



Llywodraeth Cymru
Welsh Government

STATISTICS

NHS activity and performance summary: March and April 2022

Report summarising data on activity and performance in the Welsh NHS for March and April 2022.

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Introduction

Data for each topic area is also available in more detail on our [StatsWales](#) website.

In line with our recent review of our outputs for the NHS activity and performance summary, we have discontinued the PowerBi dashboard.

This month we have published data relating to the 111 service in Wales for the first time on our [StatsWales](#) website. This includes data on calls offered, answered, and abandoned.

In next months statistical release we are aiming to publish further data relating to the 111 service webpage visits and completed online symptom checker data.

In light of the impact COVID-19 has had on NHS activity and performance levels, the Welsh Government has published its [programme for transforming and modernising planned care and reducing waiting lists in Wales](#). This plan sets out a number of key ambitions to reduce waiting times for people in Wales and we will incorporate measurements of performance against these ambitions within this statistical release and on StatsWales from June onwards.

Main points

Latest data for April shows the number and proportion of life threatening calls to the ambulance service remains high and the performance target continues not to be met.

There was a decrease in average daily attendances to emergency departments on the previous month, and a slight improvement in performance against the

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targets. Despite this, performance against the four and twelve hour targets were the third and second lowest on record respectively. The average (median) time spent in emergency departments was also the second longest on record, at three hours and two minutes.

The pandemic has impacted on the total number of patient pathways waiting to start treatment and this continued in March with waiting lists increasing to over 700,000 for the first time. However, the rate of increase remains lower than earlier in the pandemic and March saw the highest number of pathways closed since the start of the pandemic. Patient pathways differs to the number of patients. More information on this difference is available in the [Welsh Government's Chief Statistician's blog](#).

The percentage of the total patient pathways that were waiting less than 26 weeks increased on the previous month. The number of pathways waiting longer than 36 weeks increased to the highest number on record. The average (median) time patient pathways had been waiting for treatment at the end of March remained high but decreased on the previous month to 22.5 weeks.

For diagnostic services, the number of patient pathways waiting longer than the target time decreased for the second month in a row to the lowest level since April 2021.

For therapies, the number of patient pathways waiting and those waiting longer than the target time for increased to the highest level on record in March.

The total activity in March for cancer services was the highest since current data collection began in December 2020. More people started their first definitive treatment and more pathways were closed following the patient being informed they did not have cancer than in the previous month. Performance decreased slightly against the 62 day target on the previous month.

Unscheduled care

New data relating to unscheduled care are provided for the month of April 2022.

Calls to 111 service

As of 16 March 2022, the 111 service has been rolled out across the whole of Wales.

In April, almost 86,000 calls were made to the 111 service in Wales. This was an average of 2,863 calls per day. Of the total number of calls made, 73,000 were answered and 13,000 were abandoned by the caller.

Of the total number of calls answered by the 111 service during the month, for 1,224 calls the caller indicated that they wished to conduct the call in Welsh.

More data is published on [StatsWales](#).

Emergency calls to the ambulance service

A wider range of ambulance quality indicators are published on the [Emergency Ambulance Services Committee \(EASC\) website](#) and on [StatsWales](#).

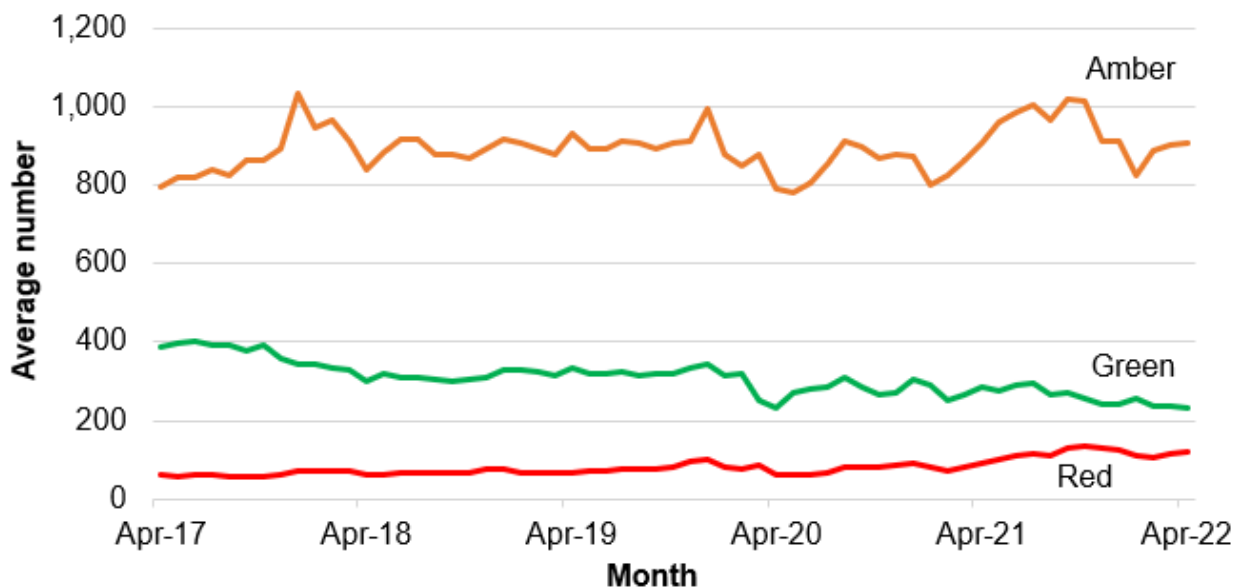
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Activity

Chart 1: Average daily number of emergency ambulance calls, by call type and month, April 2017 to April 2022



Source: Welsh Ambulance Services NHS Trust (WAST)

Emergency ambulance calls and responses to red calls, by local health board and month on StatsWales

Note: An update to call handling in May 2019 resulted in a change to red incident volume. It is not possible to directly compare before and after this date. Further details are available in the [quality information](#).

