

**PWYLLGOR CYLLID A PHERFFORMIAD
FINANCE AND PERFORMANCE COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	24 February 2026
TEITL YR ADRODDIAD: TITLE OF REPORT:	Performance Update for Hywel Dda University Health Board – Month 10 2025/2026
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Huw Thomas, Executive Director of Finance In association with all Executive Leads
SWYDDOG ADRODD: REPORTING OFFICER:	Huw Thomas, Executive Director of Finance

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Ar Gyfer Trafodaeth/For Discussion

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

This report relates to the Month 10, 2025/26 Integrated Performance Assurance Report (IPAR) which summarises progress against a range of national and local performance measures. The IPAR consists of this covering report and the following supporting documents:

- **Appendix 1** IPAR overview – includes data, issues and actions for the Health Board's key performance improvement measures.
- **IPAR Dashboard** – provides statistical process control (SPC) charts for each of our performance measures. The dashboard can be accessed via the Integrated Performance Assurance Report Dashboard as of 31 January 2026. Ahead of the Committee meeting, the dashboard will also be made available via our [internet site](#). For help navigating the IPAR dashboard, email the Performance Team: GenericAccount.PerformanceManagement@wales.nhs.uk.

We have adopted the '3As assessment' approach to highlight either an alert, advise or assure status for each of our key performance metrics:

- **Alert (may require discussion):** There is a lack of confidence that any action in place is sufficient to address the issue satisfactorily and/or within the scope of the operational team or executive to resolve. Engagement, action or intervention required.
- **Advise (to monitor):** There are areas of concern where assurance has been taken on actions in place but requires close monitoring. An early warning of an emerging and potentially serious concern.
- **Assure (to note):** There is confidence that actions are robust and will be sufficient to address the issue or generally operating effectively. Routine monitoring.

Please Note:

- Audiology data has been included retrospectively for the period April 2025 to December 2025. This data is provisional pending completion of a data cleansing exercise within the service and development of formal internal and external reporting processes, including sign-off protocols.

Cefndir / Background

Welsh Government published the [2025/26 NHS Wales Performance Framework](#) in January 2025. The framework outlines the Ministerial priorities for this financial year, along with key targets.

Asesiad / Assessment

Performance overview

The table below summarises the latest position for the 2025/26 ministerial priorities and our local key performance metrics. Additional data, details of key issues and actions being taken to address can be found in the supporting document *IPAR overview*.

