Report Title	Performance & Month 10 202	& Activity Repo 2-2023	rt A	Agenda Item	3.1										
Meeting Title	Management (Group	N	leeting Date	23/03/2023										
FOI Status	Open/Public														
Author (Job title)	Head of Informa	ation													
Executive Lead (Job title)	Director of Fina	nce													
Purpose of the Report	activity levels d any signs of re decreases are s	The purpose of this report is to highlight the scale of the decrease in activity levels during the peak COVID-19 period, and whether there are any signs of recovery in specialised services activity. These activity decreases are shown in the context of the potential risk re patient harms and of the loss of value from nationally agreed financial block contract arrangements.													
Specific Action Required	RATIFY	APPROVE	SUPPOR	Γ ASSURE	INFORM										
Recommendate Members are as • Note the	sked to:														

PERFORMANCE AND ACTIVITY REPORT MONTH 10 2022-2023

1.0 SITUATION

This report sets out the scale of decrease in specialised services activity delivered for the Welsh population by providers in England, together with the two major supra-regional providers in South Wales. The context for this report is to illustrate the decrease during the peak COVID-19 periods, and to inform the level of potential harms to specialised services patients. It also illustrates the loss of financial value from the necessary national block contracting arrangements introduced to provide overall system stability, but this is covered in greater detail in the separate monthly Finance report. Recovery rates, access comparisons across Health Boards and waiting lists are also considered, along with the relevant new Performance Measures set out by Welsh Government.

2.0 BACKGROUND

The impact of COVID-19 on the level of provision of healthcare has been felt across all levels of service, including specialised services which have traditionally been assumed to be essential services. WHSSC has used the national data sources from DHCW, together with monthly contract monitoring information to inform this report. Members are asked to note that the DHCW data for Admitted Patient Care and Patients Waiting includes all Welsh activity at providers with a WHSSC contract, and also includes some non-specialist activity that may be included in local Health Board contracts. The DHCW data used in this report was refreshed on February 28th 2023.

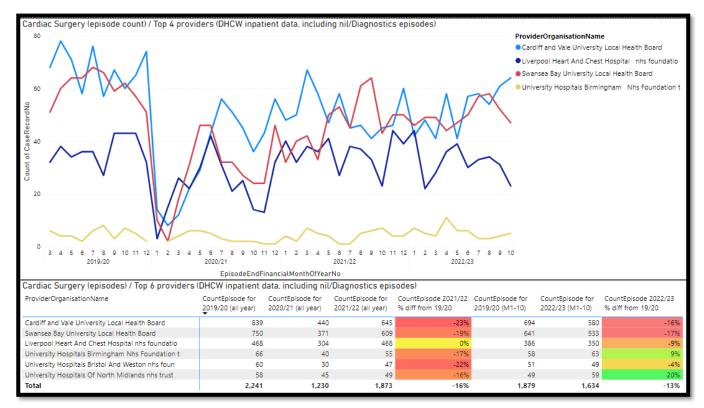
3.0 ASSESSMENT

Specialties/areas covered in this report include:

- Cardiac Surgery
- Thoracic Surgery
- Neurosurgery
- Plastic Surgery
- Paediatric Cardiac Surgery
- Paediatric Surgery
- Bariatric Surgery (new sub-heading added this month)
- English provider activity (all specialist and non-specialist)
- Annex A summary of recovery across main specialties/providers
- Annex B and C summary of Cardiff & Vale and Swansea Bay contracts
- Appendix 1 charts of DHCW data showing inpatient activity at NHS England Trusts with a WHSSC contract (specialist and non-specialist)
- Appendix 2 tables including the relevant Performance measures as directed by Welsh Government

3.1 Cardiac Surgery

3.1.1 Cardiac Surgery – Activity and Access Rate Summary

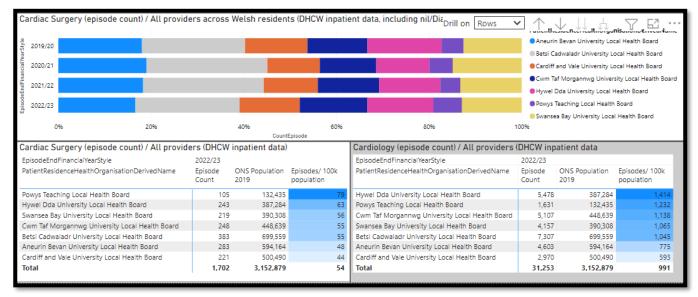


Data source: DHCW central data warehouse; <u>Note: inpatient activity includes the nil/diagnostics procedure</u> <u>episodes as there is currently significant procedure coding backlogs for recent months for all main providers</u>

The above table highlights the variance in Cardiac Surgery inpatient recovery across the main specialist providers, with Liverpool Heart & Chest showing the highest and quickest recovery. The main 3 providers show the expected inverse relationship to the COVID-19 waves across the UK, with activity increasing again.

There was a drop in the volume of Cardiac inpatient activity reported during the COVID-19 period, which is recovering but stood at 48% less activity overall in 2020/21 compared to 2019/20, and 21%/16% less in 2021/22 (excluding non-procedure/diagnostics episodes/including them). Using all activity to date this year (Month 10 of 2022/23), activity is 13% lower than to the same month in 2019/20. Historically, Cardiac surgery is seen as an urgent elective specialty with high levels of emergency and inter hospital referrals and lower levels of elective referrals. The risk of COVID infection in cardiac patients was a real risk identified at the outset of the period and outcomes for positive patients were poor.

There has been some proactive switching into TAVI (Transcatheter Aortic Valve Implant) procedures for selected sub groups of patients.



Data source: DHCW central data warehouse; Note: inpatient activity includes non-procedure/diagnostic episodes

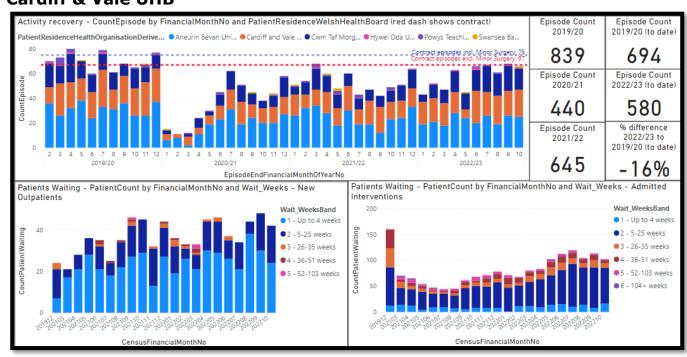
Access rates across the Health Boards varied the most during the initial COVID-19 wave due to the earlier recovery of English providers, but have stabilised in recent months to almost the same split of the available activity as 2019/20.

Inpatient episodes per 100k population varies overall across the Health Board areas, from 44 to 79 so far in 2022/23 as per the small table above to the left.

The access rate data for Cardiology is shown for information only as a related specialty, as this is not WHSSC-commissioned, except for some specific devices/interventions.

3.1.2 Cardiac Surgery - Recovery and Waiting Lists

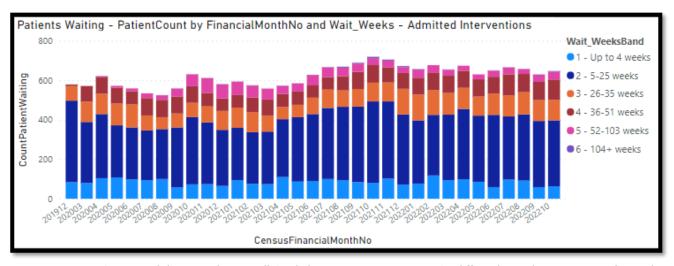
Cardiff & Vale UHB



Data source: DHCW central data warehouse; Note: inpatient activity includes non-procedure/diagnostic episodes

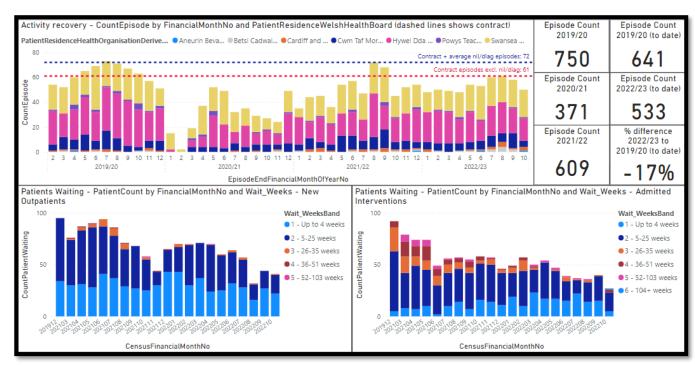
The previous tables show a summary of the position at Cardiff & Vale in relation to Cardiac Surgery. Whilst the chart showing New Outpatients shows a small increase in new referrals (those between 0-4 weeks) again, elective activity had kept pace to the point that the waiting list for admissions had reduced to almost a third of pre-COVID-19 demand by the winter of 2021, with few patients now waiting over 26 weeks, although this waiting list has been growing again over the past few months.

It is worth noting that patients waiting for admissions for Cardiology treatments have increased marginally at Cardiff, although some are now waiting longer.



Data source: DHCW central data warehouse; all Cardiology patients waiting at Cardiff – admitted interventions (specialist and non-specialist).

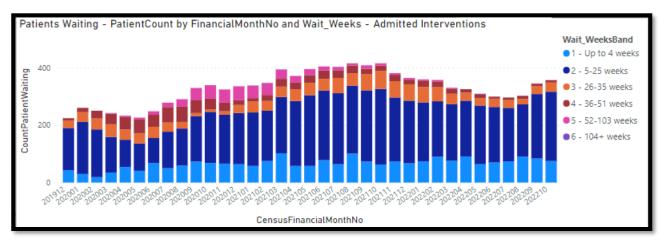
Swansea Bay UHB



Data source: DHCW central data warehouse; Note: inpatient activity incudes non-procedure/diagnostic episodes

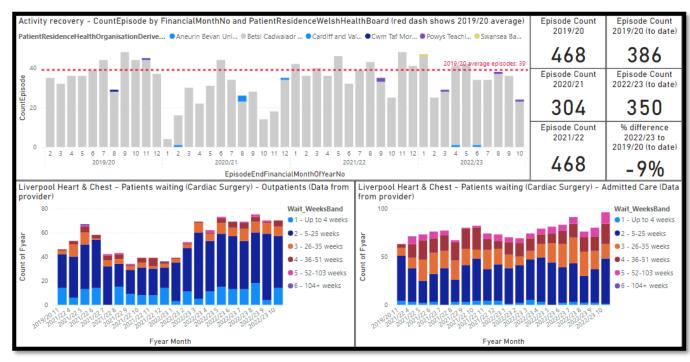
The previous tables show a summary of the position at Swansea Bay in relation to Cardiac Surgery. Whilst the chart showing New Outpatients shows new referrals (those between 0-4 weeks) back again to Pre-COVID-19 levels, elective activity has kept pace to the point that the waiting list for admissions has reduced to about half of Pre-COVID-19 demand, with few patients now waiting over 26 weeks.

It is worth noting that patients waiting for admissions for Cardiology treatments had almost doubled at Swansea Bay but has been steadily reducing since January 2022; it is unknown how many of these are waiting for specialist procedures.



Data source: DHCW central data warehouse; all Cardiology patients waiting at Swansea Bay – admitted interventions (specialist and non-specialist).

Liverpool Heart & Chest Hospital



Data source: Inpatient activity from DHCW central data warehouse; **Note: inpatient activity includes non-**procedure/diagnostic episodes. Waiting list data from provider direct.

