



Llywodraeth Cymru  
Welsh Government

STATISTICS

# NHS activity and performance summary: November and December 2022

Report summarising data on activity and performance in the Welsh NHS for November and December 2022.

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# Introduction

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

Industrial action taken by nursing staff on 15 and 20 December and ambulance services staff on 21 December may have an impact on the statistics for unscheduled care presented in this report.

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. We have incorporated these measurements of performance against these ambitions into this statistical release and on StatsWales.

## Main points

In December there were 5,949 red (life threatening) calls to the ambulance service, 14.6% of all calls. This was the highest number of red calls ever made in a month, the highest proportion of all calls and the highest average daily number of immediately life-threatening calls, at 192, up 25% from 153 in November, which itself was the highest recorded up to that point. There were also just over 502,700 hits on the [NHS 111 Wales website](#) and over 27,300 completed [symptom checks \(NHS 111 Wales\)](#).

39.5% of red calls received an emergency response within 8 minutes after a fifth consecutive monthly fall. This was the lowest on record and 8.5 percentage points lower than the previous month, which itself was the joint lowest figure recorded up to that point. Data for red calls are only comparable from May 2019

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onwards.

There was an average of 2,847 daily attendances to emergency departments, a slight increase compared to the previous month. Performance decreased against the four hour and twelve hour targets, both being the worst performance on record. The average (median) time spent in emergency departments increased in December compared to the previous month and remains high at three hours and two minutes.

The pandemic has caused a large increase in patient pathways waiting to start treatment. However, in November the number fell slightly, from over 753,000 to around 748,000, a second consecutive decrease following consistent increases from April 2020. The number of patient pathways is not the same as the number of individual patients, because some people have multiple open pathways. More information is available in the Welsh Government's [Chief Statistician's blog](#).

New management information suggests that in November 2022, when there were about 748,000 open patient pathways, there were about 586,000 individual patients on treatment waiting lists in Wales. This was the second consecutive monthly fall, a decrease of almost 3,100 patients from October.

November saw over 111,000 patient pathways closed, back to pre-pandemic levels. This was an increase of 4.7% from the previous month.

The proportion of patient pathways waiting less than 26 weeks increased slightly to 56.0% in November. This has been relatively stable for some time after falling significantly from the levels pre-pandemic. The number of pathways waiting longer than 36 weeks decreased in November to under 253,000, but remains high in historical context.

About 49,500 pathways were waiting more than two years, 30 per cent lower than the peak, following an eighth consecutive monthly fall after a consistent increase over the previous year. The average (median) time patient pathways

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had been waiting for treatment at the end of November decreased slightly on the previous month to 21.2 weeks.

The number of pathways waiting longer than one year for their first outpatient appointment decreased to around 85,300, falling for the third month after reaching the highest on record in August 2022.

For diagnostic services, the number of patient pathways waiting decreased slightly to about 111,700 in November. The number of patient pathways waiting longer than 8 weeks (the target maximum wait) decreased to just over 42,500, in November.

For therapies, the number of patient pathways waiting decreased to about 65,000 in November but remains high in historical context. The number waiting longer than fourteen weeks (the target maximum wait) decreased to about 9,500, falling for the eight consecutive month.

For cancer services, slightly more people started their first definitive treatment in November (1,749) than the previous month. The number of pathways closed following the patient being informed they did not have cancer increased to the highest level since the data collection began (14,499). Performance increased against the 62 day target in November to 53.9% compared to 52.2% the previous month, but remaining low in historical context.

## Unscheduled care

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

Industrial action taken by nursing staff on 15 and 20 December and ambulance services staff on 21 December may have an impact on the statistics for

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unscheduled care presented in this report.

## Calls to 111 service

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

In December, a total of 138,244 calls were made to the 111 helpline service, the highest on record and up 157% compared to the previous peak in July 2022. Of these, just under 61,200 (44%) calls were answered by the 111 service in Wales, an average of around 1,973 calls per day. This is an increase of 1.4% compared to the previous month.

An estimated 77,066 (56%) calls were ended by the caller before being answered. Of these, 16,471 were ended within 60 seconds of the automated messages, suggesting their needs were likely to have been met.

Just under 60,600 calls were abandoned after 60 seconds and these are regarded as callers who were more likely to have still required the service after the messages but were unable to get through or decided not to wait. This is the highest number of abandoned calls after 60 seconds since recording began, more than 4 times higher than the previous peak in July 2022.

Of the calls answered, over 2,870 calls indicated that they wished to conduct the call in Welsh.

There were just over 502,700 hits on the [NHS 111 Wales website](#) and over 27,300 completed [symptom checks \(NHS 111 Wales\)](#) in December, both the highest since recording began in April 2022 and significantly higher than the previous record.

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

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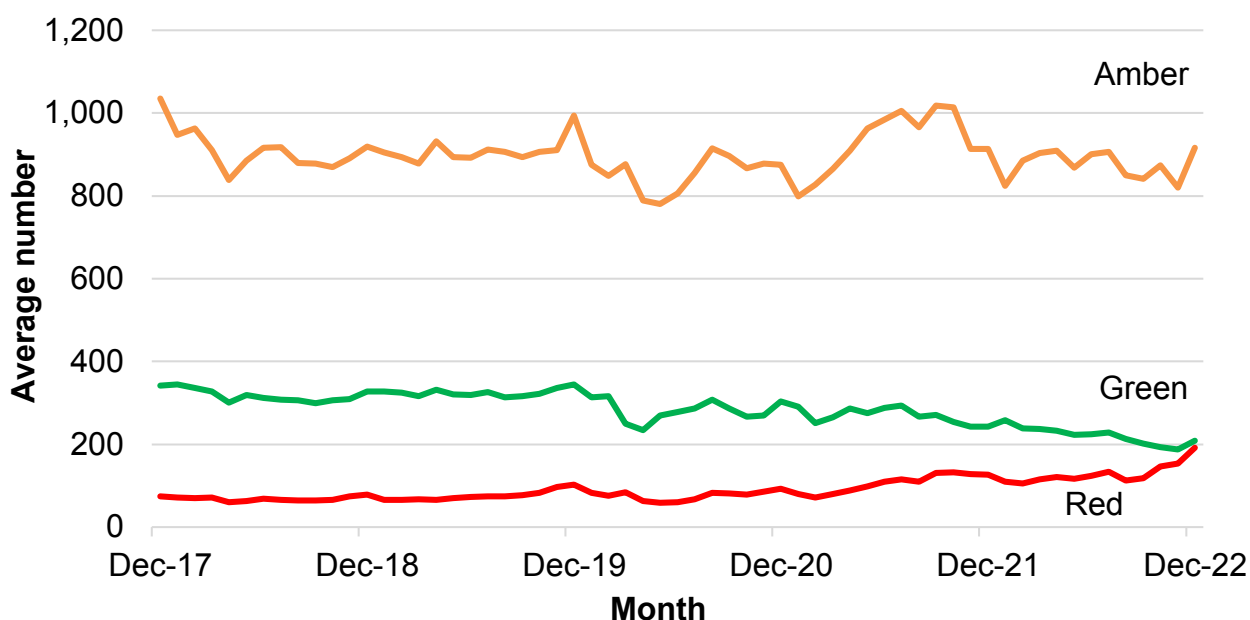
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## Emergency calls to the ambulance service

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

### Activity

**Figure 1: Average daily number of emergency ambulance calls, by call type and month, December 2017 to December 2022**



The number of emergency calls received by the Welsh Ambulance Services NHS Trust (WAST) had been rising steadily over the long term but following a decrease due to the COVID-19 pandemic figures have returned to a pre covid level.