Metric	Target	Period	Actual	Variation	Assurance	Trajectory	3A
Patients spending > 12 hours in A&E/MIU Hywel Dda	0	Jan 2026	1,368	Concerning	Missing target	n/a	Alert
% child neurodevelopment assess waits <26 weeks	80%	Dec 2025	20.5%	Usual	Missing target	n/a	Alert
Median time ambulance emergency category calls	8	Dec 2025	10	n/a	n/a	n/a	Alert
% R1 eyecare appts attended in target or 25% delay	95%	Dec 2025	55.5%	Concerning	Missing target	n/a	Alert
Pts waiting 8 wks+ for specified diagnostic	0	Jan 2026	3,669	Improving	Missing target	n/a	Alert
% patients spending <4 hours in A&E/MIU Hywel Dda	95%	Jan 2026	72.0%	Improving	Missing target	n/a	Alert
Dental: % of Welsh resident adults accessing NHS primary dental care treatment within 24 months	n/a	Jun 2025	29.1%	Concerning	n/a	n/a	Alert
% adult psychological therapy waits <26 weeks	80%	Dec 2025	57.1%	Concerning	Missing target	n/a	Alert
Pts waiting 14 wks+ for specified therapy (Exc. Audiology)	0	Jan 2026	2,438	Concerning	Missing target	n/a	Alert
Financial in month deficit	n/a	Jan 2026	£1,286,000	Improving	n/a	Trajectory met	Alert
S. aureus: Number of confirmed cases (in-month)	6	Jan 2026	14	Usual	Hit and miss	n/a	Alert
% Autumn 2025 COVID booster uptake for eligible residents	75%	Dec 2025	55.3%	n/a	n/a	n/a	Alert
E. coli: Number of confirmed cases (in-month)	21	Jan 2026	22	Usual	Hit and miss	n/a	Advise
% R1 eyecare patients waiting within 25% delay to target date	95%	Dec 2025	39.4%	Concerning	Missing target	Within 5% of Trajectory	Advise
% sickness absence rate of staff	6.60%	Jan 2026	6.60%	Concerning	Hitting target	n/a	Advise
Dental: % of Welsh resident children accessing NHS primary dental care treatment within 12 months	n/a	Jun 2025	41.5%	Improving	n/a	n/a	Advise
Median time ambulance arrest category calls	8	Dec 2025	8	n/a	n/a	n/a	Advise
Number of Pathways of Care delayed discharges	n/a	Jan 2026	213	Usual	n/a	Within 5% of Trajectory	Advise
Ambulance handover > 4 hours Hywel Dda	0	Jan 2026	195	Improving	Missing target	Trajectory met	Advise
% pts on single cancer pathway within 62 days	75%	Dec 2025	66%	Improving	Missing target	Trajectory met	Advise
Ambulance handover > 45 minutes Hywel Dda	0	Jan 2026	813	Improving	Missing target	n/a	Advise
Ambulance handovers > 1 hour Hywel Dda	0	Jan 2026	716	Usual	Missing target	Trajectory met	Advise
% uptake of flu vacc - 65+ years	75%	Mar 2026	66.1%	n/a	n/a	n/a	Advise
C. difficile: Number of confirmed cases (in-month)	8	Jan 2026	10	Usual	Hit and miss	n/a	Advise
Pts 12yrs+ with diabetes receiving all 8 NICE care processes	n/a	Jan 2026	43.2%	Improving	n/a	n/a	Advise
Follow-up appts - delayed >100%	0	Jan 2026	15,753	Improving	Missing target	n/a	Advise
Patients waiting 104 weeks+ RTT	0	Jan 2026	42	Improving	Missing target	n/a	Advise
Patients waiting over 52 weeks RTT	0	Jan 2026	10,555	Improving	Missing target	n/a	Advise
Waits over 52 weeks: new outpatient appointment	0	Jan 2026	16	Improving	Missing target	n/a	Advise
% of children who are up to date with scheduled vaccinations by age 5	95%	Sep 2025	89.6%	Usual	Missing target	n/a	Advise
% of children receiving HPV by age 15	90%	Sep 2025	77.1%	n/a	n/a	n/a	Advise
% of practices achieving National Access Standards	100%	Mar 2025	95.7%	n/a	n/a	n/a	Advise
% MH assess within 28 days (age 0-17)	80%	Dec 2025	98.6%	Improving	Hit and miss	n/a	Assure
% MH assess within 28 days (age 18+)	80%	Dec 2025	92.1%	Improving	Hit and miss	n/a	Assure
% therapy interven post LPMHSS assess (age 0-17)	80%	Dec 2025	98.1%	Improving	Hit and miss	n/a	Assure
% therapy interven post LPMHSS assess (age 18+)	80%	Dec 2025	96.4%	Improving	Hitting target	n/a	Assure
Consultations delivered through PIPS	n/a	Nov 2025	2,976	Improving	n/a	Trajectory met	Assure

Triangulating our data: 1st April 2022 to 31st January 2026.