In April, almost 38,000 emergency calls were made to the ambulance service. This is an average of 1,262 calls per day, a decrease of 6 (0.5%) calls on average per day than the previous month and 21 (1.7%) fewer calls on average per day than the same month last year.

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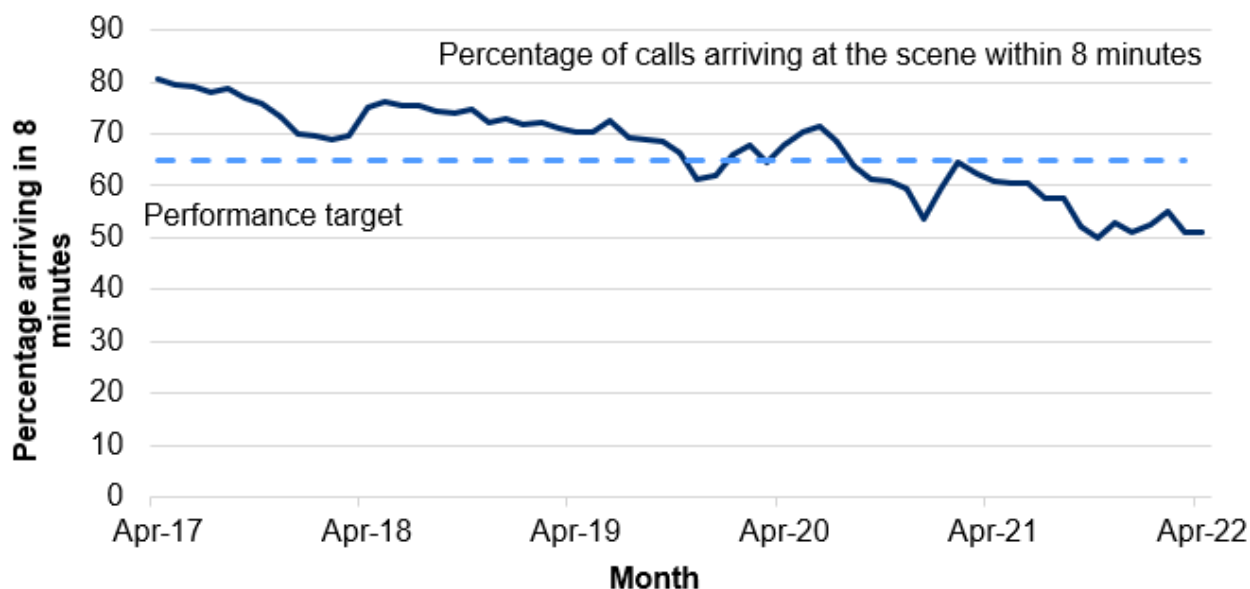
Calls to the ambulance service are categorised as red, amber or green depending on the urgency of the call. An average of 120 immediately life-threatening 'red' calls were made per day in April. This is the eleventh month in a row where on average there were more than 100 immediately life-threatening calls made each day.

In April, the proportion of all calls that were immediately life-threatening (red calls) was 9.5% up from 9.2% in February.

Target

- 65% of red calls (immediately life-threatening: someone is in imminent danger of death, such as a cardiac arrest) to have a response within 8 minutes.

Chart 2: Percentage of red calls which received an emergency response at the scene within 8 minutes of patient location and chief complaint being established, April 2017 to April 2022



Source: Welsh Ambulance Services NHS Trust (WAST)

Emergency responses: minute-by-minute performance for red calls by local health board and month on StatsWales

Note: An update to call handling in May 2019 resulted in a change to red incident volume. It is not possible to directly compare before and after this date. Further details are available in the [quality information](#).

In April, 51.2% of emergency responses to immediately life threatening (red) calls arrived within 8 minutes. This is 0.1 percentage points higher than the previous month, but 9.8 percentage points lower than in April 2021.

The median response time in the four years prior to the pandemic ranged between 4 minutes 30 seconds and 6 minutes for red calls. In March, the

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average (median) response time to immediately life-threatening 'red' calls was 7 minutes and 49 seconds. This was 1 second faster than March but 1 minute 6 seconds slower than April 2021.

The majority of calls to the ambulance service are categorised as 'amber' calls, for which there is no performance target for call response times. In April, the median response time for amber calls was just over 1 hour and 47 minutes. This is almost 4 minutes slower than in March, and 1 hour and 6 minutes slower than in April 2021.

Emergency department attendances and admissions to hospital

A wider range of emergency department performance statistics are published on the [National Collaborative Commissioning Unit \(NCCU\) website](#), as management information.

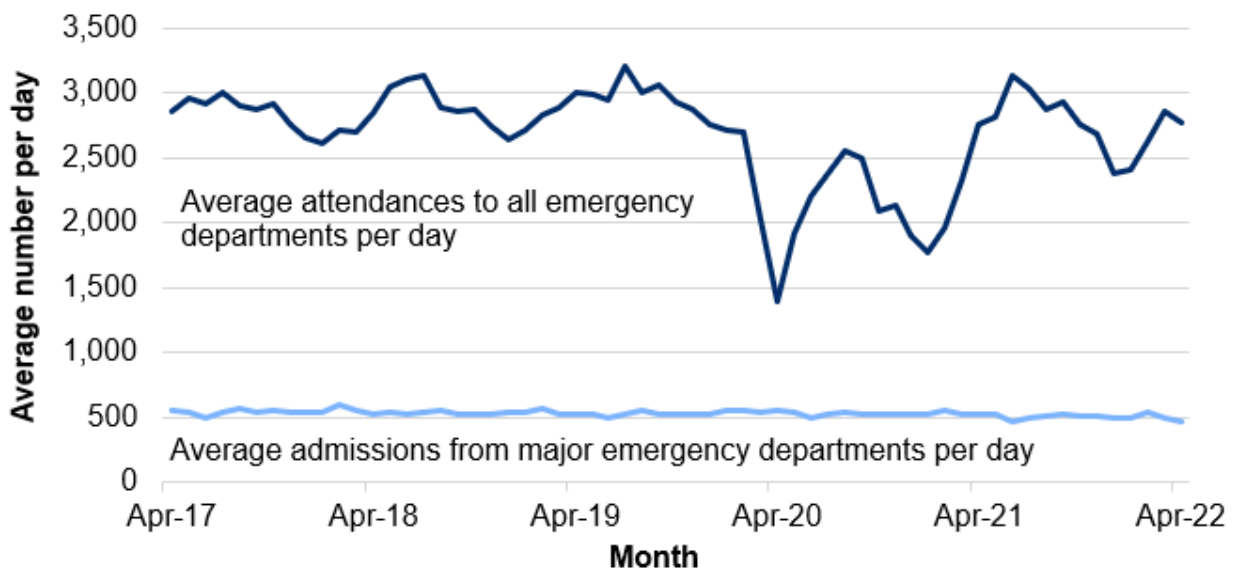
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Activity

