td> <td>16556</td> <td>16770</td> <td>16088</td> </tr> </table>     | Oct-24 | Nov-24 | Dec-24 | Jan-25 | 16744  | 16556  | 16770  | 16088  |
| Oct-24 | Nov-24   | Dec-24          | Jan-25  |                                 |   |        |        |        |        |        |        |        |        |
| 16744  | 16556  | 16770           | 16088   |                                 |   |        |        |        |        |        |        |        |        |
| 27.    | Percentage of children (aged under 18 years) waiting 14 weeks or less for a specified Allied Health Professional therapy   | Jan-25          | 100%  | <b>82%</b><br>Below standard    | <table border="1"> <tr> <th>Oct-24</th> <th>Nov-24</th> <th>Dec-24</th> <th>Jan-25</th> </tr> <tr> <td>85.90%</td> <td>87.97%</td> <td>86.24%</td> <td>82.00%</td> </tr> </table> | Oct-24 | Nov-24 | Dec-24 | Jan-25 | 85.90% | 87.97% | 86.24% | 82.00% |
| Oct-24 | Nov-24   | Dec-24          | Jan-25  |                                 |   |        |        |        |        |        |        |        |        |
| 85.90% | 87.97%   | 86.24%          | 82.00%  |                                 |   |        |        |        |        |        |        |        |        |
| 28.    | Number of patients (all ages) waiting more than 14 weeks for a specified therapy   | Jan-25          | 0   | <b>273</b><br>Above standard    | <table border="1"> <tr> <th>Oct-24</th> <th>Nov-24</th> <th>Dec-24</th> <th>Jan-25</th> </tr> <tr> <td>452</td> <td>292</td> <td>269</td> <td>273</td> </tr> </table>             | Oct-24 | Nov-24 | Dec-24 | Jan-25 | 452    | 292    | 269    | 273    |
| Oct-24 | Nov-24   | Dec-24          | Jan-25  |                                 |   |        |        |        |        |        |        |        |        |
| 452    | 292  | 269             | 273   |                                 |   |        |        |        |        |        |        |        |        |
| 29.    | Number of patients (all ages) waiting more than 14 weeks for audiology   | Jan-25          | 0   | <b>195</b><br>Above standard    | <table border="1"> <tr> <th>Oct-24</th> <th>Nov-24</th> <th>Dec-24</th> <th>Jan-25</th> </tr> <tr> <td>48</td> <td>52</td> <td>117</td> <td>195</td> </tr> </table>               | Oct-24 | Nov-24 | Dec-24 | Jan-25 | 48     | 52     | 117    | 195    |
| Oct-24 | Nov-24   | Dec-24          | Jan-25  |                                 |   |        |        |        |        |        |        |        |        |
| 48     | 52   | 117             | 195   |                                 |   |        |        |        |        |        |        |        |        |

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| No.    | Performance Measure  | Reported Period | Performance Standard   | In Month Performance            | Trend   |        |        |        |        |       |       |       |       |
|--------|--|-----------------|--|---------------------------------|---|--------|--------|--------|--------|-------|-------|-------|-------|
| 30.    | Number of patients waiting more than 52 weeks for a new outpatient appointment   | Jan-25          | 0  | <b>16,439</b><br>Above standard | <table border="1"> <tr> <th>Oct-24</th> <th>Nov-24</th> <th>Dec-24</th> <th>Jan-25</th> </tr> <tr> <td>16757</td> <td>16598</td> <td>16227</td> <td>16439</td> </tr> </table> | Oct-24 | Nov-24 | Dec-24 | Jan-25 | 16757 | 16598 | 16227 | 16439 |
| Oct-24 | Nov-24   | Dec-24          | Jan-25   |                                 |   |        |        |        |        |       |       |       |       |
| 16757  | 16598  | 16227           | 16439  |                                 |   |        |        |        |        |       |       |       |       |
| 31.    | Number of patients waiting for a follow-up outpatient appointment who are delayed by over 100%                         | Jan-25          | Reduction compared to the same month in the previous year                    | <b>20,017</b><br>Below standard | <table border="1"> <tr> <th>Oct-24</th> <th>Nov-24</th> <th>Dec-24</th> <th>Jan-25</th> </tr> <tr> <td>19526</td> <td>18940</td> <td>20232</td> <td>20017</td> </tr> </table> | Oct-24 | Nov-24 | Dec-24 | Jan-25 | 19526 | 18940 | 20232 | 20017 |
| Oct-24 | Nov-24   | Dec-24          | Jan-25   |                                 |   |        |        |        |        |       |       |       |       |
| 19526  | 18940  | 20232           | 20017  |                                 |   |        |        |        |        |       |       |       |       |
| 32.    | Number of patients waiting more than 104 weeks for referral to treatment   | Jan-25          | 0  | <b>3,581</b><br>Above standard  | <table border="1"> <tr> <th>Oct-24</th> <th>Nov-24</th> <th>Dec-24</th> <th>Jan-25</th> </tr> <tr> <td>3776</td> <td>3866</td> <td>3754</td> <td>3581</td> </tr> </table>     | Oct-24 | Nov-24 | Dec-24 | Jan-25 | 3776  | 3866  | 3754  | 3581  |
| Oct-24 | Nov-24   | Dec-24          | Jan-25   |                                 |   |        |        |        |        |       |       |       |       |
| 3776   | 3866   | 3754            | 3581   |                                 |   |        |        |        |        |       |       |       |       |
| 33.    | Number of patients waiting more than 52 weeks for referral to treatment  | Jan-25          | Month on month reduction towards the national target of zero by 30 June 2025 | <b>35,008</b><br>Above standard | <table border="1"> <tr> <th>Oct-24</th> <th>Nov-24</th> <th>Dec-24</th> <th>Jan-25</th> </tr> <tr> <td>37078</td> <td>36377</td> <td>35712</td> <td>35008</td> </tr> </table> | Oct-24 | Nov-24 | Dec-24 | Jan-25 | 37078 | 36377 | 35712 | 35008 |
| Oct-24 | Nov-24   | Dec-24          | Jan-25   |                                 |   |        |        |        |        |       |       |       |       |
| 37078  | 36377  | 35712           | 35008  |                                 |   |        |        |        |        |       |       |       |       |
| 34.    | Percentage of children and young people waiting less than 26 weeks to start an ADHD or ASD neurodevelopment assessment | Jan-25          | 80%  | <b>9%</b><br>Below standard     | <table border="1"> <tr> <th>Oct-24</th> <th>Nov-24</th> <th>Dec-24</th> <th>Jan-25</th> </tr> <tr> <td>15%</td> <td>13%</td> <td>10%</td> <td>9%</td> </tr> </table>          | Oct-24 | Nov-24 | Dec-24 | Jan-25 | 15%   | 13%   | 10%   | 9%    |
| Oct-24 | Nov-24   | Dec-24          | Jan-25   |                                 |   |        |        |        |        |       |       |       |       |
| 15%    | 13%  | 10%             | 9%   |                                 |   |        |        |        |        |       |       |       |       |
| 35.    | Percentage of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health   | Jan-25          | 80%  | <b>71%</b><br>Below standard    | <table border="1"> <tr> <th>Oct-24</th> <th>Nov-24</th> <th>Dec-24</th> <th>Jan-25</th> </tr> <tr> <td>71%</td> <td>72%</td> <td>69%</td> <td>71%</td> </tr> </table>         | Oct-24 | Nov-24 | Dec-24 | Jan-25 | 71%   | 72%   | 69%   | 71%   |
| Oct-24 | Nov-24   | Dec-24          | Jan-25   |                                 |   |        |        |        |        |       |       |       |       |
| 71%    | 72%  | 69%             | 71%  |                                 |   |        |        |        |        |       |       |       |       |

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Productivity and Efficiency measures

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| Measure      |  | Internal standard   | Nov-23 | Dec-23 | Jan-24 | Feb-24 | Mar-24 | Apr-24 | May-24 | Jun-24 | Jul-24 | Aug-24 | Sep-24 | Oct-24 | Nov-24 | Dec-24 | Jan-25 | Trend |
|--------------|--|---|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|-------|
| Outpatients  | % DNAs - New appointments                    | 5%  | 10.4%  | 10.1%  | 10.1%  | 9.9%   | 10.9%  | 9.5%   | 9.1%   | 9.7%   | 9.7%   | 10.0%  | 9.9%   | 9.9%   | 10.1%  | 10.4%  | 9.7%   |       |
|              | % DNAs - Follow-up appointments              | 5%  | 11.6%  | 12.7%  | 12.3%  | 11.7%  | 13.0%  | 11.6%  | 11.8%  | 11.9%  | 11.4%  | 11.8%  | 11.9%  | 11.6%  | 11.7%  | 12.0%  | 12.1%  |       |
| Endoscopy    | % room utilisation                           | 90%   | 86%    | 76%    | 76%    | 78%    | 91%    | 78%    | 79%    | 89%    | 81%    | 74%    | 74%    | 68%    | 78%    | 75%    | 83%    |       |
|              | % utilisation (activity points available)    | 95%   |        |        |        |        |        |        |        | 84%    | 81%    | 80%    | 83%    | 85%    | 87%    | 85%    | 84%    |       |
| Theatres     | Average turnaround time (minutes)            | 10  | 16.5   | 17.1   | 18.3   | 16.4   | 16.7   | 17.1   | 18.6   | 16.3   | 17.0   | 16.0   | 18.9   | 19.9   | 15.9   | 162    | 15.9   |       |
|              | % of theatre session utilisation             | 95%   | 88%    | 80%    | 75%    | 77%    | 73%    | 84%    | 84%    | 81%    | 80%    | 75%    | 79%    | 83%    | 84%    | 75%    | 88%    |       |
|              | % in session utilisation                     | 85%   | 77%    | 77%    | 77%    | 80%    | 78%    | 79%    | 78%    | 78%    | 77%    | 77%    | 80%    | 80%    | 82%    | 78%    | 79%    |       |
|              | <24 hour elective cancellations              |   | 285    | 269    | 239    | 226    | 212    | 243    | 289    | 247    | 309    | 249    | 190    | 363    | 198    | 217    | 315    |       |
|              | % theatre activity as Daycase                | TBC - will be added following confirmation of GIRFT dataset |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |       |
|              | High Volume Low Complexity' volume           | TBC - will be added following confirmation of GIRFT dataset |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |       |
| Waiting list | Total RTT waiting list volume                | N/A   | 141684 | 141828 | 142758 | 145810 | 147620 | 149805 | 150199 | 151888 | 153560 | 153673 | 155063 | 156194 | 154994 | 154605 | 153519 |       |
| Inpatient    | Delayed pathways of Care - Mental Health     | 217   | 41     | 36     | 37     | 38     | 41     | 38     | 39     | 34     | 29     | 36     | 26     | 26     | 32     | 29     | 30     |       |
|              | Delayed Pathways of Care - non-Mental Health |   | 150    | 114    | 173    | 200    | 170    | 145    | 140    | 160    | 142    | 138    | 144    | 135    | 130    | 115    | 146    |       |
|              | 7 day LOS on Acute Wards (snapshot)          | <40%  | 57.6%  | 56.5%  | 56.8%  | 59.2%  | 57.7%  | 56.8%  | 55.2%  | 55.2%  | 55.5%  | 58.0%  | 58.5%  | 59.4%  | 57.3%  | 62.3%  | 60.5%  |       |
|              | 21 day LOS on Acute Wards (snapshot)         | <20%  | 28.7%  | 28.0%  | 29.8%  | 32.5%  | 32.9%  | 32.0%  | 29.3%  | 29.4%  | 30.9%  | 32.6%  | 31.8%  | 31.4%  | 30.9%  | 35.5%  | 37.3%  |       |

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C&V Priorities and Annual Plan Commitments

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| Priority                                | Performance Summary   | Reported Period | Data |
|---|---|-----------------|------|
| <b>Turnover</b>                         | <p>The overall trend is downwards since Mar-24; the rates have fallen from 11.41% at Mar-24 to 8.98% in Feb-25 UHB wide. This is a net 2.43% decrease, which represents 357 WTE fewer leavers.</p> <p>The top 5 reasons recorded for leaving are; 'Voluntary Resignation - Other/Not Known', 'Retirement Age', 'Voluntary Resignation – Relocation', 'Voluntary Resignation – Promotion' and 'Voluntary Resignation - Work Life Balance'.</p>   | February 2025   |      |
| <b>Sickness Absence</b>                 | <p>The monthly sickness rate for Feb-25 was 5.74%. The 12-month cumulative rate has settled over the past year, and is 6.32% at Feb-25 (an increase of 0.07% by comparison with the rate at Feb-24).</p>  | February 2025   |      |
| <b>Statutory and Mandatory Training</b> | <p>The overall compliance rates rose marginally for Feb-25 to 81.88%, 3.12% below the overall target. The compliance for Capital, Estates &amp; Facilities, All-Wales Genomics Services, Clinical Diagnostics &amp; Therapeutics and Corporate Executives are above the 85% target; and Children &amp; Women's and PCIC are above 80% compliance.</p> <p>The compliance with Fire training has fallen to 70.30% for Feb-25. The compliance for all of the Clinical Boards is below the 85% compliance target.</p> | February 2025   |      |
| <b>Values Based Appraisal</b>           | <p>VBA compliance has fallen for Feb-25 to 74.54%, the lowest rate in 12 months. Capital, Estates &amp; Facilities is the only Board presently above the 85% target rate%.</p>  | February 2025   |      |
| <b>Employee Relations</b>               | <p>As can be seen in the graph the number of employee relations cases the People Services team are supporting has risen in the past 12 months and the number of disciplinary cases has now exceeded the UHB Target. The People Services Team continue to analyse trends of employee relations cases to develop bespoke training packages or additional toolkits/support services where appropriate.</p>   | February 2025   |      |

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| Priority                                       | Performance Summary   | Reported Period         | Data   |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
|--|---|-------------------------|--|----------------|-------------------------------------|-------------------------|------------------------------|----------------|--------|--------|-------|--------|--------|--------|-------|--------|--------|--------|--------|--------|--------|--------|-------|--------|--------|--------|-------|--------|--------|-------|--------|--------|--------|--------|------|--------|--------|-------|------|--------|--------|--------|-----|--------|--------|--------|-----|--------|--------|-------|-----|--------|-----------|-------|-----|-----|-----|--------|-----|-----|-----|-----|-----|--------|-----|-----|-----|-----|-----|--------|-----|-----|-----|-----|-----|--------|--------|--------|--------|--------|-----|
| <b>Job Plans</b>                               | The vast majority of clinicians have now engaged with job planning and have a job plan in the system. 49.33% have an agreed job plan that has been signed off within the past 12 months, and a further 15.37% have an agreed job plan that was last reviewed and signed off before Mar-24.  | February 2025           | <p><b>Job Plan Compliance Rate</b></p> <table border="1"> <thead> <tr> <th>Month</th> <th>% Target</th> <th>% Job Plan Agreed</th> <th>% Compliance</th> </tr> </thead> <tbody> <tr><td>Mar-24</td><td>85%</td><td>50%</td><td>35%</td></tr> <tr><td>Apr-24</td><td>85%</td><td>55%</td><td>30%</td></tr> <tr><td>May-24</td><td>85%</td><td>60%</td><td>35%</td></tr> <tr><td>Jun-24</td><td>85%</td><td>55%</td><td>35%</td></tr> <tr><td>Jul-24</td><td>85%</td><td>55%</td><td>35%</td></tr> <tr><td>Aug-24</td><td>85%</td><td>55%</td><td>45%</td></tr> <tr><td>Sep-24</td><td>85%</td><td>55%</td><td>50%</td></tr> <tr><td>Oct-24</td><td>85%</td><td>55%</td><td>45%</td></tr> <tr><td>Nov-24</td><td>85%</td><td>55%</td><td>45%</td></tr> <tr><td>Dec-24</td><td>85%</td><td>55%</td><td>45%</td></tr> <tr><td>Jan-25</td><td>85%</td><td>55%</td><td>45%</td></tr> <tr><td>Feb-25</td><td>85%</td><td>55%</td><td>45%</td></tr> </tbody> </table>  | Month          | % Target                            | % Job Plan Agreed       | % Compliance                 | Mar-24         | 85%    | 50%    | 35%   | Apr-24 | 85%    | 55%    | 30%   | May-24 | 85%    | 60%    | 35%    | Jun-24 | 85%    | 55%    | 35%   | Jul-24 | 85%    | 55%    | 35%   | Aug-24 | 85%    | 55%   | 45%    | Sep-24 | 85%    | 55%    | 50%  | Oct-24 | 85%    | 55%   | 45%  | Nov-24 | 85%    | 55%    | 45% | Dec-24 | 85%    | 55%    | 45% | Jan-25 | 85%    | 55%   | 45% | Feb-25 | 85%       | 55%   | 45% |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Month  | % Target  | % Job Plan Agreed       | % Compliance   |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Mar-24   | 85%   | 50%                     | 35%  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Apr-24   | 85%   | 55%                     | 30%  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| May-24   | 85%   | 60%                     | 35%  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Jun-24   | 85%   | 55%                     | 35%  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Jul-24   | 85%   | 55%                     | 35%  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Aug-24   | 85%   | 55%                     | 45%  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Sep-24   | 85%   | 55%                     | 50%  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Oct-24   | 85%   | 55%                     | 45%  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Nov-24   | 85%   | 55%                     | 45%  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Dec-24   | 85%   | 55%                     | 45%  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Jan-25   | 85%   | 55%                     | 45%  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Feb-25   | 85%   | 55%                     | 45%  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| <b>Medical Appraisals</b>                      | The rate of compliance with Medical Appraisal fell slightly to 84.11% for Feb-25, slightly below the 85% target.  | February 2025           | <p><b>Medical Appraisal Compliance Rate</b></p> <table border="1"> <thead> <tr> <th>Month</th> <th>% Target</th> <th>% Compliance</th> </tr> </thead> <tbody> <tr><td>Mar-24</td><td>85%</td><td>80%</td></tr> <tr><td>Apr-24</td><td>85%</td><td>78%</td></tr> <tr><td>May-24</td><td>85%</td><td>80%</td></tr> <tr><td>Jun-24</td><td>85%</td><td>82%</td></tr> <tr><td>Jul-24</td><td>85%</td><td>80%</td></tr> <tr><td>Aug-24</td><td>85%</td><td>78%</td></tr> <tr><td>Sep-24</td><td>85%</td><td>75%</td></tr> <tr><td>Oct-24</td><td>85%</td><td>75%</td></tr> <tr><td>Nov-24</td><td>85%</td><td>75%</td></tr> <tr><td>Dec-24</td><td>85%</td><td>75%</td></tr> <tr><td>Jan-25</td><td>85%</td><td>80%</td></tr> <tr><td>Feb-25</td><td>85%</td><td>84.11%</td></tr> </tbody> </table>   | Month          | % Target                            | % Compliance            | Mar-24                       | 85%            | 80%    | Apr-24 | 85%   | 78%    | May-24 | 85%    | 80%   | Jun-24 | 85%    | 82%    | Jul-24 | 85%    | 80%    | Aug-24 | 85%   | 78%    | Sep-24 | 85%    | 75%   | Oct-24 | 85%    | 75%   | Nov-24 | 85%    | 75%    | Dec-24 | 85%  | 75%    | Jan-25 | 85%   | 80%  | Feb-25 | 85%    | 84.11% |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Month  | % Target  | % Compliance            |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Mar-24   | 85%   | 80%                     |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Apr-24   | 85%   | 78%                     |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| May-24   | 85%   | 80%                     |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Jun-24   | 85%   | 82%                     |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Jul-24   | 85%   | 80%                     |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Aug-24   | 85%   | 78%                     |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Sep-24   | 85%   | 75%                     |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Oct-24   | 85%   | 75%                     |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Nov-24   | 85%   | 75%                     |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Dec-24   | 85%   | 75%                     |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Jan-25   | 85%   | 80%                     |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Feb-25   | 85%   | 84.11%                  |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| <b>Staff in Post</b>                           | The overall Health Board Staffing Numbers have increased in the last 12 months by 406 WTE, to 15,489.16 WTE at Feb-25. This is the highest number in the past 12 months. As can be seen the increase is in staff employed on permanent contracts; the numbers shown as employed on a fixed-term temporary basis has remained steady during the past 12 months.  | February 2025           | <p><b>WTE Permanent and Fixed-Term Staff in Post Numbers</b></p> <table border="1"> <thead> <tr> <th>Month</th> <th>Employed Staffing WTE</th> <th>Permanent (Left Axis)</th> <th>Fixed-Term Temp (Right Axis)</th> </tr> </thead> <tbody> <tr><td>Mar-24</td><td>14,400</td><td>1,400</td><td>700</td></tr> <tr><td>Apr-24</td><td>14,400</td><td>1,400</td><td>700</td></tr> <tr><td>May-24</td><td>14,400</td><td>1,400</td><td>700</td></tr> <tr><td>Jun-24</td><td>14,400</td><td>1,400</td><td>700</td></tr> <tr><td>Jul-24</td><td>14,400</td><td>1,400</td><td>700</td></tr> <tr><td>Aug-24</td><td>14,400</td><td>1,400</td><td>700</td></tr> <tr><td>Sep-24</td><td>14,400</td><td>1,400</td><td>700</td></tr> <tr><td>Oct-24</td><td>14,400</td><td>1,400</td><td>700</td></tr> <tr><td>Nov-24</td><td>14,400</td><td>1,400</td><td>700</td></tr> <tr><td>Dec-24</td><td>14,400</td><td>1,400</td><td>700</td></tr> <tr><td>Jan-25</td><td>15,000</td><td>1,700</td><td>700</td></tr> <tr><td>Feb-25</td><td>15,489.16</td><td>1,700</td><td>700</td></tr> </tbody> </table>  | Month          | Employed Staffing WTE               | Permanent (Left Axis)   | Fixed-Term Temp (Right Axis) | Mar-24         | 14,400 | 1,400  | 700   | Apr-24 | 14,400 | 1,400  | 700   | May-24 | 14,400 | 1,400  | 700    | Jun-24 | 14,400 | 1,400  | 700   | Jul-24 | 14,400 | 1,400  | 700   | Aug-24 | 14,400 | 1,400 | 700    | Sep-24 | 14,400 | 1,400  | 700  | Oct-24 | 14,400 | 1,400 | 700  | Nov-24 | 14,400 | 1,400  | 700 | Dec-24 | 14,400 | 1,400  | 700 | Jan-25 | 15,000 | 1,700 | 700 | Feb-25 | 15,489.16 | 1,700 | 700 |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Month  | Employed Staffing WTE   | Permanent (Left Axis)   | Fixed-Term Temp (Right Axis)   |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Mar-24   | 14,400  | 1,400                   | 700  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Apr-24   | 14,400  | 1,400                   | 700  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| May-24   | 14,400  | 1,400                   | 700  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Jun-24   | 14,400  | 1,400                   | 700  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Jul-24   | 14,400  | 1,400                   | 700  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Aug-24   | 14,400  | 1,400                   | 700  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Sep-24   | 14,400  | 1,400                   | 700  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Oct-24   | 14,400  | 1,400                   | 700  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Nov-24   | 14,400  | 1,400                   | 700  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Dec-24   | 14,400  | 1,400                   | 700  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Jan-25   | 15,000  | 1,700                   | 700  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Feb-25   | 15,489.16   | 1,700                   | 700  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| <b>Variable Pay (Bank, Agency, Overtime..)</b> | The trend of proportion of the pay bill spend on variable pay (Bank, Agency, overtime etc.) continues to fall. At Mar-24 the percentage was 9.34% of the total spend on pay, but in Feb-25 had fallen to 7.44%. It must however be borne in mind that the total pay bill is increasing.<br><br>There was no notable reduction in the quantity of variable pay in Nov-24, the dip on the chart is as a consequence of the total pay bill including payment of pay award and arrears. | February 2025           | <p><b>Proportion of Total Pay Bill Attributable to Variable Pay</b></p> <table border="1"> <thead> <tr> <th>Month</th> <th>% Variable Pay</th> <th>Linear (% Variable Pay)</th> </tr> </thead> <tbody> <tr><td>Mar-24</td><td>9.34%</td><td>9.34%</td></tr> <tr><td>Apr-24</td><td>7.5%</td><td>8.0%</td></tr> <tr><td>May-24</td><td>8.0%</td><td>8.0%</td></tr> <tr><td>Jun-24</td><td>8.0%</td><td>8.0%</td></tr> <tr><td>Jul-24</td><td>8.0%</td><td>8.0%</td></tr> <tr><td>Aug-24</td><td>8.0%</td><td>8.0%</td></tr> <tr><td>Sep-24</td><td>8.0%</td><td>8.0%</td></tr> <tr><td>Oct-24</td><td>8.0%</td><td>8.0%</td></tr> <tr><td>Nov-24</td><td>6.0%</td><td>7.0%</td></tr> <tr><td>Dec-24</td><td>7.5%</td><td>7.5%</td></tr> <tr><td>Jan-25</td><td>7.5%</td><td>7.5%</td></tr> <tr><td>Feb-25</td><td>7.44%</td><td>7.44%</td></tr> </tbody> </table>   | Month          | % Variable Pay                      | Linear (% Variable Pay) | Mar-24                       | 9.34%          | 9.34%  | Apr-24 | 7.5%  | 8.0%   | May-24 | 8.0%   | 8.0%  | Jun-24 | 8.0%   | 8.0%   | Jul-24 | 8.0%   | 8.0%   | Aug-24 | 8.0%  | 8.0%   | Sep-24 | 8.0%   | 8.0%  | Oct-24 | 8.0%   | 8.0%  | Nov-24 | 6.0%   | 7.0%   | Dec-24 | 7.5% | 7.5%   | Jan-25 | 7.5%  | 7.5% | Feb-25 | 7.44%  | 7.44%  |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Month  | % Variable Pay  | Linear (% Variable Pay) |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Mar-24   | 9.34%   | 9.34%                   |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Apr-24   | 7.5%  | 8.0%                    |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| May-24   | 8.0%  | 8.0%                    |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Jun-24   | 8.0%  | 8.0%                    |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Jul-24   | 8.0%  | 8.0%                    |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Aug-24   | 8.0%  | 8.0%                    |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Sep-24   | 8.0%  | 8.0%                    |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Oct-24   | 8.0%  | 8.0%                    |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Nov-24   | 6.0%  | 7.0%                    |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Dec-24   | 7.5%  | 7.5%                    |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Jan-25   | 7.5%  | 7.5%                    |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Feb-25   | 7.44%   | 7.44%                   |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| <b>Staff Winter Vaccination Programme</b>      | The winter vaccination programme for 2024-25 commenced in Oct-24.<br><br>By the end of Feb-25 32.58% of staff have received the flu vaccine, and 28.31% of staff have received the COVID-19 vaccine.  | February 2025           | <p><b>Staff Vaccination Rate</b></p> <table border="1"> <thead> <tr> <th>Month</th> <th>23-24 Flu</th> <th>23-24 COVID-19</th> <th>24-25 Flu</th> <th>24-25 COVID-19</th> <th>Target</th> </tr> </thead> <tbody> <tr><td>Mar-24</td><td>0%</td><td>0%</td><td>0%</td><td>0%</td><td>80%</td></tr> <tr><td>Apr-24</td><td>0%</td><td>0%</td><td>0%</td><td>0%</td><td>80%</td></tr> <tr><td>May-24</td><td>0%</td><td>0%</td><td>0%</td><td>0%</td><td>80%</td></tr> <tr><td>Jun-24</td><td>0%</td><td>0%</td><td>0%</td><td>0%</td><td>80%</td></tr> <tr><td>Jul-24</td><td>0%</td><td>0%</td><td>0%</td><td>0%</td><td>80%</td></tr> <tr><td>Aug-24</td><td>0%</td><td>0%</td><td>0%</td><td>0%</td><td>80%</td></tr> <tr><td>Sep-24</td><td>0%</td><td>0%</td><td>0%</td><td>0%</td><td>80%</td></tr> <tr><td>Oct-24</td><td>20%</td><td>10%</td><td>20%</td><td>10%</td><td>80%</td></tr> <tr><td>Nov-24</td><td>25%</td><td>15%</td><td>25%</td><td>15%</td><td>80%</td></tr> <tr><td>Dec-24</td><td>30%</td><td>20%</td><td>30%</td><td>20%</td><td>80%</td></tr> <tr><td>Jan-25</td><td>35%</td><td>25%</td><td>35%</td><td>25%</td><td>80%</td></tr> <tr><td>Feb-25</td><td>32.58%</td><td>28.31%</td><td>32.58%</td><td>28.31%</td><td>80%</td></tr> </tbody> </table> | Month          | 23-24 Flu                           | 23-24 COVID-19          | 24-25 Flu                    | 24-25 COVID-19 | Target | Mar-24 | 0%    | 0%     | 0%     | 0%     | 80%   | Apr-24 | 0%     | 0%     | 0%     | 0%     | 80%    | May-24 | 0%    | 0%     | 0%     | 0%     | 80%   | Jun-24 | 0%     | 0%    | 0%     | 0%     | 80%    | Jul-24 | 0%   | 0%     | 0%     | 0%    | 80%  | Aug-24 | 0%     | 0%     | 0%  | 0%     | 80%    | Sep-24 | 0%  | 0%     | 0%     | 0%    | 80% | Oct-24 | 20%       | 10%   | 20% | 10% | 80% | Nov-24 | 25% | 15% | 25% | 15% | 80% | Dec-24 | 30% | 20% | 30% | 20% | 80% | Jan-25 | 35% | 25% | 35% | 25% | 80% | Feb-25 | 32.58% | 28.31% | 32.58% | 28.31% | 80% |
| Month  | 23-24 Flu   | 23-24 COVID-19          | 24-25 Flu  | 24-25 COVID-19 | Target                              |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Mar-24   | 0%  | 0%                      | 0%   | 0%             | 80%                                 |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Apr-24   | 0%  | 0%                      | 0%   | 0%             | 80%                                 |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| May-24   | 0%  | 0%                      | 0%   | 0%             | 80%                                 |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Jun-24   | 0%  | 0%                      | 0%   | 0%             | 80%                                 |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Jul-24   | 0%  | 0%                      | 0%   | 0%             | 80%                                 |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Aug-24   | 0%  | 0%                      | 0%   | 0%             | 80%                                 |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Sep-24   | 0%  | 0%                      | 0%   | 0%             | 80%                                 |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Oct-24   | 20%   | 10%                     | 20%  | 10%            | 80%                                 |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Nov-24   | 25%   | 15%                     | 25%  | 15%            | 80%                                 |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Dec-24   | 30%   | 20%                     | 30%  | 20%            | 80%                                 |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Jan-25   | 35%   | 25%                     | 35%  | 25%            | 80%                                 |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Feb-25   | 32.58%  | 28.31%                  | 32.58%   | 28.31%         | 80%                                 |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| <b>Agency Spend as % of Total Pay Bill</b>     | The proportion of the total pay bill attributed to Agency has risen in the past 2 months. At Mar-24 the percentage was 0.60% of the total spend on pay, but after falling during summer months has risen again to 0.63% at Feb-25. It must however be borne in mind that the total pay bill is increasing.  | February 2025           | <p><b>Agency Spend as % of Total Pay Bill</b></p> <table border="1"> <thead> <tr> <th>Month</th> <th>Agency Spend as % of Total Pay Bill</th> </tr> </thead> <tbody> <tr><td>Mar-24</td><td>0.60%</td></tr> <tr><td>Apr-24</td><td>0.80%</td></tr> <tr><td>May-24</td><td>0.80%</td></tr> <tr><td>Jun-24</td><td>0.60%</td></tr> <tr><td>Jul-24</td><td>0.70%</td></tr> <tr><td>Aug-24</td><td>0.80%</td></tr> <tr><td>Sep-24</td><td>0.50%</td></tr> <tr><td>Oct-24</td><td>0.40%</td></tr> <tr><td>Nov-24</td><td>0.40%</td></tr> <tr><td>Dec-24</td><td>0.50%</td></tr> <tr><td>Jan-25</td><td>0.60%</td></tr> <tr><td>Feb-25</td><td>0.63%</td></tr> </tbody> </table>   | Month          | Agency Spend as % of Total Pay Bill | Mar-24                  | 0.60%                        | Apr-24         | 0.80%  | May-24 | 0.80% | Jun-24 | 0.60%  | Jul-24 | 0.70% | Aug-24 | 0.80%  | Sep-24 | 0.50%  | Oct-24 | 0.40%  | Nov-24 | 0.40% | Dec-24 | 0.50%  | Jan-25 | 0.60% | Feb-25 | 0.63%  |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Month  | Agency Spend as % of Total Pay Bill   |                         |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Mar-24   | 0.60%   |                         |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Apr-24   | 0.80%   |                         |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| May-24   | 0.80%   |                         |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Jun-24   | 0.60%   |                         |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Jul-24   | 0.70%   |                         |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Aug-24   | 0.80%   |                         |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Sep-24   | 0.50%   |                         |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Oct-24   | 0.40%   |                         |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Nov-24   | 0.40%   |                         |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Dec-24   | 0.50%   |                         |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Jan-25   | 0.60%   |                         |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |
| Feb-25   | 0.63%   |                         |  |                |                                     |                         |                              |                |        |        |       |        |        |        |       |        |        |        |        |        |        |        |       |        |        |        |       |        |        |       |        |        |        |        |      |        |        |       |      |        |        |        |     |        |        |        |     |        |        |       |     |        |           |       |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |     |     |     |     |     |        |        |        |        |        |     |