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 December, over 40,800 emergency calls were made to the ambulance service. This was an average of 1,317 calls per day, an increase of 155 (13.4%) calls on average per day than the previous month, and 35 (2.7%) more calls on average per day than the same month last year.

Calls to the ambulance service are categorised as red (immediately life-threatening), amber (serious but not life-threatening) or green (non-urgent). An average of 192 red calls were made per day in December. This was the highest number on record and a 25% increase from the previous month (153), which itself was the highest recorded up to that point. There was a change to call handling procedures in May 2019 which impacted on the comparability of the time series.

In December, the proportion of all calls that were immediately life-threatening was 14.6%, up from 13.2% in the previous month and the highest figure on record.

## Performance

### 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.

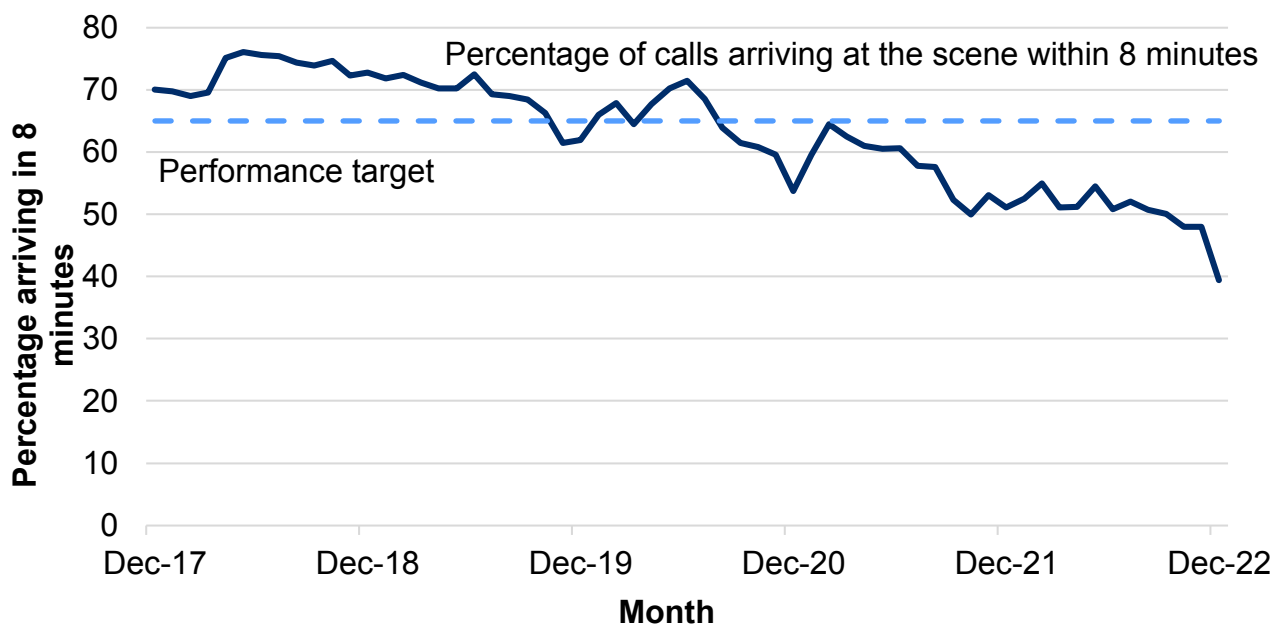
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**Figure 2: Percentage of red calls which received an emergency response at the scene within 8 minutes of patient location and chief complaint being established, December 2017 to December 2022**



Performance for emergency response calls improved during the initial coronavirus period but since July 2020 has declined.

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 December, 39.5% of emergency responses to immediately life threatening (red) calls arrived within 8 minutes, a fifth consecutive monthly fall. This was the lowest on record and 8.5 percentage points lower than the previous month,

which itself was the joint lowest figure recorded up to that point, and 11.7 percentage points lower than in December 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 December, the average (median) response time to immediately life-threatening 'red' calls was 10 minutes. This was 1 minute and 42 seconds slower than previous month, over 2 minutes slower than December 2021, and the slowest on record.

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 December, the median response time for amber calls was almost 3 hours and 30 minutes. This was 1 hour and 48 minutes slower than in November, over 2 hours slower than in December 2021, and the slowest on record.

## **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.

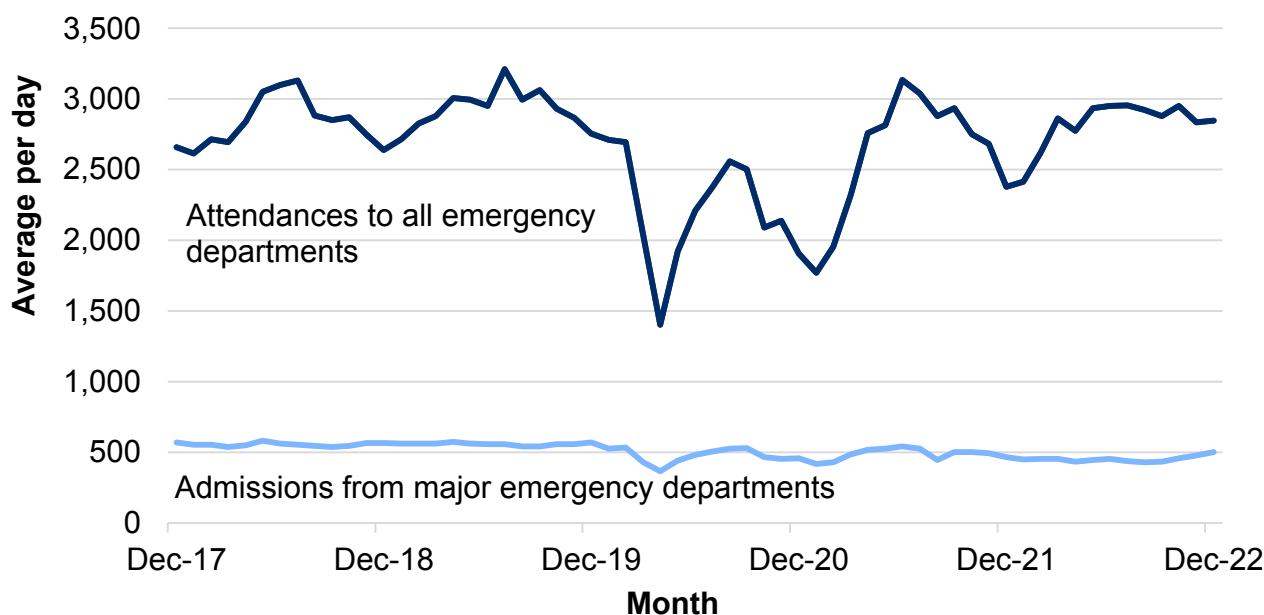
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## Activity

**Figure 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, December 2017 to December 2022**



A&E attendances are generally higher in the summer months than the winter. The decrease in attendances due to the COVID-19 pandemic can also be seen.