Chart 3: Average number of attendances in NHS Wales accident and emergency departments, and admissions to hospital resulting from attendances at major emergency departments per day, April 2017 to April 2022



Source: Emergency department data set (EDDS), Digital Health and Care Wales (DHCW)

Number of attendances in NHS Wales emergency departments by age band, sex and site on StatsWales

Note: Chart shows number of attendances at both major emergency departments and minor injuries units, and the number of admissions resulting from attending major emergency departments only.

In April there were more than 83,000 attendances to all NHS Wales emergency departments. This is an average of 2,770 emergency department attendances per day; 94 fewer attendances per day on average than in the previous month,

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but 10 more than in the same month last year.

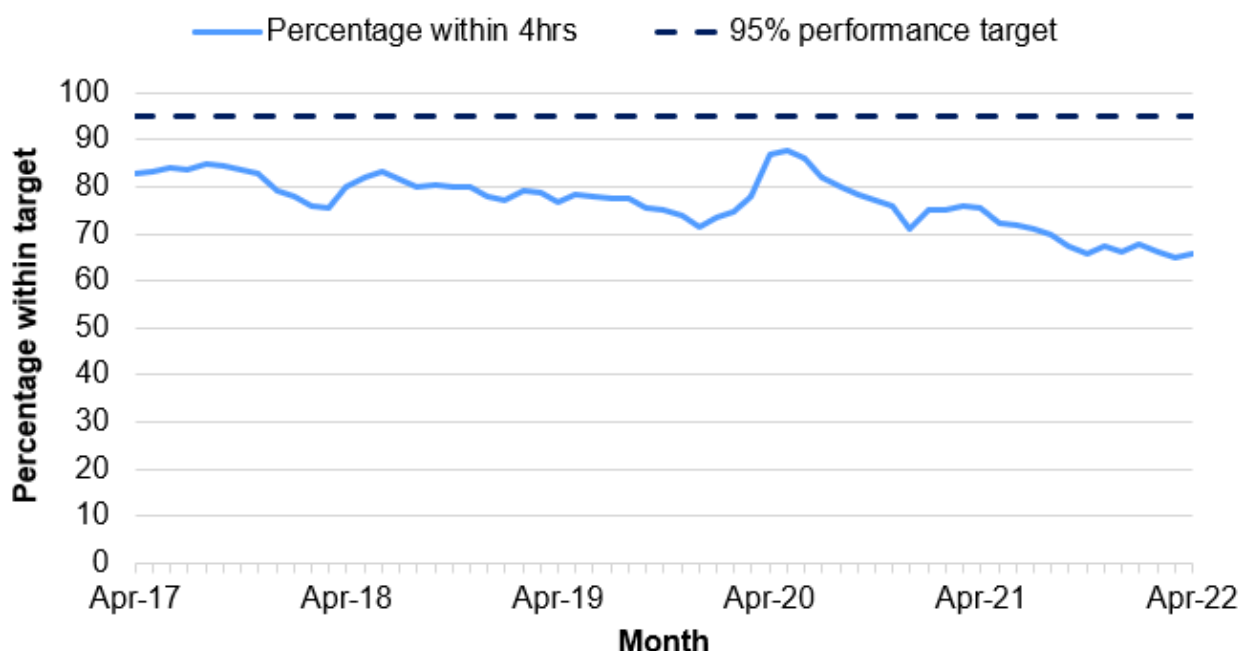
In April, almost 13,000 patients were admitted to the same or a different hospital following attendance at a major emergency department. This was 7.3% lower than the previous month, and 16.8% lower than the same month in 2021.

Performance

Targets

- 95% of new patients should spend less than 4 hours in emergency departments from arrival until admission, transfer or discharge.
- No patient waiting more than 12 hours in emergency departments from arrival until admission, transfer or discharge.

Chart 4: Percentage of patients admitted, transferred or discharged within 4 hours at NHS emergency departments, April 2017 to April 2022



Source: Emergency department data set (EDDS), Digital Health and Care Wales (DHCW)

Performance against 4 hour target by hospital on StatsWales

April data shows that 65.9% of patients in all NHS emergency departments spent less than 4 hours in the department from arrival until admission, transfer or discharge, which was the third lowest level on record. This was 0.8 percentage points higher than the previous month, but 9.5 percentage points lower than the same month a year ago. The 95% target continues to be missed.

In 2019, the median time patients spent in emergency departments was around 2 hours and 30 minutes. During the early part of the pandemic, as attendances decreased the median time spent in the department decreased, to a low of 1 hour 47 minutes in April 2020. Since then, median times have increased and

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reached a record high of 3 hours and 8 minutes in March 2022. In the latest data for April, the median waiting time was 3 hours and 2 minutes. This was six minutes faster than the previous month, but the second longest average waiting time on record.

The median time spent in emergency department varies by age. Prior to the pandemic, children (aged 0-4) spent between 1 hour and 30 minutes and 2 hours in emergency departments, while older patients (aged 85 or greater) spent between 3 hours and 30 minutes and 5 hours.