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| Priority  | Performance Summary  | Reported Period | Data |
|---|--|-----------------|------|
| <b>Time to Hire</b>   | The All-Wales target for recruitment Time to Hire (the time interval between vacancy creation and successful candidate ready for start date) is 71 days, and the NHS Wales average is 66.7 days. The figure for Cardiff & Vale uHB for Feb-25 was 87.5 days, but over the past 12 months the trend is broadly downwards.   | February 2025   |      |
| <b>Time to Shortlist</b>  | The All-Wales target for recruitment Time to Shortlist (the time interval between vacancy closure and shortlisting completion) is 3 days, and the NHS Wales average is 5.9 days. The figure for Cardiff & Vale uHB for Feb-25 was 10.7 days.   | February 2025   |      |
| <b>Exit Questionnaire Completion</b>                                      | The People Resourcing Team commenced a new process in Sep-23 whereby staff leavers received a direct email inviting them to complete an exit questionnaire, in the hope of seeing an improvement in the return rate, to a target of 30%.<br><br>At Nov-24 the return rate was 25%.   | November 2024   |      |
| <b>Nursing &amp; Midwifery Band 5 &amp; 6 Vacancy Rates</b>               | The vacancy rate is the difference between the funded establishment WTE and the sum of the staff in post WTE represented as a percentage of the funded establishment WTE. At Feb-25 the rate was 4.38%, by comparison with a nominal 5% target. The swing between Oct-24 and Nov-24 was significantly impacted by validation of ESR position data.                           | February 2025   |      |
| <b>Provision of EDI Data in ESR</b>                                       | This measure shows the percentage of staff who have recorded all of their Marital Status, Nationality, Ethnicity, Disability, Sexual Orientation, Religion and Country of Birth in ESR.<br><br>At Feb-25 34.18% have recorded all of their EDI data. Country of Birth has the poorest compliance rate.   | February 2025   |      |
| <b>Percentage of Staff with Welsh Skills Levels 2 – 5 Recorded in ESR</b> | This measure shows the percentage of staff who have recorded their Welsh Skills in ESR at level 2 (Foundation) through to level 5 (Proficient). 47% of staff have not recorded their Welsh Skills in ESR, and a range of activities are being undertaken to improve this.<br><br>At Feb-25 6.61% of staff have identified their Welsh Skills as between level 2 and level 5. | February 2025   |      |

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| No. | Performance Measure   | Reported Period | Performance Standard  | In Month Performance            | Trend  |        |        |        |
|-----|---|-----------------|---|---------------------------------|--------|--------|--------|--------|
| 36. | Percentage of sickness absence rate of staff  | Feb-25          | 12 month reduction trend (6%)                                   | <b>5.74%</b><br>Below standard  | Nov-24 | Dec-24 | Jan-25 | Feb-25 |
|     |   |                 |   |                                 | 6.63%  | 7.28%  | 6.59%  | 5.74%  |
| 37. | Turnover rate for nurse and midwifery registered staff leaving NHS Wales  | Feb-25          | Rolling 12 month reduction against a baseline of 2019-20 (7-9%) | <b>8.98%</b><br>Above standard  | Nov-24 | Dec-24 | Jan-25 | Feb-25 |
|     |   |                 |   |                                 | 9.50%  | 9.47%  | 9.40%  | 8.98%  |
| 38. | Agency spend as a percentage of the total pay bill  | Feb-25          | 12 month reduction trend  | <b>0.63%</b><br>Below standard  | Nov-24 | Dec-24 | Jan-25 | Feb-25 |
|     |   |                 |   |                                 | 0.38%  | 0.41%  | 0.63%  | 0.63%  |
| 39. | Percentage 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) | Feb-25          | 85%   | <b>75.12%</b><br>Below standard | Nov-24 | Dec-24 | Jan-25 | Feb-25 |
|     |   |                 |   |                                 | 79.40% | 79.30% | 78.28% | 75.12% |

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| Priority                                      | Performance Summary  | Reporting Period    | Performance against standard | Data   |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
|---|--|---------------------|------------------------------|--|--------------|----|--------|------------------------|--------|-----|-------------------|------|--------|---------------------|--------|------|--|------|--------|---------------------|--------|------|------------------------|------|--------|-------------------|--------|------|----------------------------------|------|--------|---|------|------|-------------------------------|------|------|---------------------------------|------|------|
| <p><b>Concerns</b><br/>30 day performance</p> | <p><b>During Jan and Feb 25, the Health Board :</b></p> <ul style="list-style-type: none"> <li>•Received 436 Concerns</li> <li>•Closed 383 concerns</li> <li>•67 % closed within 30 working days (including Early Resolution)</li> <li>• 29 % closed under Early Resolution (within 2 days including day of receipt)</li> <li>•Received 506 Enquiries</li> <li>•Received 58 Compliments</li> <li>•We currently have 270 active concerns</li> </ul> <p><b>Top 3 themes and trends</b></p> <ul style="list-style-type: none"> <li>• Clinical Treatment and Assessment</li> <li>• Concerns around appointments (waiting times/cancellations)</li> <li>• Communication</li> </ul>  | <p>Jan / Feb 25</p> | <p>66 %</p>                  | <p><b>% of concerns closed within 30 working days by month</b></p> <table border="1"> <caption>% of concerns closed within 30 working days by month</caption> <thead> <tr> <th>Month</th> <th>%</th> </tr> </thead> <tbody> <tr><td>Feb-24</td><td>80</td></tr> <tr><td>Mar-24</td><td>80</td></tr> <tr><td>Apr-24</td><td>78</td></tr> <tr><td>May-24</td><td>80</td></tr> <tr><td>Jun-24</td><td>82</td></tr> <tr><td>Jul-24</td><td>82</td></tr> <tr><td>Aug-24</td><td>78</td></tr> <tr><td>Sep-24</td><td>80</td></tr> <tr><td>Oct-24</td><td>75</td></tr> <tr><td>Nov-24</td><td>62</td></tr> <tr><td>Dec-24</td><td>60</td></tr> <tr><td>Jan-25</td><td>60</td></tr> <tr><td>Feb-25</td><td>70</td></tr> </tbody> </table>  | Month        | %  | Feb-24 | 80                     | Mar-24 | 80  | Apr-24            | 78   | May-24 | 80                  | Jun-24 | 82   | Jul-24                                   | 82   | Aug-24 | 78                  | Sep-24 | 80   | Oct-24                 | 75   | Nov-24 | 62                | Dec-24 | 60   | Jan-25                           | 60   | Feb-25 | 70  |      |      |                               |      |      |                                 |      |      |
| Month   | %  |                     |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
| Feb-24  | 80   |                     |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
| Mar-24  | 80   |                     |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
| Apr-24  | 78   |                     |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
| May-24  | 80   |                     |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
| Jun-24  | 82   |                     |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
| Jul-24  | 82   |                     |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
| Aug-24  | 78   |                     |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
| Sep-24  | 80   |                     |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
| Oct-24  | 75   |                     |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
| Nov-24  | 62   |                     |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
| Dec-24  | 60   |                     |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
| Jan-25  | 60   |                     |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
| Feb-25  | 70   |                     |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
| <p><b>Duty of Candour</b></p>                 | <p><b>Key Updates:</b></p> <ul style="list-style-type: none"> <li>•Since April 1st, 2023, 48,597 incidents have been reported across the Health Board.</li> <li>•We continue to support DOC awareness sessions across Primary and Secondary care.</li> <li>•Since April 1st, 2023, we have triggered the DOC on 256 occasions.</li> <li>•We have conducted internal audits of the process and compliance.</li> </ul> <p><b>Themes and Trends for Triggered Duty of Candour:</b></p> <ul style="list-style-type: none"> <li>• Avoidable pressure damage.</li> <li>• Avoidable falls.</li> <li>• Patients lost to follow-up.</li> <li>• Failure to prescribe or administer appropriate medication.</li> <li>• Administration of incorrect medication.</li> <li>• Missed opportunities to diagnose</li> </ul> | <p>Dec/Jan 2025</p> | <p>n/a</p>                   | <p><b>Incident grading changed following review</b></p> <table border="1"> <caption>Incident grading changed following review</caption> <thead> <tr> <th>Service Area</th> <th>No</th> <th>Yes</th> </tr> </thead> <tbody> <tr><td>Wales Genomics Service</td><td>~50</td><td>~50</td></tr> <tr><td>Surgical Services</td><td>~100</td><td>~100</td></tr> <tr><td>Specialist Services</td><td>~150</td><td>~150</td></tr> <tr><td>Primary, Community and Intermediate Care</td><td>~200</td><td>~200</td></tr> <tr><td>Other Organisations</td><td>~250</td><td>~250</td></tr> <tr><td>Mental Health Services</td><td>~300</td><td>~300</td></tr> <tr><td>Medicine Services</td><td>~400</td><td>~400</td></tr> <tr><td>Executive and Corporate Services</td><td>~500</td><td>~500</td></tr> <tr><td>Clinical Diagnostics and Therapeutic Services</td><td>~600</td><td>~600</td></tr> <tr><td>Children and Women's Services</td><td>~700</td><td>~700</td></tr> <tr><td>Capital, Estates and Facilities</td><td>~800</td><td>~800</td></tr> </tbody> </table> | Service Area | No | Yes    | Wales Genomics Service | ~50    | ~50 | Surgical Services | ~100 | ~100   | Specialist Services | ~150   | ~150 | Primary, Community and Intermediate Care | ~200 | ~200   | Other Organisations | ~250   | ~250 | Mental Health Services | ~300 | ~300   | Medicine Services | ~400   | ~400 | Executive and Corporate Services | ~500 | ~500   | Clinical Diagnostics and Therapeutic Services | ~600 | ~600 | Children and Women's Services | ~700 | ~700 | Capital, Estates and Facilities | ~800 | ~800 |
| Service Area                                  | No   | Yes                 |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
| Wales Genomics Service                        | ~50  | ~50                 |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
| Surgical Services                             | ~100   | ~100                |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
| Specialist Services                           | ~150   | ~150                |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
| Primary, Community and Intermediate Care      | ~200   | ~200                |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
| Other Organisations                           | ~250   | ~250                |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
| Mental Health Services                        | ~300   | ~300                |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
| Medicine Services                             | ~400   | ~400                |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
| Executive and Corporate Services              | ~500   | ~500                |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
| Clinical Diagnostics and Therapeutic Services | ~600   | ~600                |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
| Children and Women's Services                 | ~700   | ~700                |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |
| Capital, Estates and Facilities               | ~800   | ~800                |                              |  |              |    |        |                        |        |     |                   |      |        |                     |        |      |  |      |        |                     |        |      |                        |      |        |                   |        |      |                                  |      |        |   |      |      |                               |      |      |                                 |      |      |