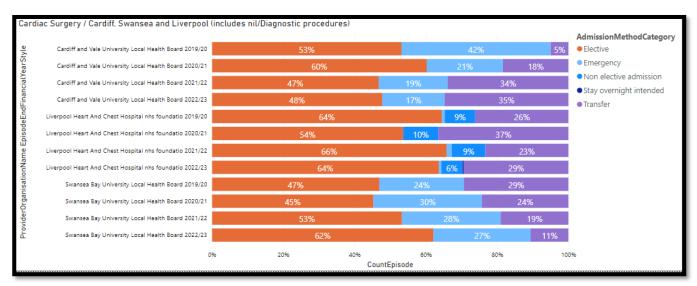
The tables above show a summary of the position at Liverpool Heart & Chest in relation to Cardiac Surgery. Whilst the chart showing New Outpatients shows a similar pattern in new referrals (those between 0-4 weeks) again to Pre-COVID-19

levels, elective activity is also back to almost the same Pre-COVID-19 levels. The waiting list for admissions has remained roughly steady over the past 2 years, but with over half now waiting over 26 weeks.

Other activity notes

An additional note is that the reported pattern of activity is historically different between Wales and England, with England reporting typically higher proportions of elective/transferred expected overnight stay activity. Welsh centres have reported that the pressure from transfers squeezes capacity available for elective cases with a resulting adverse impact on the waiting list.

The below chart shows the elective/emergency percentages of the overall inpatient activity. Whilst Liverpool Heart & Chest appears to be back to 2019/20 splits, Cardiff has seen a marked increase in Transferred activity, while Swansea Bay has seen a decrease in Non-elective and Transferred activity percentages.



Data source: DHCW central data warehouse; all inpatient activity including non-procedure/diagnostic episodes

Specialised Planner comments:

Commencing December 2022, CVUHB and SBUHB agreed that CTMUHB cardiac surgery patients (excluding PMVR) would be referred to SBUHB for an initial period of six weeks. As noted in the last iteration of this report, this arrangement has worked well – albeit that numbers have been less than anticipated – and it was agreed in January 2023 it would be extended for an additional six weeks. Potential for a further extension and/or formalised long-term arrangements were discussed at the February CVUHB Cardiac Risk, Assurance and Recovery meeting, where it was highlighted that owing to both the aforementioned arrangement and an increase in the volume of cardiac surgery undertaken by CVUHB, waiting lists have reduced. No agreement was reached and discussions will be revisited at the end of the additional six weeks. SBUHB are understood to have additional cardiac surgery capacity are keen for the arrangement to be further extended.

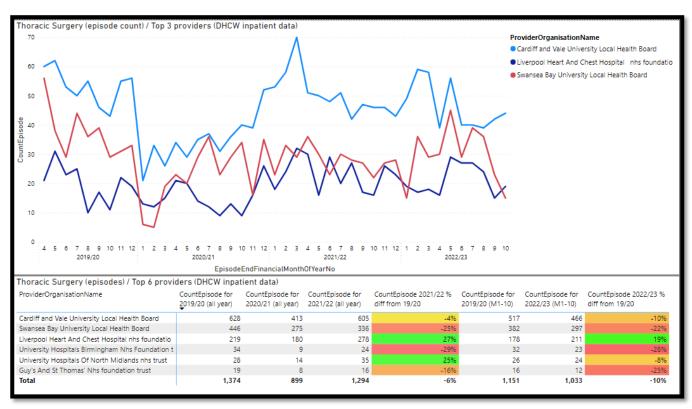
Previous iterations of this report have highlighted the risk that Cardiac Surgery referrals and waiting times will increase over the coming months as a result of the efforts of local health boards to manage the recovery of cardiology services. As identified previously, indications that increases have not been as significant as

anticipated has led to the risk being deescalated, but Cardiff and Vale's waiting list position has precluded the risk being removed from the CRAF. Waits will continue to be closely monitored lest possible risk re-escalation be required; in the event that recent activity increases are sustained, risk de-escalation will be considered.

This report has also previously highlighted the work underway to investigate the continuing growth in the number of TAVI procedures, the profile of devices employed, and any resultant impact on the volume of cardiac surgery commissioned by WHSSC. The outcomes of this exercise were incorporated into the 'WHSSC Cardiac Review' report, which was endorsed by WHSSC Joint Committee in January 2023. Work has now underway on Phase 1 of the planned review, for which a Project Initiation Document (PID) is being prepared. Phase 1 will seek to re-baseline the TAVI/cardiac surgery contract, ascertain whether the TAVI policy remains fit for purpose, and consider the differential costs of TAVI valve types. Phase 1 is due to be completed by June 2023.

3.2 Thoracic Surgery

3.2.1 Thoracic Surgery – Activity and Access Rate Summary

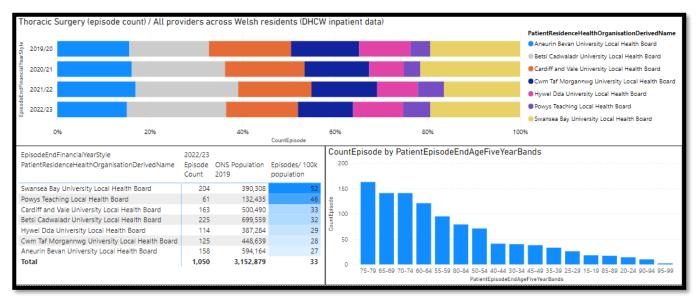


Data source: DHCW central data warehouse; all inpatient activity

The above table highlights the variance in Thoracic Surgery inpatient recovery across the main specialist providers, with Liverpool Heart & Chest showing the highest and quickest recovery to activity. Liverpool actually performed inpatient episodes 27% higher in 2021/22 than 2019/20, and 19% higher so far this year (2022/23). Cardiff & Vale is showing a small drop in activity of 10% to 2019/20 to

the same month this year. However, Swansea Bay is showing a 22% drop in activity to date compared to 2019/20, although the later section showing more detail indicates the total numbers on the waiting list is not suffering due to this.

The drop in the volume of Thoracic inpatient activity reported over the COVID-19 period stood at 35% less activity overall in 2020/21 compared to 2019/20, and 6% less in 2021/22. Using activity to date this year 2022/23 (Month 10), activity is 10% less than 2019/20.



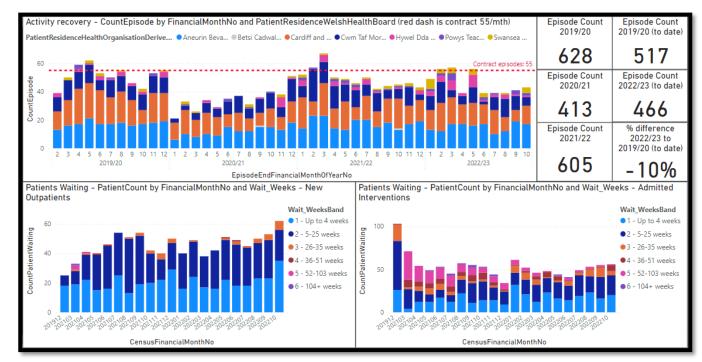
Data source: DHCW central data warehouse; all inpatient activity

Access rates of the Health Boards varied slightly across the past two years, which is to be expected given the relatively low activity numbers (about 100/month), but are now close again to the pre-Covid splits in 2019/20.

Inpatient episodes per 100k population varies significantly overall across the Health Board areas, from 27 to 52 as per the small table above for 2022/23.

3.2. Thoracic Surgery – Recovery and Waiting Lists

Cardiff and Vale UHB

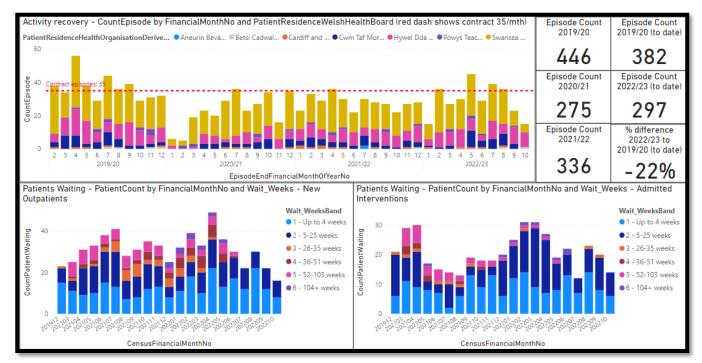


Data source: DHCW central data warehouse; all patients waiting with an open pathway

The tables above show a summary of the position at Cardiff & Vale in relation to Thoracic Surgery. Whilst the chart showing New Outpatients shows a return to pre-Covid levels of new referrals (those between 0-4 weeks) again, elective activity has recovered to an equivalent episode count compared to 2019/20. The waiting list for admissions has reduced to around half of pre-COVID-19 demand.

It is worth noting that Cardiff had recently picked up some activity from Swansea Bay, due to an agreement between the two centres. This can be seen by the Swansea Bay resident episodes, shown in mustard in the top chart.

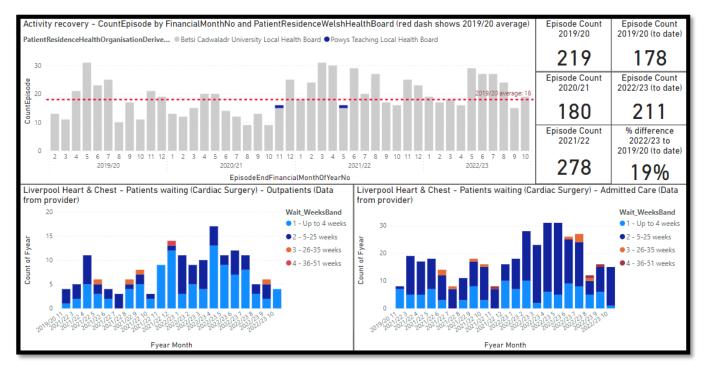
Swansea Bay UHB



Data source: DHCW central data warehouse; all patients waiting with an open pathway

The previous tables show a summary of the position at Swansea Bay in relation to Thoracic Surgery. Whilst the chart showing New Outpatients shows consistent numbers, elective activity is still lower than 2019/20. However, the overall waiting list for admissions has not deteriorated from the position at March 2020, although the numbers are not high.

Liverpool Heart & Chest Hospital



Data source: DHCW central data warehouse; Waiting list data from provider directly

The tables above show a summary of the position at Liverpool Heart & Chest in relation to Thoracic Surgery. Whilst the chart showing New Outpatients shows a quick increase in new referrals (those between 0-4 weeks) after the pandemic started, inpatient activity has increased by 19% this year compared to 2019/20. Despite this, the patients waiting for admission had increased from pre-Covid levels, although these are not material numbers and are easily skewed month-onmonth.

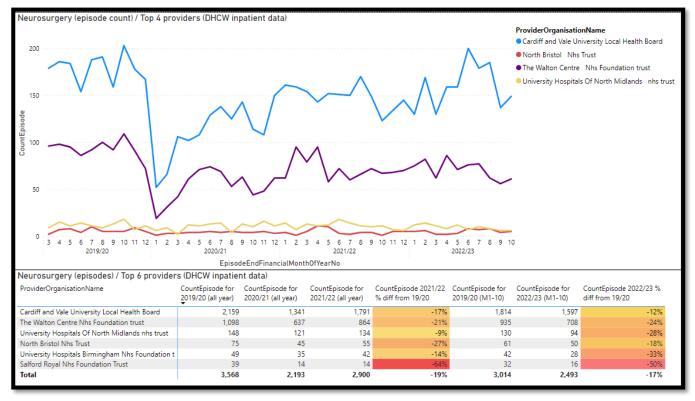
Specialised Planner comments:

In interpreting the data above, it is important to note that collaborative arrangements are in place between the two South Wales thoracic surgery services to use the joint capacity across the 2 services to ensure equitable access. This ensures that if their usual centre is capacity constrained due to the impact of the pandemic (or potentially other factors) and there is available capacity at the other south Wales service, patients can be cross referred and access treatment on the basis of clinical need. This means that activity at a particular centre does not directly translate into access for residents of health boards for which it is the usual provider.