In April, children spent an average of 2 hours and 18 minutes. Adults aged 85 and over spent an average of 8 hours and 10 minutes in emergency departments, the second longest on record.

Chart 5: Number of patients waiting more than 12 hours to be admitted, transferred or discharged at NHS emergency departments April 2017 to April 2022



Source: Emergency department data set (EDDS), Digital Health and Care Wales (DHCW)

Performance against the 12 hour target by hospital on StatsWales

In April there were almost 10,400 patients waiting 12 hours or more. This was 573 fewer than in the previous month which had been the highest on record.

Scheduled care activity

New data relating to unscheduled care are provided for the month of March 2022.

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Outpatient referrals

An outpatient appointment is an appointment, often at a hospital or clinic, where the patient does not need to stay at hospital overnight. Outpatient referrals statistics show monthly data on the number of referral requests for a first outpatient appointment received by local health boards in Wales.

Activity

Chart 6: Average daily number of referrals for first outpatient appointment, March 2017 to March 2022



Source: Outpatient Referral Dataset, Digital Health and Care Wales (DHCW)

Outpatient referrals on StatsWales

An average of 3,715 referrals for first outpatient appointments were made per

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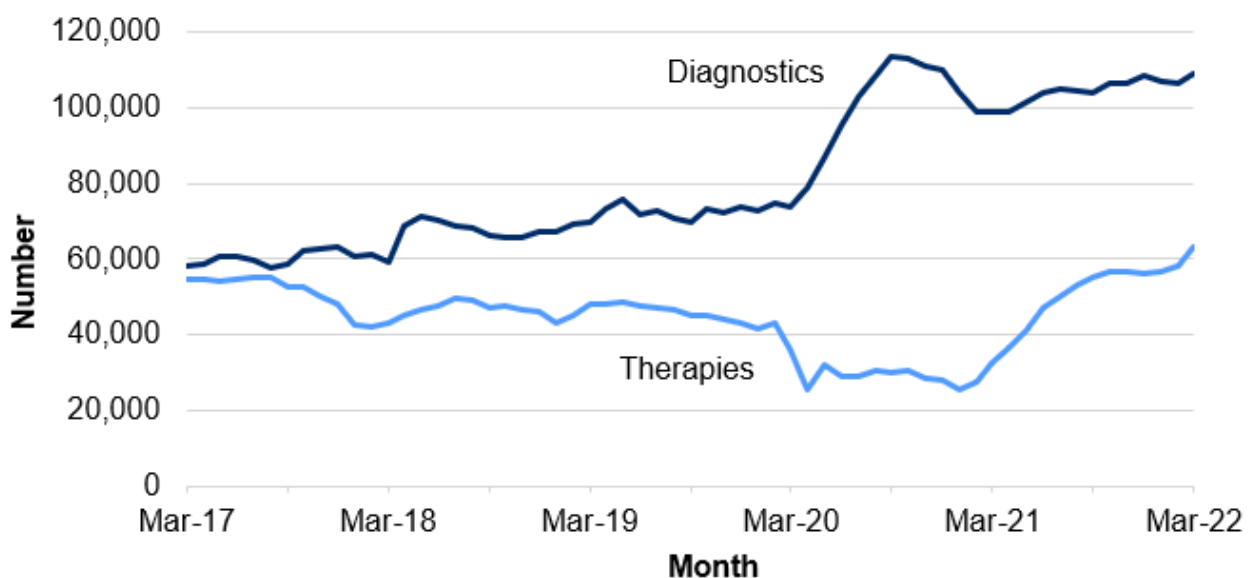
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day in March. This is an increase of 0.5% (18 more referrals per day on average) compared to February.

Diagnostic and therapy waiting times

Activity

Chart 7: Total number of patient pathways waiting for diagnostic and therapy services, March 2017 to March 2022



Source: Diagnostic and Therapy Services (DATS), Digital Health and Care Wales (DHCW)

Diagnostic and Therapy Services Waiting Times by week on StatsWales

Note: The low point in April 2020 for therapies is in part due to Betsi Cadwaladr not submitting data for this month, please see the [quality information](#).

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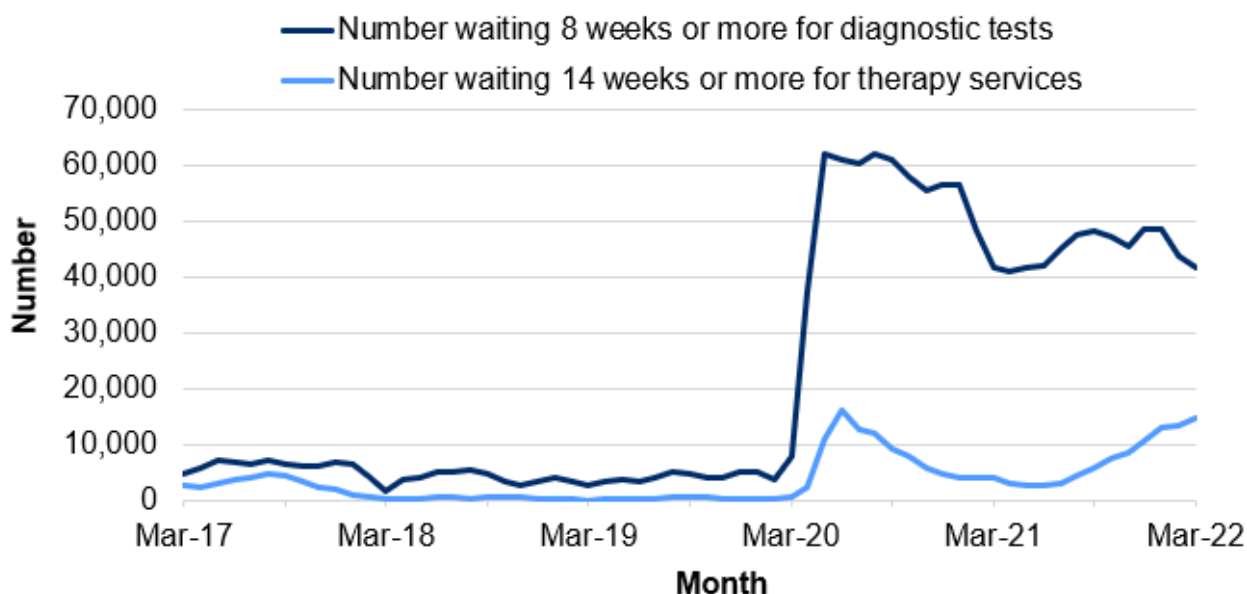
In March there were over 109,000 patient pathways waiting for diagnostics, an increase of 2.2% compared with the previous month and there were over 63,000 patient pathways waiting for therapies, an increase of 8.2% compared to the previous month to the highest level on record.