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| Priority   | Performance Summary   | Reporting Period    | Performance against standard | Data  |              |            |                |       |                  |       |  |       |                               |      |   |      |                                |      |                 |      |                            |      |   |      |                      |      |              |      |
|--|---|---------------------|------------------------------|---|--------------|------------|----------------|-------|------------------|-------|--|-------|-------------------------------|------|---|------|--------------------------------|------|-----------------|------|----------------------------|------|---|------|----------------------|------|--------------|------|
| <p><b>Patient Feedback – Civica</b></p>  | <p>The system went live on Friday 28th October 2022 and we are currently surveying up to 1000 patients daily via text, 600 chosen randomly from general hospital activity, 200 from EU activity and 200 from Mental Health activity. <b>Over the past 12 months, we have sent over 179,000 texts</b> and are seeing a response of 16%.</p> <p>In February, we sent 14,560 texts and had 2,224 completions (15% response).</p> <p>Of those respondents who were discharged during January/February and answered the rating question: Using the scale of 0-10 where 0 is bad and 10 is excellent, 86% were satisfied with our service.</p> <p>Currently, our response rate overall is 16% and whilst it's our understanding that this is higher than many organisations, we will be focussing on improving this over the next year.</p>   | <p>Jan/Feb 2025</p> |                              | <p>Breakdown of rating question (Random, EU and MH)</p> <table border="1"> <caption>Breakdown of rating question (Random, EU and MH)</caption> <thead> <tr> <th>Rating</th> <th>Percentage</th> </tr> </thead> <tbody> <tr><td>10 - Excellent</td><td>51.26</td></tr> <tr><td>9</td><td>16.71</td></tr> <tr><td>8</td><td>12.76</td></tr> <tr><td>7</td><td>5.77</td></tr> <tr><td>6</td><td>1.89</td></tr> <tr><td>5 - Average</td><td>3.72</td></tr> <tr><td>4</td><td>1.61</td></tr> <tr><td>3</td><td>1.98</td></tr> <tr><td>2</td><td>1.51</td></tr> <tr><td>1</td><td>0.86</td></tr> <tr><td>0 - Very bad</td><td>1.93</td></tr> </tbody> </table>  | Rating       | Percentage | 10 - Excellent | 51.26 | 9                | 16.71 | 8  | 12.76 | 7                             | 5.77 | 6                                       | 1.89 | 5 - Average                    | 3.72 | 4               | 1.61 | 3                          | 1.98 | 2                                       | 1.51 | 1                    | 0.86 | 0 - Very bad | 1.93 |
| Rating   | Percentage  |                     |                              |   |              |            |                |       |                  |       |  |       |                               |      |   |      |                                |      |                 |      |                            |      |   |      |                      |      |              |      |
| 10 - Excellent   | 51.26   |                     |                              |   |              |            |                |       |                  |       |  |       |                               |      |   |      |                                |      |                 |      |                            |      |   |      |                      |      |              |      |
| 9  | 16.71   |                     |                              |   |              |            |                |       |                  |       |  |       |                               |      |   |      |                                |      |                 |      |                            |      |   |      |                      |      |              |      |
| 8  | 12.76   |                     |                              |   |              |            |                |       |                  |       |  |       |                               |      |   |      |                                |      |                 |      |                            |      |   |      |                      |      |              |      |
| 7  | 5.77  |                     |                              |   |              |            |                |       |                  |       |  |       |                               |      |   |      |                                |      |                 |      |                            |      |   |      |                      |      |              |      |
| 6  | 1.89  |                     |                              |   |              |            |                |       |                  |       |  |       |                               |      |   |      |                                |      |                 |      |                            |      |   |      |                      |      |              |      |
| 5 - Average  | 3.72  |                     |                              |   |              |            |                |       |                  |       |  |       |                               |      |   |      |                                |      |                 |      |                            |      |   |      |                      |      |              |      |
| 4  | 1.61  |                     |                              |   |              |            |                |       |                  |       |  |       |                               |      |   |      |                                |      |                 |      |                            |      |   |      |                      |      |              |      |
| 3  | 1.98  |                     |                              |   |              |            |                |       |                  |       |  |       |                               |      |   |      |                                |      |                 |      |                            |      |   |      |                      |      |              |      |
| 2  | 1.51  |                     |                              |   |              |            |                |       |                  |       |  |       |                               |      |   |      |                                |      |                 |      |                            |      |   |      |                      |      |              |      |
| 1  | 0.86  |                     |                              |   |              |            |                |       |                  |       |  |       |                               |      |   |      |                                |      |                 |      |                            |      |   |      |                      |      |              |      |
| 0 - Very bad   | 1.93  |                     |                              |   |              |            |                |       |                  |       |  |       |                               |      |   |      |                                |      |                 |      |                            |      |   |      |                      |      |              |      |
| <p><b>Patient Safety</b></p>   | <p>Cardiff and Vale reported 19 NRIs in February 2025 and 13 NRIs were closed. In total, at the end of February, there were 121 open NRIs (Nationally Reportable Incidents) and of these 57 were overdue for closure.</p> <p>One Never Event was reported in February (wrong site surgery), 7 have been reported since July 2024. A number of improvement actions are underway to help reduce future risk of Never Event occurrence.</p> <p>Healthcare associated pressure damage was again the highest reported NRI category followed by accident/injury (patient falls).</p> <p>There were 1659 patient safety incidents reported in February 2025, a reduction from 2393 in January. Of this number, 78% were reported with no or low harm attributed, 3% were reported with an initial harm category of severe or catastrophic harm.</p> <p>(Data tables from Beacon dashboard opposite have not been updated to reflect February data at the time of writing this report).</p> | <p>Feb 2025</p>     |                              | <p>CVU UHB rate of NRIs reported to NHS Executive per 100,000 population as of 07/02/2025</p> <p>CVU UHB top 10 NRI categories occurring by volume (incident dates between Feb-24 and Jan-25) as of 07/02/2025</p> <table border="1"> <thead> <tr> <th>NRI category</th> <th>Total</th> </tr> </thead> <tbody> <tr><td>Neonate</td><td>36</td></tr> <tr><td>Unexpected death</td><td>24</td></tr> <tr><td>Pressure ulcer developed or worsened during care in this clinical care area/caseload</td><td>16</td></tr> <tr><td>Treatment or procedure issues</td><td>15</td></tr> <tr><td>Clinical assessment, clinical diagnosis</td><td>13</td></tr> <tr><td>Diagnostic testing - Pathology</td><td>4</td></tr> <tr><td>Medical devices</td><td>3</td></tr> <tr><td>Screening and surveillance</td><td>3</td></tr> <tr><td>Access to services or admission delayed</td><td>2</td></tr> <tr><td>Communication issues</td><td>2</td></tr> </tbody> </table> <p>Note: NRI categories can be expanded down to the level of 'sub category' using the +/- icons beside the category label, or by hovering the cursor over the 'total' figure</p> | NRI category | Total      | Neonate        | 36    | Unexpected death | 24    | Pressure ulcer developed or worsened during care in this clinical care area/caseload | 16    | Treatment or procedure issues | 15   | Clinical assessment, clinical diagnosis | 13   | Diagnostic testing - Pathology | 4    | Medical devices | 3    | Screening and surveillance | 3    | Access to services or admission delayed | 2    | Communication issues | 2    |              |      |
| NRI category   | Total   |                     |                              |   |              |            |                |       |                  |       |  |       |                               |      |   |      |                                |      |                 |      |                            |      |   |      |                      |      |              |      |
| Neonate  | 36  |                     |                              |   |              |            |                |       |                  |       |  |       |                               |      |   |      |                                |      |                 |      |                            |      |   |      |                      |      |              |      |
| Unexpected death   | 24  |                     |                              |   |              |            |                |       |                  |       |  |       |                               |      |   |      |                                |      |                 |      |                            |      |   |      |                      |      |              |      |
| Pressure ulcer developed or worsened during care in this clinical care area/caseload | 16  |                     |                              |   |              |            |                |       |                  |       |  |       |                               |      |   |      |                                |      |                 |      |                            |      |   |      |                      |      |              |      |
| Treatment or procedure issues  | 15  |                     |                              |   |              |            |                |       |                  |       |  |       |                               |      |   |      |                                |      |                 |      |                            |      |   |      |                      |      |              |      |
| Clinical assessment, clinical diagnosis  | 13  |                     |                              |   |              |            |                |       |                  |       |  |       |                               |      |   |      |                                |      |                 |      |                            |      |   |      |                      |      |              |      |
| Diagnostic testing - Pathology   | 4   |                     |                              |   |              |            |                |       |                  |       |  |       |                               |      |   |      |                                |      |                 |      |                            |      |   |      |                      |      |              |      |
| Medical devices  | 3   |                     |                              |   |              |            |                |       |                  |       |  |       |                               |      |   |      |                                |      |                 |      |                            |      |   |      |                      |      |              |      |
| Screening and surveillance   | 3   |                     |                              |   |              |            |                |       |                  |       |  |       |                               |      |   |      |                                |      |                 |      |                            |      |   |      |                      |      |              |      |
| Access to services or admission delayed  | 2   |                     |                              |   |              |            |                |       |                  |       |  |       |                               |      |   |      |                                |      |                 |      |                            |      |   |      |                      |      |              |      |
| Communication issues   | 2   |                     |                              |   |              |            |                |       |                  |       |  |       |                               |      |   |      |                                |      |                 |      |                            |      |   |      |                      |      |              |      |

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| Priority                        | Performance Summary  | Reporting Period    | Performance against standard | Data |
|---------------------------------|--|---------------------|------------------------------|------|
| <p><b>Tier 1 Mortality</b></p>  | <p><b>Inpatient Mortality</b></p> <p>Crude inpatient mortality continues in line with the five year average, with influenza and flu continuing to have an impact. All deaths are being reviewed by the Medical examiner 20% of all deaths were returned to the UHB for further consideration. These cases are considered at the UHB mortality review group where the approach to propionate investigation is agreed. The identification and escalation of deteriorating patients, mental capacity assessment and advanced care planning and use of treatment escalation plans are recurrent themes.</p> <p><b>All Cause Mortality</b><br/>The all cause mortality continues to track the seasonal variation noted over the five year average with increased mortality associated with acute respiratory infection since November 2024.</p> | <p>January 2025</p> |                              |      |
| <p><b>Infection Control</b></p> | <p><b>In January we had 92 infection outbreaks</b></p> <p>Covid 19: 22 (24% of total)<br/>Flu: 33 (36%)<br/>Norovirus: 34 (37%)<br/>D&amp;V: 2 (2%)<br/>C-Diff: 1 (1%)</p> <p>There is an antimicrobial plan in place to review all outbreaks in detail and action any improvements</p>  | <p>January 25</p>   |                              |      |

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| No.    | Performance Measure   | Reported Period | Performance Standard       | In Month Performance           | Trend   |        |        |        |        |        |        |        |        |
|--------|---|-----------------|----------------------------|--------------------------------|---|--------|--------|--------|--------|--------|--------|--------|--------|
| 40.    | Percentage of episodes clinically coded within one reporting month post episode discharge end date  | Nov-24          | 12 month improvement trend | <b>62.4%</b><br>Below standard | <table border="1"> <tr> <td>Aug-24</td> <td>Sep-24</td> <td>Oct-24</td> <td>Nov-24</td> </tr> <tr> <td>66.40%</td> <td>67.90%</td> <td>67.20%</td> <td>62.40%</td> </tr> </table> | Aug-24 | Sep-24 | Oct-24 | Nov-24 | 66.40% | 67.90% | 67.20% | 62.40% |
| Aug-24 | Sep-24  | Oct-24          | Nov-24                     |                                |   |        |        |        |        |        |        |        |        |
| 66.40% | 67.90%  | 67.20%          | 62.40%                     |                                |   |        |        |        |        |        |        |        |        |
| 41.    | Percentage of all classifications' coding errors corrected by the next monthly reporting submission following identification                                | Nov-24          | 90%                        | <b>26.3%</b><br>Below standard | <table border="1"> <tr> <td>Aug-24</td> <td>Sep-24</td> <td>Oct-24</td> <td>Nov-24</td> </tr> <tr> <td>14.30%</td> <td>71.60%</td> <td>59.60%</td> <td>26.30%</td> </tr> </table> | Aug-24 | Sep-24 | Oct-24 | Nov-24 | 14.30% | 71.60% | 59.60% | 26.30% |
| Aug-24 | Sep-24  | Oct-24          | Nov-24                     |                                |   |        |        |        |        |        |        |        |        |
| 14.30% | 71.60%  | 59.60%          | 26.30%                     |                                |   |        |        |        |        |        |        |        |        |
| 42.    | Percentage of calls ended following WAST telephone assessment (Hear and Treat)  | Apr-24          | 17% or more                | <b>16.1%</b><br>Below standard | <table border="1"> <tr> <td>Jan-24</td> <td>Feb-24</td> <td>Mar-24</td> <td>Apr-24</td> </tr> <tr> <td>17.00%</td> <td>15.30%</td> <td>15.00%</td> <td>16.10%</td> </tr> </table> | Jan-24 | Feb-24 | Mar-24 | Apr-24 | 17.00% | 15.30% | 15.00% | 16.10% |
| Jan-24 | Feb-24  | Mar-24          | Apr-24                     |                                |   |        |        |        |        |        |        |        |        |
| 17.00% | 15.30%  | 15.00%          | 16.10%                     |                                |   |        |        |        |        |        |        |        |        |
| 43.    | Number of Pathways of Care delayed discharges   | Feb-25          | 12 month reduction trend   | <b>163</b><br>Above standard   | <table border="1"> <tr> <td>Nov-24</td> <td>Dec-24</td> <td>Jan-25</td> <td>Feb-25</td> </tr> <tr> <td>154</td> <td>145</td> <td>176</td> <td>163</td> </tr> </table>             | Nov-24 | Dec-24 | Jan-25 | Feb-25 | 154    | 145    | 176    | 163    |
| Nov-24 | Dec-24  | Jan-25          | Feb-25                     |                                |   |        |        |        |        |        |        |        |        |
| 154    | 145   | 176             | 163                        |                                |   |        |        |        |        |        |        |        |        |
| 44.    | Percentage of health board residents in receipt of secondary mental health services who have a valid care and treatment plan for people aged under 18 years | Jan-25          | 90%                        | <b>91.5%</b><br>Above standard | <table border="1"> <tr> <td>Oct-24</td> <td>Nov-24</td> <td>Dec-24</td> <td>Jan-25</td> </tr> <tr> <td>91.4%</td> <td>89.2%</td> <td>91.1%</td> <td>91.5%</td> </tr> </table>     | Oct-24 | Nov-24 | Dec-24 | Jan-25 | 91.4%  | 89.2%  | 91.1%  | 91.5%  |
| Oct-24 | Nov-24  | Dec-24          | Jan-25                     |                                |   |        |        |        |        |        |        |        |        |
| 91.4%  | 89.2%   | 91.1%           | 91.5%                      |                                |   |        |        |        |        |        |        |        |        |
| 45.    | Percentage of health board residents in receipt of secondary mental health services who have a valid care and treatment plan for adults 18 years and over   | Jan-25          | 90%                        | <b>57.5%</b><br>Below standard | <table border="1"> <tr> <td>Oct-24</td> <td>Nov-24</td> <td>Dec-24</td> <td>Jan-25</td> </tr> <tr> <td>61.2%</td> <td>61.0%</td> <td>57.8%</td> <td>57.5%</td> </tr> </table>     | Oct-24 | Nov-24 | Dec-24 | Jan-25 | 61.2%  | 61.0%  | 57.8%  | 57.5%  |
| Oct-24 | Nov-24  | Dec-24          | Jan-25                     |                                |   |        |        |        |        |        |        |        |        |
| 61.2%  | 61.0%   | 57.8%           | 57.5%                      |                                |   |        |        |        |        |        |        |        |        |
| 46.    | Number of service user feedback experience responses completed and recorded on CIVICA, figures lower for this period due to system failure.                 | Jan/Feb 25      | (Some system issues)       | <b>5731</b>                    | In January and February we sent 31,162 texts  |        |        |        |        |        |        |        |        |

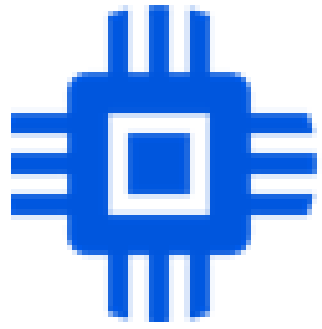
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| No.Redu cing trend | Performance Measure   | Reported Period | Performance Standard   | In Month Performance   | Trend   |        |        |        |        |        |        |        |        |
|--------------------|---|-----------------|--|--|---|--------|--------|--------|--------|--------|--------|--------|--------|
| 47.                | Cumulative number of laboratory confirmed bacteraemia cases: <i>Klebsiella</i> sp and; <i>Pseudomonas aeruginosa</i>                              | Apr-24 – Jan-25 | <i>Klebsiella</i> sp - 100<br><i>P. aeruginosa</i> – 31  | <b>107<br/>34</b><br>Below standard  | Not on trajectory to achieve the reduction expectation number<br><br>On trajectory to achieve the reduction expectation number  |        |        |        |        |        |        |        |        |
| 48.                | Cumulative rate of laboratory confirmed bacteraemia cases per 100,000 population: <i>E.coli</i> and; <i>S.aureus</i> (MRSA and MSSA)              | Apr-24 – Jan-25 | <i>E. coli</i> – 67 cases per 100,000 population<br><i>S. aureus</i> – 20 cases per 100,000 population             | <b>55.68 cases per 100,000 population</b><br><b>36.57 cases per 100,000 population</b><br>Above standard | On trajectory to achieve the reduction expectation rate<br><br>Not on trajectory to achieve the reduction expectation rate  |        |        |        |        |        |        |        |        |
| 49.                | Cumulative rate of laboratory confirmed <i>C.difficile</i> cases per 100,000 population   | Apr-24 – Jan-25 | 25 cases per 100,000 population  | <b>42.23 cases per 100,000 population</b><br>Above standard  | Not on trajectory to achieve the reduction expectation rate   |        |        |        |        |        |        |        |        |
| 50.                | Percentage of confirmed COVID-19 cases within hospital which had a definite hospital onset (>14 days after admission)                             | Jan-25          | Reduction compared to the same month in the previous year  | <b>45.1%</b><br>On standard  | <table border="1"> <tr> <th>Oct-24</th> <th>Nov-24</th> <th>Dec-24</th> <th>Jan-25</th> </tr> <tr> <td>25.60%</td> <td>30.30%</td> <td>38.30%</td> <td>45.10%</td> </tr> </table> | Oct-24 | Nov-24 | Dec-24 | Jan-25 | 25.60% | 30.30% | 38.30% | 45.10% |
| Oct-24             | Nov-24  | Dec-24          | Jan-25   |  |   |        |        |        |        |        |        |        |        |
| 25.60%             | 30.30%  | 38.30%          | 45.10%   |  |   |        |        |        |        |        |        |        |        |
| 51.                | Percentage of ophthalmology R1 appointments attended which were within their clinical target date or within 25% beyond their clinical target date | Dec-24          | 12 month improvement trend towards national target of 95%  | <b>70.3%</b><br>Below standard   | <table border="1"> <tr> <th>Sep-24</th> <th>Oct-24</th> <th>Nov-24</th> <th>Dec-24</th> </tr> <tr> <td>63.00%</td> <td>66.00%</td> <td>67.00%</td> <td>70.30%</td> </tr> </table> | Sep-24 | Oct-24 | Nov-24 | Dec-24 | 63.00% | 66.00% | 67.00% | 70.30% |
| Sep-24             | Oct-24  | Nov-24          | Dec-24   |  |   |        |        |        |        |        |        |        |        |
| 63.00%             | 66.00%  | 67.00%          | 70.30%   |  |   |        |        |        |        |        |        |        |        |
| 52.                | Number of ambulance patient handovers over one hour   | Feb-25          | 0  | <b>385</b><br>Over standard  | <table border="1"> <tr> <th>Nov-24</th> <th>Dec-24</th> <th>Jan-25</th> <th>Feb-25</th> </tr> <tr> <td>456</td> <td>493</td> <td>466</td> <td>385</td> </tr> </table>             | Nov-24 | Dec-24 | Jan-25 | Feb-25 | 456    | 493    | 466    | 385    |
| Nov-24             | Dec-24  | Jan-25          | Feb-25   |  |   |        |        |        |        |        |        |        |        |
| 456                | 493   | 466             | 385  |  |   |        |        |        |        |        |        |        |        |
| 53.                | Percentage of ambulance patient handovers within 15 minutes   | Feb-25          | Improvement compared to the same month in the previous year, towards the national target of 100% within 15 minutes | <b>10.46%</b><br>Below standard  | <table border="1"> <tr> <th>Nov-24</th> <th>Dec-24</th> <th>Jan-25</th> <th>Feb-25</th> </tr> <tr> <td>13.45%</td> <td>12.10%</td> <td>10.62%</td> <td>10.46%</td> </tr> </table> | Nov-24 | Dec-24 | Jan-25 | Feb-25 | 13.45% | 12.10% | 10.62% | 10.46% |
| Nov-24             | Dec-24  | Jan-25          | Feb-25   |  |   |        |        |        |        |        |        |        |        |
| 13.45%             | 12.10%  | 10.62%          | 10.46%   |  |   |        |        |        |        |        |        |        |        |
| 54.                | Number of National Reportable incidents that remain open 90 days or more  | Feb -25         | 12 month reduction trend   | <b>61</b>  |   |        |        |        |        |        |        |        |        |

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Shaping Our Future

**Digital  
Services**

# Digital & Health Intelligence

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# Ivanti Management Report

[View in Power BI](#) ↗

Last data refresh:  
11/03/2025 17:50:17 UTC

Downloaded at:  
11/03/2025 17:56:54 UTC

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13/03/2025 15:07:52



# Executive Scorecard

| Year 2024                   |                             | Current Year                |                             | Current Month               |                             |
|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| Incidents                   | Requests                    | Incidents                   | Requests                    | Incidents                   | Requests                    |
| 39321<br>Incidents Opened   | 50046<br>Requests Opened    | 8305<br>Incidents Opened    | 11313<br>Requests Opened    | 3624<br>Incidents Opened    | 5434<br>Requests Opened     |
| 38799<br>Incidents Closed   | 45363<br>Closed Requests    | 7548<br>Incidents Closed    | 9042<br>Closed Requests     | 3485<br>Incidents Closed    | 4805<br>Closed Requests     |
| 522<br>Remaining Open       | 4683<br>Remaining Open      | 757<br>Remaining Open       | 2271<br>Remaining Open      | 139<br>Remaining Open       | 629<br>Remaining Open       |
| 3.70<br>Avg Duration (Days) | 5.30<br>Avg Duration (Days) | 1.83<br>Avg Duration (Days) | 2.36<br>Avg Duration (Days) | 2.46<br>Avg Duration (Days) | 2.79<br>Avg Duration (Days) |

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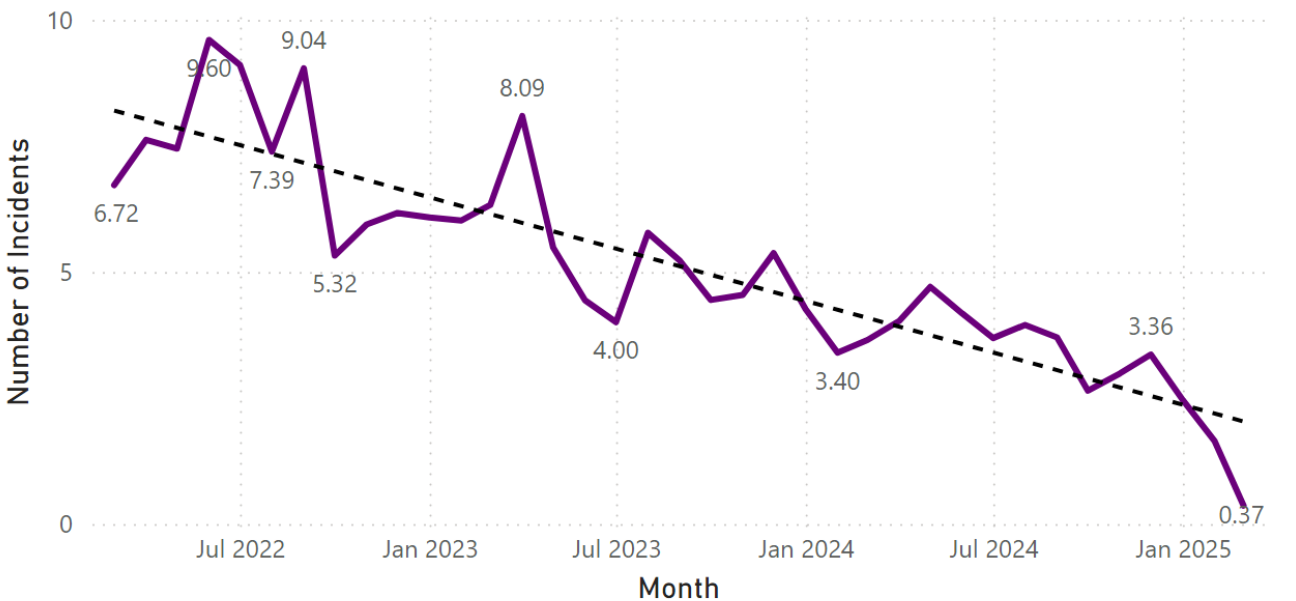
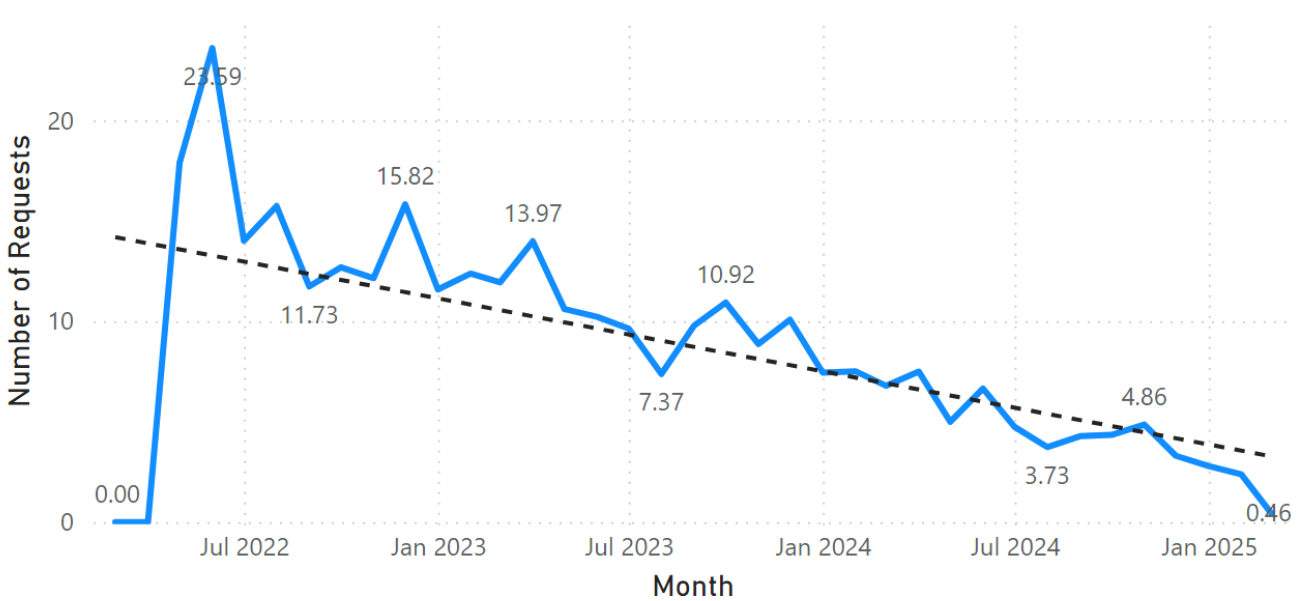
# Executive Trending

## Requests

## Incidents

Average Duration (Days)

Average Duration (Days)