However, to date, the joint meeting has focused on primary lung cancer patients. The service has been providing elective operations for non-cancer patients but a small number of long waiters still remain within the backlog.

3.3 Neurosurgery

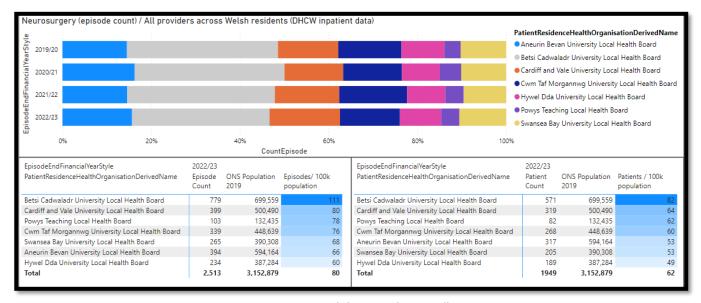
3.3.1 Neurosurgery – Activity and Access Rate Summary



Data source: DHCW central data warehouse; all inpatient activity

The above table highlights the variance in Neurosurgery inpatient recovery across the main specialist providers, with Cardiff and the Walton showing similar recoveries with reductions of 12% and 24% this year compared to the same point in 2019/20. Overall activity was 39% less in 2020/21 than in 2019/20, with the equivalent figure being 19% less in 2021/22, and 17% less so far in 2022/23.

Please note that about 2/3rds of the UH North Midlands activity above relates to North Wales residents, which is paid for through a local contract and not WHSSC. The remaining activity relates to Powys residents, which does flow through WHSSC contracting.



Data source: DHCW central data warehouse; all inpatient activity

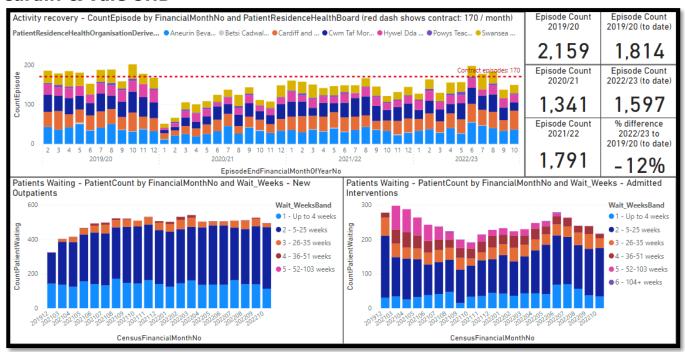
Access rates across the Health Boards have not varied much across the past four years, as shown in the charts above. Inpatient episodes per 100k population in 2022/23 so far vary from 60 to 111 across Health Boards in the bottom left chart, with North Wales having the highest access.

Using individual patient counts (bottom right chart) also shows a similar access order. It is worth noting that the outlying access rate for Betsi Cadwaladr is related to the way activity is reported between the two main centres as being in different NHS countries. For example, as a Specialist centre, the Walton reports activity under the Neurosurgery specialty that is reported under others within Welsh providers, and the ratios are also reflected in this way in the waiting list numbers for Neurosurgery.

Please note a separate deep dive report into Neurosurgery was produced in July 2022 – please see that for further analysis if required.

3.3.2 Neurosurgery – Recovery and Waiting Lists

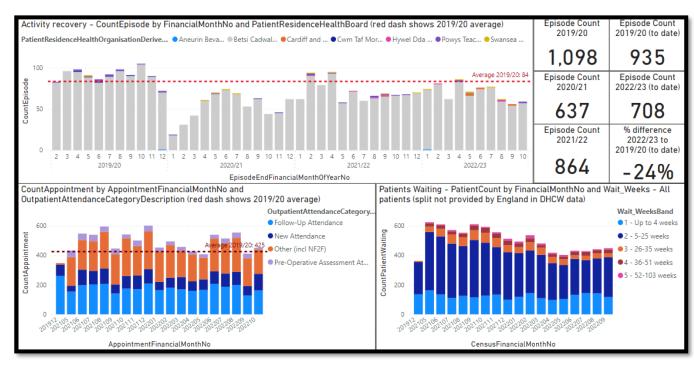
Cardiff & Vale UHB



Data source: DHCW central data warehouse; all patients waiting with an open pathway

The tables above show a summary of the position at Cardiff & Vale in relation to Neurosurgery. The chart showing New Outpatients shows the total waiting is now higher than pre-Covid. Admitted activity increased from the initial reduction, then stayed static for a few months, although the total waiting list for admissions had been steadily reducing and there are now no patients waiting over 52 weeks.

The Walton Centre



Data source: DHCW central data warehouse; all patients waiting with an open pathway

The tables above show a summary of the position at the Walton in relation to Neurosurgery. Whilst activity is 24% less this year than 2019/20, the total patients waiting is similar in total compared to what it was as COVID-19 struck, although some patients are now waiting longer. However, the past few months had shown an improvement in the total waiting list numbers, and this should continue.

One point to note is the bottom left chart, which shows the movement across types of Outpatient appointment since March 2020. It is clear that non face-to-face appointments have been well-utilised during the COVID-19 period, and have actually increased to above pre-Covid levels.

Specialised Planner comments:

Cardiff & Vale UHB

Cardiff's Neurosurgery Recovery Plan was discussed with the service in November 2022 at the regular Performance meeting.

There has been a rise in Level 2 patients and the team are balancing emergencies with the operational pressures.

Theatre Utilisation rates are now at the levels that were pre-Covid (75-85%). It is difficult to consistently achieve 85% target due to make of the sub specialties within the Neuro directorate. They do not have small cases to add onto the end of a list.

DSA backlog has improved considerably through the additional WLI's running on the weekends.

In September this was the first time the Neuro team managed to achieve contract activity levels, this was as a result of the increase in DSA work which was done during this month.

Outpatient numbers are growing with 493 patients waiting for a new outpatient appointment. There are plans to repatriate the outpatient clinics from Rookwood to UHW in January 2023. Over the past few months the Directorate have seen a significant number of follow up patients.

There are significant workforce challenges with theatre staff and shortfall of ODP recruitment. However, the service is still planning extended days as they have done previously – this will commence in January 2023. Staff will be paid an enhanced rate, but this needs to be signed off by the Health Board.

Please note that due to improved and consistent inpatient activity, this service has been de-escalated.

The Walton

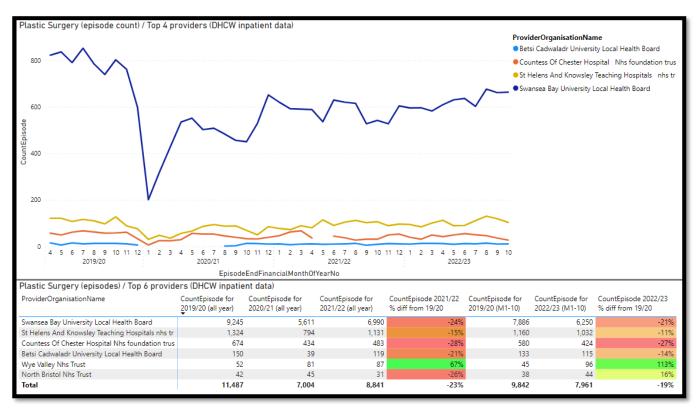
The Walton Centre confirmed that Spinal patients would be cleared by the summer 2022. The 52-week wait patients were on track to be cleared by the end of December 2022.

The Centre has a restoration and recovery plan for all of their long waiters which includes a regular clinical validation of patients who have waited over 6 months, to ensure that symptoms and imaging are up to date. The Walton centre have been managing this with Consultant and Nurse led consultations and they have the ability to operate on weekend lists as Waiting List Initiatives.

A physical visit to the Centre is planned for 2023.

3.4 Plastic Surgery (excl. Burns)

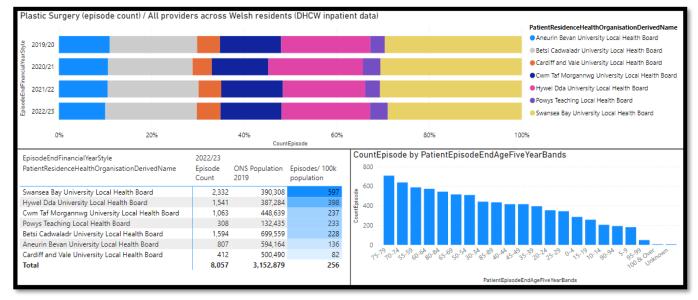
3.4.1 Plastic Surgery (excl. Burns) – Activity and Access Rate Summary



Data source: DHCW central data warehouse; all inpatient activity

The previous table highlights the variance in Plastic Surgery inpatient recovery across the main specialist providers, with an overall reduction of 19% so far this year compared to 2019/20. The total reduction was 39% across the full year of 2020/21, and 23% in 2021/22. All providers all show the expected inverse relationship to the COVID-19 waves across the UK, with activity steadily increasing again after the first few months.

Please note the Countess of Chester activity above primarily relates to North Wales residents, which is paid for through a local contract and not WHSSC. Wye Valley patients are primarily Powys residents through the WHSSC contract. The Swansea Bay figures primarily relate to the WHSSC specialist contract, but include some small numbers relating to a local Dermatology contract they hold with Hywel Dda.



Data source: DHCW central data warehouse; all inpatient activity

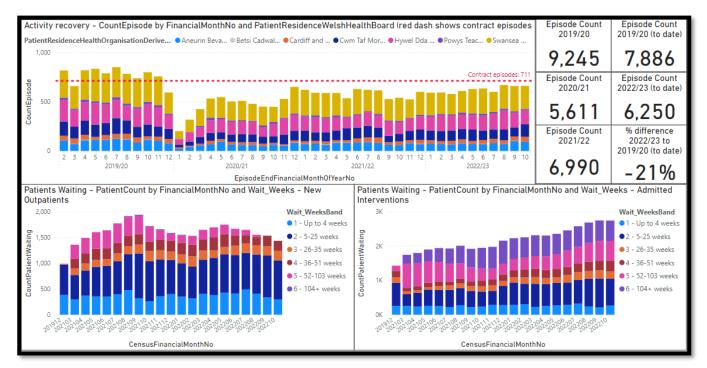
Access rates shares across the Health Boards do not appear to have varied much across the past 2 years, as shown in the charts above.

However, there is an apparent variation between Health Boards in relation to episodes/100k population, with inpatient episodes per 100k population in 2022/23 to date varying from 82 to 597 across Health Boards. This is related to the contract that Swansea Bay hold as the lead South Wales centre, which includes significant non-specialist activity for both Swansea Bay and Hywel Dda residents. Non-specialist activity for other Health Boards is reported under non-WHSSC areas/specialties.

This has been discussed internally, with a wider workshop with Management Group members held in September. The decision has been made to hand back non-specialist Plastics commissioning to resident Health Boards, and a Project Management team is being set up to work out the details of this transfer in the future.