Performance

Targets

- The maximum wait for access to specified diagnostic tests is 8 weeks.
- The maximum wait for access to specified therapy services is 14 weeks.

Chart 8: Number of patient pathways waiting over the target time for diagnostic and therapy services, March 2017 to March 2022



Source: Diagnostic and Therapy Services (DATS), Digital Health and Care Wales (DHCW)

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Diagnostic and Therapy Services Waiting Times by week on StatsWales

Note: Betsi Cadwaladr did not submit data for April 2020, so are not included in the Wales figures for this month.

At the end of March, almost 42,000 patient pathways were waiting longer than the target time for diagnostics. This was a decrease of 4.9% compared to the previous month but over five times greater than March 2020.

At the end of March there were almost 15,000 patient pathways waiting longer than the target time for therapies. This is an increase of 9.9% compared to February 2022 and is the tenth consecutive month on month increase.

Median waiting times had been relatively stable for diagnostic tests since 2017 and for therapy services since 2018. Median waiting times for both services peaked in June 2020 (14.3 weeks for diagnostics and 14.9 weeks for therapies).

In March, the median waiting time for diagnostic tests was 5.4 weeks. This is the same as the previous month. The median waiting time for therapy services was 5.8 weeks. This is an increase from 5.3 weeks in the previous month.

Referral to treatment time

Referral to treatment time statistics show monthly data on waiting times for both open and closed pathways following a referral by a GP or other medical practitioner to hospital for treatment in the NHS. Open pathways are those that remain on the waiting list for treatment, whereas closed pathways are those taken off the waiting list.

Activity is measured by patient pathways, which differs to the number of patients. More information on this difference is available in the [Welsh Government's chief statisticians blog](#).

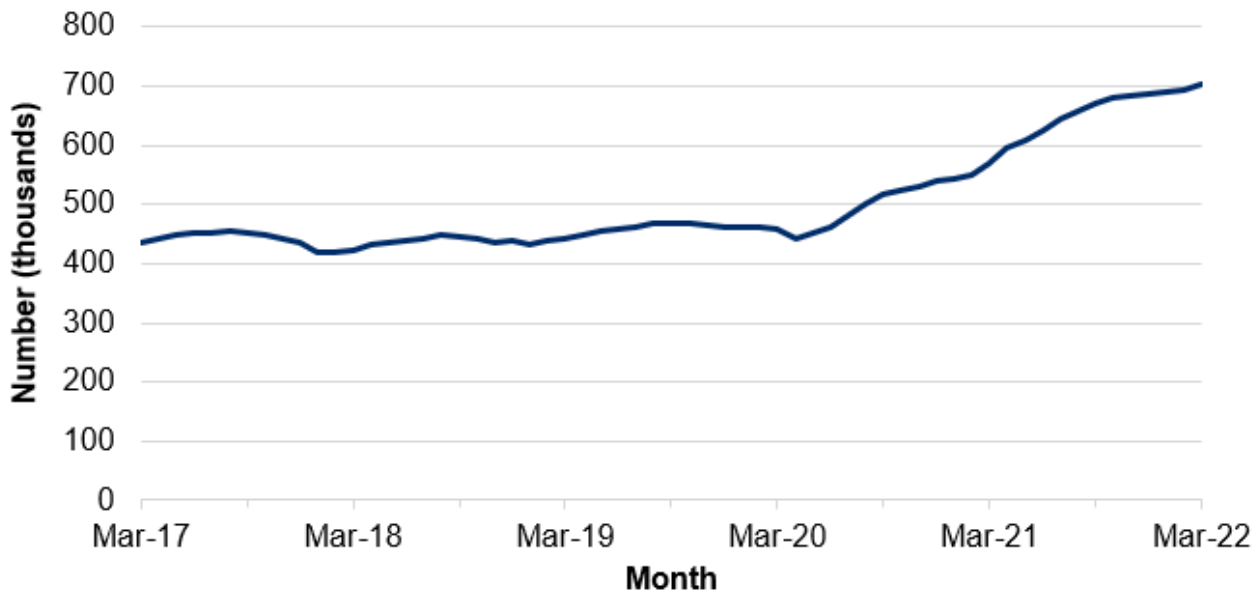
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Activity

Chart 9: Number of patient pathways waiting to start treatment, March 2017 to March 2022



Source: Referral to treatment times (RTT), Digital Health and Care Wales (DHCW)

Patient pathways waiting to start treatment by month, grouped weeks and stage of pathway on StatsWales