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 December there were over 88,200 attendances to all NHS Wales emergency departments. This was an average of 2,847 emergency department attendances per day; 12 attendances more per day on average than in the previous month.

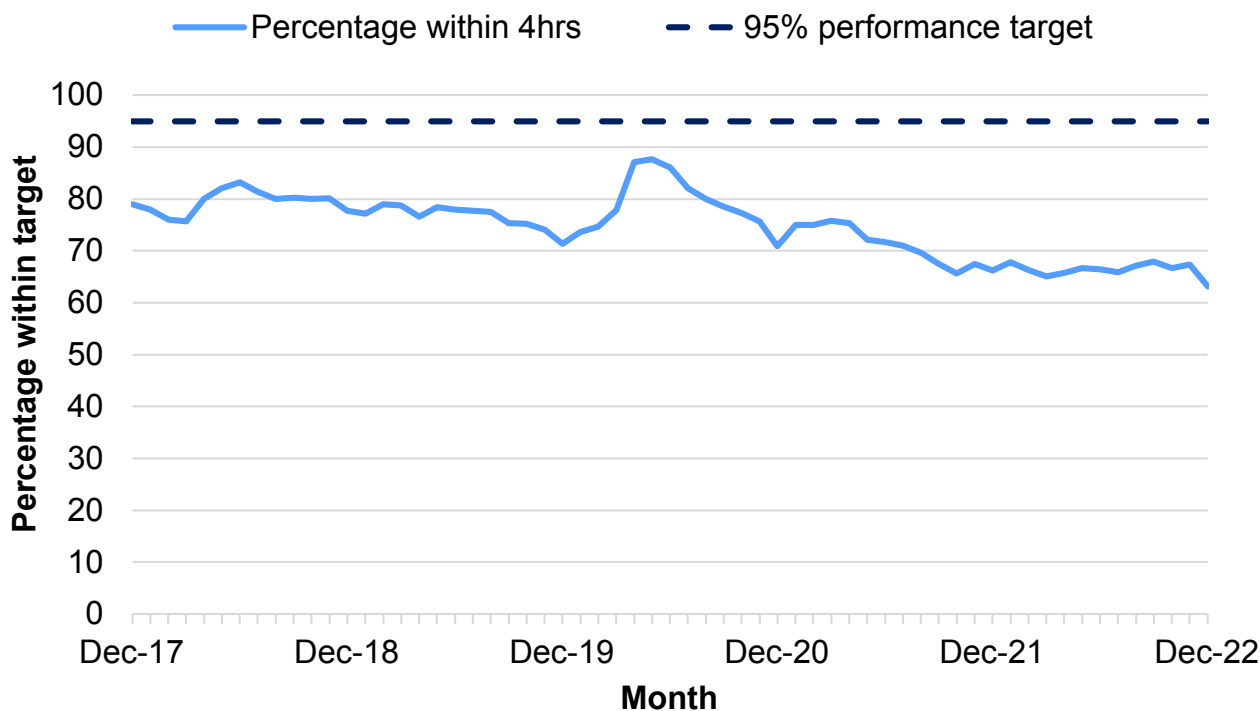
In December, over 15,500 patients were admitted to the same or a different hospital following attendance at a major emergency department. This was 8.2% higher than the previous month and 7.3% higher than the same month in 2021.

## 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.

**Figure 4: Percentage of patients admitted, transferred or discharged within 4 hours at NHS emergency departments, December 2017 to December 2022**



From October 2015 the 95% target has not been met but performance has increased over the initial few months of the covid-19 pandemic.

Source: Emergency department data set (EDDS), Digital Health and Care Wales (DHCW) ([Performance against 4 hour target by hospital on StatsWales](#))

In December, 63.1% of patients in all NHS emergency departments spent less than 4 hours in the department from arrival until admission, transfer or discharge. This was 4.2 percentage points lower than the previous month and the lowest on record

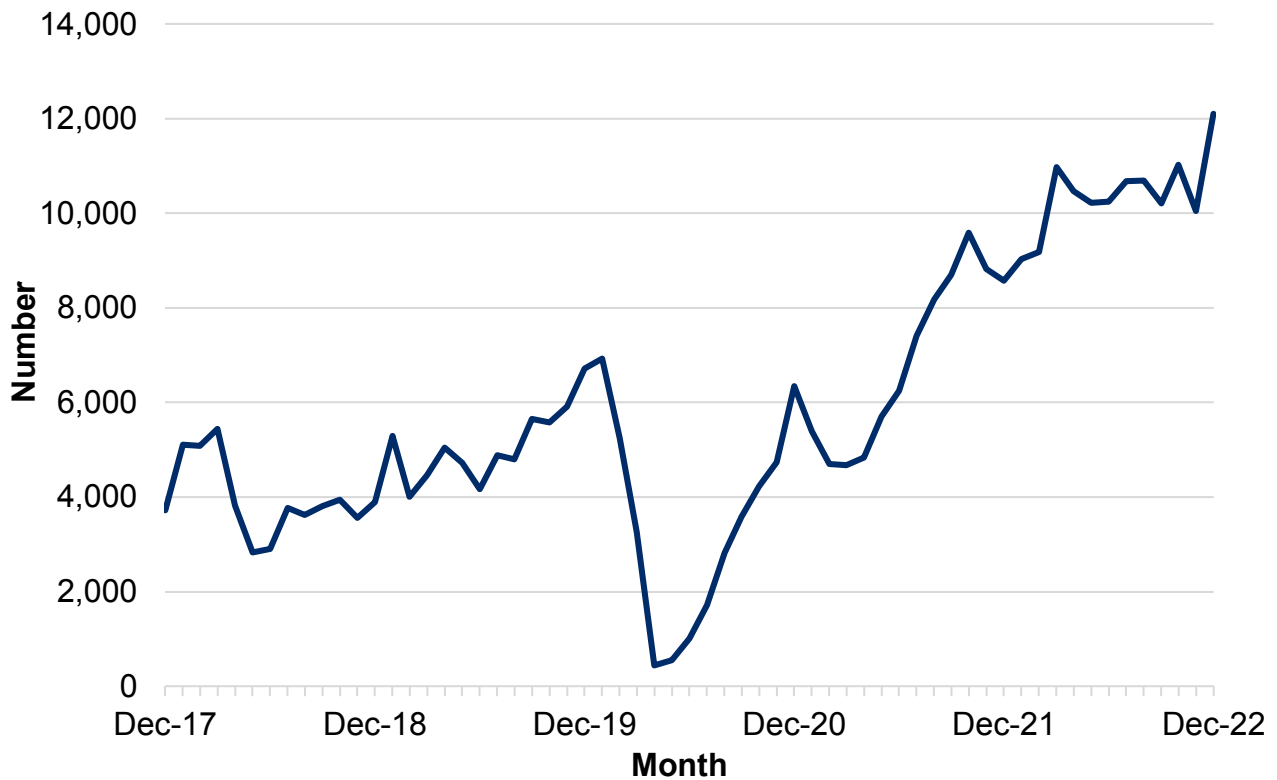
In 2019, the median time patients spent in emergency departments was around 2 hours and 30 minutes. During the early part of the pandemic, as attendances

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 reached a record high of 3 hours and 8 minutes in March 2022. In the latest data for December, the median waiting time was 3 hours and 2 minutes, the third highest on record and 11 minutes slower than the previous month.