3.4.2 Plastic Surgery (excl. Burns) - Recovery and Waiting lists

Swansea Bay UHB

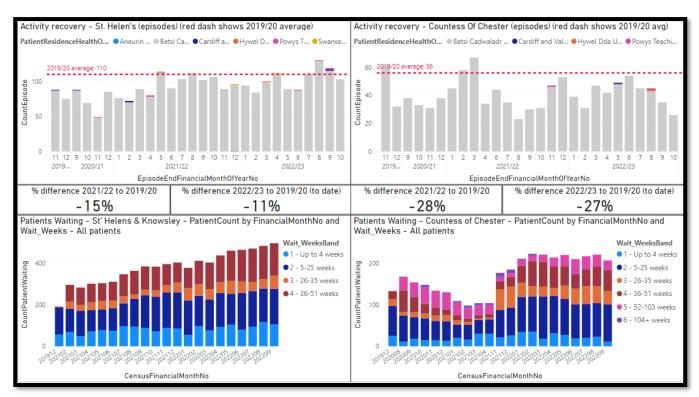


Data source: DHCW central data warehouse; all patients waiting with an open pathway Note: DHCW data includes a small amount of activity related to a local Dermatology contract between SBU/HDU

The tables above show a summary of the position at Swansea Bay in relation to Plastic Surgery. Whilst activity is now 21% less this year than 2019/20, which is better than the 39% drop in 2020/21, the total patients waiting has been steadily increasing to almost double what it was as COVID-19 struck, and a significant number of patients have now been waiting more than 2 years. Within the total of patients waiting, those waiting for new outpatient appointments has increased by about half again since February 2020, but has been falling over the past few months and no patients have now been waiting over a year. However, it is concerning that those waiting for admissions have increased by around 35% and the total is still steadily rising; currently 590 patients have now been waiting for over 2 years for an admission.

It is worth noting that the over performance against contract levels in 2019/20 (shown by the red dash on the inpatient activity graph) relates to Surgical Day cases and Emergency Short Stays.

English providers – St. Helen's & Knowsley Teaching Hospitals NHS Trust, Countess of Chester Hospital



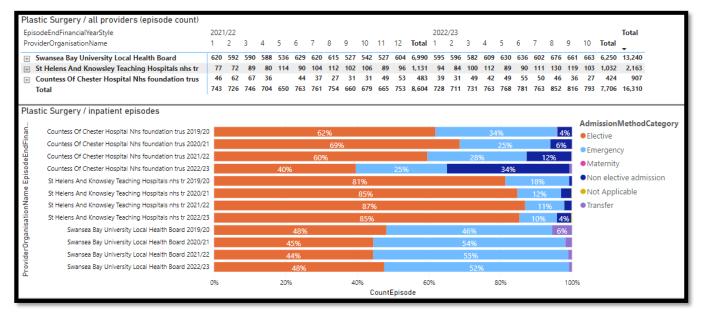
Data source: DHCW central data warehouse; all patients waiting with an open pathway

Whilst English providers also reflect the trend of patients in general waiting longer than before the pandemic, the percentage of patients waiting over a year is much lower. Total waiting patients have increased at St Helen's, although no one has been waiting over a year. The total has varied at Countess of Chester (local BCU contract) but is now increasing, with some patients having waited for over a year (note months 5-10 of 2021/22 were not submitted and are hence blank).

Other notes

Interestingly, data on the inpatient episodes shows an inverse of the elective/non-elective split for Swansea Bay and the English providers, with Swansea Bay having a higher proportion of emergency activity. Please see the below chart for the movements across the past 4 years. The episode counts have been included to give some perspective on the numbers, as Swansea Bay treats a far higher volume of Welsh patients.

Given the expected prioritisation weighted towards cancer work, it is likely that there will be a legacy of non-cancer elective waiting list cases, although the available data does not give the cancer breakdown.



Data source: DHCW central data warehouse; all inpatient activity

Specialised Planner comments:

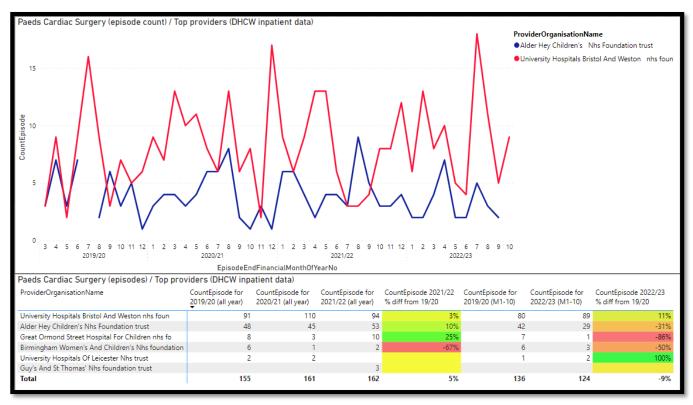
As noted in the comments above, variation across heath boards in utilisation of plastic surgery does not necessarily reflect variation in access to appropriate treatment, since many procedures (the majority of activity) provided by plastic surgery are also provided by other specialties. Whether a particular patient is treated by a plastic surgeon or a surgeon from another specialty largely depends on the local services available in the patient's health board (unless it is a specialised procedure only offered by Plastics).

WHSSC will be working with Swansea Bay to support the recovery plan for plastic surgery to address the significant backlog of patients with long waiting times for treatment.

In addition the Joint Committee meeting on 12 July had a workshop to focus on HB recovery plans. Details on plastic surgery were specifically provided from the service for this meeting.

3.5 Paediatric Cardiac Surgery (English providers using this specialty code)

3.5.1 Paediatric Cardiac Surgery - Activity and Access Rate Summary



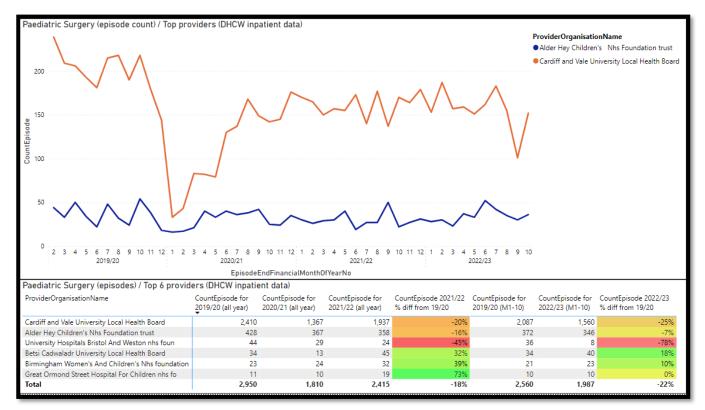
Data source: DHCW central data warehouse; all inpatient activity

The above table highlights the variance in Paediatric Cardiac Surgery inpatient recovery across the main specialist providers.

Case volumes are traditionally small but with high importance in terms of outcomes. Encouragingly, figures show little change in either 2020/21, 2021/22 or 2022/23 to date compared to 2019/20.

3.6 Paediatric Surgery

3.6.1 Paediatric Surgery – Activity and Access Rate Summary

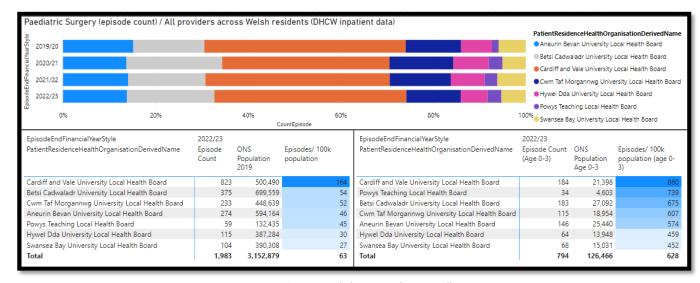


Data source: DHCW central data warehouse; all inpatient activity

The above table highlights the variance in Paediatric Surgery inpatient recovery across the main specialist providers, with Alder Hey initially showing the highest and quicker recovery. The main 2 providers show the expected inverse relationship to the COVID-19 waves across the UK, with activity increasing again.

There was a drop in the volume of Paediatric Surgery inpatient activity reported during the period, which is recovering but was 38% less activity overall in 2020/21 compared to 2019/20, and 18% less in 2021/22.

Activity so far in 2022/23 shows 22% less than 2019/20, with Alder Hey having a better recovery figure than Cardiff, although their inpatient activity is only about 17% of the total.



Data source: DHCW central data warehouse; all inpatient activity

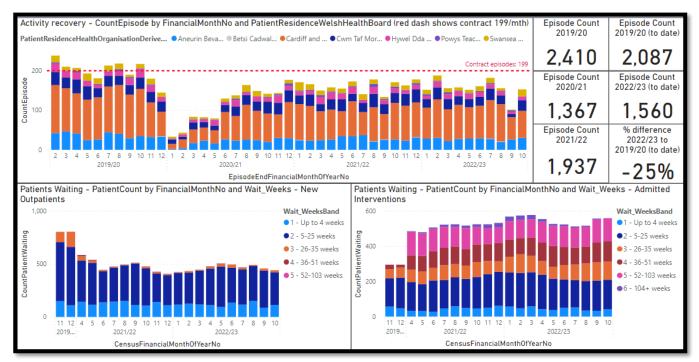
Access rates across the Health Boards varied as the pandemic initially hit, but have now stabilised to roughly the same split as before the pandemic.

However, inpatient episodes per 100k population varies significantly overall across the Health Board areas, from 27 to 164 as per the small table above, with Cardiff being by far the highest. This is linked to Cardiff being the contracted provider of this service, with all South Wales specialist activity passing through the WHSSC contract, along with the local more general activity. The general age group within Paediatric Surgery is 0-3 age group, and this specific activity and population rates are also shown in the table on the bottom right; this shows a closer range of access across Health Boards.

Please note a separate deep dive presentation on Paediatric Surgery was prepared for discussion by Joint Committee members in August 2022.

3.6.2 Paediatric Surgery - Recovery and Waiting lists

Cardiff & Vale UHB

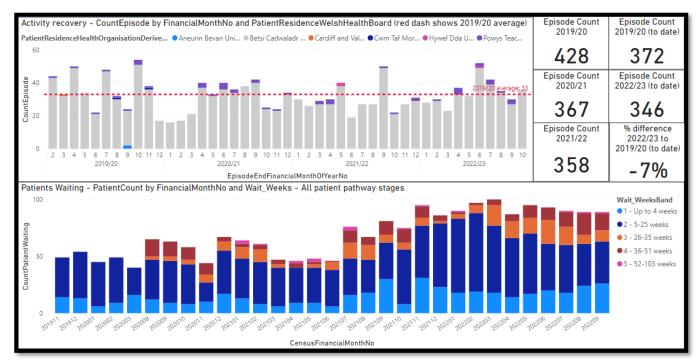


Data source: DHCW central data warehouse; all patients waiting with an open pathway

The tables above show the progression of patients waiting for Paediatric Surgery services at Cardiff & Vale. As the main provider, Cardiff shows mixed results – while patients waiting for outpatient appointments have reduced, particularly for followups, patients waiting for admitted interventions have increased, with about 30% now having waited for over a year. Given that the main age band treated by this specialty is in the 0-3 age band, this is particularly significant. Whilst tackling the New Outpatient waiting list is to be commended, it appears to then adversely affect the waiting list for admissions further down the pathway.

Previous experience emphasizes the importance of maintaining elective waiting lists delivered on a timely basis, given the qualitative impact on the development of children. It will be important to see a more rapid increase in activity if waiting times for children are to be kept to tolerable levels. Meanwhile it is essential for the provider to have in place appropriate systems to monitor the risk of these patients waiting for surgery.

Alder Hey Children's Hospital



Data source: DHCW central data warehouse; all inpatient activity

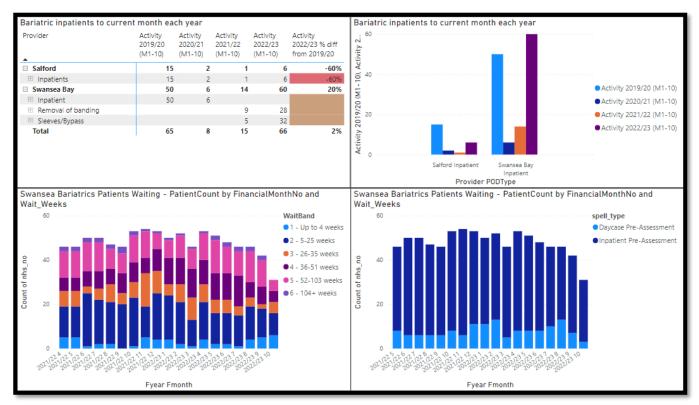
The tables above show a summary of the position at Alder Hey in relation to Paediatric Surgery. The recovery position to the current month this year is 7% lower than last year (14% less in 2020/21 compared to 2019/20 in total, and 17% less in 2021/22 compared to 2019/20). The total waiting list had remained fairly static until October 2021, where it has started to increase again.