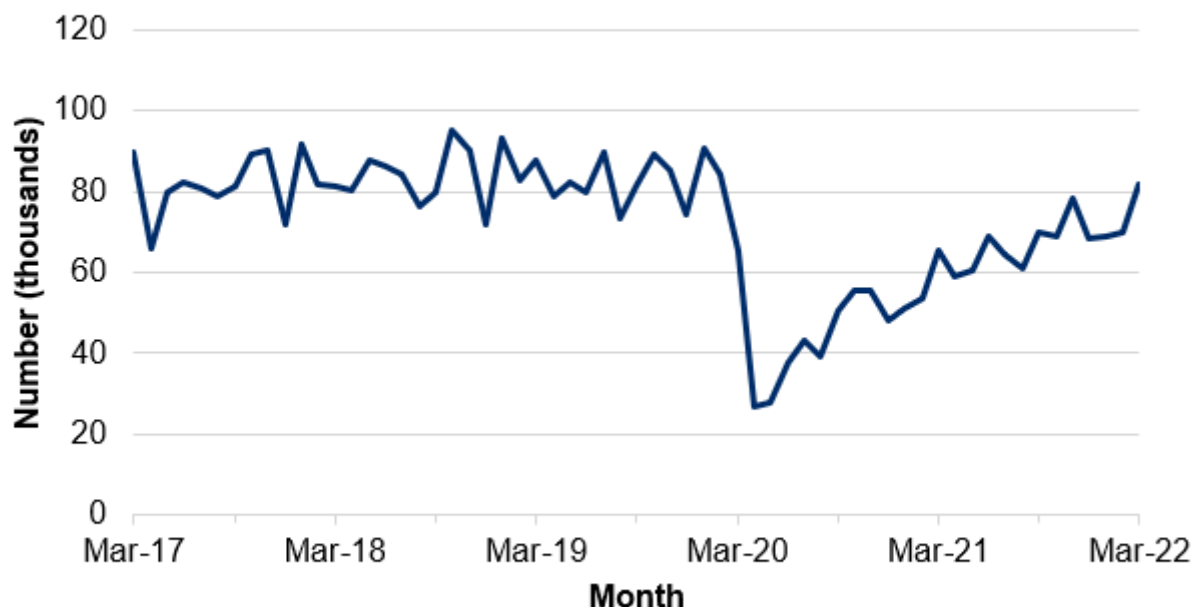
In March there were over 701,000 patient pathways waiting to start treatment, the highest since comparable data was first collected in 2011. This was 1.4% higher than in the previous month and was 53.5% higher than March 2020.

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Chart 10: Number of closed patient pathways, March 2017 to March 2022



Source: Referral to treatment times (RTT), Digital Health and Care Wales (DHCW)

Closed patient pathways by month, local health board and weeks waiting on StatsWales

Note: Cwm Taf Morgannwg health board have been unable to provide closed pathway data since September 2018. Data for this health board is excluded from the Wales total in the chart to allow for trend analysis. More details are available in the [quality information](#).

The number of patient pathways closed in March was almost 82,000. This is an average of 3,552 patient pathways closed per working day, an increase of 1.7% from February, and the second highest since February 2020.

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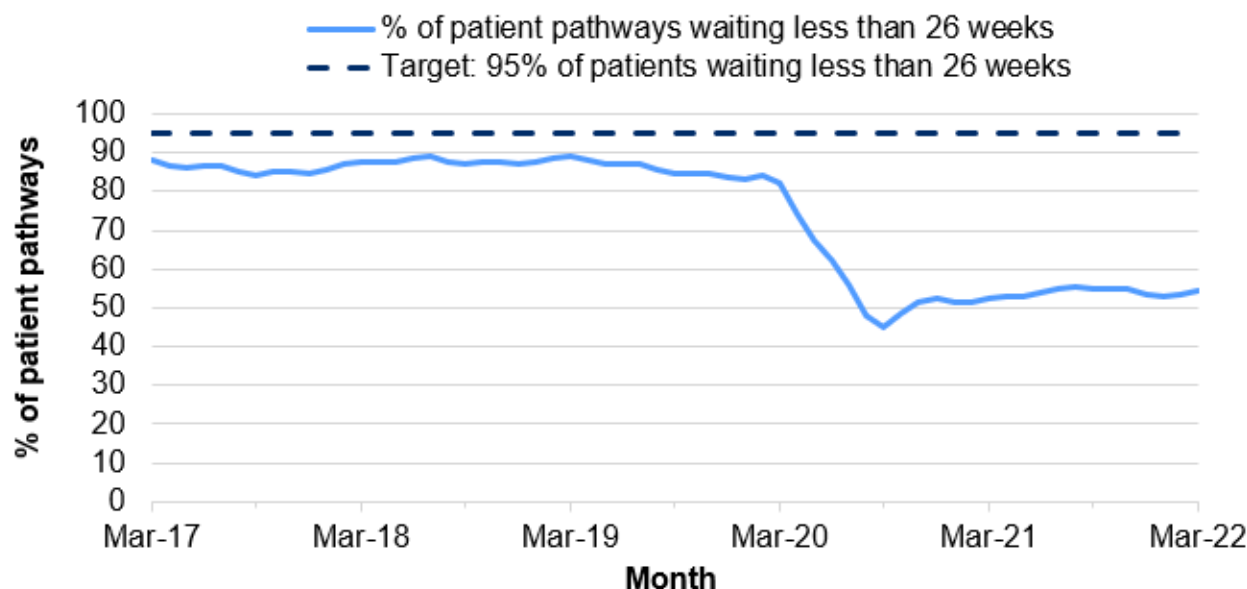
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Performance

Targets

- 95% of patients waiting less than 26 weeks from referral.
- No patients waiting more than 36 weeks for treatment from referral.

Chart 11: Percentage of patient pathways waiting less than 26 weeks, by month and weeks waited, March 2017 to March 2022



Source: Referral to treatment times (RTT), Digital Health and Care Wales (DHCW)

Percentage of patient pathways waiting to start treatment within target time by month and grouped weeks on StatsWales