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 December, children (aged 0-4) spent an average of 2 hours and 42 minutes. Adults aged 85 and over spent an average of 7 hours and 32 minutes in emergency departments.

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



Since October 2015 the target of no patients waiting longer than 12 hours has not been met. The decrease in patients waiting over 12 hours in March 2020 is due to the decrease in the number of emergency department attendances during the coronavirus pandemic.

Source: Emergency department data set (EDDS), Digital Health and Care Wales (DHCW) ([Performance against the 12 hour target by hospital on StatsWales](#))

In December there were 12,099 patients waiting 12 hours or more. This was 2,047 (20.4%) more than in the previous month and the highest on record.

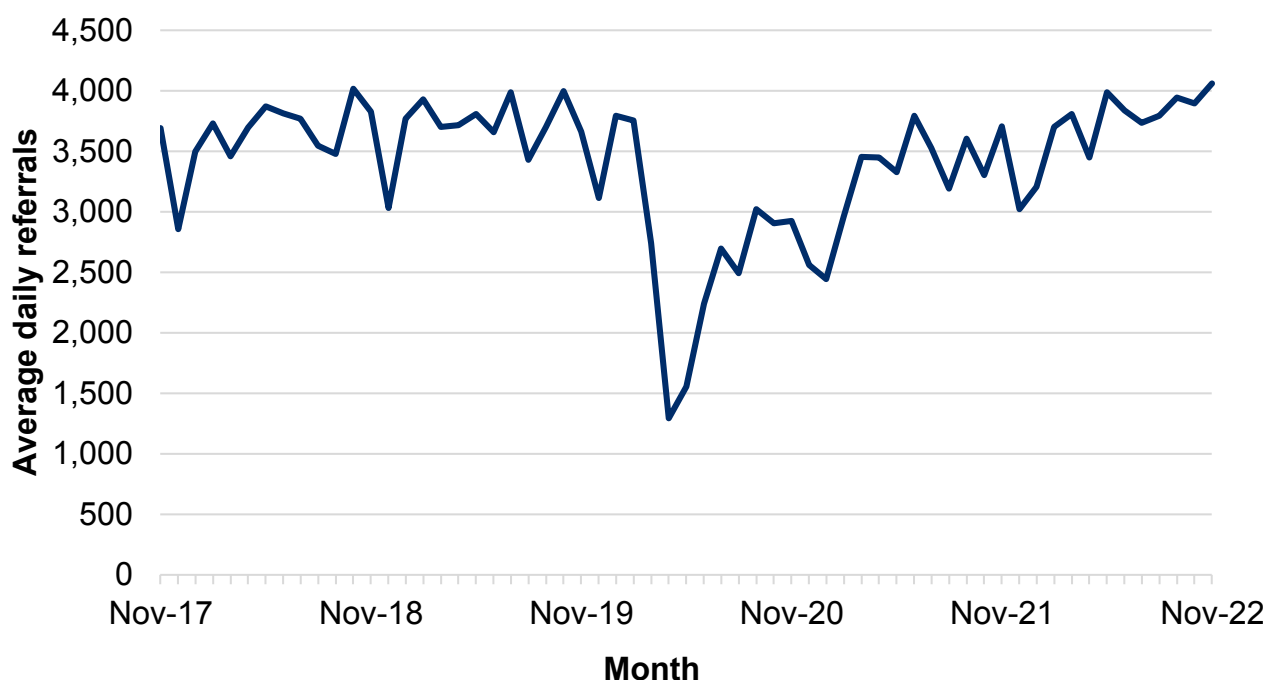
# Scheduled care activity

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

## Outpatient referrals and appointments

### Activity

Figure 6: Average daily number of referrals for first outpatient appointment, November 2017 to November 2022



The decrease in outpatient referrals from February 2020 onwards is due to the

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coronavirus pandemic.

Source: Outpatient Referral Dataset, Digital Health and Care Wales (DHCW)  
([Outpatient referrals on StatsWales](#))

An average of 4,060 referrals for first outpatient appointments were made per day in November. This is an increase of 4.3% (166 more referrals per day on average) compared to October and the highest on record.

## Performance

### Targets

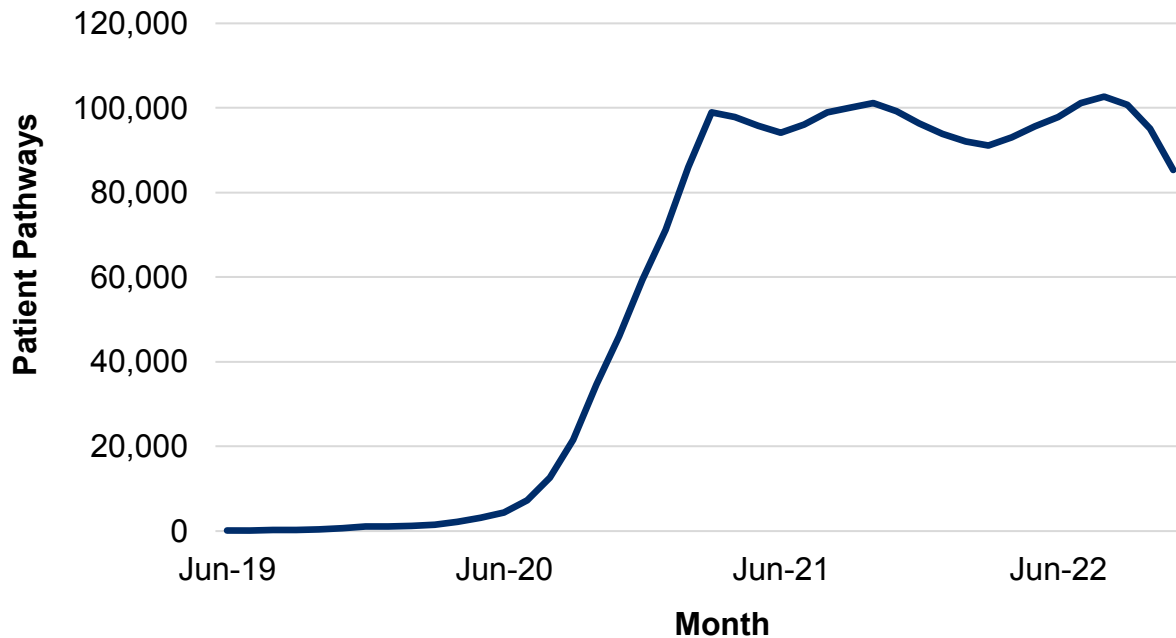
- No one waiting for longer than a year for their first outpatient appointment by the end of 2022 (a target established in the [planned care recovery plan](#)).