Specialised Planner comments:

Alder Hey had previously reported to WHSSC through their recovery plans that activity was currently higher than pre-pandemic levels and a robust plan is in place to manage the small number of patients waiting over 52 weeks. The provider had confirmed that all patients waiting over 52 weeks would be treated before the end of March 2022, and indeed by the end of September 2021 the single longest waiting patient was between 36-51 weeks.

Cardiff and Vale is reporting a significant number of patients waiting over 52 weeks. It was noted there are currently 8 children on the list who have waited over 104 weeks however there is a plan in place to ensure there are zero patients waiting over 104 weeks by the end of March 2023. In dialogue with the provider, there are a number of contributing factors to the waiting list including nurse capacity, bed capacity, anaesthetic support and theatre availability. The HB confirmed that there is a plan in place to utilise the support of Anaesthetists from SBUHB to increase capacity. Joint Committee has requested a revised recovery plan from CVUHB. Outsourcing is currently being explored.

3.7 Bariatric Surgery



Data source: direct submissions from providers

Bariatric Surgery is provided at two main centres – Salford predominantly for North Wales residents, and Swansea Bay for South Wales' residents. Numbers are small and were greatly affected early on in the Covid-19 pandemic.

The service in Swansea has been in Level 1 escalation since November 2022, with weekly performance monitoring being received. Since then, activity at Swansea has dramatically increased, with 22 procedures being performed in January 2023 alone, with a good effect on the number of patients waiting.

Specialised Planner comments:

As noted previously, WHSSC has had long-standing concerns with the volume of procedures delivered by both commissioned centres. To this end, SBUHB has previously committed to returning to commissioned levels and has been placed in Level 1 (enhanced monitoring) escalation. Since December 2022, there has been a significant and sustained increase in the number of procedures delivered by SBUHB, which is now evident in the monthly monitoring data. An impact on waiting times is also apparent, mindful that SBUHB has sought to address long waiters in the first instance. SBUHB is developing proposals to grow and develop the service, although there will need to be sufficient referrals from the level 3 obesity service to support the sustained delivery of increased numbers of bariatric surgery procedures.

WHSSC continues to work with Aneurin Bevan University Health Board to support the possibility that the health board be a bariatric surgery designated provider, and has recently been advised that the health board had largely completed a business case, which will be subject to its own internal governance processes prior to being submitted to WHSSC.

3.8 NHS England Providers - Organisations with WHSSC Contracts

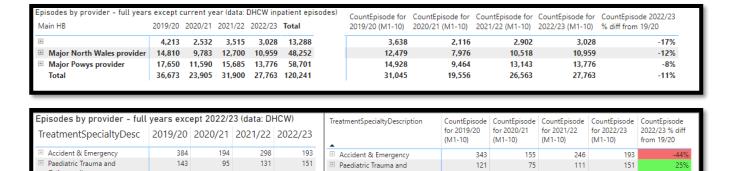
The key summaries and analysis relating to English providers are set out in Appendix A.

3.8.1 Analysis summary

Tables 1 to 3 of Appendix A detail the trend in admitted patient care activity levels since the 2019/20 financial year. Table 2 analyses the activity by resident Health Board, and Table 3 analyses the activity by Specialty. In summary, 2020/21 English provider activity (using providers with WHSSC contracts) dropped by 34% in comparison to 2019/20, and in the inverse pattern to the COVID-19 waves, as expected. Activity for 2021/22 improved to just 13% less than 2019/20, and this increase in performance is expected to continue into 2022/23; to the current month the comparison is 11% lower than 2019/20.

The following chart shows the activity drop classified between contracts that are major Powys/North Wales providers and the remaining ones that are either South/all Wales. Providers predominantly to Powys/North Wales have a higher recovery to pre-Covid rates, although they have much higher activity overall than the other Health Boards; please see the appendix for data on each provider by name.

It is worth noting that activity under A&E/Trauma specialties make up 16% of the pre-Covid inpatient episodes, which reduced to only 10% in 2020/21, but has increased to 14% of the 2022/23 activity to date. This is likely due to reduced travelling, and means that the rest of the activity has reduced less than the total 11% so far this year.



Data source: DHCW central data warehouse; all inpatient activity at English Trusts with WHSSC contracts

Orthopaedics

Total

4 554

5.018

1.854

2.084

3.426

3.783

3 601

3.945

-21%

The overall split across resident Health Boards is relatively unchanged, with inpatient access rates close to the same percentages as before COVID-19, with the exception of Powys, whose share has increased slightly, and Betsi Cadwaladr, whose share has decreased slightly. The following chart shows the shares since April 2019. The actual episode counts can be found in Appendix A, Table 2, and there are pages per Health Board as Table 4.x

Orthopaedics

Total

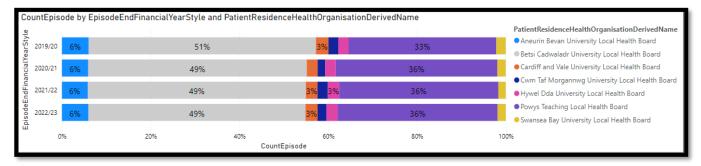
Trauma & Orthopaedics

5.429

2.171

4.089

3.601



Data source: DHCW central data warehouse; all inpatient activity at English Trusts with WHSSC contracts

4.0 SUMMARY

In summary of the data and detail in the report, the main points can be condensed to the following:

Cardiac Surgery (pages 3-8) – Whilst overall inpatient activity has decreased by 13% to date this financial year, compared to 2019/20, this had not translated into higher waiting lists due to lower demand for inpatient admissions. Cardiff's waiting list for admissions had actually reduced to about one half of pre-COVID-19 levels, but has been increasing again since December 2021 (now about 100 patients), and Swansea Bay's has steadily reduced to just over a third (about 25 patients), although Liverpool's list has increased (about 90 patients).

Referrals for New outpatient appointments are now growing again after an initial lull as COVID-19 hit Wales, and the Welsh centres historically have a much higher percentage than Liverpool of emergency admissions compared to elective admissions. Therefore the good progress must be maintained, especially considering the link to Cardiology and that patients may move to Cardiac Surgery lists at short notice.

It is worth noting that waiting lists for admissions for Cardiology have increased at both Cardiff and Swansea Bay – a small increase at Cardiff to about 620 patients (from about 590 in March 2020), but a larger increase at Swansea Bay to around 350 patients (from about 220 in March 2020), although this has been decreasing each month lately. These figures include non-specialist activity, as well as specialised interventions.

Thoracic Surgery (pages 9-12) – Whilst inpatient activity overall has decreased by 10% to date in 2022/23 compared to 2019/20, this varies across the 3 main providers. Cardiff have performed a similar episode volume to 2019/20, and have halved their waiting list for admissions (now about 50 patients). Liverpool have increased their inpatient activity by 19%, and their waiting list for admissions is around 15 patients. Swansea Bay's activity is 22% lower than 2019/20 so far this year, but their waiting list is similar to pre-Covid levels with about 20 patients. Cardiff have been seeing some Swansea patients by agreement.

Similar to Cardiac Surgery, New Outpatient referrals appear to be now increasing again though, so the good work needs to be maintained.

Neurosurgery (pages 13-17) – Inpatient activity has decreased by 17% in 2022/23 compared to 2019/20, with both Cardiff and the Walton showing similar recovery rates. Cardiff's waiting lists for admissions has reduced slightly since pre-Covid (from about 280 to 210 patients), and Cardiff have now seen all the patients that had been waiting for admission over a year from pressures at the start of the Covid period. The Walton's waiting list has increased overall from about 380 in March 2020 to about 430 in December 2022.

New outpatient referrals appear to be consistent, but Cardiff now has a growing waiting list for new appointments, which could translate into pressure on the waiting list for admissions.

Plastic Surgery (pages 17-21) – Inpatient activity is still 19% less so far this financial year compared to 2019/20, although this is higher than 2020/21. Both of the centres commissioned by WHSSC (Swansea Bay and St. Helen's and Knowsley) are now showing large waiting lists for admissions, with large numbers having now waited over a year, or even two years. Swansea Bay's inpatient waiting list has grown from about 1,450 in March 2020 to about 2,700 in December 2022, with almost half having waited over a year.

The new performance measures from Welsh Government show that almost 600 patients have now waited over 2 years for admission at Swansea Bay. WHSSC is working with the Health Board to support the recovery plan for plastic surgery to address the significant backlog of patients with long waiting times for treatment.

St. Helen's and Knowsley's total waiting list for all pathway points has grown from just under 200 in March 2020 to over 430 in November 2022, although none have waited over a year.

It is noteworthy that Swansea Bay shows a far higher percentage of emergency activity (52% to date in 2022/23) than St Helen's (15% to date in 2022/23), although this was also the case Pre-COVID-19.

Paediatric Surgery (pages 23-26) - Inpatient activity overall has decreased by 22% to date this financial year, compared to 2019/20, but this is still better than in 2020/21.

Whilst Cardiff has clearly worked hard to reduce the New Outpatient waiting list, the waiting list for admissions has been progressively growing from about 300 patients in March 2020 to over 550 in January 2023, with about 30% having now waited over a year (very few had waited over 36 weeks Pre-COVID-19). A few patients had even tipped into the wait band of over 2 years, but these have been progressively cleared. WHSSC have been in discussions with the Health Board around their recovery plan, and there is a plan in place to ensure there are no patients waiting over 104 weeks by the end of March 2023.

Alder Hey's waiting list had remained fairly static since Pre-COVID-19, but has recently started growing again with about 80 patients waiting across all pathway points. The Trust had cleared all waiters over 36 weeks by October 2021, but that number is now growing again since then.

Bariatric Surgery (pages 27) - Bariatric Surgery is provided at two main centres – Salford predominantly for North Wales residents, and Swansea Bay for South Wales residents. Numbers are small and were greatly affected early on in the Covid-19 pandemic. Activity at Swansea has been significant throughout January and February 2023, and the waiting list has halved since the end of 2022.

NHS England providers (page 28, Appendix 1) – Overall, the English Trusts that WHSSC commission have performed by 11% less inpatient episodes so far this year compared to 2019/20. It can be noted that part of this reduction is due to the lower volumes of emergency admissions from Welsh residents, and that the specialist activity has reduced by less than this. For example, Trauma & Orthopaedics has reduced by 21% in total, and A&E by 44% in 2022/23. Appendix A lists all the specialties in order, and also shows the position by Health Board.

Other notes

Performance measurement is now increasing in priority, following the worst of the Covid-19 pandemic. Welsh Government have brought out a full range of measurements for 2022/23, and WHSSC will be considering a new template for this report for the coming new financial year.

5.0 RECOMMENDATIONS

Members are asked to:

• **Note** the report.