Of the 701,000 patient pathways waiting to start treatment by the end of March,

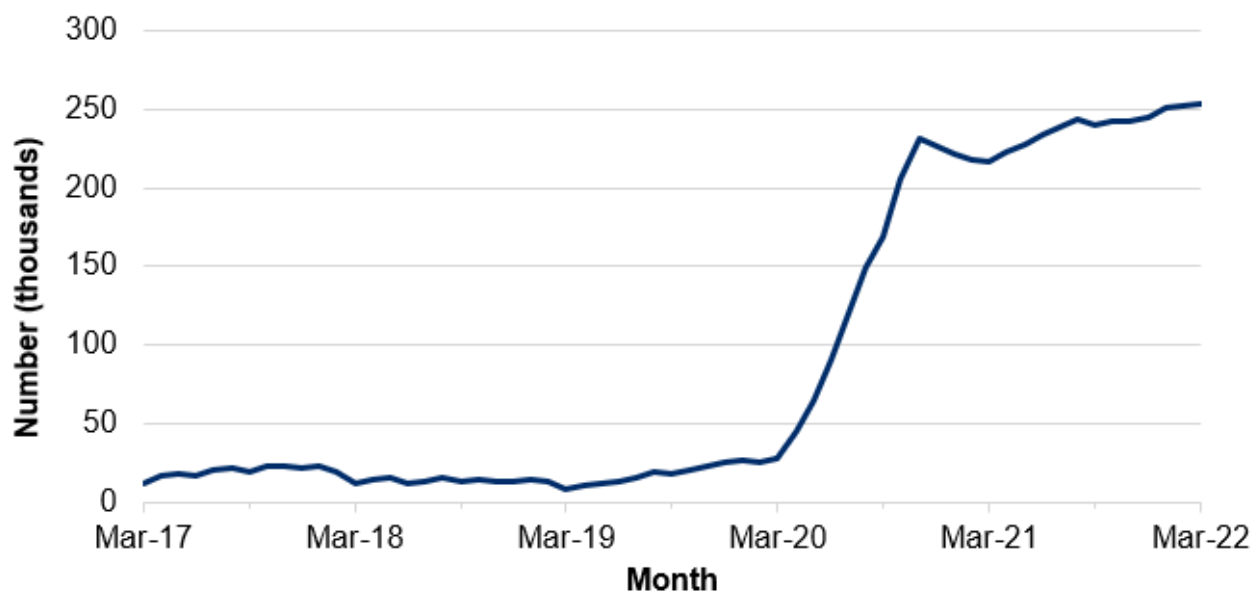
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54.2% had been waiting less than 26 weeks. This is 0.8 percentage points higher than in the previous month but 27.7 percentage points lower than March 2020.

Chart 12: Number of patient pathways waiting more than 36 weeks, by month and weeks waited, March 2017 to March 2022



Source: Referral to treatment times (RTT), Digital Health and Care Wales (DHCW)

Percentage of patient pathways waiting to start treatment within target time by month and grouped weeks on StatsWales

In March over 253,000 patient pathways had been waiting more than 36 weeks. This represented 36.1% of all patient pathways waiting to start treatment. This is 1,530 (or 0.6%) more pathways waiting than in the previous month and almost nine times more than March 2020.

The median waiting time to start treatment had generally been around 10 weeks

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pre pandemic between late 2013 and February 2020. This increased during the pandemic and peaked at a record high of 29 weeks in October 2020. In March, the median waiting time was 22.5 weeks. This is a decrease from 22.9 weeks in the previous month.

Cancer services (experimental statistics)

A number of **wider measures from the suspected cancer pathway** are produced by Digital Health and Care Wales are published alongside this statistical release.

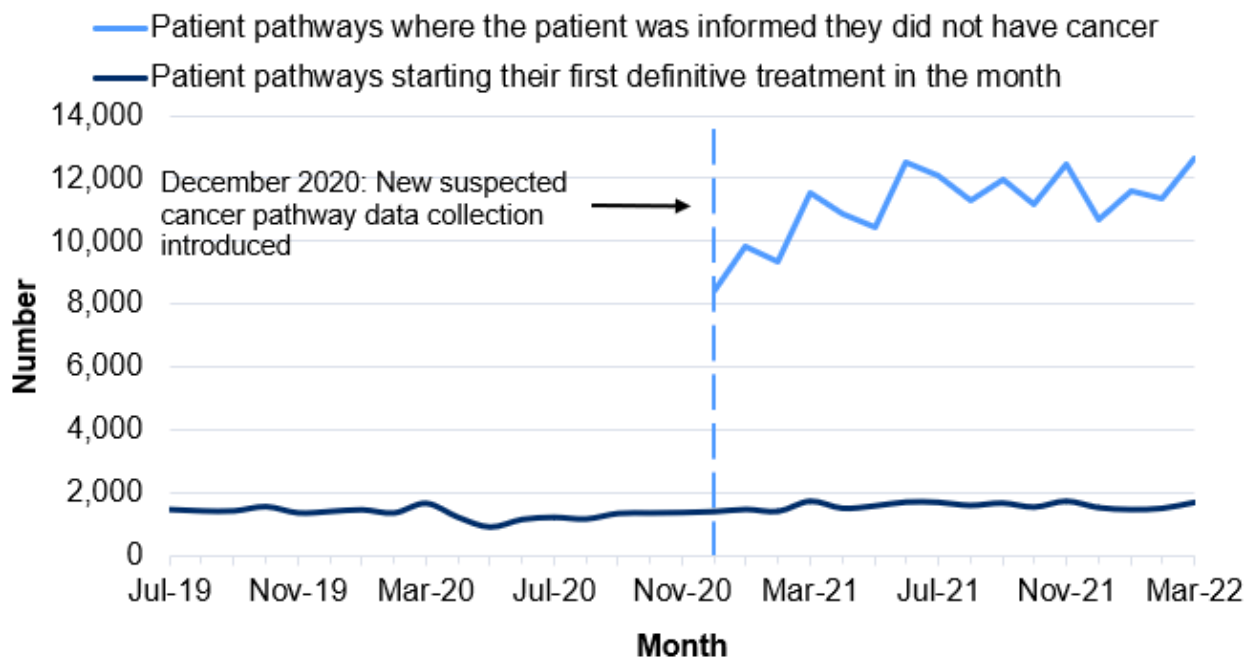
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Activity

Chart 13: Closed suspected cancer pathways in the month, by month and outcome, July 2019 to March 2022



Source: Suspected Cancer Pathway, Digital Health and Care Wales (DHCW) and National Data Resource (NDR)

Suspected cancer pathway (closed pathways) on StatsWales

In March, 1,720 pathways where the patient was newly diagnosed with cancer started their first definitive treatment in the month. This is an increase of 12.4% compared to the previous month but a decrease of 2.4% from March 2021.