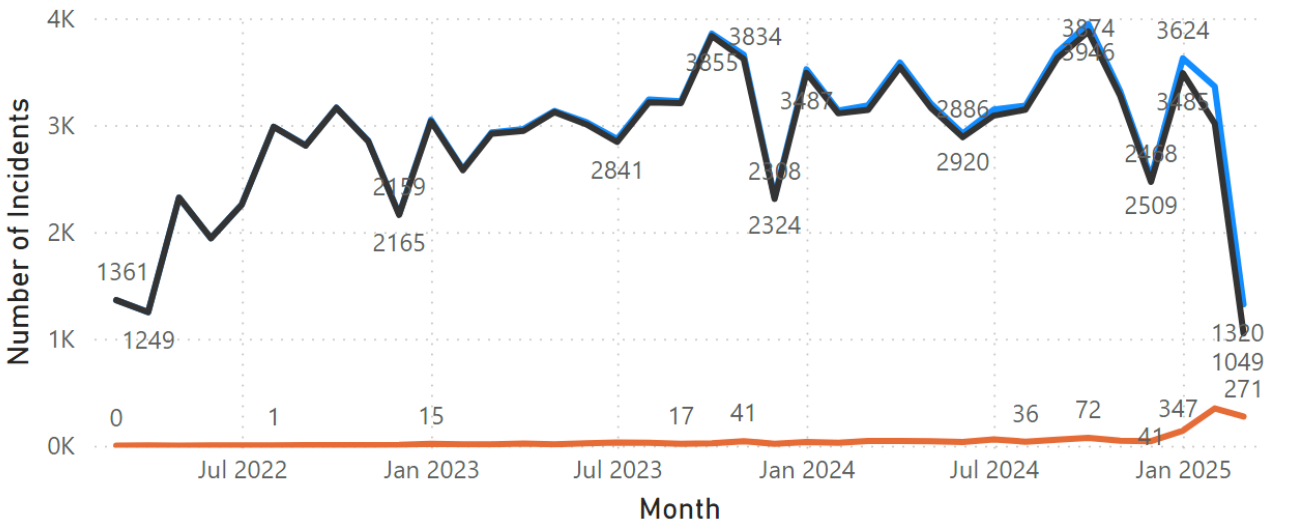
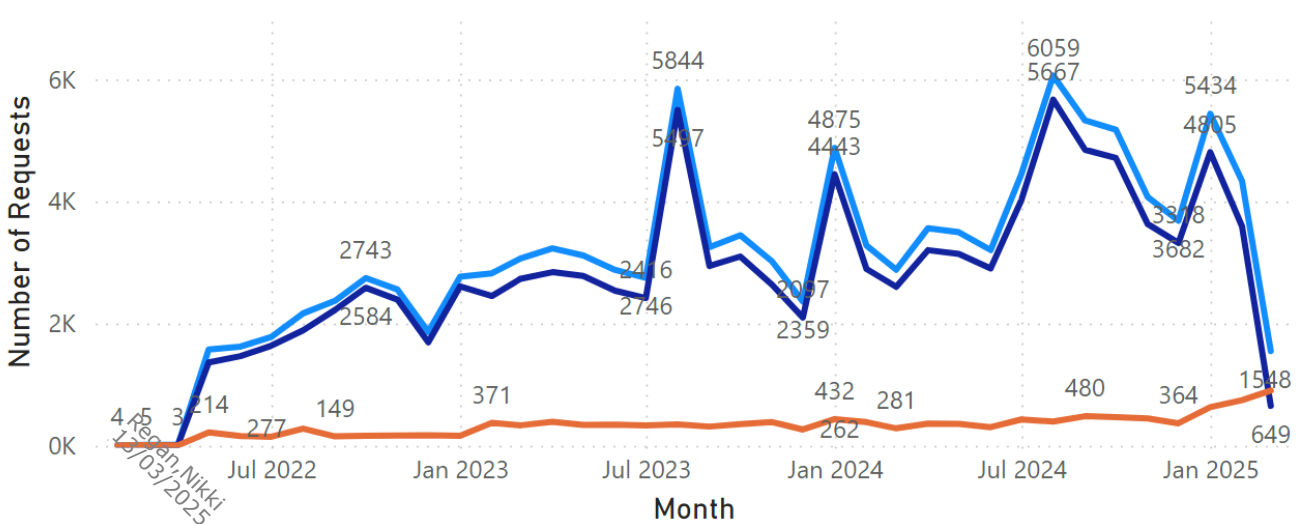


Requests Opened, Closed and Remaining Open

Incidents Opened, Closed and Remaining Open

● Requests Opened ● Requests Closed ● Remaining Open

● Incidents Opened ● Incidents Closed ● Remaining Open



Reported by: Nikki  
13/03/2025 15:07:52

# Service Desk Scorecard

| Year 2024                          |                                    | Current Year                       |                                    | Current Month                      |                                    |
|------------------------------------|------------------------------------|------------------------------------|------------------------------------|------------------------------------|------------------------------------|
| Incidents                          | Requests                           | Incidents                          | Requests                           | Incidents                          | Requests                           |
| <b>18240</b><br>Incidents Opened   | <b>26781</b><br>Requests Opened    | <b>3708</b><br>Incidents Opened    | <b>5728</b><br>Requests Opened     | <b>565</b><br>Incidents Opened     | <b>822</b><br>Requests Opened      |
| <b>18215</b><br>Incidents Closed   | <b>25041</b><br>Closed Requests    | <b>3386</b><br>Incidents Closed    | <b>4770</b><br>Closed Requests     | <b>2053</b><br>Incidents Closed    | <b>409</b><br>Closed Requests      |
| <b>25</b><br>Remaining Open        | <b>1740</b><br>Remaining Open      | <b>322</b><br>Remaining Open       | <b>958</b><br>Remaining Open       | <b>142</b><br>Remaining Open       | <b>413</b><br>Remaining Open       |
| <b>4.06</b><br>Avg Duration (Days) | <b>3.43</b><br>Avg Duration (Days) | <b>2.50</b><br>Avg Duration (Days) | <b>1.95</b><br>Avg Duration (Days) | <b>0.54</b><br>Avg Duration (Days) | <b>0.35</b><br>Avg Duration (Days) |

Reported by: Nikki  
9/03/2025 15:07:52

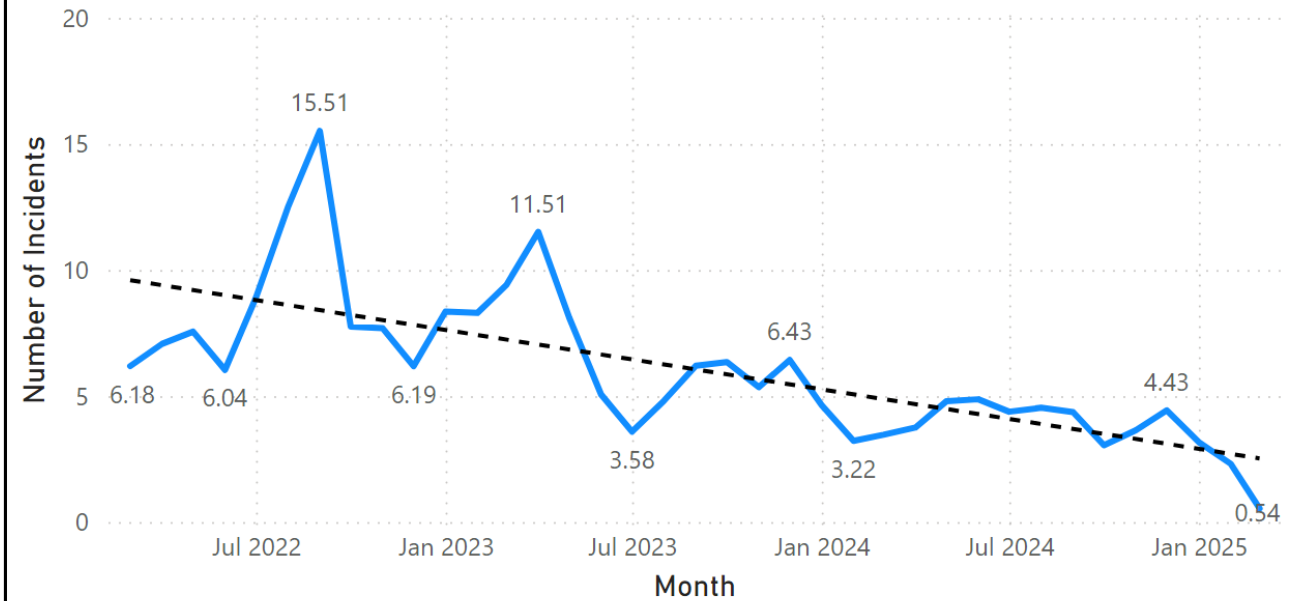
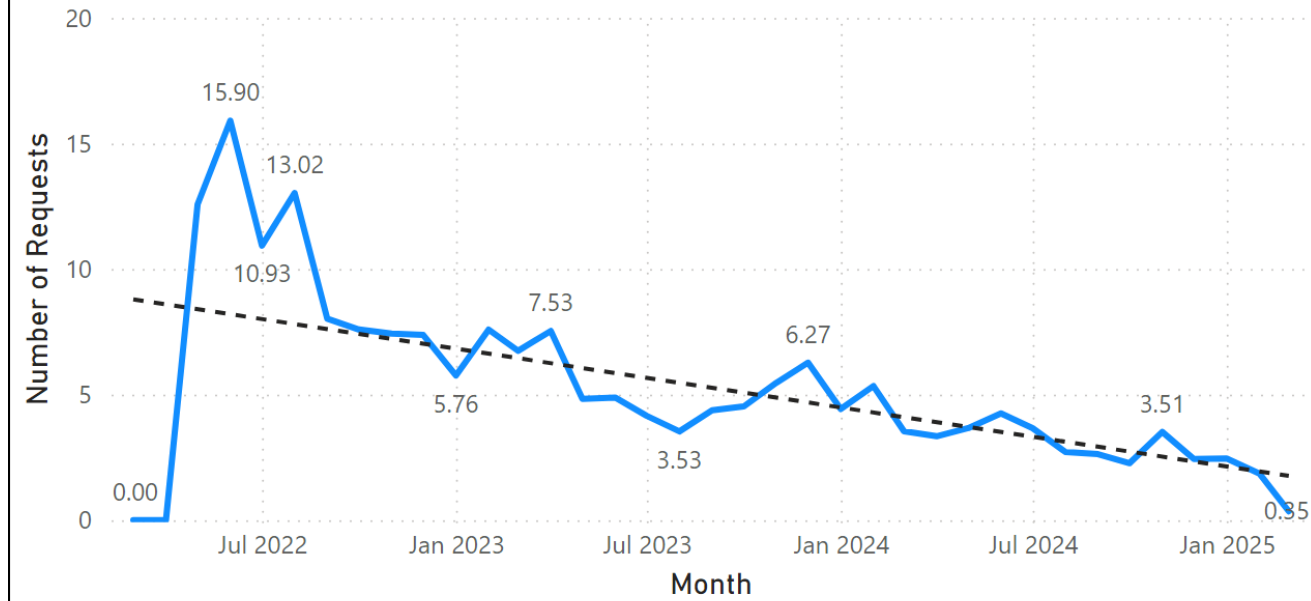
# Service Desk Trending

## Requests

## Incidents

### Average Duration (Days)

### Average Duration (Days)

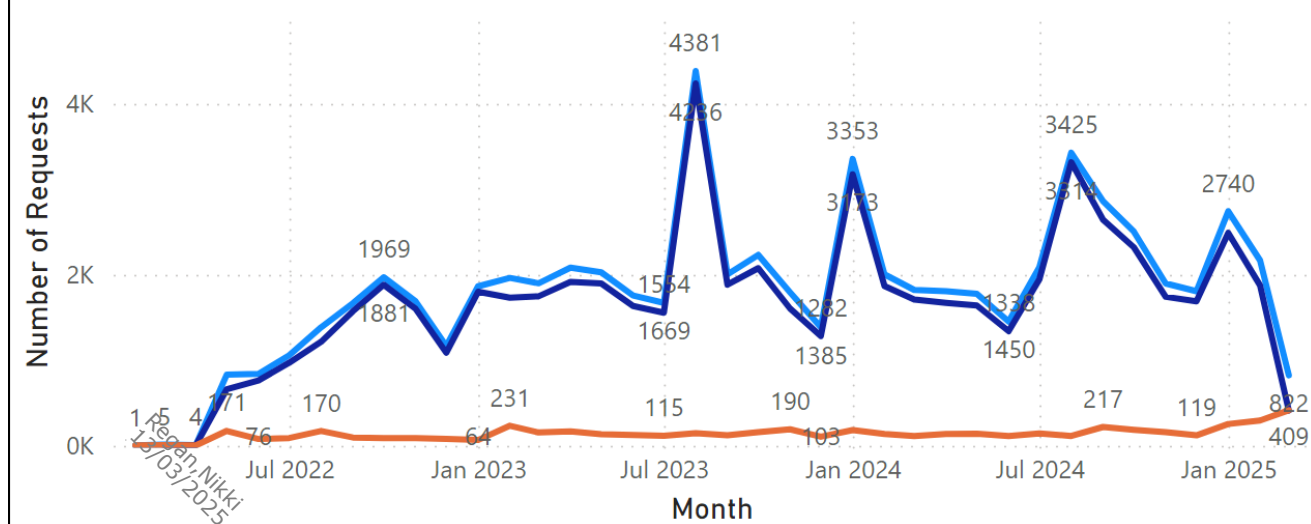


### Requests Opened, Closed and Remaining Open

### Incidents Opened, Closed and Remaining Open

● Requests Opened ● Requests Closed ● Remaining Open

● Incidents Opened ● Incidents Closed ● Remaining Open



**Created by Year**

- Created by Month**
- February 2022
  - March 2022
  - April 2022
  - May 2022
  - June 2022
  - July 2022
  - August 2022
  - September 2022
  - October 2022
  - November 2022

- OwnerTeam**
- BI Applications and Warehouse
  - Business Intelligence & Informatics
  - Digital Services Management (DSM)
  - ePMA IT
  - EUD
  - IM&T Security
  - ISM Admin
  - IT Procurement
  - M365
  - Network
  - Paris
  - Pending Approval
  - PMS Administration
  - PMS Development
  - PMS Implementation
  - PMS Support
  - Server/Infrastructure

**822**  
Requests Opened

**409**  
Closed Requests

**344**  
Remaining Open

**0.34**  
Duration (Days)

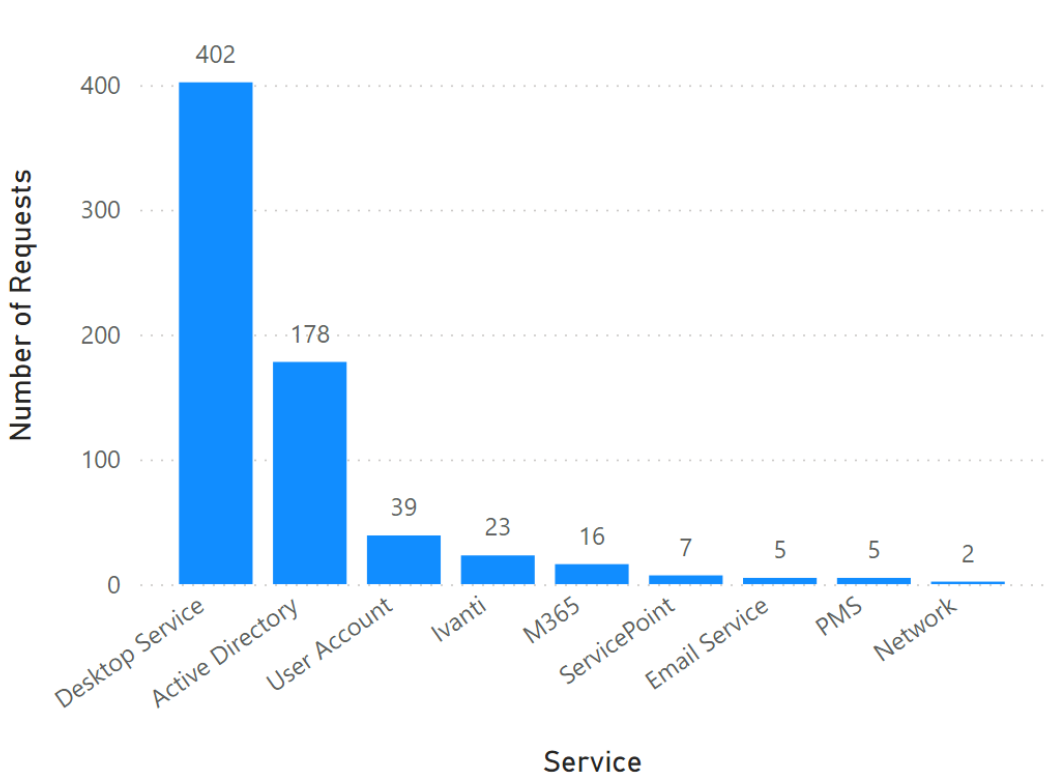
**86**  
Older than 30 Days

**16**  
Pending Approval

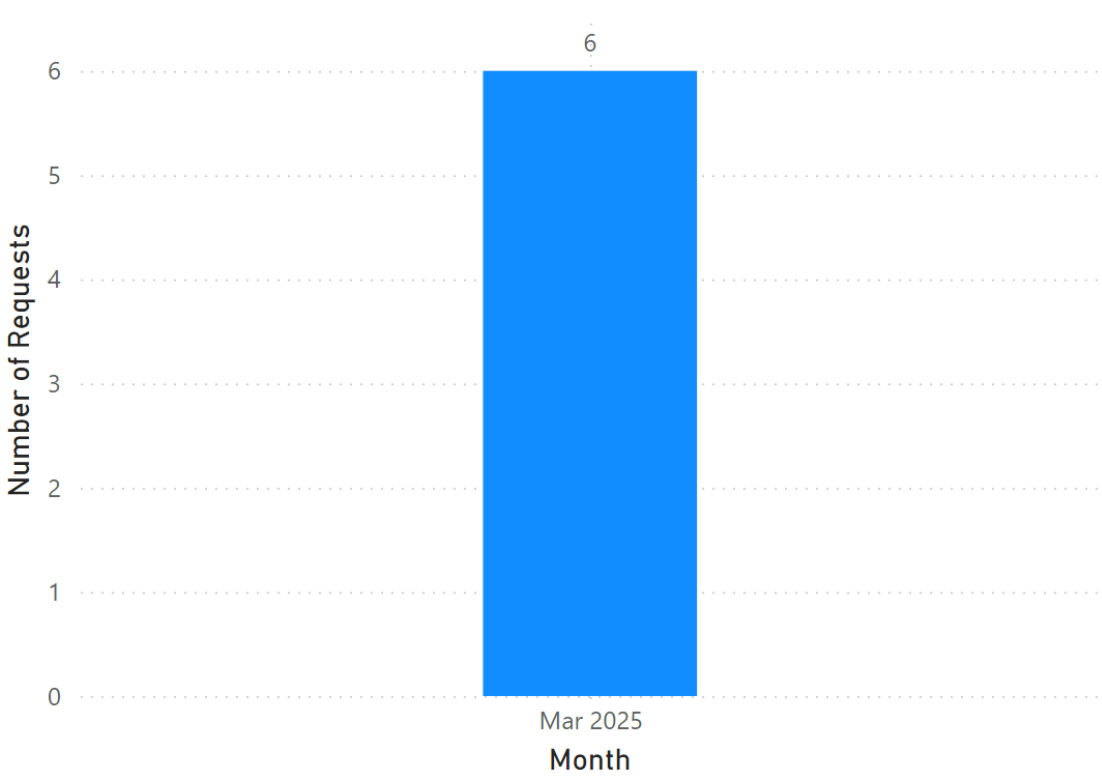
**IT Procurement Requests**

**Status**

**Number by Service**



**Automation Requests**



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13/05/2025 15:07:52

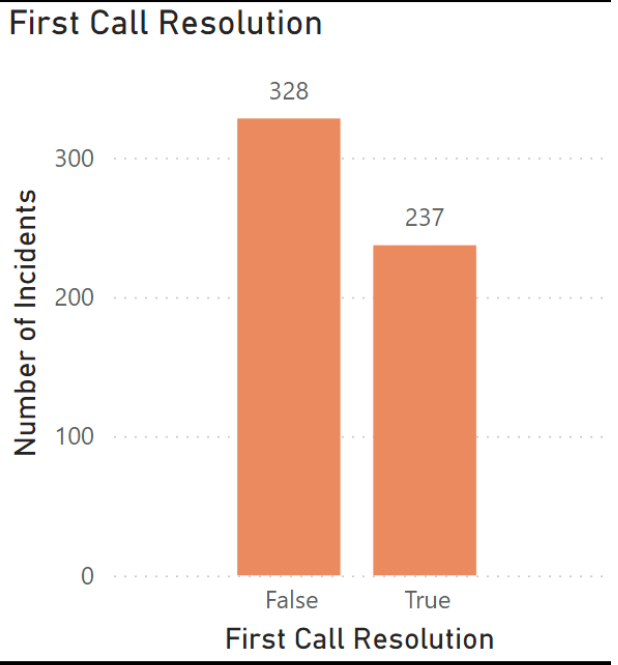
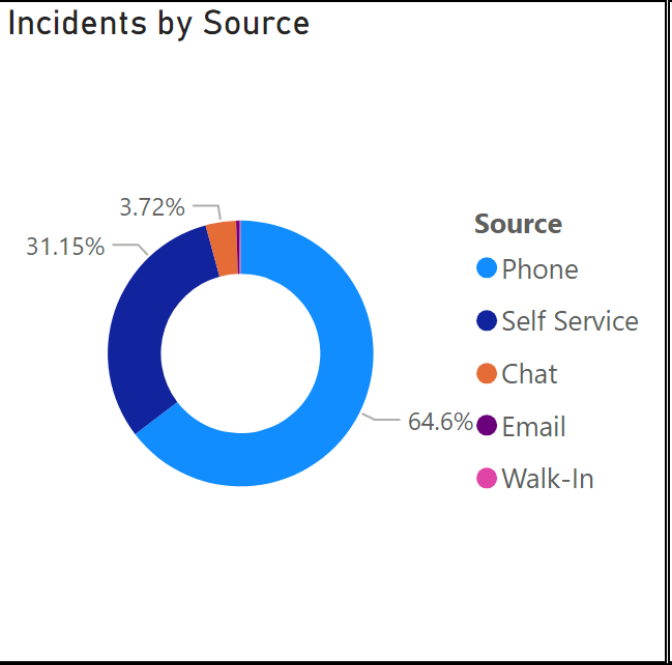
- Date by Year**
- Date By Month**
- March 2022
  - April 2022
  - May 2022
  - June 2022
  - July 2022
  - August 2022
  - September 2022
  - October 2022
  - November 2022
  - December 2022