Governance and Assu	Irance
Link to Strategic Obje	
Strategic Objective(s)	Implementation of the Plan
Objective(s)	Governance and Assurance
	Choose an item.
Link to Integrated	This report provides assurance on delivery of the ICP.
Commissioning Plan	
Health and Care	Governance, Leadership and Accountability
Standards	Choose an item.
	Choose an item.
Principles of	Reduce inappropriate variation
Prudent Healthcare	Choose an item.
	Choose an item.
Institute for	Reducing the per capita cost of health care
HealthCare	Choose an item.
Improvement Triple	Choose an item.
Aim	
Organisational Implic	cations
Quality, Safety &	Any issues are identified in the report.
Patient Experience	·
Finance/Resource	Any issues are identified in the report.
Implications	, and the second
Population Health	Any issues are identified in the report.
Legal Implications	·
(including equality	Any issues are identified in the report.
& diversity, socio	
economic duty etc)	
Long Term	Any issues are identified in the report.
Implications (incl	Any issues are identified in the report.
WBFG Act 2015)	
Report History	
-	
(Meeting/Date/	
Summary of Outcome	
Outcome	Appendix A – Recovery summary of main
	specialties/providers
	Appendix B – contract monitoring return activity
	CVUHB
	Appendix C – contract monitoring return activity
	SBUHB
Appendices	Appendix 1 – charts of DHCW data showing inpatient
	activity at NHS England Trusts with a WHSSC contract
	(specialist and non-specialist)
	Appendix 2 – tables including the relevant
	Performance measures as directed by Welsh Government
	Government

Appendix A: Recovery summary of main specialties/providers (please see main body of the report for more detail)

pisode comparison to current month (DHCW	/ data wareho	ouse)				Current Waiting List totals (DHCW data									
Specialty_WHSSC		CountEpisode	CountEnisode	CountEpisode	CountEpisode	202209		y	,,						
Specially_++155c	for 2019/20 (M1-10)	for 2020/21 (M1-10)	for 2021/22 (M1-10)	for 2022/23 (M1-10)	2022/23 % diff from 19/20	Admitted diagnostic intervention	FUP OP appointment	New OP appointment	Unknown	Tota					
□ Cardiac Surgery	1,828	961	1,496	1,585	-13%	153	33	92	177	45					
Cardiff and Vale University Local Health Board	694	336	527	580	-16%	113	24	48		- 18					
Liverpool Heart And Chest Hospital nhs foundatio	386	251	377	350	-9%				173	- 17					
Swansea Bay University Local Health Board	641	298	503	533	-17%	40	9	44		9					
University Hospitals Birmingham Nhs Foundation t	58	38	44	63	9%				4						
University Hospitals Of North Midlands nhs trust	49	38	45	59	20%										
□ Neurosurgery	2,879	1,704	2,359	2,399	-17%	238	247	525	448	1,4					
Cardiff and Vale University Local Health Board	1,814	1,083	1,512	1,597	-12%	238	247	525		1,0					
The Walton Centre Nhs Foundation trust	935	527	726	708	-24%				448	4					
University Hospitals Of North Midlands nhs trust	130	94	121	94	-28%										
□ Paediatric Surgery	2,459	1,354	1,894	1,906	-22%	557	19	457	89	1,1					
Alder Hey Children's Nhs Foundation trust	372	308	300	346	-7%				89						
Cardiff and Vale University Local Health Board	2,087	1,046	1,594	1,560	-25%	557	19	457		1,0					
□ Plastic Surgery	9,626	5,453	7,186	7,706	-20%	2,742	90	1,533	704	5,0					
Countess Of Chester Hospital Nhs foundation trus	580	363	381	424	-27%				207	2					
St Helens And Knowsley Teaching Hospitals nhs tr	1,160	659	946	1,032	-11%				497	4					
Swansea Bay University Local Health Board	7,886	4,431	5,859	6,250	-21%	2,742	90	1,533		4,3					
∃ Thoracic Surgery	1,103	697	1,052	998	-10%	75	76	75	22	2					
Cardiff and Vale University Local Health Board	517	322	516	466	-10%	55	71	53		- 1					
Liverpool Heart And Chest Hospital nhs foundatio	178	138	229	211	19%				22	1					
Swansea Bay University Local Health Board	382	224	281	297	-22%	20	5	22							
University Hospitals Of North Midlands nhs trust	26	13	26	24	-8%										
Total Specialty	17,895	10,169	13,987	14,594	-18%	3,765	465	2,682	1,440	8,3					

Appendix B: CVUHB - CONTRACT MONITORING RETURN - page 1 of 3

Notes:

- 1. The new month's figure is the difference from the previous month's sub-total, so would include any retrospective adjustments made in the contract monitoring.
- 2. The charts in the main report body use DHCW data for consistency with other providers; year-to-date activity totals are checked to ensure any variation to the contract monitoring summarised below is not material. These small variations may include residency allocations (including border residents), episode/spell end months etc
- 3. The Cardiac Surgery inpatient line below includes minor surgeries.

			Yalues	YTD 💌	Month IT			Sum of Spen	d £										m of Activi	ty				
Handina 7	Out to the			2	3		202	22123	7	•	9	10	2022/23 Total		2	3		2022	2123	7	•	9	10	2022/23
Heading 🗷	Sub-heading © Cardiology- Specialist Services	■ Activity t _i -	999,585	1,073,683	1,092,218	1,331,502	1,103,030	1,120,002	1,166,352	1,007,767	1,202,094	1,075,936	11,172,170	149	148	143	164	168	161	140	188	150	160	Total 1,5
	Prioritisation-Percutaneous mitral		333,363	1,013,003	1,032,210	1,331,002	1,103,030	1,120,002	1,100,302	1,007,767	1,202,034	1,070,336	11,172,170	143	140	143	104	100	101	140	100	100	100	1,0
	valve leaflet repair	(blank)	55,940	55,940	55,940	55,940	(120,181)	14,490	9,727	5,363	58,627	57,589	249,377											
	□ Cardiology for AB	FCE's	143,343	7,238	57,826	86,206	402,452	139,414	141,450	186,679	137,755	160,171	1,462,534	27	29	20	33	17	26	35	34	34	23	2
	AB ICD Repatriation	(blank)	(70,235)	(70,235)	(70,235)	(70,235)	(70,235)	(70,235)	(70,235)	(70,235)	(70,235)	(70,235)	(702,352)						20					
	Cwm Taf Cardiology ICD's	FCE's	23,426	13,510	33,343	111,053	30,458	42,358	51,614	39,903	9,594	39,474	394,732	3	2	- 1	8	2	4	3	0	2	1	
CARDIO	■ SB Cardiology	FCE's	3,445	3,445	3,445	20,311	3,445	6,818	2,883	(10,153)	16,340	3,211	53,193	1	0	1	Ö	0	Ö	-1	1			
THORACIC	■ Cardiac Surgerq-TAYI	Procedure	289,410	722,014	367,564	415,690	386,316	436,200	481,574	526,179	214.805	462,410	4,302,162	15	31	18	20	18	21	21	12	21	19	
	⊕ ACHD	OP	108,778	108,778	108,778	108,778	108,778	65,202	34,826	91,988	91,988	91,988	919,882	72	77	85	73	85	78	71	117	55	91	
		FCE's	1,140,349	1,218,366	1,159,504	1,219,707	1,168,443	1,181,274	1,204,961	1,194,345	1,180,745	1,311,480	11,979,174	44	52	45	64	46	67	66	62	68	65	
	■ Cardiac Surgery	OP												83	105	104	75	103	92	103	112	68	165	1
	Thorneis Curgors	FCE's	363,846	416,603	404,091	384,832	384,864	390,844	365,220	368,854	372,316	357,459	3,808,927	48	59	58	39	55	40	38	41	40	47	
	■ Thoracic Surgery	OP					- 1,					,		143	146	135	106	148	161	151	156	116	168	1,
	CARDIO THORACIC Total		3,057,887	3,549,343	3,212,474	3,663,783	3,397,370	3,326,367	3,388,373	3,340,690	3,214,029	3,489,483	33,639,798	585	649	610	582	642	650	627	723	554	739	6
	Neurosurger ■ Neurosurger	FCE's	1,562,415	1,627,787	1,572,281	1,598,002	1,593,021	1,590,701	1,651,241	1,624,267	1,640,237	1,570,901	16,030,853	129	166	129	157	156	198	236	195	146	144	1,
	- necurosurgery	OP												374	404	425	415	408	487	556	443	392	730	4.
	■ Spinal Implants	Patients	138,206	119,536	86,418	195,593	58,876	119,726	251,783	145,041	187,562	122,105	1,424,847	8	12	9	16	8	14	8	11	13	4	
	■ Spinal Implants - SB Intrathecal	(blank)																						
	■ INR Devices	Devices	105,049	165,685	67,228	145,621	161,889	129,092	194,435	197,752	191,182	144,306	1,502,239	12	14	9	11	9	17	18	21	12	19	
	■ Excess INR Outsourcing	(blank)	0	0	0	0	0	0					0											
	■ Epilepsy Surgery	FCE's	1,919	63,909	32,914	(1)	(1)	19,748	10,148	24,880	31,678	6,801	191,994	0	2	1	0	0	0	1	1		1	
NEUROSCIENCE!	■ Prolonged Disorder of	(blank)	24,501	24,501	24,501	24,501	24,501	(14,128)	26,801	19,311	19,311	25,908	199,707											
ALAS	■ Neurosurgery Oncology Service	(blank)	42,833	42,833	42,833	42,833	42,833	(29,954)	16,226	28,634	28,634	(14,283)	243,423											
	Spinal Injuries	Bed-days	309,494	323,435	323,294	328,645	327,941	322,559	318,488	321,228	332,659	320,188	3,227,929	546	645	644	682	677	614	630	702	624	634	6,3
	- opinia injunes	OP												53	77	67	54	58	58	68	81	38	46	- 1
	■ Neuro Rehab	Bed-days	303,334	303,716	312,752	307,152	306,738	306,738	306,739	306,739	306,739	307,139	3,067,785	457	460	531	571	553	455	497	487	424	457	4,3
		OP												24	26	28	36	17	28	38	42	23	35	
	■ Relocation of Rehabilitation	(blank)	42,833	42,833	42,833	42,833	42,833	(100,554)	(31,666)	11,707	11,707	11,707	117,066											
	■ ALAS	(blank)	1,546,961	1,547,003	1,547,004	1,546,836	1,547,136	1,376,853	1,518,764	1,461,841	1,565,710	1,515,068	15,173,176											
	■ MPK	(blank)	28,417	28,417	28,417	28,417	28,417	28,417	28,417	(71,583)	(54,944)	17,611	90,000											
	NEUROSCIENCE/ ALAS Total		4,105,962	4,289,654	4,080,475	4,260,433	4,134,185	3,749,197	4,291,373	4,069,815	4,260,474	4,027,450	41,269,018	1,603	1,806	1,843	1,942	1,886	1,871	2,052	1,983	1,672	2,070	18,
	■ Renal Surger¶	FCE's	338,099	388,232	342,681	377,601	332,553	355,833	331,937	333,278	351,714	332,730	3,484,656	76	93	81	97	68	86	87	94	74	81	
		OP.												307	353	366	315	391	230	401	409	292	355	3,
	■ Nephrology	FCE's	555,329	548,863	539,164	548,863	563,412	551,127	565,459	551,019	563,816	563,267	5,550,318	109	86	106	103	129	163	147	183	180	200	1,
RENAL		OP Districts	400 400	127.562	100.005	445.454	444.500	135,394	44 700	100.007	141.010	127,938	4 004 000	439	525	469	628	824	542	614	777	526	804	6,
	■ Home Renal Dialysis	Dialysis	129,488 128,813	127,562	129,965 128,284	145,421 133,615	144,537 132,013	135,394	111,732 119,863	128,027 131,710	141,846 126,037	127,938	1,321,910 1,288,758	644 1,644	624 1,691	649 1,636	718 1,735	782 1,645	508 1,450	634 1,737	664 1,565	621 1,617	650 1,824	6. 16.
	Renal CAPD (Dialysis)	Dialysis Dialysis	128,813	1,235,502	128,284	1,188,665	1,262,369	1.241.745	1.355.532	1.274.028	1,289,134	127,914	1,288,758	7,281	7,283	7,574	6,952	7,487	1,450 8,137	7,557	7,671	7.085	1,824 8,781	
	■ Hospital Renal Dialysis		521,309	573,623	562,281	523,168	495,583	503,652	466,090	487,212	550,008	519,102	5.202.027	7,281	7,283	7,074	6,952	1,487	8,137	7,007	7,671	7,085	6,781	75.
	■ Renal Transplants RENAL Total	Transplant	2,914,345	3,003,751	2,983,257	2.917.333	2,930,467	2,918,290	2,950,612	2,905,274	3.022.555	2,877,561	29,423,445	10,510	10.667	10.893	10.558	11.334	11,121	11.185	11.363	10.419	12.701	110.
	□ Haemophilia - Blood products	Units	448,436	479,466	426,136	507.624	761,737	524,680	633,513	260.093	517,668	504,139	5,063,492	1,374,003	1,402,611	1,756,043	1,506,823	2.063.128	1,435,927	232,723	2,135,134	1,925,808		
	BD Service Infrastructure	(blank)	159,097	159,097	159,097	159,097	159,097	92,213	147,950	147,950	147,950	215,732	1,547,280	1,014,000	1,702,011	1,700,043	1,000,023	2,000,120	1,400,027	202,120	2,100,104	1,020,000	303,030	17,002,0
	Haemophilia Ref Centre	(blank)	6,419	6,419	6,419	6,419	6,419	6,419	6,419	6,419	6,419	6,419	64.194											
	BMT - Cardiff & SB	Transplant	739,972	765,336	854,475	637,533	808,277	761,118	786,172	728,101	547,622	736,512	7.365.117	11	13	12	q	12	q	10	7	14	17	
HAEMATOLOGY	ATMPs - C&V Service	Patients	342,308	340,136	86,613	86,613	1,102,468	(1,224,694)	148,667	81,686	115,661	130,227	1,209,686	"	1	0	ů	4	2	10		5		
	□ Lumphoma Panel	Patients	127,370	132,305	111,918	127,154	124.099	124,567	132,520	127,987	126,330	126,027	1,260,278	207	228	141	206	193	224	208	203	179	185	1.
	⊕ Clinical Immunologe	Patients	675,785	891,994	807,137	721,865	940,516	793,567	880,896	963,360	886,008	873,639	8,434,767	135	223	224	235	228	247	242	246	254	256	2
	Hereditary Aneamia Service	(blank)	31,632	31,632	31,632	31,632	31,632	11.882	26,792	28,119	28.119	15,271	268.341	100	223	224	233	220	241	444	240	2.34	230	۷.
	HAEMATOLOGY Total	(pigin)	2,531,018	2.806.386		2.277.937	3,934,245	1.089.752		2,343,716		2.607.967											970,316	14.806.