12,643 pathways were closed following the patient being informed they did not have cancer. This is an increase of 11.1% compared to the previous month.

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The total activity in March for cancer services was the highest since current data collection began in December 2020.

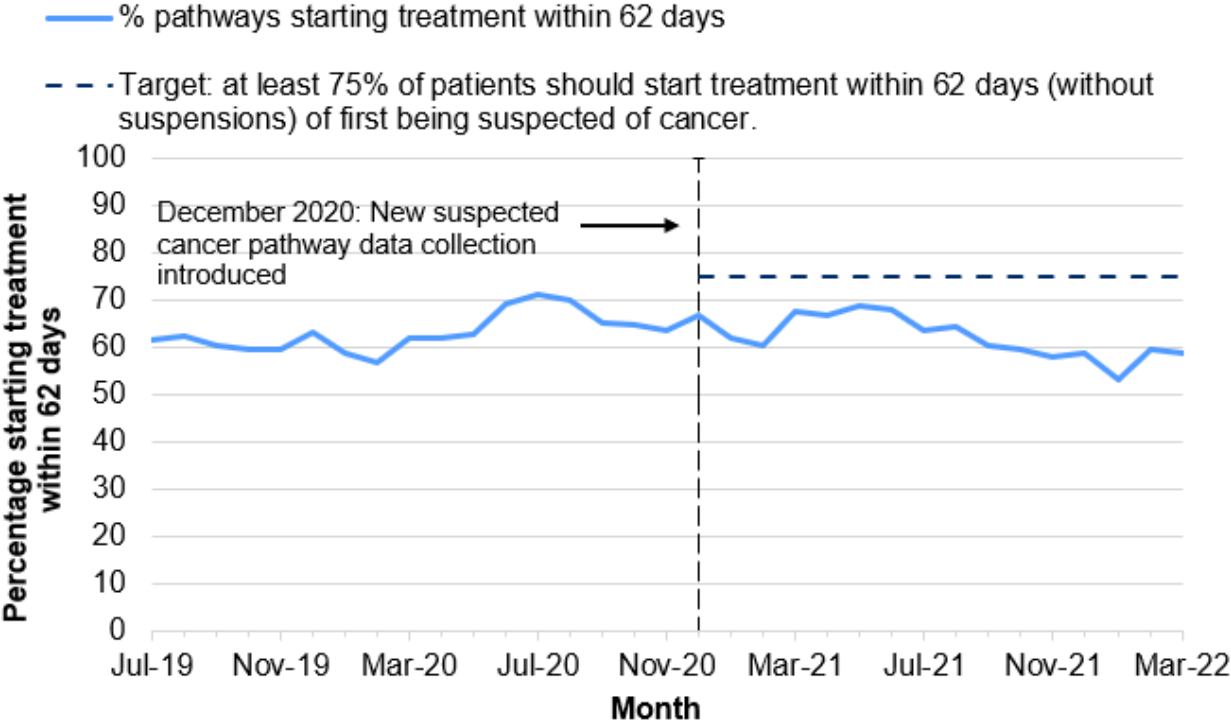
In March, 15,300 patient pathways were opened in the month following a new suspicion of cancer. This was an increase of 1,658 (12.1%) on the previous month and the highest since current data collection began in December 2021.

Performance

Target

- At least 75% of patients should start treatment within 62 days (without suspensions) of first being suspected of cancer. Data published for time periods before December 2020 are not subject to the target.

Chart 14: Percentage of pathways where the patient started their first definitive treatment within the target time, July 2019 to March 2022



Source: Suspected Cancer Pathway, Digital Health and Care Wales (DHCW) and National Data

Suspected cancer pathway (closed pathways) on StatsWales

In March, 58.7% (1,009 out of 1,720) of pathways started their first definitive treatment within 62 days of first being suspected of cancer. This was 0.8 percentage points lower than the previous month and 9.0 percentage points lower than March 2021.

Quality and methodology information

All quality and methodology information in relation to this statistical release can be found in the [NHS activity and performance summary: quality report](#)

Revision notice

Data for referral to treatment times have been revised for the period of April 2021 to February 2022. Previously published data had been submitted with incorrect data for a treatment function which requires certain codes to be rolled back when accounting for a specific sub-specialty. This impacts on only on a small number of records and will be inline with usual monthly data revisions.

Well-being of Future Generations Act (WFG)

The Well-being of Future Generations Act 2015 is about improving the social, economic, environmental and cultural wellbeing of Wales. The Act puts in place seven wellbeing goals for Wales. These are for a more equal, prosperous, resilient, healthier and globally responsible Wales, with cohesive communities and a vibrant culture and thriving Welsh language. Under section (10)(1) of the Act, the Welsh Ministers must (a) publish indicators (“national indicators”) that must be applied for the purpose of measuring progress towards the achievement of the wellbeing goals, and (b) lay a copy of the national indicators before Senedd Cymru. Under section 10(8) of the Well-being of Future Generations Act, where the Welsh Ministers revise the national indicators, they must as soon as reasonably practicable (a) publish the indicators as revised and (b) lay a copy of them before the Senedd. These national indicators were laid before the Senedd in 2021. The indicators laid on 14 December 2021 replace the set laid on 16 March 2016.

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Information on the indicators, along with narratives for each of the wellbeing goals and associated technical information is available in the [Wellbeing of Wales report](#).

Further information on the [Well-being of Future Generations \(Wales\) Act 2015](#).

The statistics included in this release could also provide supporting narrative to the national indicators and be used by public services boards in relation to their local wellbeing assessments and local wellbeing plans.

We want your feedback

We welcome any feedback on any aspect of these statistics which can be provided by email to stats.healthinfo@gov.wales.

Next update

23 June 2022

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