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**Figure 7: Number of pathways waiting more than a year for their first appointment, November 2017 to November 2022**



The chart illustrates the number of Pathways Waiting More than a Year for their First Appointment, by Month. It shows that since the start of the coronavirus pandemic the number of patient pathways have increased.

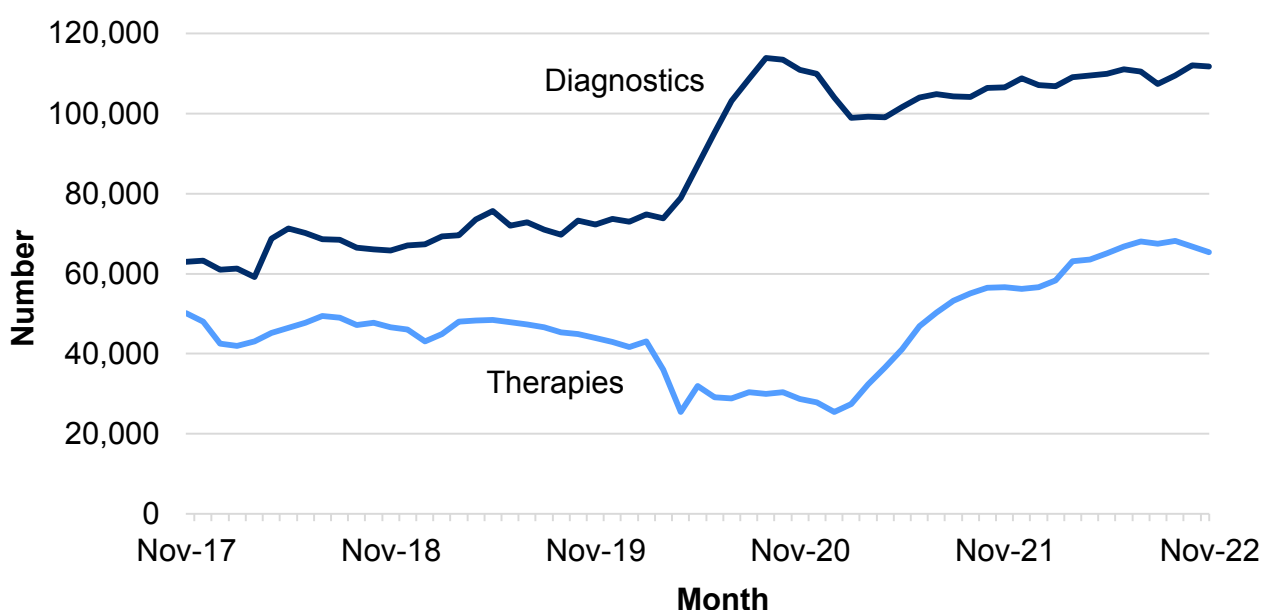
Source: Referral to treatment times (RTT), Digital Health and Care Wales (DHCW) ([Referral to treatment on StatsWales](#))

In November, the number of pathways waiting longer than one year for their first outpatient appointment decreased by 10.3% compared to the previous month to around 85,300. Pathways waiting longer than one year for a first outpatient appointment increased dramatically over the course of the pandemic.

# Diagnostic and therapy waiting times

## Activity

**Figure 8: Total number of patient pathways waiting for diagnostic and therapy services, November 2017 to November 2022**



The increase in patients waiting from March 2020 for diagnostic services is due to the coronavirus pandemic. The decrease in the number of people waiting for therapy services in March 2020 is mainly due to fewer patients accessing these services.

Source: Diagnostic and Therapy Services (DATS), Digital Health and Care Wales (DHCW) ([Diagnostic and Therapy Services Waiting Times by week on StatsWales](#))

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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](#).

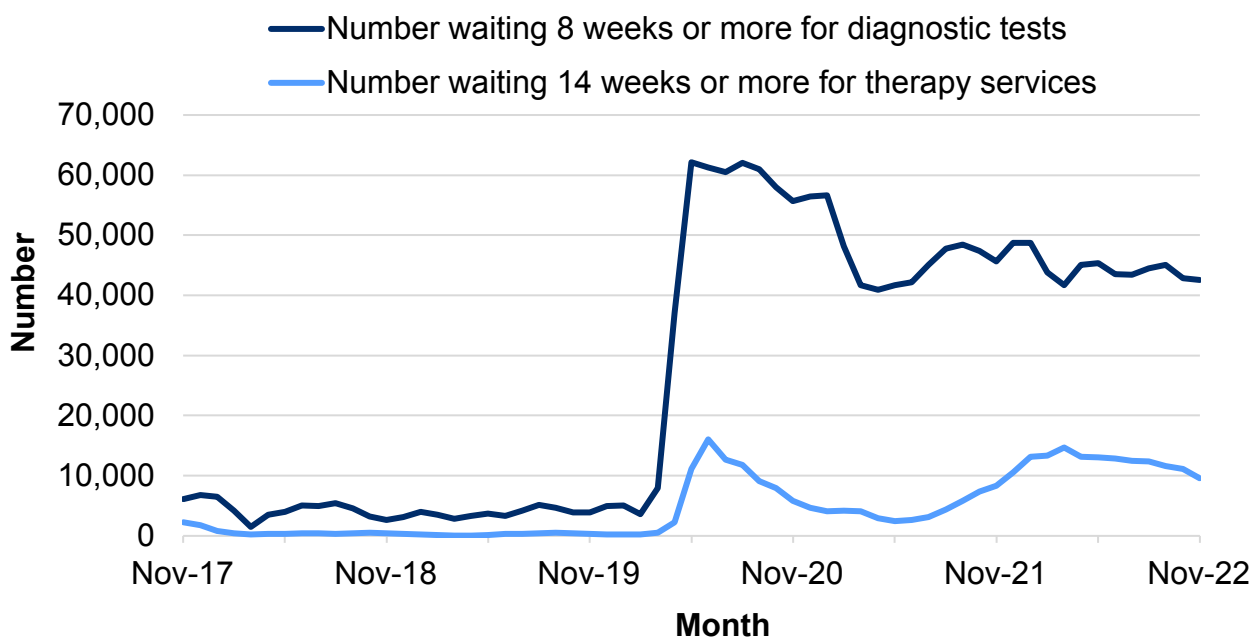
In November there were over 111,000 patient pathways waiting for diagnostics, a slight decrease of 0.3% compared with the previous month. There were over 65,000 patient pathways waiting for therapies, a decrease of 2.1% compared to the previous month, but still the sixth highest level on record.