CVUHB - Page 2 of 3

								Sum of Spend	1 E				2022122	0					of Activity	ı				202212
11	Sub-heading	■ Activity to-		2	•		202	2123	-	•		10	2022/23 Total	•				2022	23	,			10	2022/2: Total
Heading -	Sub-neading		566.155	592,537	565,352	569,176	561.612	570,966	571,380	586,911	567,806	522,772	5,674,667	153	188	3	157	147	160	178	8 450	3 400	10	1 Otal
	■ Paediatric Surgery	FCE's OP	566,155	592,537	565,352	569,176	561,612	570,966	571,380	586,911	567,806	522,112	3,674,667	236	281	152	174	178	279	281	156 289	102	152 287	2
		FCE's	146,742	161,679	170,941	144,163	142,835	153,277	126,071	150,154	130,521	136,355	4 400 707	236	59	235 46	40	45	49	281	289	213 37	48	
	■ Paediatric Renal	OP OP	146,742	161,679	170,941	144,163	192,835	103,277	126,071	100,104	130,521	136,300	1,462,737	47	168		10	147	140	148	141		146	1
		FCE's -	945.745	964,767	900.347	944,574	944.050	939,894	893,424	929,671	987.643	938,936	9.389.051	164	153	129	162 162	134	81	198	160	96	108	
	☐ Paediatric Oncolog ■ Paediatric Oncolog	FCE's	340,740	364,767	300,347	344,074	344,000	333,834	833,424	323,671	387,543	338,336	9,389,091	164	52	56	59	92	74	73	106	138 96	108	
	a Paediatric Uncology	OP OP												64		56 461								
			050 000	057.007	050.055	050.070	000 400	404.040	404.455	000 707	004.000	470 400	0.000.004	224	452 24		689	465	625	536	753 13	372	605	
	■ Paediatric Neurology	FCE's	250,226	257,867	250,355	253,076	262,468	131,643	191,155	232,727	231,962	178,422	2,239,904	19		19	18	22	10	24	10	6	10	
		OP OP			E EAE	F FAF		E 505		E 505			FF 040	118	106	139	45	129	72	132	126	108	108	
	Nusinersen Additional Costs	(blank)	5,505	5,505	5,505	5,505	5,505	5,505	5,505	5,505	5,505	5,505	55,049											
	Paediatric Ketogenic Diet	(blank)	8,546	8,546	8,546	8,546	8,546	8,546	8,546	8,546	8,546	8,546	85,458											
	■ Paediatric Rheumatology	(blank)	61,129	54,592	57,861	57,861	57,861	38,149	35,143	51,799	51,799	51,799	517,993											
	■ Paediatric Neuro Rehab	(blank)	22,889	22,889	22,889	22,889	22,889	22,889	22,889	22,889	22,889	22,889	228,891											
	■ Paediatric Gastroenterology	FCE's	163,788	136,769	158,342	154,845	171,005	148,770	119,369	168,525	133,422	146,557	1,501,393	66	57	77	61	66	88	73	10	12	20	
PAEDIATRICS		OP												72	84	86	55	79	117	85	120	75	79	
NEONATAL	□ Paediatric ENT	FCE's	123,498	125,633	124,533	124,795	127,835	125,258	124,916	126,002	80,932	170,893	1,254,296	34	37	33	37	45	34	40	45	32	65	
		OP												108	183	144	133	224	167	313	312	146	288	
	Paediatric Cardiology	FCE's	250,466	256,477	280,342	250,648	214,577	235,878	227,059	241,887	250,241	232,777	2,440,352	17	18	21	18	12	8	13	18	10	13	
		OP												171	224	224	186	183	218	199	226	165	231	
	■ Foetal Cardiology	OP	22,135	22,135	22,135	22,135	22,135	22,136	22,135	22,135	22,136	22,135	221,355	42	64	59	38	37	50	40	33	65	63	
	■ Paeds Cystic Fibrosis	(blank)	48,442	45,397	46,550	44,012	47,040	46,286	45,661	47,192	49,531	47,329	467,441											
	■ Children's Hospital for Vales	(blank)	109,858	109,858	109,858	109,858	109,858	109,858	109,858	109,858	109,858	109,858	1,098,581											
	■ Paeds Respiratory Equipment	(blank)	21,364	29,369	73,051	26,793	69,309	44,026	17,124	75,788	19,155	38,094	414,073											
	■ Paediatric Radiology	(blank)	51,400	23,600	37,500	37,500	37,500	(50,600)	2,867	19,967	19,967	(77,450)	102,250											
	■ Paeds Endocrinology	(blank)	61,944	61,944	61,944	61,944	61,944	61,944	61,944	61,944	61,944	61,944	619,438											
	■ Foetal Medicine	(blank)	27,184	27,184	27,184	27,184	27,184	27,184	97,184	27,184	(35,248)	100,703	352,926											
	■ PICU BH	Bed-days	409,420	420,061	512,561	392,789	338,871	414,740	376,432	443,923	423,917	680,996	4,413,709	86	115	133	99	81	31	124	172	221	239	
	■ NICU BH	Bed-days	825,486	849,448	802,903	855,001	877,805	799,367	835,002	835,002	835,002	835,002	8,350,017	741	704	837	934	803	924	919	823	748	811	
	■ Perinatal Pathology	(blank)	24,650	24,650	24,650	24,650	24,650	24,650	24,650	24,650	24,650	24,650	246,502											
	■ Paediatric IMD	(blank)	12,925	12,925	12,925	12,925	12,925	0	10,771	10,771	10,771	10,771	107,708											
	■ Paediatric MRI Investment	(blank)	39,609	39,609	39,609	39,609	39,609	(20,015)	29,672	29,672	29,672	29,672	296,715											
F	PAEDIATRICS/ NEONATAL Total		4,199,106	4,253,443	4,315,882	4,190,479	4,188,012	3,860,349	3,958,756	4,232,701	4,042,620	4,299,155	41,540,504	2,510	2,969	2,965	3,067	2,889	3,135	3,390	3,538	2,642	3,379	- 3
	B AICU	Bed-days	596,342	541,128	234,185	457,218	640,842	493,941	532,723	600,489	553,076	603,412	5,253,356	284	309	410	307	285	350	306	346	377	237	
ADULT CRITICAL	■ HDU	Bed-days	55,913	48,093	75,463	74,681	80,936	67,018	158,067	96,080	69,539	94,524	820,314	22	14	48	47	55	137	87	27	81	74	
CARE	■ Critical Care Long Term Ventilation	(blank)	73,976	73,976	73,976	73,976	73,976	34,155	113,797	73,976	73,976	73,976	739,759											
	■ LT¥ Consultant Sessions	(blank)	3,338	3,338	3,338	3,338	3,338	3,338	3,338	3,338	3,338	3,338	33,383											
	ADULT CRITICAL CARE Total	1	729,569	666,535	386,962	609.213	799,093	598,451	807,925	773,883	699,929	775,251	6,846,811	306	323	458	354	340	487	393	373	458	311	