**565**  
Incidents Opened

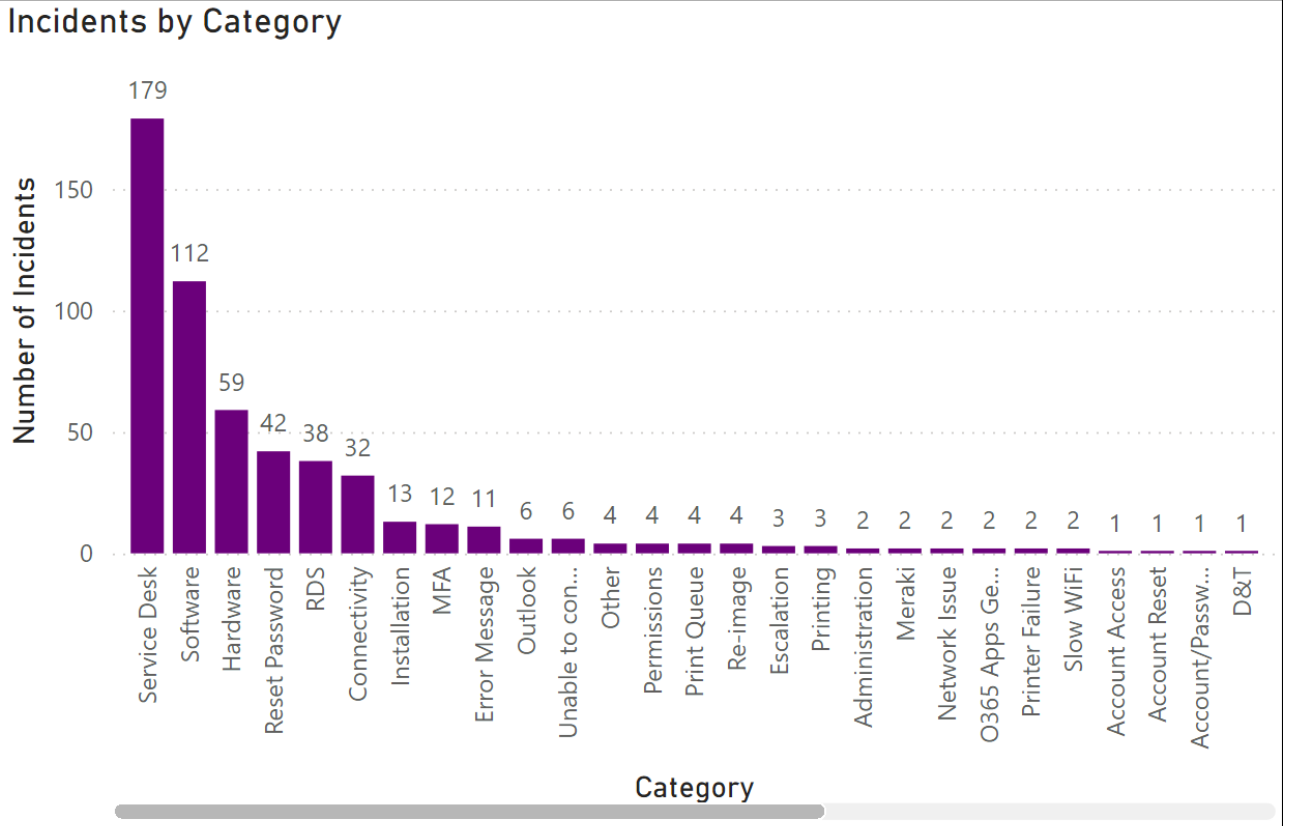
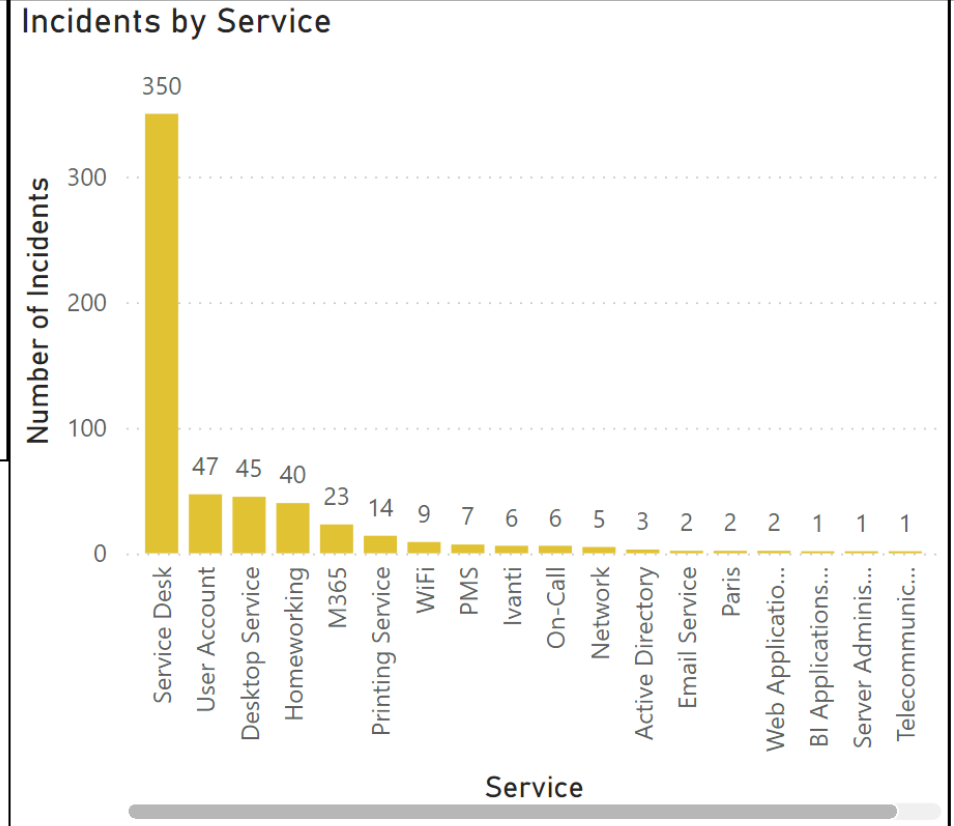
**423**  
Incidents Closed

**0.54**  
Avg Duration (Days)

**142**  
Older then 30 Days



- OwnerTeam**
- BI Applications and Warehouse
  - Digital Services Management (DS)
  - ePMA IT
  - IM&T Security
  - Network
  - Paris
  - PMS Development
  - PMS Support
  - Server/Infrastructure

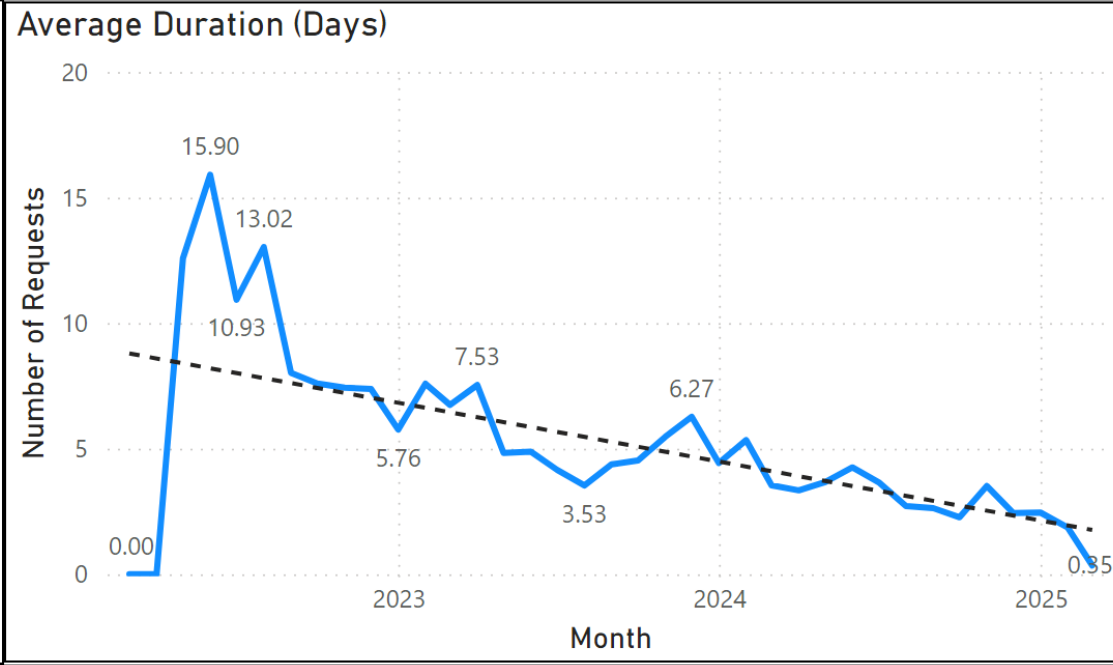


- Site**
- At Home
  - Avon House
  - Barry Hospital
  - Broad Street Clinic
  - Cardiff Edge
  - CRI
  - Hamadrvad Centre

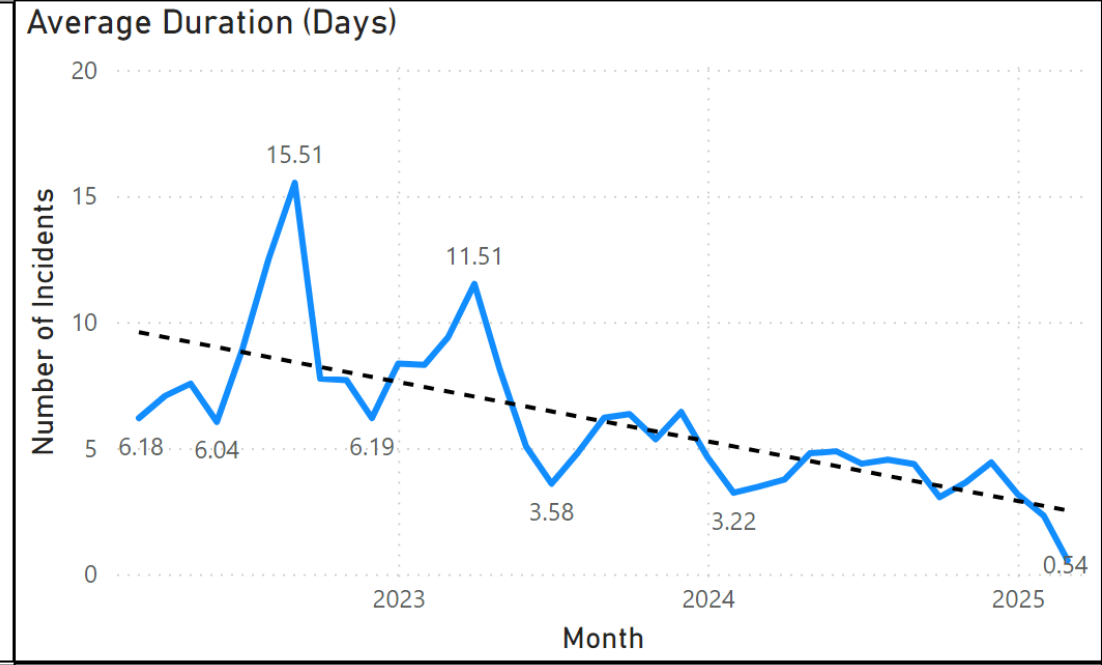
Report: Nikki  
13/03/2022 15:07:52

# Trending

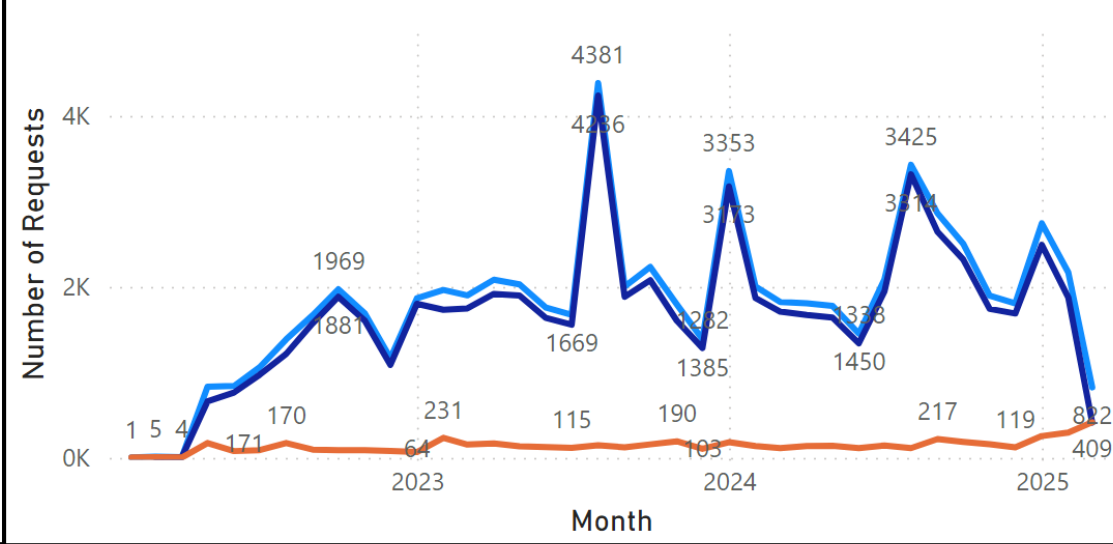
## Requests



## Incidents



## Requests Opened, Closed and Remaining Open



## Incidents Opened, Closed and Remaining Open



- ### Request Team
- Applications
  - BI Analytics
  - BI Applications and Warehouse
  - Business Intelligence & Informatics
  - Change Management
  - Customer
  - Digital Integration Development
  - Digital Services Management (DSM)
  - Digital Work Request
  - ePMA IT
  - EUD
  - IM&T Security
  - Information Governance

- ### Incident Team
- Badgernet
  - BI Applications and Warehouse
  - Business Intelligence & Informatics
  - Digital Integration Development
  - Digital Services Management (DSM)
  - ePMA IT
  - EUD
  - IM&T Security
  - ISM Admin
  - M365
  - Maternity
  - Network
  - O365/Azure

|                 |  |          |                 |            |
|-----------------|--|----------|-----------------|------------|
| Report Title:   | Palliative and Supportive Care Strategy and Deliver Plan |          | Agenda Item no. | 3.1        |
| Meeting:        | F&P  | Public   | Meeting Date:   | 19.03.2025 |
|                 |  | Private  |                 |            |
| Status:         | Assurance  | Approval | Information     |            |
| Lead Executive: | Chief Operating Officer                                  |          |                 |            |
| Report Author:  | Director of Operational Planning and Performance         |          |                 |            |

### Background and current situation:

Patients with life-limiting conditions of whatever cause, once they fully understand their situation, frequently choose to reprioritise quality of life over prolongation of life. Yet our increasingly overburdened healthcare system ends up admitting dying patients for more than 4 weeks out of the last year of their life.

The End of Life and Supportive Care Strategy seeks to deliver integrated End of Life (EOL) care for the population of Cardiff and Vale alongside partner organisations, with a value-based focus on patient experience and outcomes.

This strategy aims to support patients who are in the last 1-2 years of life to have more personalised and tailored care which frequently will need to be organised around facilitating care at home and avoiding hospital to achieve patient preference

The implementation of a comprehensive and innovative strategy for palliative and end-of-life care is imperative but also makes huge logical sense if we wish to relieve some of the currently unnecessary burden on our healthcare services. This strategy offers a cultural change in end-of-life care stewardship which could potentially ease pressure on the whole system through rationalising rather than rationing care delivery within a context of improved personalised value for the individual.

Key parts of the approach include:

- **Tidal Zone 1: C&VUHB front door:** expansion of service to focus on identifying more patients who are destabilising/deteriorating and present to ED or medical assessment unit who may be in last days/weeks of life through proactive identification at front door to give early palliative input to improve symptom control, support decision-making and avoid/shorten hospital admissions.
- **Tidal Zone 2 enhanced urgent community response service:** to deliver urgent focused palliative care input for patients who are destabilising/deteriorating where home-based assessment with point of care testing (POCT) and emergency supportive/palliative care symptom control plans (ESP-SCP) may avoid admission through early urgent decision-making and management tailored to the patient.
- **Supportive Care service expansion:** to improve equity of palliative access for non-cancer patients by increasing referral rates from teams who actively manage patients with difficult to predict prognoses.
- **ALISE project:** working towards moving patients off expert clinical areas in hospital and instead transferring to specialist end-of-life care beds capable of managing more complex EoL inpatients in the Hospice. Audit has demonstrated that approx. 250 patients per year die on the cardiology, respiratory, renal and liver expert wards.
- **Daily hot review Palliative Care/Supportive Care clinics:** access to daily Supportive/Palliative hot clinics with supportive/palliative assessment will enable prompt decision-making, symptom control and tailored management with appropriate stewardship.

Regan, Nikki  
13/03/2025 10:51:51

The UHB has been working with Social Finance to finalise approval of a bid against their Macmillan fund to support the financial model of this strategy. Social Finance would provide a 'social bond' allocation to fund the investment up front, which would then be repayable subject to delivery against the agreed set of KPIs and savings, demonstrating the value-added. This supports the initial cashflows but also significantly de-risks the overall investment / return on investment plan.

The realisation of benefits includes length of stay (LOS) savings based on admission avoidance and reduced AvLOS for the cohort. The primary KPI for the social bond repayment model will be LOS reduction modelled on £450 per day. The projection is an equivalent 30 beds based on prudent assumptions, and a commitment to reduce the UHB bed base would support delivery of this on a cash releasing as well as efficiency / cost avoidance basis. The business case provides a recurrent benefit impact of (£4.9m) for the UHB. The 30 beds have been agreed to be closed during financial year 26/27 to ensure payback. The Medicine Bed Plan considers the forward bed requirement based on demand trajectories, seasonality, CHKS peer LOS ambitions and occupancy assumptions. Actions to mitigate demand (and consequently shift the trajectory) are key for sustainability. It is important to note that a commitment to close 30 beds in support of the EOL model and equivalent savings is no worse than the 'do nothing' trajectory on both. However, it also potentially releases capacity to support wider redesign and changes in care models. Should the programme not deliver the forecasts benefits then pay back to Macmillan would not be due.

The indicative financial model is set out in the case and summarised below:

| Indicative Social Bond / Benefits Realisation Model |                                      | 25/26        | 26/27          | 27/28          | 28/29          |
|---|--------------------------------------|--------------|----------------|----------------|----------------|
|   |                                      | £m           | £m             | £m             | £m             |
| <b>Social Finance:<br/>Macmillan</b>                | Social Bond Income                   | (1.199)      | (2.468)        | (0.333)        | 0.000          |
|   | Social Bond Repayment (indic')       | 0.000        | 1.500          | 2.250          | 0.000          |
| <b>Business Case</b>                                | Resource input costs                 | 1.199        | 2.468          | 2.558          | 2.558          |
|   | Benefits realisation Wards incl. AHP | 0.000        | (1.506)        | (2.957)        | (2.957)        |
|   | Benefits realisation Medical & Other |              |                | (1.971)        | (1.971)        |
|   |                                      | <b>0.000</b> | <b>(0.006)</b> | <b>(0.453)</b> | <b>(2.370)</b> |

*It should be noted that the above is still subject to the final contract agreement with Social Finance/Macmillan and assumes 30 beds are closed mid 26/27, with direct and indirect cost savings (e.g. ward non-pay, nursing, AHP, medical) being realised recurrently.*

#### Executive Director Opinion and Key Issues to bring to the attention of the Board/Committee:

- Transforming the care offered to patients at the end of their life is a key priority for the Health Board
- The Palliative and Supportive Care strategy is in full alignment with our Health Board ambition to become an Integrated Community Care System
- The Macmillan Social Finance agreement is an innovative approach to de-risk investment. If the benefits are not delivered, the Health Board does repay the bond income.
- The full delivery of the anticipated benefits is estimated at £4.9m per year once fully operational.





#### Recommendation:

The Committee are requested to:

- a) APPROVE the Palliative and Supportive Care Business Case

Link to Strategic Objectives of Shaping our Future Wellbeing:

<https://shapingourfuturewellbeing.com/>

|  |   |
|--|---|
|  <p><b>Putting People First</b></p> <p>1.</p> <p>Click the objective above to view more detail.</p>           |  <p><b>Providing Outstanding Quality</b></p> <p>2.</p> <p>Click the objective above to view more detail.</p> |
|  <p><b>Delivering in the Right Places</b></p> <p>3.</p> <p>Click the objective above to view more detail.</p> |  <p><b>Acting for the Future</b></p> <p>4.</p> <p>Click the objective above to view more detail.</p>         |

Five Ways of Working (Sustainable Development Principles) considered

|            |  |           |  |             |  |               |  |             |  |
|------------|--|-----------|--|-------------|--|---------------|--|-------------|--|
| Prevention |  | Long term |  | Integration |  | Collaboration |  | Involvement |  |
|------------|--|-----------|--|-------------|--|---------------|--|-------------|--|

Quality Impact Assessment Completed?

|  |    |
|--|----|
|  | No |
|--|----|

**Impact Assessment:**

Risk: Yes/No (delete as appropriate)

*Please include the detail of any Risk Assessments undertaken when preparing and considering the content of this report and, where appropriate, the nature of any risks identified. (If this has been addressed in the main body of the report, please confirm)*

Safety: Yes/No

*Are there any Staff or Patient safety implications associated with the content and proposals contained within this report? If so, have these been fully considered and have plans been put in place to mitigate these? (If this has been addressed in the main body of the report, please confirm)*

Financial: Yes/No

*Are there any financial implications associated with the content and proposals contained within this report? If so, have these been fully considered and have plans been put in place to mitigate these? (If this has been addressed in the main body of the report, please confirm)*

Workforce: Yes/No

*Are there any Workforce implications associated with the content and proposals contained within this report? If so, have these been fully considered and have plans been put in place to mitigate these? (If this has been addressed in the main body of the report, please confirm)*

Legal: Yes/No

*Are there any legal implications that arise from the content and proposals contained within this report? If so, has advice been sought and what was the outcome? (If this has been addressed in the main body of the report, please confirm)*

Reputational: Yes/No

Are there any reputational risks associated with the content and proposals contained within this report? If so, have these been fully considered and have plans been put in place to mitigate these? (If this has been addressed in the main body of the report, please confirm)

Socio Economic: Yes/No - **Useful Guidance on the application of the Socio-Economic Duty can be found at the following link: [The Socio-economic Duty: guidance | GOV.WALES](#)**

The Socio-Economic Duty is designed to encourage better decision making, ensuring more equal outcomes. Do the proposals within this report contain strategic decisions, such as setting objectives and the development of services. If so has consideration been given to how the proposals can improve inequality of outcome for people who suffer socio-economic disadvantage? Please include detail. (If this has been addressed in the main body of the report, please confirm)

Equality and Health: Yes/No

Equality Health Impact Assessments (EHIA) are typically undertaken when developing or reviewing Health Board strategies, policies, plans, procedures or services. Do the proposals contained within the report necessitate the requirement for an EHIA to be undertaken? If so, please include the detail of any EHIA undertaken or the plans are in place to do so. (If this has been addressed in the main body of the report, please confirm)

Decarbonisation: Yes/No

There are a number of ways by which carbon emissions can be avoided through the operations of CVUHB.

These include:

- A focus upon preventing ill health in our population
- Saving energy or increasing throughput.
- Value based healthcare. Being prudent by not over-treating/intervening. Avoid delivering low-value interventions
- Patients empowered to manage their conditions, utilising See on Symptoms and Patient Initiated follow ups to reduce unnecessary outpatient appointments.
- Service delivery in the most appropriate setting, e.g. in a community setting rather than an acute setting.
- Reducing waste – for example use non-sterile gloves only when needed, manage use-by dates to avoid throwing out good products, recycle and reuse.

Does the subject matter of your paper risk any of the above not being achieved?

Welsh Language: Yes/No

Consideration should be given to potential impact on the Welsh language, including the following key aspects:





- More than just words: Does the report align with the More than just words strategy, ensuring Welsh-speaking patients can access services in their preferred language, and supporting active offer and bilingual care?
- Accessibility and compliance: Ensure key information is bilingual and that the report meets the Welsh Language Standards for communication, signage, and patient materials.
- Patient understanding and safety: Could English-only content impact Welsh speakers' comprehension in critical areas like consent and medication instructions, potentially affecting safety?
- Staffing and resources: Does the report address the need for Welsh-speaking staff or bilingual resources to deliver equitable care?

Does the subject matter of your paper risk any of the above not being achieved?