## 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.
- The [planned care recovery plan](#) established a target date of Spring 2024 to reach these targets.

**Figure 9: Number of patient pathways waiting over the target time for diagnostic and therapy services, November 2017 to November 2022**



The increase in the number of patients waiting over the target time from March 2020 is due to the coronavirus pandemic.

Source: Diagnostic and Therapy Services (DATS), Digital Health and Care Wales (DHCW) ([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 November, about 42,500 patient pathways were waiting longer than the target time for diagnostics. This was a slight decrease of 0.6% compared to the previous month.

At the end of November there were about 9,500 patient pathways waiting longer than the target time for therapies. This was a decrease of 14.1% compared to the previous month and an eighth consecutive monthly fall.

Median waiting times had been relatively stable for diagnostic tests since 2017 (2.8 weeks on average) and for therapy services since 2018 (3.6 weeks on average). Median waiting times for both services peaked in 2020 (14.3 weeks for diagnostics and 14.9 weeks for therapies).

In November, the median waiting time for diagnostic tests was 5.4 weeks, compared to 5.3 in the previous month. The median waiting time for therapy services was 5.2 weeks, the same level as 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](#).

Also published is newly collected management information for the number of individual patients on treatment waiting lists in Wales.

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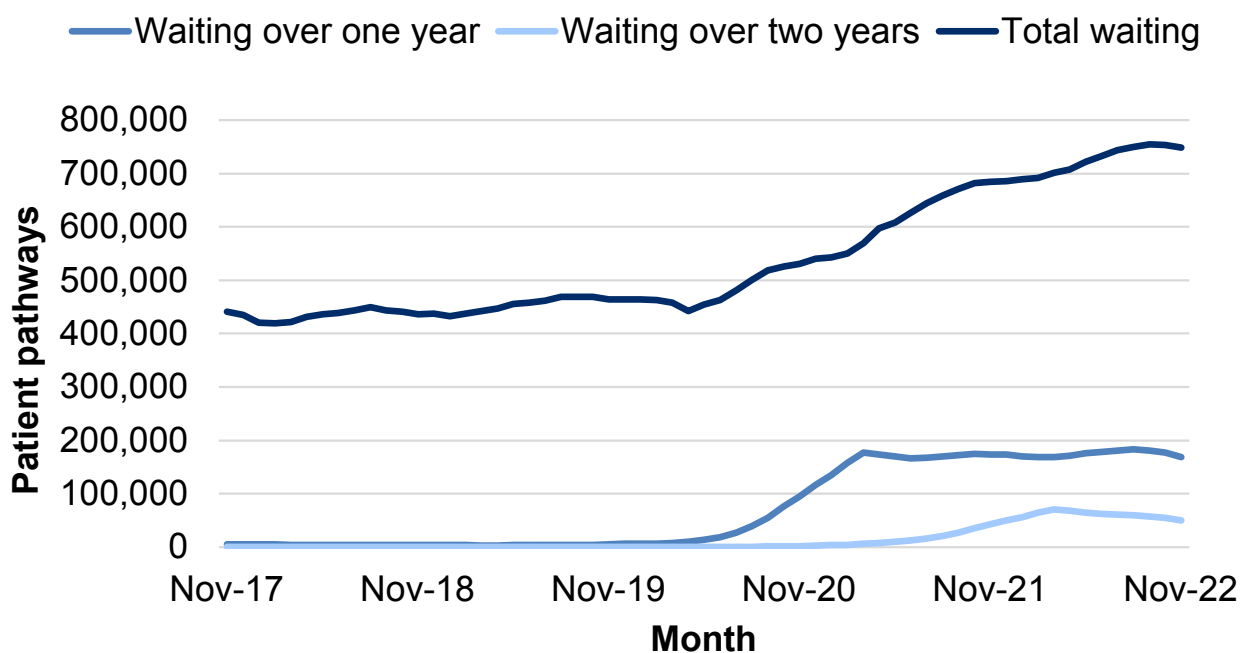
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## Performance

### Targets

- No patients waiting longer than two years in most specialities by March 2023, and no patients waiting longer than one year in most specialities by Spring 2025 (new targets established in the [planned care recovery plan](#)).
- 95% of patients waiting less than 26 weeks from referral.
- No patients waiting more than 36 weeks for treatment from referral.

Figure 10: Number of patient pathways waiting to start treatment, November 2017 to November 2022



The chart illustrates the patient pathway data. It shows that since the coronavirus pandemic the number of patient pathways have increased.

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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 November there were over 748,000 patient pathways waiting to start treatment. This was the second consecutive monthly fall, down 0.7% from over 753,000 in October, but this is still the fourth highest number on record and 61.5% higher than February 2020. [Waiting lists statistics are not directly comparable across the four nations of the UK \(Chief Statistician's blog\)](#).

Over 168,500 pathways were waiting more than one year in November. This number has fallen for the third consecutive month, though it has been relatively stable since Spring 2021. About 49,500 pathways were waiting more than two years, 30 per cent lower than the peak, following an eighth consecutive monthly fall after a consistent increase over the previous year.

The number of patient pathways is not the same as the number of individual patients, because some people have multiple open pathways.

We do not have official statistics on the number of individual patients waiting to start treatment. However, newly collected management information suggests that in November, when the National Statistics (above) reported there were over 748,000 open patient pathways, there were estimated to be 586,000 individual patients on treatment waiting lists in Wales. This was the second consecutive monthly fall, a decrease of almost 3,100 patients from October.

Unlike the National Statistics elsewhere in this release, which have been independently assessed against the Code of Practice for statistics, this estimate is based on newly collected management information. Whilst the principles of the Code of Practice have been applied, quality assurance is not to the level of the National Statistics. Work is ongoing to further understand the strengths and limitations of this data and this will be communicated as we learn more. For these reasons there is greater uncertainty around this estimate than with the