- Quality safety and risk** – the number of incidents causing moderate harm or above reported by month, continues to decrease since July 2025 (184), with January reporting 129. There has been an overall increase in the number of patient falls from 193 in August 2025 to 257 in January 2026. However, medication errors have decreased from 148 in June 2025 to 81 in January 2026. We continue to have significant numbers of high and extreme risks on the risk register with 549 in January 2026. There has been a significant decrease in the number of new complaints received since September 2025 (249) with 67 in January. The number of new infections decreased with January reporting 55 cases (S. aureus=14 cases, E. coli=21 cases, C. difficile=10 cases).
- Workforce** – In month, staff sickness decreased slightly with 6.8% in January 2026. This is a change to the previous increasing trend. Short-term sickness increased slightly to 2.6% for January whilst long-term sickness decreased slightly to 4.3%. Note: The sickness metric reported in the alert section of this SBAR includes 12 month rolling data. Nursing and midwifery agency usage continues to decrease since March 2024 (255). In January it was 64.4 whole time equivalent (WTE). Rolling 12-month staff turnover percentage is at its lowest ever recorded at 6.7%.

Quality, safety and risk	Best		Worst	Latest	Trend
Reported incidents causing moderate harm or above	124		305	129	
Patient falls	189		301	257	
Medication errors	61		148	81	
Pressure damage developing or worsening during care	54		215	73	
New complaints by month received (ward level not available)	62		249	67	
Number of high and extreme risks (health board & function only)	381		550	549	
Infections: new cases	53		81	55	
Infections: C. difficile cases	9		23	10	
Workforce					
Number of staff/contractor related incidents	98		186	159	
Sickness - short term	1.7%		2.8%	2.6%	
Sickness - long term	3.3%		4.9%	4.3%	
Number of vacancies	To follow				
Staff turnover (12 month rolling)	6.7%		9.8%	6.7%	
Nursing and midwifery vacancies	To follow				
Nursing and midwifery agency (WTE)	56.38		379.79	64.44	
Bank (WTE)	212.99		352.85	308.46	

Argymhelliad / Recommendation

The Finance and Performance Committee is asked to **DISCUSS** the IPAR – Month 10 2025/2026 report and to **SEEK ASSURANCE** on the operational delivery of mitigating actions to improve performance in the areas that have been categorised as ‘alert’.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference:
Cyfeirnod Cylch Gorchwyl y Pwyllgor:

- 2.1.1 The financial performance and delivery against Health Board financial plans and objectives and
- give early warning of potential performance issues,
 - make recommendations for action to continuously improve the financial position of the organisation,
 - focus on the financial impact of in-year and medium-long term plans, the impact of financial issues on service delivery, quality and patient experience, and any specific issues where financial performance is showing deterioration or there are areas of concern.
- 2.1.2 The overall performance and delivery against Health Board plans and objectives, including delivery of key targets, giving early warning on potential performance issues and making recommendations for action to continuously improve the performance of the organisation and, as required focus on specific issues where performance is showing deterioration or there are issues of concern

Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol:
Datix Risk Register Reference and Score:

Risks are outlined throughout the report

Parthau Ansawdd:
Domains of Quality
[Quality and Engagement Act \(sharepoint.com\)](#)

7. All apply

Galluogwyr Ansawdd:
Enablers of Quality:
[Quality and Engagement Act \(sharepoint.com\)](#)

6. All Apply

Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Cynllunio Planning Objectives	All Planning Objectives Apply
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	9. All HDdUHB Well-being Objectives apply

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	2025/2026 NHS Performance Framework
Rhestr Termau: Glossary of Terms:	Contained within the body of the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Adnoddau Cynaliadwy: Parties / Committees consulted prior to Sustainable Resources Committee:	Contained within the body of the report

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Better use of resources through integration of reporting methodology
Ansawdd / Gofal Claf: Quality / Patient Care:	Use of key metrics to triangulate and analyse data to support improvement
Gweithlu: Workforce:	Development of staff through pooling of skills and integration of knowledge

Risg: Risk:	Better use of resources through integration of reporting methodology
Cyfreithiol: Legal:	Better use of resources through integration of reporting methodology
Enw Da: Reputational:	Yes
Gyfrinachedd: Privacy:	Not Applicable
Cydraddoldeb: Equality:	Not Applicable