Approval/Scrutiny Route (please note anywhere else this paper has been before):

Committee/Group/Exec

Date:

|   |   |                                |             |   |                                   |
|---|---|--------------------------------|-------------|---|-----------------------------------|
| Report Title:   | <b>2024-25 Month 9 Monthly Financial Monitoring Return</b>                          |                                |             | Agenda Item no.   | 4.1                               |
| Meeting:  | <b>Finance Committee</b>  | Public                         | X           | Meeting Date:   | <b>19<sup>th</sup> March 2025</b> |
| Status<br><i>(please tick one only):</i>  | Assurance   | x                              | Approval    | Information   | x                                 |
| Lead Executive:   | <b>Executive Director of Finance</b>  |                                |             |   |                                   |
| Report Author<br>(Title):   | <b>Deputy Director of Finance</b>   |                                |             |   |                                   |
| <b>Main Report</b>  |   |                                |             |   |                                   |
| Background and current situation:   |   |                                |             |   |                                   |
| <b>SITUATION</b>  |   |                                |             |   |                                   |
| <p>WHC (2024) 026 - Welsh Government 2024/25 LHB, SHA &amp; Trust Monthly Financial Monitoring Return Guidance requires the UHB to provide a main Committee of the Board with copy of the monthly Financial Monitoring Return (consisting of the Narrative, Table A and Tables C to C3), to provide the Committee with transparency on the submission made to the Welsh Government.</p> <p>A copy of the January 2024/25 MMR is attached.</p> |   |                                |             |   |                                   |
| <b>Executive Director Opinion and Key Issues to bring to the attention of the Board/Committee:</b>  |   |                                |             |   |                                   |
| The extracts from the UHBs Monthly Financial Monitoring Return are provided for information and assurance.  |   |                                |             |   |                                   |
| <b>Recommendation:</b>  |   |                                |             |   |                                   |
| The Board / Committee is requested to:  |   |                                |             |   |                                   |
| <b>NOTE</b> the extracts from the UHBs Monthly Financial Monitoring Returns.  |   |                                |             |   |                                   |
| <b>Link to Strategic Objectives of Shaping our Future Wellbeing:</b>  |   |                                |             |   |                                   |
| <i>Please tick as relevant</i>  |   |                                |             |   |                                   |
| 1.  |  | Putting People First           | 2.          |  | Providing Outstanding Quality     |
| 3.  |   | Delivering in the Right Places | 4.          |  | Acting for the Future             |
| <b>Five Ways of Working (Sustainable Development Principles) considered.</b>  |   |                                |             |   |                                   |
| <i>Please tick as relevant</i>  |   |                                |             |   |                                   |
| Prevention  | Long term   | x                              | Integration | Collaboration   | Involvement                       |
| <b>Impact Assessment:</b>   |   |                                |             |   |                                   |
| <i>Please state yes or no for each category. If yes, please provide further details.</i>  |   |                                |             |   |                                   |
| Risk: No  |   |                                |             |   |                                   |
| Safety: No  |   |                                |             |   |                                   |

|   |                                   |
|---|-----------------------------------|
|   |                                   |
| Financial: Yes  |                                   |
| As detailed above.                                    |                                   |
| Workforce: No   |                                   |
|   |                                   |
| Legal: No   |                                   |
|   |                                   |
| Reputational: Yes                                     |                                   |
| Yes, if forecast financial position is not delivered. |                                   |
| Socio Economic: No                                    |                                   |
|   |                                   |
| Equality and Health: No                               |                                   |
|   |                                   |
| Decarbonisation: No                                   |                                   |
|   |                                   |
| <b>Approval/Scrutiny Route:</b>                       |                                   |
| Finance Committee                                     | Date: 19 <sup>th</sup> March 2025 |
|   |                                   |
|   |                                   |
|   |                                   |

Regan Nikki  
13/03/2025 15:07:52

## THE WELSH GOVERNMENT FINANCIAL COMMENTARY

### FINANCIAL POSITION FOR THE TEN MONTH PERIOD ENDED 31<sup>st</sup> JANUARY 2025

#### INTRODUCTION

The Health Board submitted an initial draft financial plan to Welsh Government at the end of March 2024. The draft plan incorporated: -

- Brought forward underlying deficit of £60.9m
- 2024/25 Demand and cost growth and unavoidable investments of £45.4m
- Additional Allocations of £37.3m
- Anticipated pass-through funding on Long Term Agreements of £5.9m (3.67%)
- A £47.2m Savings programme

This resulted in an initial 2024/25 planning deficit of £15.9m.

The draft plan assumes that the 2024/25 cost of the RLW, being paid to staff directly employed by the UHB will be funded through the 2024-25 pay award funding in addition to non recurrent funding for the impact of the policy on the social/third sector.

#### Revision to Planned Deficit

Following a review and recognition of the additional unforeseen cost pressures and demand on services in 2024-25, the UHB relayed an Accountable Officer letter on the 2nd of December 2024 to advise Welsh Government of a revised forecast deficit of £34.5m.

Welsh Government issued a revised control target letter dated the 25th of November 2024 which indicated that additional funding of £50m would be allocated across the seven Health Boards on a fair-shares basis. For CVUHB, this results in an in-year recurrent allocation of £6.8m and a revised target control total of £9.1m. On this basis the UHB's revised year end forecast is £27.7m as follows:

**Table 1 – Forecast Year End Outturn**

|  | 2024/25<br>£m |
|--|---------------|
| <b>Draft Planned Financial Position - Deficit £m</b> | <b>15.9</b>   |
| Additional In Year Recurrent Funding                 | (6.8)         |
| <b>Revised WG Control Target - Deficit £m</b>        | <b>9.1</b>    |
| Forecast Savings Programme Deficit                   | 11.2          |
| Forecast Operational Deficit                         | 9.5           |
| Further Recovery Actions                             | (2.1)         |
| <b>Revised Year-End Forecast Deficit £m</b>          | <b>27.7</b>   |

The Month 10 Monitoring Return now incorporates a revised forecast deficit of £27.7m as recognised by the UHB’s governance structure.

**At Month 10 the UHB is reporting an overspend of £27.553m.**

**This is comprised of £10.409m unidentified savings, £9.561m of operational overspend and the revised planned deficit of £7.583m (10 twelfths of the revised planning control deficit of £9.100m).**

**The UHB is working to reduce the operational and savings overspend to remain within the £27.700 forecast deficit.**

This level of overspend continues to cause concern and has broadly been driven by three key factors: -

- 80 beds will be open by the end of March that were not anticipated at the commencement of the financial year (£6m fully year effect).
- Planned Care initiatives to achieve target waiting times by the end of the financial year have cost £3m more than anticipated in plan.
- Cost reduction programmes have delivered £11.2m less than anticipated mainly reflecting the lack of progress the UHB has been able to make in workforce reshaping initiatives as a result of increasing service pressures.

At Month 9 the UHB reported a year to date position of £27.5m against its revised forecast out-turn of £27.7m. This was a serious deterioration in the financial trajectory, creating doubt over the UHB’s ability to meet its revised year end forecast which itself is deterioration from the **revised deficit control of £9.1m issued by Welsh Government in November 2024.**

The UHB has had a Recovery Scheme framework in place throughout 2024-25 including a number of schemes and review processes and this has been overseen by the UHB’s Sustainability Board (CEO chaired).

In response to the Month 9 reported position the UHB has, from January 2025, initiated a number of urgent control actions to slow expenditure run rates and eliminate unnecessary expenditure. This includes a daily Programme Management Office (PMO) which meets twice a day and a daily joint Executive/PMO meeting which convenes at the end of each weekday. The PMO has overseen:-

- Authorisation for any necessary remaining agency expenditure
- Authorisation for any necessary variable bank expenditure
- Authorisation for any training (outside the statutory training required for professional registration or clinical training to ensure patient safety and treatment continuity).

**The impact of the enhanced control actions combined with greater clarity of final 2024-25 funding has contributed to an improved monthly financial performance of £0.052m deterioration in Month 10 and confidence that the revised year end forecast out-turn of £27.7m can be met.**

## BACKGROUND

The Board agreed and submitted a draft financial plan to Welsh Government at the end of March 2024. A summary of the draft financial plan submitted is provided in Table 2.

**Table 2: 2024/25 Draft Plan**

|   | £m           |             |
|---|--------------|-------------|
|   | 2024/25      | 2025/26     |
| Planned Opening Deficit                             | 16.5         | 15.9        |
| Non Recurrent Welsh Government (WG) Funding 2023/24 | 17.2         |             |
| Shortfall on 2023/24 Recurrent Savings              | 15.2         |             |
| Recurrent Operational Pressures                     | 12.0         |             |
| Estimated Demand Growth / Inflationary Pressures    | 40.4         | 40.0        |
| Essential service investments                       | 5.0          | 5.0         |
| <b>Gross Deficit £m</b>                             | <b>106.3</b> | <b>60.9</b> |
| WG Core Uplift                                      | (37.3)       | (24.0)      |
| WG Core Uplift - pass through funding on LTAs       | (5.9)        |             |
| Savings Target                                      | (47.2)       | (36.9)      |
| <b>Planned Financial Position £m</b>                | <b>15.9</b>  | <b>0.0</b>  |

This represented the initial financial plan of the Health Board.

**Welsh Government issued a revised control target letter dated the 25th of November 2024 which indicated that additional funding of £50m would be allocated across the seven Health Boards on a fair-shares basis. For CVUHB, this results in an in-year recurrent allocation of £6.8m and a revised target control total of a £9.1m deficit.**

These financial monitoring returns have been prepared within the framework of the UHB's submitted Draft Financial Plan, and the revised target control total of a £9.1m deficit for 2024-25. This report details the financial position of the UHB for the period ended 31<sup>st</sup> January 2025.

A full commentary has been provided to cover the tables requested for the month 10 financial position.

### **MOVEMENT OF OPENING FINANCIAL PLAN TO FORECAST OUTTURN and UNDERLYING POSITION (TABLE A & A1)**

Table A sets out the draft financial plan and latest position at month 10 for which the following should be noted:

- The UHB's 47.2m 2024/25 savings target is reported on lines 8 & 9.
- It is assumed that LTA inflation of £5.9m (3.67%) will be passed to the UHB from other Health Boards.
- The bought forward underlying deficit is £60.9m as outlined in the draft financial plan.

The draft financial plan requires the UHB to meet its £47.2m Recurrent Savings target and deliver a balanced recurrent operational position to reduce the brought forward underlying deficit (ULD) from £60.9m to £6.8m (revised from £5.9m to £9.1m after additional in year recurrent funding of £6.8m) at the end of 2024/25.

At month 10, the UHB had identified £20.385m of recurrent green and amber savings and a further £2.431m of red schemes.

A £9.561m operational overspend was reported at month 10 and this also needs to be managed to a balanced position at year end to meet the target ULD.

Significant progress in the identification of further recurrent savings and recovering the operational position are required to enable the UHB to reduce its ULD to £9.1m at the end of March.

The UHB has re-assessed its planning assumptions for the 2025/26 financial plan and this includes a review of its Underlying Deficit. The revised draft assessment is an ULD of £57.1m as described by Table 3 below:

**Table 3 – Initial Assessment of Underlying Deficit**

|                                      | <b>UHB<br/>£m</b> |
|--------------------------------------|-------------------|
| Operational ULD                      | 23.1              |
| Savings ULD                          | 24.9              |
| Additional In Year Recurrent Funding | (6.8)             |
| Planned Deficit                      | 15.9              |
| <b>Total ULD £m</b>                  | <b>57.1</b>       |

The forecast ULD continues to be reviewed and the £57.1m ULD identified above is expected to reduce as recovery actions identified are developed.

The forecast carry forward underlying deficit at year end 2024/25 has been amended to £57.100m in Tables A & A1 to reflect the current assessment.

### **OVERVIEW OF KEY RISKS & OPPORTUNITIES (TABLE A2)**

Table A2 reflects an update on the risks identified in the draft financial plan and these are reviewed on a monthly basis.

Following the improvement in the operational position at month 10 the level of risk reported has been reduced as summarised below:

**Table 4 – Summary of Risk and Opportunities**

|  | <b>£m</b> | <b>Likelihood</b> |
|--|-----------|-------------------|
| Revised Forecast Deficit   | 27.7      |                   |
| <b>Risks</b>   |           |                   |
| Failure to deliver additional recovery actions & manage operational position | 1.0       | Low               |
| <b>Opportunities</b>   |           |                   |
| Further Corporate Opportunities  | (1.0)     | Low               |

In addition to the in year risk there is a risk in respect of the recurrent allocation for the 2024/25 Pay Award. The UHB is working with Welsh Government to agree the recurrent affect pay uplift arrears actioned in 2024/25. The risk to the UHB is currently quantified at circa £5m.

Some inherent risks remain, particularly in respect of under-performance against Long Term Agreement (LTA) arrangements funded by other Welsh Health Boards.

## ACTUAL YEAR TO DATE (TABLE B AND B2)

Table B confirms the year-to-date deficit of £27.553m which is a relatively small in month deterioration of £0.052m above the revised control total.

The year-to-date deficit and the revised control deficit of £9.100m is shown in Table 5.

**Table 5: Summary Financial Position for the period ended 31<sup>st</sup> January 2025**

|   | Month 10 Position<br>£m | Forecast Year-End Position<br>£m |
|---|-------------------------|----------------------------------|
| Revised Planning Control (Deficit)                  | 7.583                   | 9.100                            |
| Savings Programme Deficit                           | 10.409                  | 11.200                           |
| Operational position (Surplus) / Deficit            | 9.561                   | 9.500                            |
| Further Recovery actions                            |                         | (2.100)                          |
| <b>Financial Position £m (Surplus) / Deficit £m</b> | <b>27.553</b>           | <b>27.700</b>                    |

The month 10 deficit of £27.553m comprised of the following:

- £7.583m revised planning control deficit
- £10.409m unachieved CRP gap
- £9.561m operational deficit against plan.

The operational deficit against plan improved by £2.165m in month from £11.126m to £9.561m during month 10 primarily due to the following additional funding assumptions and actions:

- Additional Pay award funding secured through WG including bank
- variable pay reduction as a result of recovery actions
- 50 day challenge WG funding
- Planned care funding recovery

Circa £1.2m of the previously reported cumulative overspend was directly linked to the implementation of the 2024/25 pay uplift to bank staff in month 8, where Welsh Government had previously indicated that Health Boards should not assume that additional wage award funding would be provided. The full year effect of the 2024/25 pay uplift for bank staff was estimated at £1.550m. The Month 10 report assumes that the full cost will be covered by additional Welsh Government pay award funding.

Pressures remain in month, primarily against medical staff budgets; nursing due to sickness levels and the provision of further capacity to cover additional demand; primary care prescribing pressures; and out of area mental placements driven by both demand and a fall in capacity while structural remedial work is carried out at the Hafan Y Coed unit. Some of the continuing pressures are mitigated by slippage which has emerged against specific budgets towards year end.

The UHB plan provides funding to cover both inflationary pressures incurred in 2024-25 and COVID consequential costs relating primarily to an increased bed base including Lakeside Wing.

The UHB continues to work to remain within its revised year end forecast of a £27.7m deficit and minimise its year end overspend against the revised £9.1m control total deficit.

### **SOCNE / SOCNI Movement (TABLE B1)**

An explanation of significant movements in the Forecast Income and Expenditure Categories is provided in the response to queries arising from the previous monitoring return submission.

### **PAY & AGENCY (TABLE B2)**

The UHB recorded Agency costs of £0.384m in month primarily due to nursing pressures, which is £0.148m less than the average for the year to month 9. £0.297m of the costs recorded in January related to registered nursing and midwifery.

### **COVID 19 ANALYSIS (TABLE B3)**

At month 10, Table B3 reports forecast outturn expenditure due to COVID-19 to be in line with the Welsh Government funding of £10.184m. This includes expenditure related to the Covid funding for Health Protection and PPE (£9.040m) and Long Covid (£1.144m) allocations.

The Business Plan for the continuing Covid Programmes remains subject to review. Forecast expenditure will be reviewed at month 11 and this is expected to reveal a forecast underspend which will lead to a revised profile of expenditure in Table B3. The UHB plan assumes that any underspends against Covid funding will be retained by the UHB.

Welsh Government funding is summarised in Table 6 below.

**Table 6: Summary of Forecast COVID 19 Net Expenditure**

|   | Funded by<br>WG £m | Funding to<br>Month 10 £m |
|---|--------------------|---------------------------|
| Health Protection/Vaccination & PPE             | 9.040              | 7.533                     |
| Long Covid                                      | 1.144              | 0.953                     |
| <b>Sub Total WG Funded Covid Expenditure £m</b> | <b>10.184</b>      | <b>8.487</b>              |

**SAVINGS PROGRAMME 2024-25 (TABLE C, C1, C2 & C3)**

At month 10, the UHB had identified £36.245m (77%) of green and amber savings to deliver against the £47.2m savings target. With red schemes of £4.661m also identified, but with less certain delivery assurance, Table 7 summarises that £40.218m of savings have been identified for 2024-25 with £6.982m currently not identified.

**Table 7: Savings Schemes**

|  | Total<br>Savings<br>Target<br>£m | Total<br>Savings<br>Identified<br>£m | Total<br>Savings<br>(Unidentified)<br>£m |
|--|----------------------------------|--------------------------------------|--|
| Total Identified Savings (green, amber & red) £m | 47.200                           | 40.907                               | (6.293)                                  |

Given that only 2 months of the financial year remain there is considerable uncertainty around the delivery in 2024/25 of £4.661m of red schemes included in Table 7 above.

The Monthly Monitoring Returns savings tables report shortfalls in delivery of identified green and amber schemes, as well as all red scheme and unidentified values. This results in a deficit to date of £10.409m on a straight-line Month 1-12 phasing basis.

The UHB will continue work to identify and deliver savings schemes to mitigate the current position.

**INCOME/EXPENDITURE ASSUMPTIONS (TABLE D)**

The UHB has completed discussions to agree and sign contracts (Long Term Agreements (LTA) and Service Level Agreements with other Welsh NHS organisations, without the need to resort to arbitration. Most LTAs were uplifted in line with the Welsh Government guidelines with a general funding uplift of 3.67%. Some settlements are expected to recover the necessary income to support the anticipated plan position with improved output and productivity.

The financial impact of year-to-date underperformance against LTA activity targets is incorporated within the year to date reported position.

## INCOME ASSUMPTIONS 2024/25 (TABLE E)

Table E outlines the UHB's 2024/25 resource limit.

Similar to practice in previous years, the UHB reported position continues to exclude recurrent expenditure which has arisen following a change in the accounting treatment of UHB PFI schemes under International Financial Reporting Standards (IFRS). The UHB is assuming that Welsh Government will continue to provide resource cover for this cost, which was assessed at £0.222m in the previous financial year.

The UHB notes that Welsh Government's intention to fund the full impact of the retrospective 2023/24 pay awards and the 2024/25 pay uplift identified in the month 9 MMR alongside the estimated impact on bank staff. It is noted that further consideration will be given to additional pay uplift payments actioned in month 10. The UHBs anticipated allocations at month 10 reflect this.

The UHBs confirmed Revenue Resource Limit as of January 31<sup>st</sup> 2025 was £1,363m with a further £82m of assumed allocations as detailed at Table 8 below:

**Table 8: Unconfirmed Anticipated Allocations**

|   | Unconfirmed Allocations<br>£m |
|---|-------------------------------|
| Depreciation, Impairments* see note 1                           | 19.813                        |
| IFRS 16 Leases - revenue  | (4.488)                       |
| Real Living Wage Health & Social Care Providers                 | 4.612                         |
| 2024/25 Pay Uplifts & Retrospective 2023/24 Medical Pay Uplifts | 47.574                        |
| Vertex  | 2.774                         |
| Clinical Excellence & Impact Awards                             | 1.796                         |
| Welsh Government Funded New Medical Posts                       | 1.736                         |
| Other   | 8.392                         |
| <b>Total Unconfirmed Allocations £m</b>                         | <b>82.209</b>                 |
| <b>Adjustments</b>  |                               |
| Depreciation, Impairments* see note 1                           | (19.813)                      |
| IFRS 16 Leases - capital  | 4.488                         |
| <b>Total Unconfirmed Allocations (Drawing Limit) £m</b>         | <b>66.884</b>                 |

Note 1 – there is no associated cash drawing with Depreciation & Impairment adjustments.  
Note 2. The table above excludes working cash and strategic cash requests.

In addition to UHB payroll costs, the UHB also has an obligation to meet the additional costs of medical staff on the Cardiff University payroll, where a

cross charge is made to the LHB. The estimated additional costs of the pay award made to Cardiff University Staff have been reviewed in month following the receipt of additional consultant pay point information from Cardiff University. The estimated costs of the 2024/25 uplift have increased from circa £0.4m to £0.5m as a result.

The UHB's financial and cashflow forecast is based on confirmation of all unconfirmed allocations. In addition, it is assumed that funding in respect of the 2024/25 pay award will be confirmed in due course to enable the UHB to manage both the additional cost and cashflow.

## **BALANCE SHEET (TABLE F)**

The Opening Balances at the beginning of April 24 reflect the closing balances in the 2023/24 Final accounts.

Property, plant & equipment is in line with the start of the year. This is due to the combined impact of annual indexation and a decrease in the carrying value of the assets reflecting monthly depreciation charges.

There has been an increase in the carrying values of Trade and Other receivables and this is predominantly due to an increase in the carrying value of NHS Receivables and Prepayments.

There has been an increase in the carrying values of Trade and Other Payables and this is predominately due to an increase in Other Payables and Deferred income.

The carrying value of Provisions has remained consistent with the previous month.

There is a change in the payment profile of the WRP Debtor of c£18m and this is reflected in both Trade and Other Receivables and Current and Non Current Liabilities.

The forecast balance sheet reflects the UHB's latest non-cash estimates and its anticipated capital funding.

## **MONTHLY CASHFLOW FORECAST (TABLE G)**

The closing cash balance at the end of January, was £3.527m.

The cashflow assumes that the impact of the forecast receipt for the sale of Whitchurch will be neutralised before the year end.

The UHB gained Finance Committee and Board approval to request £15.900m strategic cash support from Welsh Government to cover the Month 8 Financial Forecast. Additional approval was provided by the Board to extend the application to Welsh Government for supplementary strategic cash support to cover the movement in the Forecast deficit from £15.9 to £27.7m.

The UHB relayed a letter to Welsh Government on the 28th of November requesting £15.900m strategic cash support from Welsh Government to cover the cash shortfall arising from the original planned forecast deficit and any further increase to the UHBs forecast deficit.

The UHB notes that the letter from the Director General Health, Social Care & Early Years Group / NHS Wales Chief Executive dated 10th February 2025 confirms that at this stage Welsh Government will provide a maximum of £9.1m strategic cash only support reflecting the revised Cardiff & Vale UHB control total. The letter also requests that all future monthly monitoring returns provide updates on the actual strategic cash assistance required. The forecast strategic cash requirement remains at 27.7m in line with the revised forecast deficit.

Further cash assistance is required in respect of medical negligence settlements, where associated cash support from the Welsh Risk Pool is provided after the initial payment by the UHB.

The UHB notes that If strategic cash assistance or working capital cash needs to be drawn prior to March 2025, that the type of assistance must be detailed on UHB FIS forms and clearly identified as cash only support.

Further retrospective wage award payments in respect of AfC band 8/9 increments, medical locums, medical waiting list and intensity payments placed additional pressure on the UHBs cash in January and are now included on the list of anticipated allocations. In addition, the estimated cost of the pay uplift actioned against bank pay rates in 2024/25 is included.

The UHB urgently requires confirmation and action on the outstanding cash allocations that are included in table E.

The combination of strategic/working cash support and outstanding allocations not confirmed is circa £129m as outlined by table 9 below:

**Table 9: Summary of forecast request to Welsh Government for strategic cash and working cash support.**

|  | Cash Request<br>£m |
|--|--------------------|
| Strategic Cash Support based on month 7 forecast   | 15.900             |
| Additional Strategic Cash Support based on revised forecast deficit of £27.7m                                  | 11.800             |
| Working Cash Support - Non Cash Backed 2023/24 Resource Limit Allocations                                      | 0.151              |
| Working Cash Support - working balances (mainly provisions) based on month 9 forecast                          | 11.390             |
| Working Cash Support - Medical Negligence Settlements where WRP Reimbursement is outstanding                   | 11.000             |
| Working Cash Support - working balances capital based on month 9 forecast                                      | 12.000             |
| <b>Forecast Cash Support Request £m</b>  | <b>62.241</b>      |
| Unconfirmed anticipated allocations as at Month 9 (drawing Limit only i.e excludes depreciation & impairments) |                    |
| Outstanding Pay Award Allocations  | 47.574             |
| Other Outstanding Cash allocations ( drawing limit only)   | 19.310             |
| <b>Total Unconfirmed Cash as at Month 9 £m</b>   | <b>129.125</b>     |

## PUBLIC SECTOR PAYMENT PERFORMANCE (TABLE H)

The UHB's public sector payment compliance performance is above the target of 95%. Performance for the month to the end of January was 97.2 %.

## CAPITAL RESOURCE LIMIT, IN YEAR SCHEMES & DISPOSALS (TABLES I, J, K & Q)

Of the UHB's approved Capital Resource Limit, 29.8% has been expended to date.