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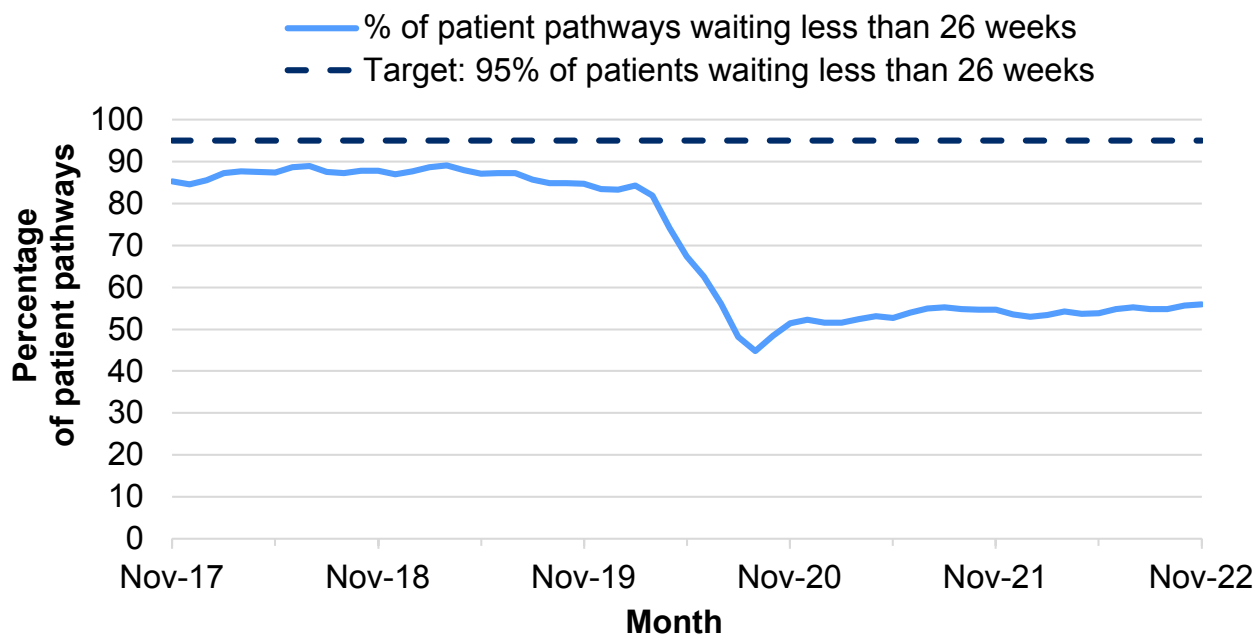
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other figures in this release. However, the level of public interest in understanding the number of patients in addition to the number of patient pathways adds sufficient value to warrant making this available.

**Figure 11: Percentage of patient pathways waiting less than 26 weeks, by month and weeks waited, November 2017 to November 2022**



The chart illustrates the month on month fluctuations of the data and shows that since the coronavirus pandemic the percentage of patients waiting less than 26 weeks has decreased.

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 over 748,000 patient pathways waiting to start treatment, by the end of November, 56.0% had been waiting less than 26 weeks. This was 0.4% percentage points higher than in the previous month but 28.3 percentage points

lower than February 2020.

**Figure 12: Number of patient pathways waiting more than 36 weeks, by month and weeks waited, November 2017 to November 2022**



The chart illustrates the month on month fluctuations of the data and shows that since the coronavirus (COVID-19) pandemic the number of patients waiting more than 36 weeks has increased.

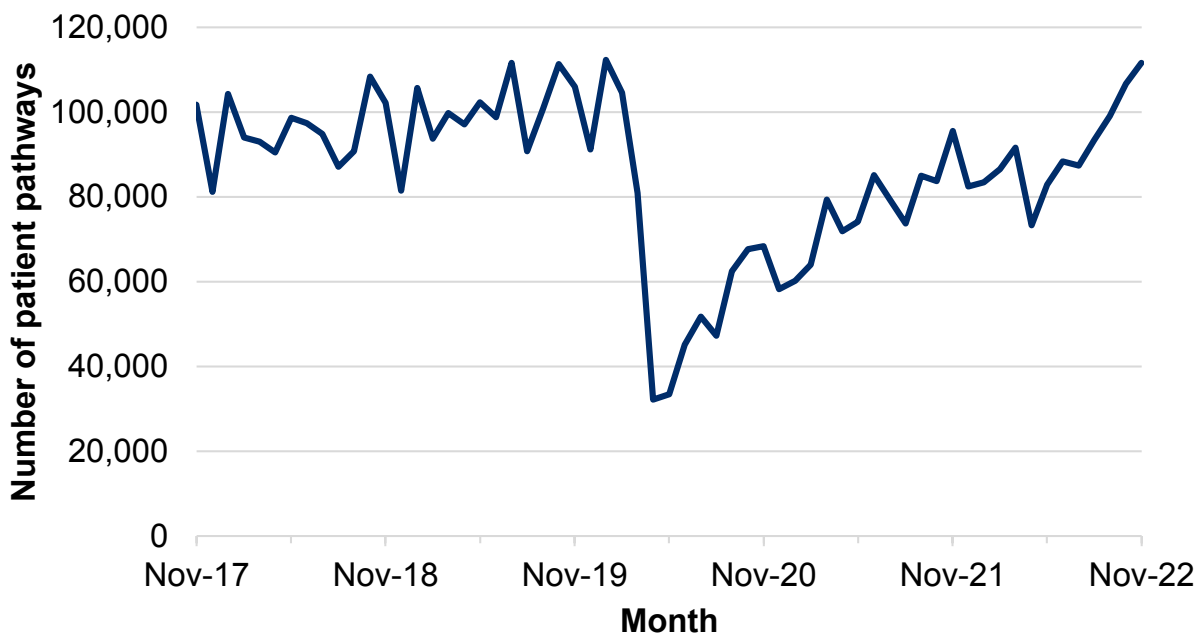
Source: Referral to treatment times (RTT), Digital Health and Care Wales (DHCW) ([Percentage of patient pathways waiting to start treatment within target time by month and grouped weeks on StatsWales](#))

In November, around 253,000 patient pathways had been waiting more than 36 weeks. This represented 33.8% of all patient pathways waiting to start treatment. This was 7,209 (or 2.8%) fewer than in the previous month but still high in historical context.

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

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 November, the median waiting time was 21.2 weeks, which was a decrease from 21.6 weeks in the previous month.

**Figure 13: Number of closed patient pathways, November 2017 to November 2022**



The decrease in the number of closed pathways in the months following March is due to the coronavirus pandemic.

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: Data revised to now include Cwm Taf Morgannwg health board closed pathways. Up to the July 2022 statistical release, the data series was not available for Cwm Tag Morgannwg. More details are available in the [quality](#)

## information.

The number of patient pathways closed in November was 111,600. This was an average of 5,073 patient pathways closed per working day. This was a similar level as the previous month and the second highest since February 2020.

## Cancer services

These statistics were previously labelled as **experimental (ONS)**. Following a review of methods, quality and utility we have now removed the experimental label and from November 2022 these are **official statistics (UKSA)**.