Planned expenditure for the year reflects the CRL received from Welsh Government dated 4<sup>th</sup> February 2024 - £52.563m. This reflects the transfer of Whitchurch Hospital to Velindre NHS Trust which completed on the 12<sup>th</sup> of November 2024.

All schemes are expected to deliver in line with the revised allocations.

IFRS16 figures have been updated to reflect the December return.

## AGED WELSH NHS DEBTORS (TABLE M)

On the 31<sup>st</sup> of January 2025 there were no invoices raised by the UHB against other Welsh NHS organisations which were outstanding for more than 17 weeks.

## RING FENCED ALLOCATIONS (TABLE P)

Assumed funding and forecast expenditure in respect of Ring-Fenced Allocations are reported in Table P.

## IFRS 16 (TABLE Q)

Lease costs, Interest, depreciation and dilapidations are reported at table Q.

## OTHER ISSUES

The financial information reported in these monitoring returns aligns to the financial details included within Finance Committee and Board papers. These monitoring returns will be taken to next available meeting of the Finance Committee for information.

## CONCLUSION

The UHB submitted a draft financial plan at the end of March 2024 which included a savings target of £47.2m and aimed to deliver financial stability, a deficit of £15.9m and ensure that the underlying position was reduced.

Welsh Government confirmed an additional in-year recurrent allocation of £6.8m and a revised target control total of £9.1m in November 2024

The Month 10 forecast is based on the revised target control total of £9.1m, plus operational and savings pressures that have emerged in the financial year of £20.7m less £2.1m of recovery actions. This leaves a revised forecast deficit of £27.7m

The UHBs requires timely confirmation of outstanding allocations and strategic and working capital support to enable the UHB to maintain its cash position.

The UHB remains committed to achieving in year and recurrent financial balance as soon as possible and work to minimise the 2024/25 deficit outturn continues.

The reported financial position for the first nine months is an overspend of £27.553m which is £19.970m above the £7.583m straight line profile of the revised control deficit.



.....  
**SUZANNE RANKIN**  
**CHIEF EXECUTIVE**

13<sup>th</sup> February 2025



.....  
**CATHERINE PHILLIPS**  
**EXECUTIVE DIRECTOR OF**  
**FINANCE**

13<sup>th</sup> February 2025

Table A - Movement of Opening Financial Plan to Forecast Outturn

This Table is currently showing 0 errors

Line 14 should reflect the corresponding amounts included within the latest IMTP/AOP submission to WG  
Lines 1 - 14 should not be adjusted after Month 1

|  | In Year Effect<br>£'000 | Non<br>Recurring<br>£'000 | Recurring<br>£'000 | FYE of<br>Recurring<br>£'000 |
|--|-------------------------|---------------------------|--------------------|------------------------------|
| 1 Underlying Position b/fwd from Previous Year - must agree to M12 MMR (Deficit - Negative Value)                              | -60,900                 | 0                         | -60,900            | -60,900                      |
| 2 Cost Pressures (Non Covid-19) (Negative Value)   | -45,400                 | -45,400                   |                    |                              |
| 3 Planned Expenditure For Covid-19 (Negative Value)  | -10,184                 | -10,184                   |                    |                              |
| 4 Allocation Letter Revenue Funding Uplift / (Reduction)/ WG RRL / WG Income Uplift / (Reduction)/ Non-Covid)                  | 37,300                  | 37,300                    |                    |                              |
| 5 Planned Welsh Government Funding for Covid-19 (Positive Value)   | 10,184                  | 10,184                    |                    |                              |
| 6 Other Income Uplift / (Reduction)  | 5,900                   | 5,900                     |                    |                              |
| 7 RRL Profile - phasing only (In Year Effect / Column C must be nil)   | 0                       | 0                         | 0                  | 0                            |
| 8 Planned (Finalised) Green and Amber Savings Plan   | 20,272                  | 8,928                     | 11,344             | 13,549                       |
| 9 Planned (Finalised) Net Income Generation  | 717                     | 492                       | 226                | 236                          |
| 10 Planned Profit / (Loss) on Disposal of Assets   | 0                       | 0                         | 0                  | 0                            |
| 11 Planned Release of Uncommitted Contingencies & Reserves (Positive Value)  | 0                       | 0                         |                    |                              |
| 12   | 0                       | 0                         |                    |                              |
| 13 Red, Pipeline and Planning Assumption Savings still to be finalised at Month 1  | 26,211                  | 0                         | 26,211             | 31,215                       |
| 14 <b>Opening IMTP / Annual Operating Plan</b>   | <b>-15,900</b>          | <b>7,220</b>              | <b>-23,120</b>     | <b>-15,900</b>               |
| 15 Reversal of Red, Pipeline and Planning Assumption Savings still to be finalised at Month 1                                  | -26,211                 | 0                         | -26,211            | -31,215                      |
| 16 Additional In Year & Movement from Planned Release of Previously Committed Contingencies & Reserves (Positive Value)        | 0                       | 0                         |                    |                              |
| 17 Additional In Year & Movement from Planned Profit / (Loss) on Disposal of Assets  | 0                       | 0                         |                    |                              |
| 18 Other Movement in Month 1 Planned & In Year Net Income Generation   | 157                     | 93                        | 65                 | 117                          |
| 19 Other Movement in Month 1 Planned Savings - (Underachievement) / Overachievement  | -1,356                  | -365                      | -991               | -271                         |
| 20 Additional In Year Identified Savings - Forecast  | 15,146                  | 9,831                     | 5,315              | 7,134                        |
| 21 Variance to Planned RRL & Other Income  | 0                       | 0                         |                    |                              |
| 22 Additional In Year & Movement in Planned Welsh Government Funding for Covid-19 plus virements (Positive Value - additional) | 0                       | 0                         |                    |                              |
| 23 Additional In Year & Movement in Planned Welsh Government Funding (Non Covid) (Positive Value - additional)                 | 6,800                   | 6,800                     |                    | 6,800                        |
| 24 Additional In Year & Movement Expenditure for Covid-19 (Negative Value - additional/Positive Value - reduction)             | 0                       | 0                         |                    |                              |
| 25 In Year Accountancy Gains (Positive Value)  | 400                     | 400                       | 0                  | 0                            |
| 26 Net In Year Operational Variance to IMTP/AOP (material gross amounts to be listed separately)                               | 0                       | 0                         |                    |                              |
| 27 Savings Gap   | 664                     | 664                       |                    | -13,700                      |
| 28 Operational Overspend   | -3,213                  | -3,213                    |                    | -2,515                       |
| 29 Savings Gap Recovery - identification of Schemes at pace  | 0                       | 0                         |                    |                              |
| 30 Operational Overspend - Mitigating Actions to reduce expenditure Grip & Control & slippage                                  | 1,476                   | 1,476                     |                    |                              |
| 31 Pay Award Funding Bank Staff  | 1,550                   | 1,550                     |                    |                              |
| 32 Full Year Effect of Operational Pressures, Demand & inflation (other issues)  | 0                       | 0                         |                    |                              |
| 33 80 beds will be open by the end of March £6m  | -6,000                  | -6,000                    |                    | -6,000                       |
| 34 Planned care Initiatives above original plan  | -3,000                  | -3,000                    |                    |                              |
| 35 2024/25 Pay Award Funding applied to Bank Staff (including RLW staff)   | -1,163                  | -1,163                    |                    | -1,550                       |
| 36 2024/25 Pay Award Funding applied to Bank Staff (including RLW staff)   | 0                       | 0                         |                    |                              |
| 37 Mitigating actions to reduce expenditure - Planned Care Recovery  | 550                     | 550                       |                    |                              |
| 38 Mitigating actions to reduce expenditure - Variable Pay Reduction   | 2,400                   | 2,400                     |                    |                              |
| 39   | 0                       | 0                         |                    |                              |
| 40 <b>Forecast Outturn (- Deficit / + Surplus)</b>   | <b>-27,700</b>          | <b>17,242</b>             | <b>-44,942</b>     | <b>-57,100</b>               |
| 41 <b>Covid-19 - Forecast Outturn (- Deficit / + Surplus)</b>  | <b>0</b>                |                           |                    |                              |
| 42 <b>Operational - Forecast Outturn (- Deficit / + Surplus)</b>   | <b>-27,700</b>          |                           |                    |                              |

|    | Apr<br>£'000  | May<br>£'000  | Jun<br>£'000  | Jul<br>£'000  | Aug<br>£'000  | Sep<br>£'000  | Oct<br>£'000  | Nov<br>£'000  | Dec<br>£'000  | Jan<br>£'000  | Feb<br>£'000  | Mar<br>£'000  | YTD<br>£'000   | In Year Effect<br>£'000 |
|----|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|----------------|-------------------------|
| 1  | -5,075        | -5,075        | -5,075        | -5,075        | -5,075        | -5,075        | -5,075        | -5,075        | -5,075        | -5,075        | -5,075        | -5,075        | -50,750        | -60,900                 |
| 2  | -3,783        | -3,783        | -3,783        | -3,783        | -3,783        | -3,783        | -3,783        | -3,783        | -3,783        | -3,783        | -3,783        | -3,783        | -37,833        | -45,400                 |
| 3  | -822          | -822          | -848          | -837          | -837          | -837          | -837          | -882          | -882          | -882          | -849          | -850          | -8,486         | -10,184                 |
| 4  | 3,108         | 3,108         | 3,108         | 3,108         | 3,108         | 3,108         | 3,108         | 3,108         | 3,108         | 3,108         | 3,108         | 3,108         | 31,083         | 37,300                  |
| 5  | 822           | 822           | 848           | 837           | 837           | 837           | 837           | 882           | 882           | 882           | 849           | 850           | 8,485          | 10,184                  |
| 6  | 492           | 492           | 492           | 492           | 492           | 492           | 492           | 492           | 492           | 492           | 492           | 492           | 4,917          | 5,900                   |
| 7  | 821           | 336           | -125          | 194           | -398          | -126          | -185          | -49           | -51           | -50           | -75           | -291          | 366            | 0                       |
| 8  | 890           | 1,348         | 1,805         | 1,485         | 2,076         | 1,805         | 1,730         | 1,773         | 1,775         | 1,774         | 1,799         | 2,014         | 16,459         | 20,272                  |
| 9  | 38            | 65            | 71            | 71            | 71            | 71            | 204           | 25            | 25            | 25            | 25            | 25            | 666            | 717                     |
| 10 |               |               |               |               |               |               |               |               |               |               |               |               | 0              | 0                       |
| 11 |               |               |               |               |               |               |               |               |               |               |               |               | 0              | 0                       |
| 12 |               |               |               |               |               |               |               |               |               |               |               |               | 0              | 0                       |
| 13 | 2,184         | 2,184         | 2,184         | 2,184         | 2,184         | 2,184         | 2,184         | 2,184         | 2,184         | 2,184         | 2,184         | 2,184         | 21,842         | 26,211                  |
| 14 | <b>-1,326</b> | <b>-1,325</b> | <b>-1,324</b> | <b>-1,325</b> | <b>-1,325</b> | <b>-1,325</b> | <b>-1,325</b> | <b>-1,325</b> | <b>-1,325</b> | <b>-1,325</b> | <b>-1,325</b> | <b>-1,325</b> | <b>-13,250</b> | <b>-15,900</b>          |
| 15 | -2,184        | -2,184        | -2,184        | -2,184        | -2,184        | -2,184        | -2,184        | -2,184        | -2,184        | -2,184        | -2,184        | -2,184        | -21,842        | -26,211                 |
| 16 |               |               |               |               |               |               |               |               |               |               |               |               | 0              | 0                       |
| 17 |               |               |               |               |               |               |               |               |               |               |               |               | 0              | 0                       |
| 18 | 0             | -57           | 200           | 8             | 3             | 7             | -135          | 70            | 18            | 7             | 19            | 19            | 120            | 157                     |
| 19 | 52            | -389          | 72            | 375           | -471          | -220          | -152          | -166          | -200          | -88           | -66           | -104          | -1,186         | -1,356                  |
| 20 | 0             | 0             | 1,771         | 1,888         | 719           | 1,329         | 1,713         | 1,084         | 1,359         | 1,652         | 1,532         | 2,099         | 11,515         | 15,146                  |
| 21 |               |               |               |               |               |               |               |               |               |               |               |               | 0              | 0                       |
| 22 | 0             | 0             | 0             | 0             | 0             | 0             | 0             | 0             | 0             | 0             | 0             | 0             | 0              | 0                       |
| 23 |               |               |               |               |               |               |               | 4,533         | 567           | 567           | 567           | 567           | 5,667          | 6,800                   |
| 24 | 0             | 0             | 0             | 0             | 0             | 0             | 0             | 0             | 0             | 0             | 0             | 0             | 0              | 0                       |
| 25 | 0             | 0             | 0             | 0             | 100           | 0             | 300           | 0             | 0             | 0             | 0             | 0             | 400            | 400                     |
| 26 |               |               |               |               |               |               |               |               |               |               |               |               | 0              | 0                       |
| 27 | -90           | 239           | -397          | -428          | 1,005         | 21            | 156           | 421           | -96           | -246          | 39            | 40            | 585            | 664                     |
| 28 | -719          | -838          | -881          | -932          | -860          | 137           | -1,205        | -3,158        | 5,243         |               |               |               | -3,213         | -3,213                  |
| 29 |               |               |               |               |               |               |               |               |               |               |               |               | 0              | 0                       |
| 30 |               |               |               |               |               |               |               |               |               | 74            | 966           | 436           | 74             | 1,476                   |
| 31 |               |               |               |               |               |               |               |               |               | 1,292         | 129           | 129           | 1,292          | 1,550                   |
| 32 |               |               |               |               |               |               |               |               |               |               |               |               | 0              | 0                       |
| 33 |               |               |               |               |               |               |               |               | -4,500        | -500          | -500          | -500          | -5,000         | -6,000                  |
| 34 |               |               |               |               |               |               |               |               | -2,250        | -250          | -250          | -250          | -2,500         | -3,000                  |
| 35 |               |               |               |               |               |               |               |               | -1,163        |               |               |               | -1,163         | -1,550                  |
| 36 |               |               |               |               |               |               |               |               |               |               |               |               | 0              | 0                       |
| 37 |               |               |               |               |               |               |               |               |               | 150           | 200           | 200           | 150            | 550                     |
| 38 |               |               |               |               |               |               |               |               |               | 800           | 800           | 800           | 800            | 2,400                   |
| 39 |               |               |               |               |               |               |               |               |               |               |               |               | 0              | 0                       |
| 40 | <b>-4,267</b> | <b>-4,554</b> | <b>-2,743</b> | <b>-2,599</b> | <b>-3,014</b> | <b>-2,235</b> | <b>-2,832</b> | <b>-725</b>   | <b>-4,532</b> | <b>-51</b>    | <b>-74</b>    | <b>-74</b>    | <b>-27,552</b> | <b>-27,700</b>          |
| 41 | <b>0</b>      | <b>0</b>      | <b>0</b>      | <b>0</b>      | <b>0</b>      | <b>0</b>      | <b>0</b>      | <b>0</b>      | <b>0</b>      | <b>0</b>      | <b>0</b>      | <b>0</b>      | <b>0</b>       | <b>0</b>                |
| 42 | <b>-4,267</b> | <b>-4,554</b> | <b>-2,743</b> | <b>-2,599</b> | <b>-3,013</b> | <b>-2,235</b> | <b>-2,832</b> | <b>-725</b>   | <b>-4,532</b> | <b>-51</b>    | <b>-74</b>    | <b>-74</b>    | <b>-27,552</b> | <b>-27,700</b>          |

Table C - Identified Expenditure Savings Schemes (Excludes Income Generation & Accountancy Gains)

This Table is currently showing 0 errors

|    |  | 1     | 2        | 3       | 4       | 5      | 6      | 7      | 8      | 9      | 10     | 11     | 12     | Total YTD | Full-year forecast | YTD as %age of FY<br>YTD variance as %age of YTD | Assessment |       | Full In-Year forecast |           | Full-Year Effect of Recurring Savings<br>£'000 |  |
|----|--|-------|----------|---------|---------|--------|--------|--------|--------|--------|--------|--------|--------|-----------|--------------------|--|------------|-------|-----------------------|-----------|--|--|
|    |  | Apr   | May      | Jun     | Jul     | Aug    | Sep    | Oct    | Nov    | Dec    | Jan    | Feb    | Mar    |           |                    |  | Green      | Amber | non recurring         | recurring |  |  |
|    |  | £'000 | £'000    | £'000   | £'000   | £'000  | £'000  | £'000  | £'000  | £'000  | £'000  | £'000  | £'000  |           |                    |  | £'000      | £'000 | £'000                 | £'000     |  |  |
| 1  | Budget/Plan  | 466   | 585      | 582     | 652     | 823    | 777    | 773    | 815    | 789    | 788    | 813    | 813    | 7,052     | 8,678              |  | 0          | 65    |                       |           |  |  |
| 2  | Pay  | 497   | 399      | 911     | 913     | 996    | 1,003  | 1,106  | 1,157  | 924    | 1,104  | 1,138  | 1,355  | 9,012     | 11,506             | 78.33%   | 11,441     | 65    | 5,832                 | 5,673     | 6,976  |  |
| 3  | Variance   | 30    | (186)    | 329     | 261     | 173    | 226    | 336    | 341    | 135    | 316    | 325    | 542    | 1,960     | 2,827              | 27.80%   | 11,441     | 0     |                       |           |  |  |
| 4  | Budget/Plan  | 259   | 479      | 810     | 508     | 727    | 594    | 601    | 601    | 629    | 629    | 629    | 845    | 5,837     | 7,311              |  | 7,040      | 271   |                       |           |  |  |
| 5  | Non-Pay  | 287   | 259      | 2,184   | 1,483   | 934    | 1,314  | 1,307  | 1,032  | 1,285  | 1,532  | 1,424  | 1,969  | 11,617    | 15,010             | 77.40%   | 14,021     | 989   | 11,377                | 3,633     | 5,049  |  |
| 6  | Variance   | 28    | (219)    | 1,374   | 975     | 207    | 720    | 706    | 431    | 656    | 903    | 795    | 1,124  | 5,780     | 7,699              | 99.02%   | 6,981      | 718   |                       |           |  |  |
| 7  | Budget/Plan  | 105   | 106      | 106     | 106     | 106    | 106    | 106    | 106    | 106    | 106    | 106    | 106    | 1,056     | 1,268              |  | 1,268      | 0     |                       |           |  |  |
| 8  | Primary Care - Drugs & Appliances                      | 105   | 170      | 174     | 197     | 107    | 155    | 337    | 129    | 233    | 233    | 233    | 233    | 1,838     | 2,304              | 79.80%   | 2,304      | 0     | 0                     | 2,304     | 2,922  |  |
| 9  | Variance   | (0)   | 64       | 69      | 91      | 1      | 49     | 231    | 23     | 127    | 127    | 127    | 127    | 782       | 1,036              | 74.05%   | 1,036      | 0     |                       |           |  |  |
| 10 | Budget/Plan  | 14    | 133      | 260     | 171     | 161    | 238    | 161    | 161    | 161    | 161    | 161    | 161    | 1,618     | 1,940              |  | 1,940      | 0     |                       |           |  |  |
| 11 | Secondary Care Drugs                                   | 8     | 85       | 326     | 146     | 133    | 215    | 186    | 120    | 198    | 176    | 177    | 159    | 1,594     | 1,930              | 82.59%   | 1,930      | 0     | 132                   | 1,798     | 3,207  |  |
| 12 | Variance   | (6)   | (48)     | 66      | (25)    | (28)   | (23)   | 25     | (40)   | 37     | 15     | 16     | (1)    | (25)      | (10)               | (1.52%)  | -10        | 0     |                       |           |  |  |
| 13 | Budget/Plan  | 45    | 45       | 48      | 48      | 260    | 90     | 90     | 90     | 90     | 90     | 90     | 90     | 895       | 1,075              |  | 1,075      | 0     |                       |           |  |  |
| 14 | CHC/FNC  | 45    | 45       | 52      | 989     | 155    | 226    | 353    | 227    | 267    | 267    | 267    | 267    | 2,627     | 3,162              | 83.09%   | 3,162      | 0     | 903                   | 2,259     | 2,259  |  |
| 15 | Variance   | 0     | 0        | 5       | 942     | (105)  | 136    | 263    | 137    | 177    | 177    | 177    | 177    | 1,732     | 2,087              | 193.57%  | 2,087      | 0     |                       |           |  |  |
| 16 | Budget/Plan  | 0     | 0        | 0       | 0       | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0         | 0                  |  | 0          | 0     |                       |           |  |  |
| 17 | Primary Care Contractor                                | 0     | 0        | 0       | 0       | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0         | 0                  |  | 0          | 0     | 0                     | 0         | 0  |  |
| 18 | Variance   | 0     | 0        | 0       | 0       | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0         | 0                  |  | 0          | 0     |                       |           |  |  |
| 19 | Budget/Plan  | 0     | 0        | 0       | 0       | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0         | 0                  |  | 0          | 0     |                       |           |  |  |
| 20 | Healthcare Services Provided by Other Healthboards     | 0     | 0        | 0       | 0       | 0      | 0      | 0      | 26     | 26     | 26     | 26     | 26     | 78        | 130                | 60.00%   | 130        | 0     | 130                   | 0         | 0  |  |
| 21 | Variance   | 0     | 0        | 0       | 0       | 0      | 0      | 0      | 26     | 26     | 26     | 26     | 26     | 78        | 130                |  | 130        | 0     |                       |           |  |  |
| 22 | Budget/Plan  | 0     | 0        | 0       | 0       | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0         | 0                  |  | 0          | 0     |                       |           |  |  |
| 23 | Non-healthcare Services Provided by Other Healthboards | 0     | 0        | 0       | 20      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 21        | 21                 | 99.25%   | 21         | 0     | 21                    | 0         | 0  |  |
| 24 | Variance   | 0     | 0        | 0       | 20      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 21        | 21                 |  | 21         | 0     |                       |           |  |  |
| 25 | Budget/Plan  | 0     | 0        | 0       | 0       | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0         | 0                  |  | 0          | 0     |                       |           |  |  |
| 26 | Other Private & Voluntary Sector                       | 0     | 0        | 0       | 0       | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0         | 0                  |  | 0          | 0     | 0                     | 0         | 0  |  |
| 27 | Variance   | 0     | 0        | 0       | 0       | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0         | 0                  |  | 0          | 0     |                       |           |  |  |
| 28 | Budget/Plan  | 0     | 0        | 0       | 0       | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0         | 0                  |  | 0          | 0     |                       |           |  |  |
| 29 | Joint Financing & Other                                | 0     | 0        | 0       | 0       | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0         | 0                  |  | 0          | 0     | 0                     | 0         | 0  |  |
| 30 | Variance   | 0     | 0        | 0       | 0       | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0      | 0         | 0                  |  | 0          | 0     |                       |           |  |  |
| 34 | Budget/Plan  | 890   | 1,348    | 1,805   | 1,485   | 2,076  | 1,805  | 1,730  | 1,773  | 1,775  | 1,774  | 1,799  | 2,014  | 16,459    | 20,272             |  | 11,322     | 0     |                       |           |  |  |
| 35 | Total  | 942   | 959      | 3,648   | 3,748   | 2,324  | 2,914  | 3,291  | 2,691  | 2,933  | 3,339  | 3,265  | 4,009  | 26,787    | 34,062             | 60.00%   | 33,008     | 1,054 | 18,395                | 15,667    | 20,412   |  |
| 36 | Variance   | 52    | (389)    | 1,843   | 2,264   | 248    | 1,109  | 1,561  | 918    | 1,158  | 1,565  | 1,466  | 1,995  | 10,329    | 13,790             |  | 21,686     | 1,054 |                       |           |  |  |
| 37 | Variance in month                                      | 5.89% | (28.85%) | 102.13% | 152.46% | 11.94% | 61.46% | 90.23% | 51.79% | 65.26% | 88.22% | 81.50% | 99.04% | 62.76%    |                    |  |            |       |                       |           |  |  |
| 38 | In month achievement against FY forecast               | 2.77% | 2.82%    | 10.71%  | 11.00%  | 6.82%  | 8.55%  | 9.66%  | 7.90%  | 8.61%  | 9.80%  | 9.59%  | 11.77% |           |                    |  |            |       |                       |           |  |  |

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Table C1- Savings Schemes Pay Analysis

|    | Month                       | 1     | 2     | 3     | 4     | 5     | 6     | 7     | 8     | 9     | 10    | 11    | 12    | Total YTD | Full-year forecast | Assessment  |       | Full In-Year forecast |           | Full-Year Effect of Recurring Savings |
|----|-----------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-----------|--------------------|-------------|-------|-----------------------|-----------|---------------------------------------|
|    |                             | Apr   | May   | Jun   | Jul   | Aug   | Sep   | Oct   | Nov   | Dec   | Jan   | Feb   | Mar   |           |                    | Green       | Amber | non recurring         | recurring |                                       |
|    |                             | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 |           |                    | £'000       | £'000 | £'000                 | £'000     |                                       |
| 1  | Budget/Plan                 | 167   | 230   | 227   | 233   | 404   | 404   | 399   | 442   | 416   | 415   | 440   | 440   | 3,337     | 4,216              |             |       |                       |           |                                       |
| 2  | Pay - General & Substantive | 167   | 211   | 498   | 316   | 405   | 524   | 633   | 550   | 554   | 562   | 622   | 854   | 4,420     | 5,897              | 5,832       | 65    | 1,712                 | 4,184     | 5,418                                 |
| 3  | Variance                    | 0     | (19)  | 271   | 83    | 1     | 121   | 234   | 108   | 138   | 147   | 183   | 414   | 1,084     | 1,680              | 5831.580922 | 0     |                       |           |                                       |
| 4  | Budget/Plan                 | 299   | 355   | 355   | 419   | 419   | 373   | 373   | 373   | 373   | 373   | 373   | 373   | 3,715     | 4,462              |             |       |                       |           |                                       |
| 5  | Pay - Variable              | 330   | 188   | 413   | 592   | 585   | 473   | 469   | 600   | 364   | 542   | 516   | 501   | 4,556     | 5,573              | 5,573       | 0     | 4,084                 | 1,489     | 1,558                                 |
| 6  | Variance                    | 30    | (167) | 58    | 172   | 165   | 99    | 95    | 227   | (10)  | 169   | 142   | 128   | 840       | 1,110              | 5,573       | 0     |                       |           |                                       |
| 7  | Budget/Plan                 | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0         | 0                  | 0           | 0     | 0                     | 0         | 0                                     |
| 8  | Pay - Agency                | 0     | 0     | 0     | 6     | 6     | 6     | 6     | 6     | 6     | 6     | 6     | 6     | 0         | 36                 | 36          | 36    | 0                     | 36        | 0                                     |
| 9  | Variance                    | 0     | 0     | 0     | 6     | 6     | 6     | 6     | 6     | 6     | 6     | 6     | 6     | 0         | 36                 | 36          | 36    | 0                     | 36        | 0                                     |
| 10 | Budget/Plan                 | 466   | 585   | 582   | 652   | 823   | 777   | 773   | 815   | 789   | 788   | 813   | 813   | 7,052     | 8,678              |             |       |                       |           |                                       |
| 11 | Total                       | 497   | 399   | 911   | 913   | 996   | 1,003 | 1,108 | 1,157 | 924   | 1,104 | 1,138 | 1,355 | 9,012     | 11,506             | 11,441      | 65    | 5,832                 | 5,673     | 6,976                                 |
| 12 | Variance                    | 30    | (186) | 329   | 261   | 173   | 226   | 336   | 341   | 135   | 316   | 325   | 542   | 1,960     | 2,827              | 11,441      | 0     |                       |           |                                       |

Table C2- V&S Saving Categories

|    | Month                 | 1     | 2     | 3     | 4     | 5     | 6     | 7     | 8     | 9     | 10    | 11    | 12    | Total YTD | Full-year forecast |
|----|-----------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-----------|--------------------|
|    |                       | Apr   | May   | Jun   | Jul   | Aug   | Sep   | Oct   | Nov   | Dec   | Jan   | Feb   | Mar   |           |                    |
|    |                       | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 | £'000 |           |                    |
| 1  | Budget/Plan           | 466   | 585   | 582   | 652   | 823   | 777   | 773   | 815   | 789   | 788   | 813   | 813   | 7,052     | 8,678              |
| 2  | Workforce             | 497   | 399   | 911   | 913   | 996   | 1,003 | 1,108 | 1,157 | 924   | 1,104 | 1,138 | 1,355 | 9,012     | 11,506             |
| 3  | Variance              | 30    | (186) | 329   | 261   | 173   | 226   | 336   | 341   | 135   | 316   | 325   | 542   | 1,960     | 2,827              |
| 4  | Budget/Plan           | 119   | 239   | 365   | 276   | 266   | 343   | 266   | 266   | 266   | 266   | 266   | 266   | 2,675     | 3,207              |
| 5  | Medicines Management  | 113   | 255   | 500   | 342   | 240   | 370   | 480   | 292   | 431   | 409   | 410   | 392   | 3,432     | 4,234              |
| 6  | Variance              | (6)   | 16    | 135   | 66    | (27)  | 27    | 214   | 25    | 165   | 143   | 143   | 126   | 758       | 1,026              |
| 7  | Budget/Plan           | 259   | 479   | 810   | 508   | 727   | 594   | 601   | 601   | 629   | 629   | 629   | 845   | 5,837     | 7,311              |
| 8  | Procurement & Non-pay | 287   | 259   | 2,184 | 1,503 | 934   | 1,314 | 1,307 | 1,032 | 1,285 | 1,532 | 1,424 | 1,969 | 11,638    | 15,030             |
| 9  | Variance              | 28    | (219) | 1,374 | 995   | 207   | 720   | 706   | 431   | 656   | 903   | 795   | 1,124 | 5,801     | 7,719              |
| 10 | Budget/Plan           | 45    | 45    | 48    | 48    | 260   | 90    | 90    | 90    | 90    | 90    | 90    | 90    | 895       | 1,075              |
| 11 | CHC                   | 45    | 45    | 52    | 989   | 155   | 226   | 353   | 227   | 267   | 267   | 267   | 267   | 2,627     | 3,162              |
| 12 | Variance              | 0     | 0     | 5     | 942   | (105) | 136   | 263   | 137   | 177   | 177   | 177   | 177   | 1,732     | 2,087              |
| 13 | Budget/Plan           | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0         | 0                  |
| 14 | Pathway               | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 26    | 26    | 26    | 26    | 26    | 78        | 130                |
| 15 | Variance              | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 26    | 26    | 26    | 26    | 26    | 78        | 130                |
| 16 | Budget/Plan           | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0         | 0                  |
| 17 | Other - Commissioning | 0     | 0     | 0     | 0     | 0     | 0     | 43    | (43)  | 0     | 0     | 0     | 0     | 0         | 0                  |
| 18 | Variance              | 0     | 0     | 0     | 0     | 0     | 0     | 43    | (43)  | 0     | 0     | 0     | 0     | 0         | 0                  |
| 19 | Budget/Plan           | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0         | 0                  |
| 20 | Other - Primary Care  | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0         | 0                  |
| 21 | Variance              | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0         | 0                  |
| 22 | Budget/Plan           | 890   | 1,348 | 1,805 | 1,485 | 2,076 | 1,805 | 1,730 | 1,773 | 1,775 | 1,774 | 1,799 | 2,014 | 16,459    | 20,272             |
| 23 | Total                 | 942   | 959   | 3,648 | 3,748 | 2,324 | 2,914 | 3,291 | 2,691 | 2,933 | 3,339 | 3,265 | 4,009 | 26,787    | 34,062             |
| 24 | Variance              | 52    | (389) | 1,843 | 2,264 | 248   | 1,109 | 1,561 | 918   | 1,158 | 1,565 | 1,466 | 1,995 | 10,329    | 13,790             |

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Table C3 - Tracker

|   | £'000                     | Apr   | May   | Jun   | Jul   | Aug   | Sep   | Oct   | Nov   | Dec   | Jan   | Feb   | Mar     | Total YTD | Full-year forecast | Non Recurring | Recurring | FYE Adjustment | Full-year Effect |
|---|---------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|---------|-----------|--------------------|---------------|-----------|----------------|------------------|
| Savings (Cash Releasing & Cost Avoidance) | Month 1 - Plan            | 890   | 1,348 | 1,805 | 1,485 | 2,076 | 1,805 | 1,730 | 1,773 | 1,775 | 1,774 | 1,799 | 2,014   | 16,459    | 20,272             | 8,928         | 11,344    | 2,205          | 13,549           |
|   | Month 1 - Actual/Forecast | 942   | 959   | 1,876 | 1,860 | 1,605 | 1,584 | 1,578 | 1,607 | 1,575 | 1,686 | 1,733 | 1,910   | 15,272    | 18,916             | 8,564         | 10,352    | 2,926          | 13,278           |
|   | Variance                  | 52    | (389) | 72    | 375   | (471) | (220) | (152) | (166) | (200) | (88)  | (66)  | (104)   | (1,186)   | (1,356)            | (365)         | (991)     | 720            | (271)            |
|   | In Year - Plan            | 0     | 0     | 1,776 | 1,942 | 843   | 1,372 | 1,319 | 1,247 | 1,371 | 1,591 | 1,425 | 1,741   | 11,461    | 14,627             | 8,973         | 5,654     | 1,480          | 7,134            |
|   | In Year - Actual/Forecast | 0     | 0     | 1,771 | 1,888 | 719   | 1,329 | 1,713 | 1,084 | 1,359 | 1,652 | 1,532 | 2,099   | 11,515    | 15,146             | 9,831         | 5,315     | 1,819          | 7,134            |
|   | Variance                  | 0     | 0     | (5)   | (54)  | (124) | (43)  | 393   | (163) | (12)  | 62    | 107   | 358     | 54        | 519                | 858           | (339)     | 339            | 0                |
|   | Total Plan                | 890   | 1,348 | 3,581 | 3,426 | 2,919 | 3,177 | 3,049 | 3,020 | 3,146 | 3,364 | 3,224 | 3,755   | 27,920    | 34,899             | 17,902        | 16,997    | 3,686          | 20,683           |
| Total Actual/Forecast                     | 942                       | 959   | 3,648 | 3,748 | 2,324 | 2,914 | 3,291 | 2,691 | 2,933 | 3,339 | 3,265 | 4,009 | 26,787  | 34,062    | 18,395             | 15,667        | 4,745     | 20,412         |                  |
| Total Variance                            | 52                        | (389) | 67    | 322   | (595) | (263) | 241   | (329) | (213) | (26)  | 41    | 254   | (1,133) | (837)     | 493                | (1,330)       | 1,060     | (271)          |                  |
| Net Income Generation                     | Month 1 - Plan            | 38    | 65    | 71    | 71    | 71    | 71    | 204   | 25    | 25    | 25    | 25    | 25      | 666       | 717                | 492           | 226       | 10             | 236              |
|   | Month 1 - Actual/Forecast | 38    | 8     | 271   | 66    | 66    | 66    | 41    | 15    | 15    | 15    | 27    | 27      | 601       | 655                | 482           | 174       | 62             | 236              |
|   | Variance                  | 0     | (57)  | 200   | (5)   | (5)   | (5)   | (163) | (10)  | (10)  | (10)  | 2     | 2       | (65)      | (62)               | (10)          | (52)      | 52             | 0                |
|   | In Year - Plan            | 0     | 0     | 0     | 29    | 7     | 12    | 30    | 82    | 30    | 13    | 13    | 13      | 203       | 229                | 103           | 127       | (10)           | 117              |
|   | In Year - Actual/Forecast | 0     | 0     | 0     | 12    | 7     | 12    | 28    | 81    | 28    | 17    | 17    | 17      | 185       | 219                | 103           | 117       | 0              | 117              |
|   | Variance                  | 0     | 0     | 0     | (17)  | 0     | 0     | (2)   | (2)   | (2)   | 4     | 4     | 4       | (18)      | (10)               | 0             | (10)      | 10             | 0                |
|   | Total Plan                | 38    | 65    | 71    | 100   | 78    | 82    | 234   | 108   | 55    | 39    | 39    | 39      | 869       | 947                | 594           | 353       | 0              | 353              |
| Total Actual/Forecast                     | 38                        | 8     | 271   | 78    | 73    | 78    | 69    | 96    | 43    | 32    | 44    | 44    | 786     | 875       | 584                | 291           | 62        | 353            |                  |
| Total Variance                            | 0                         | (57)  | 200   | (21)  | (5)   | (5)   | (165) | (12)  | (12)  | (7)   | 6     | 6     | (83)    | (72)      | (10)               | (62)          | 62        | 0              |                  |
| Accountancy Gains                         | In Year - Plan            | 0     | 0     | 0     | 0     | 100   | 0     | 300   | 0     | 0     | 0     | 0     | 0       | 400       | 400                | 400           | 0         | 0              | 0                |
|   | In Year - Actual/Forecast | 0     | 0     | 0     | 0     | 100   | 0     | 300   | 0     | 0     | 0     | 0     | 0       | 400       | 400                | 400           | 0         | 0              | 0                |
|   | Variance                  | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0       | 0         | 0                  | 0             | 0         | 0              | 0                |
| Total                                     | Month 1 - Plan            | 928   | 1,413 | 1,875 | 1,555 | 2,147 | 1,875 | 1,934 | 1,798 | 1,800 | 1,799 | 1,824 | 2,040   | 17,125    | 20,989             | 9,420         | 11,569    | 2,216          | 13,785           |
|   | Month 1 - Actual/Forecast | 980   | 967   | 2,147 | 1,926 | 1,671 | 1,650 | 1,619 | 1,622 | 1,590 | 1,701 | 1,760 | 1,937   | 15,873    | 19,571             | 9,045         | 10,526    | 2,988          | 13,514           |
|   | Variance                  | 52    | (446) | 271   | 371   | (475) | (225) | (315) | (176) | (211) | (98)  | (64)  | (102)   | (1,252)   | (1,418)            | (375)         | (1,043)   | 772            | (271)            |
|   | In Year - Plan            | 0     | 0     | 1,776 | 1,971 | 950   | 1,384 | 1,649 | 1,330 | 1,401 | 1,604 | 1,438 | 1,754   | 12,064    | 15,256             | 9,476         | 5,780     | 1,470          | 7,251            |
|   | In Year - Actual/Forecast | 0     | 0     | 1,771 | 1,900 | 826   | 1,341 | 2,041 | 1,165 | 1,387 | 1,669 | 1,549 | 2,116   | 12,100    | 15,765             | 10,334        | 5,432     | 1,819          | 7,251            |
|   | Variance                  | 0     | 0     | (5)   | (70)  | (124) | (43)  | 391   | (165) | (14)  | 66    | 111   | 362     | 36        | 509                | 858           | (349)     | 349            | 0                |
|   | Total Plan                | 928   | 1,413 | 3,652 | 3,526 | 3,097 | 3,259 | 3,583 | 3,128 | 3,201 | 3,403 | 3,262 | 3,794   | 29,189    | 36,245             | 18,896        | 17,350    | 3,686          | 21,036           |
| Total Actual/Forecast                     | 980                       | 967   | 3,918 | 3,827 | 2,497 | 2,991 | 3,660 | 2,787 | 2,976 | 3,371 | 3,309 | 4,054 | 27,974  | 35,337    | 19,379             | 15,958        | 4,807     | 20,765         |                  |
| Total Variance                            | 52                        | (446) | 266   | 300   | (600) | (268) | 77    | (342) | (225) | (32)  | 47    | 260   | (1,216) | (909)     | 483                | (1,392)       | 1,122     | (271)          |                  |

| Summary of Forecast Month 1 & In Year (£000's) - Green & Amber | Cash-Releasing Saving (Pay) | Cash-Releasing Saving (Non Pay) | Cost Avoidance | Savings Total | Income Generation | Accountancy Gains |
|--|-----------------------------|---------------------------------|----------------|---------------|-------------------|-------------------|
| <b>All Service Areas</b>                                       | 10,167                      | 17,800                          | 377            | <b>28,343</b> | 825               | 400               |
| Scheduled Care   | 0                           | 989                             | 0              | <b>989</b>    | 0                 | 0                 |
| Unscheduled Care   | 0                           | 883                             | 0              | <b>883</b>    | 0                 | 0                 |
| Mental Health  | 0                           | 0                               | 0              | <b>0</b>      | 0                 | 0                 |
| Community Services   | 0                           | 0                               | 0              | <b>0</b>      | 0                 | 0                 |
| Primary Care   | 1,171                       | 2,356                           | 0              | <b>3,527</b>  | 0                 | 0                 |
| Commissioned Services - CHC                                    | 0                           | 0                               | 0              | <b>0</b>      | 0                 | 0                 |
| Commissioned Services - Specialised Services                   | 0                           | 152                             | 0              | <b>152</b>    | 0                 | 0                 |
| Other Commissioned Services                                    | 0                           | 0                               | 0              | <b>0</b>      | 0                 | 0                 |
| Clinical Support   | 0                           | 0                               | 0              | <b>0</b>      | 0                 | 0                 |
| Non Clinical Support   | 0                           | 0                               | 0              | <b>0</b>      | 0                 | 0                 |
| Executive / Corporate Areas                                    | 168                         | 0                               | 0              | <b>168</b>    | 50                | 0                 |
| <b>Total</b>   | <b>11,506</b>               | <b>22,179</b>                   | <b>377</b>     | <b>34,062</b> | <b>875</b>        | <b>400</b>        |

# Cardiff & Vale ULHB

Period : Jan 25

This Table is currently showing 0 errors

This table needs completing monthly from Month: 2

Table G - Monthly Cashflow Forecast

|                 | April<br>£'000   | May<br>£'000   | June<br>£'000  | July<br>£'000  | Aug<br>£'000   | Sept<br>£'000  | Oct<br>£'000   | Nov<br>£'000   | Dec<br>£'000   | Jan<br>£'000   | Feb<br>£'000   | Mar<br>£,000   | Total<br>£,000 |                  |
|-----------------|--|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|------------------|
| <b>RECEIPTS</b> |  |                |                |                |                |                |                |                |                |                |                |                |                |                  |
| 1               | WG Revenue Funding - Cash Limit (excluding NCL) - LHB & SHA only | 132,945        | 118,770        | 92,640         | 117,835        | 126,005        | 106,110        | 110,275        | 141,950        | 139,780        | 114,165        | 101,505        | 89884.502      | 1,391,865        |
| 2               | WG Revenue Funding - Non Cash Limited (NCL) - LHB & SHA only     | 1,180          | 1,180          | 420            | 995            | 2,005          | 1,430          | 1,120          | 1,895          | 555            | 725            | 2,060          | 0              | 13,565           |
| 3               | WG Revenue Funding - Other (e.g. invoices)                       | 3,185          | 1,319          | 1,307          | 1,371          | 1,369          | 3,080          | 1,333          | 3,473          | 1,326          | 1,304          | 1,298          | 1,298          | 21,663           |
| 4               | WG Capital Funding - Cash Limit - LHB & SHA only                 | 10,000         | 4,000          | 2,000          | 2,080          | 2,000          | 1,000          | 3,000          | 1,500          | (3,800)        | 5,000          | 8,000          | 32,502         | 67,282           |
| 5               | Income from other Welsh NHS Organisations                        | 40,964         | 47,167         | 44,602         | 44,107         | 40,652         | 40,817         | 53,103         | 41,780         | 48,350         | 46,160         | 57,877         | 48,350         | 553,928          |
| 6               | Short Term Loans - Trust only                                    |                |                |                |                |                |                |                |                |                |                |                |                | 0                |
| 7               | PDC - Trust only   |                |                |                |                |                |                |                |                |                |                |                |                | 0                |
| 8               | Interest Receivable - Trust only                                 |                |                |                |                |                |                |                |                |                |                |                |                | 0                |
| 9               | Sale of Assets   |                |                |                |                | 0              | 0              | 0              | 7,800          | 0              | 0              | 0              | 0              | 7,800            |
| 10              | Other - (Specify in narrative)                                   | 4,368          | 12,334         | 6,857          | 6,463          | 9,417          | 5,952          | 10,390         | 17,702         | 5,876          | 12,689         | 12,011         | 9,434          | 113,492          |
| 11              | <b>TOTAL RECEIPTS</b>  | <b>192,642</b> | <b>184,770</b> | <b>147,825</b> | <b>172,850</b> | <b>181,447</b> | <b>158,389</b> | <b>179,221</b> | <b>216,099</b> | <b>192,087</b> | <b>180,043</b> | <b>182,751</b> | <b>181,469</b> | <b>2,169,594</b> |
| <b>PAYMENTS</b> |  |                |                |                |                |                |                |                |                |                |                |                |                |                  |
| 12              | Primary Care Services : General Medical Services                 | 6,787          | 6,329          | 7,770          | 6,161          | 6,282          | 6,539          | 6,196          | 6,683          | 6,315          | 6,303          | 6,379          | 7,020          | 78,764           |
| 13              | Primary Care Services : Pharmacy Services                        | 215            | 140            | 125            | 124            | 122            | 118            | 133            | 123            | 141            | 930            | 413            | 520            | 3,104            |
| 14              | Primary Care Services : Prescribed Drugs & Appliances            | 8,718          | 18,833         | 0              | 9,099          | 19,250         | 0              | 9,593          | 19,854         | 9,795          | 9,955          | 9,515          | 0              | 114,612          |
| 15              | Primary Care Services : General Dental Services                  | 2,354          | 2,429          | 2,380          | 2,368          | 2,444          | 2,373          | 2,395          | 2,201          | 2,247          | 2,290          | 2,370          | 2,350          | 28,203           |
| 16              | Non Cash Limited Payments  | 2,112          | 2,077          | 2,270          | 2,136          | 2,007          | 2,097          | 2,159          | 2,189          | 2,318          | 1,989          | 2,340          | 2,155          | 25,850           |
| 17              | Salaries and Wages   | 70,344         | 70,347         | 70,084         | 70,092         | 68,975         | 72,076         | 73,656         | 84,007         | 88,242         | 76,510         | 77,031         | 75,824         | 897,188          |
| 18              | Non Pay Expenditure  | 80,837         | 87,303         | 68,961         | 80,183         | 73,557         | 77,378         | 83,009         | 95,049         | 81,858         | 85,420         | 74,226         | 89,164         | 976,946          |
| 19              | Short Term Loan Repayment - Trust only                           |                |                |                | 0              | 0              | 0              | 0              | 0              | 0              | 0              | 0              | 0              | 0                |
| 20              | PDC Repayment - Trust only                                       |                |                |                | 0              | 0              | 0              | 0              | 0              | 0              | 0              | 0              | 0              | 0                |
| 21              | Capital Payment  | 12,675         | 1,730          | 1,015          | 1,347          | 1,729          | 912            | 1,569          | 3,074          | 3,416          | 1,800          | 10,000         | 36,140         | 75,407           |
| 22              | Other items (Specify in narrative)                               |                |                |                |                |                |                |                |                |                |                |                |                | 0                |
| 23              | <b>TOTAL PAYMENTS</b>  | <b>184,043</b> | <b>189,188</b> | <b>152,605</b> | <b>171,509</b> | <b>174,366</b> | <b>161,492</b> | <b>178,711</b> | <b>213,181</b> | <b>194,333</b> | <b>185,198</b> | <b>182,274</b> | <b>213,173</b> | <b>2,200,074</b> |
| 24              | Net cash inflow/outflow  | 8,599          | (4,418)        | (4,780)        | 1,341          | 7,081          | (3,103)        | 510            | 2,919          | (2,246)        | (5,155)        | 476            | (31,703)       |                  |
| 25              | Balance b/f  | 2,780          | 11,379         | 6,961          | 2,181          | 3,522          | 10,603         | 7,500          | 8,010          | 10,929         | 8,682          | 3,527          | 4,004          |                  |
| 26              | Balance c/f  | 11,379         | 6,961          | 2,181          | 3,522          | 10,603         | 7,500          | 8,010          | 10,929         | 8,682          | 3,527          | 4,004          | (27,700)       |                  |

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