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

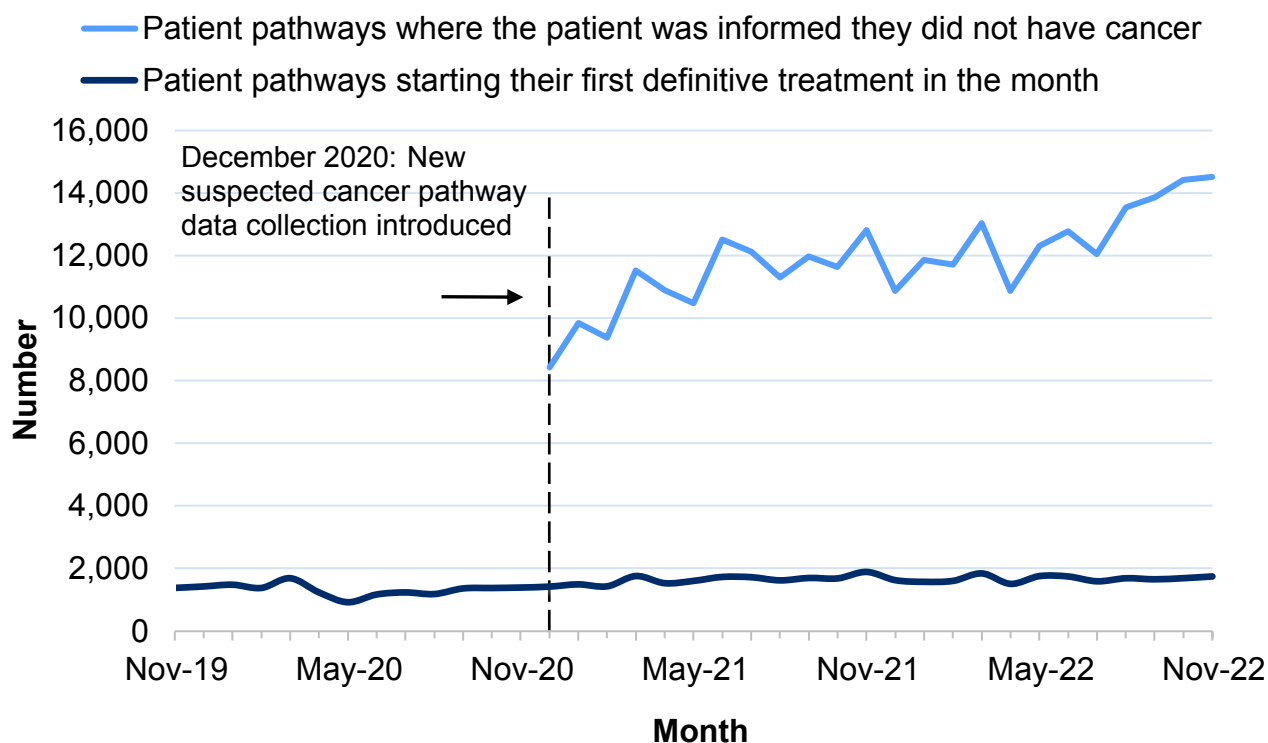
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## Activity

**Figure 14: Closed suspected cancer pathways in the month, by month and outcome, November 2019 to November 2022**



A chart showing the number of patients informed they do not have cancer and the number of patients starting their first definitive treatment in the month.

Source: Suspected Cancer Pathway, Digital Health and Care Wales (DHCW) and National Data Resource (NDR) ([Suspected cancer pathway \(closed pathways\) on StatsWales](#))

In November 1,749 pathways where the patient was newly diagnosed with cancer started their first definitive treatment in the month. This was an increase

of 3.2% compared to the previous month.

14,499 pathways were closed following the patient being informed they did not have cancer. This is an increase of 0.6% compared to the previous month and the highest level on record.

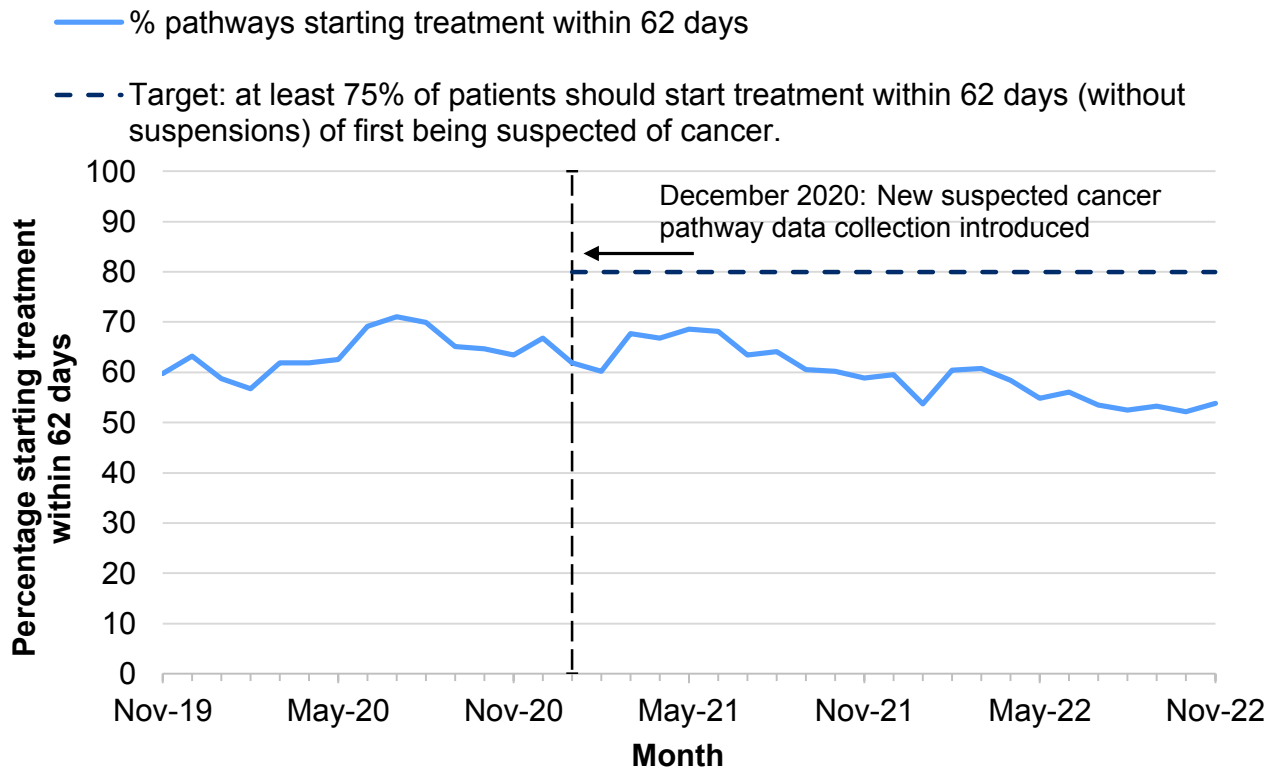
In November, 15,707 patient pathways were opened in the month following a new suspicion of cancer. This was a an increase of 124 (0.8%) on the previous month.

## 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.
- The [planned care recovery plan](#) established a new target of 80%, to be reached by 2026.

**Figure 15: Percentage of pathways where the patient started their first definitive treatment within the target time, November 2019 to November 2022**



A chart showing the percentage of patients that started their first definitive treatment within 62 days of first being suspected of cancer in the month, by month.

Source: Suspected Cancer Pathway, Digital Health and Care Wales (DHCW) and National Data Resource (NDR) ([Suspected cancer pathway \(closed pathways\) on StatsWales](#))

In November, 53.9% (942 out of 1,749) of pathways started their first definitive treatment within 62 days of first being suspected of cancer. This was 1.7 percentage point higher than the previous month but 5.0 percentage points lower than November 2021 and low in historical context.

## 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](#)

## 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.

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

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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](mailto:stats.healthinfo@gov.wales).

## Next update

23 February 2023

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