CVUHB - Page 3 of 3

			Sum of Spend Σ 2022/23 2022/23 Θ											Sum of Activity 2/23 □ 2022/23												
Heading	⋾ Sub-heading	■ Activity t	1	2	3	4	5	6	7	8	9	10	Total	1	2	3	4	5	6	7	8	9	10	Total		
	■ Medical Genetics	(blank)	1,338,061	947,263	1,244,538	1,198,465	1,182,424	953,147	1,143,983	1,143,983	1,143,983	1,143,983	11,439,831													
	■ UK GTN Send out tests	Tests	38,167	38,167	38,167	38,167	38,167	38,167	38,845	46,111	(152,363)	16,006	177,601	6	23	20	32	20	18	40	24	18	9	210		
	■ Lynch Syndrome	(blank)	26,043	26,043	26,043	26,043	26,043	26,043	26,043	26,043	26,043	26,043	260,433													
■ GENETICS/LTC	. 🖪 Genetic Counsellor 8a	(blank)	5,550	5,550	5,550	5,550	5,550	5,550	5,550	5,550	5,550	5,550	55,501													
GENETICSTER	■ Enzyme Replacement Therapy	(blank)	75,017	75,017	75,017	75,017	75,017	10,340	(20,288)	52,162	52,162	47,546	517,007													
	■ Cystic Fibrosis	(blank)	549,042	542,692	536,765	550,209	512,982	312,793	486,969	491,595	496,676	497,734	4,977,456													
	■ Home TPN	FCE's	277,621	202,333	213,171	292,073	350,379	213,439	330,338	324,772	262,591	158,367	2,625,085	325	218	224	360	455	411	420	326	251	277	3,267		
	■ BAHAs & Cochlears	(blank)	422,054	422,054	422,054	580,046	461,552	461,553	461,552	461,552	461,551	310,618	4,464,587													
	GENETICS/ LTC Total		2,731,556	2,259,119	2,561,306	2,765,570	2,652,115	2,021,032	2,472,993	2,551,769	2,296,194	2,205,847	24,517,500	331	241	244	392	475	429	460	350	269	286	3,477		
	■ Liver Surgery	FCE's	107,958	107,958	83,738	81,774	91,083	79,278	77,836	115,320	78,197	87,536	910,678	13	12	10	4	10	10	14	9	10	13	105		
	■ Liver Cancer Development	(blank)	2,537	2,537	2,537	2,537	2,537	2,537	2,537	2,537	2,537	2,537	25,373													
	■ Major Trauma Centre	(blank)	1,000,557	1,000,557	1,000,557	1,000,557	1,000,557	1,000,557	1,000,557	1,000,557	1,000,557	1,000,557	10,005,573													
	■ RF Ablation - Barretts Oesophagu	ıs (blank)	26,178	26,178	32,779	46,982	25,339	31,489	72,619	37,367	12,749	35,332	347,013													
	■ Hepatology	(blank)	22,927	22,927	22,927	22,927	22,927	22,927	22,927	22,927	22,927	22,927	229,269													
	■ Hepatology Collective	(blank)	793	57,460	29,127	29,127	29,127	(55,890)	4,326	13,439	13,439	13,439	134,385													
OTHER	■ Neuropsychiatry	Days	252,818	256,324	255,645	252,001	255,042	250,431	255,467	247,501	259,993	252,690	2,537,912	311	334	329	306	326	309	283	351	364	355	3,268		
	Regional Pharmaceutical Service	(blank)	64,854	64,854	64,854	64,854	64,854	64,854	64,854	64,854	64,854	64,854	648,543													
	■ NICE / High Cost Drugs	(blank)	104,691	60,879	113,998	51,183	103,091	86,769	114,047	126,418	173,891	135,845	1,070,811													
	■ ILD RHIG Funded	(blank)	13,336	13,336	13,336	13,336	13,336	13,336	13,336	13,336	13,336	13,336	133,362													
	■ Neuroendocrine Tumours (NETs)	(blank)	65,178	65,178	65,178	65,178	65,178	65,178	65,178	65,178	65,178	65,178	651,778													
	■ Gender Identity Service	OP	116,647	116,647	116,647	116,647	116,647	(16,275)	94,493	94,493	94,493	(52,826)	797,613	86	132	106	84	133	95	169	212	143	189	1,349		
	■ Pay Award	(blank)	718,034	718,034	718,034	718,034	718,034	718,034	718,034	718,034	718,034	718,034	7,180,338													
	OTHER Total		2,496,509	2,512,870	2,519,357	2,465,138	2,507,753	2,263,226	2,506,213	2,521,961	2,520,186	2,359,438	24,672,648	410	478	445	394	469	414	466	572	517	557	4,722		
	Grand Total		22,765,952	23,341,100	22,543,140	23,149,886	24,543,239	19,826,666	23,139,173	22,739,807	22,431,763	22,642,153	227,122,878	1,390,612	1,420,209	1,773,878	1,524,562	2,081,600	1,454,516	251,756	2,154,492	1,942,791	990,359	14,984,774		

ANNEX C: SBUHB - CONTRACT MONITORING RETURN - Page 1 of 1

Notes:

1. The new month's figure is the difference from the previous month's sub-total, so would include any retrospective adjustments made in the contract monitoring.

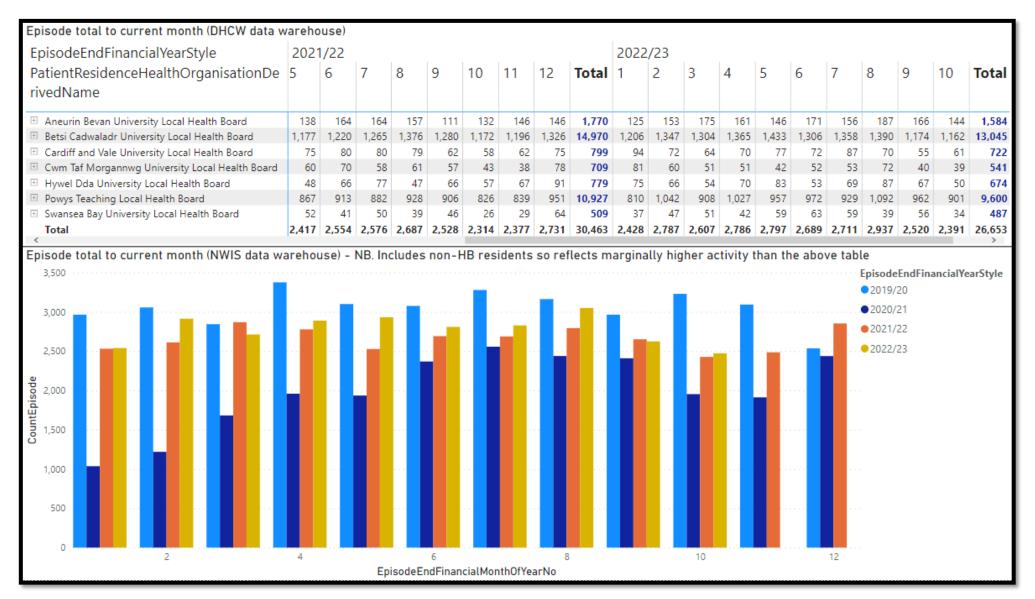
								sum of Spe	end E										um of A	ctivity				
Useding V	Sub-heading -	Activity type -1	Θ .	2	3		20. 5	22/23	7	0	q	10	2022/23 Total	Θ.	2	3		_ 20	122123 6	7	0	0	10	2022/23 Total
neauing =	Renal - Other	Activity type -	700,618	700.618	700,618	700,618	700,618	700,618	700,618	711,950	673,259	707.510	6,997,042	991	991	991	991	991	991	991	1.092	974	1.097	10.097
	Hospital Dialysis	Dialysis	520,141	520,141	520,141	520,141	520,141	540,787	644,382	528,488	558,289	539,487	5,412,138	3,069	3.125	3.047	2.964	3.151	3.077	3.075	2.976	3,209	3.062	30,755
RENAL	Home Dialysis	Dialysis	152,964	152,964	152,964	152,964	152,964	152,964	152,964	152,964	162,745	147,296	1,533,752	3,063	3,120	3,047	2,304	3,131	3,077	3,075	2,376	3,203	77	30,733
	Renal Wwales Contract		335,320	295,016	126,317	191,608	350,489	259,735	259,748	259,748	259,747	259,748	2,597,477	2.288	2.256	2.303	2.318	2.382	2,306	2.283	2.236	2.248	2.291	22,911
	BENAL Total	Dialysis	1.709.043	1.668.739	1.500.040	1.565.331	1.724.211	1.654.103	1.757.711	1.653.150	1.654.040	1.654.041	16.540.409	6.428	6.452	6.421	6.353	6.604	6.454	6.429	6.386	6.518	6.527	64.574
	HENAL TOTAL													38	38	6,421 40	29	29	38		6,386 45		28	374
	■ Cardiac Surgery	Minorhil	1,275,459	1,260,770	1,290,509	1,238,815	1,265,777	1,239,566	1,300,550	1,332,112	1,336,013	1,291,485	12,831,057	30	13	40	29 17	23	30	46 11	43	43 15	28 18	122
	- Cardiac Surgery	Minomii OP												44	33	43	31	38	36	44	53	21	39	382
CARDIO	- TAM	UF	438,006	471,453	398,840	179,943	537,190	589,887	370,786	754.015	743,014	366,347	4,849,481	16	18	14.5	12	21	30	27	27	14		186
■ THORACIC	■ TAVI							33.083	-198.500	704,010	743,014	366,347	4,043,401	ID.	10	14	IZ	21	14	21	21	14	23	100
I HUNACIC	■ TAVI (Add'I Develop)		33,083	33,083	33,083	33,083	33,083			070.004	007.005	007.070	0.000.000	100	150	10.4	100	244	107	140	100	15.4	170	1.666
	■ Cardiology		953,186	953,186	953,186	953,186	953,186	953,186	980,019	978,924	997,365	927,973	9,603,398	156	159	154	108	244	187	149	182	154	173	
	■ Bariatrics		37,813	35,102	39,356	28,908	35,558	46,148	53,714	55,324	30,079	49,695	411,697	3	3	5	2	5	ь	6	2	6	22	60
	⊕ ICC		25,015	25,015	25,015	25,015	21,192	24,250	24,250	24,250	24,250	31,897	250,147	200	20.4	207	100	242	205	202	220	252	202	2.700
	CARDIO THORACIC Total		2,762,563	2,778,609	2,739,989	2,458,950	2,845,986	2,886,120	2,530,819	3,144,625	3,130,721	2,667,397	27,945,780	266	264	267	199	340	295	283	320	253	303	2,790
DAEDC!	⊕ CLP		115,139	125,131	115,395	148,147	126,079	128,678	140,195	135,061	129,229	138,339	1,301,392	4	7	4	14	8	11	12	12	13	15	100
PAEDS /	■ NICU		478,150	469,820	400,394	447,343	500,562	459,253	459,254	459,254	459,253	459,254	4,592,537	475	427	461	465	561	528	623	593	645	609	5,387
NEONATAL	BAHA		5,418	5,418	5,418	5,418	5,418	5,418	5,417	5,418	5,417	5,418	54,176											
	■ Paeds Onc		12,419	12,419	12,419	12,419	12,419	12,419	12,419	12,419	12,419	12,418	124,187											
	PAEDS / NEONATAL Total		611,125	612,787	533,625	613,326	644,477	605,768	617,285	612,152	606,318	615,429	6,072,292	479	434	465	479	569	539	635	605	658	624	5,487
	■ Plastics		1,552,784	1,532,747	1,523,606	1,561,446	1,542,927	1,461,702	1,596,869	1,589,536	1,626,592	1,603,257	15,591,467	657	642	624	659	708	657	663	668	639	723	6,640
		OP												1,842	2,152	1,896	1,898	2,141	2,303	2,315	2,283	1,943	2,482	21,255
	Burns		429,154	415,367	485,221	480,165	453,001	525,482	457,265	354,713	441,367	412,184	4,453,920	85	55	207	196	270	147	-47	113	57	198	1,281
CANCER &	■ Thoracic		180,291	241,622	229,707	253,272	225,699	358,118	225,951	289,713	281,447	237,421	2,523,240	14	31	25	27	44	34	42	38	24	19	298
BLOOD		OP												65	99	93	88	122	108	119	148	90	103	1,035
DEGOD	⊚SNB																							
	■ Haemophilia		75,113	117,253	84,261	59,604	84,335	152,513	71,713	42,970	85,970	216,288	990,020											
	Sarcoma		83,886	110,875	92,018	101,782	74,412	92,895	113,878	110,726	99,672	156,207	1,036,353	11	26	23	17	21	27	25	19	22	22	213
	■ Clinical Genetics		5,537	5,537	5,537	5,537	5,537	5,537	5,536	5,537	5,536	5,537	55,367											
	CANCER & BLOOD Total		2,326,765	2,423,402	2,420,350	2,461,806	2,385,911	2,596,247	2,471,213	2,393,195	2,540,584	2,630,894	24,650,366	2,674	3,005	2,868	2,885	3,306	3,276	3,117	3,269	2,775	3,547	30,722
NEUROSCIEN	■ ALAC		194,435	194,435	194,435	194,435	111,582	177,864	177,865	177,864	177,865	291,385	1,892,165											
CES	■ Rehab		178,797	181,966	174,539	168,102	175,337	180,248	185,831	186,593	177,320	181,441	1,790,175	330	362	287	222	328	394	392	320	355	343	3,333
CLJ	- Hellab	OP												25	24	13	41	6	24	16	31	19	17	216
	NEUROSCIENCES Total		373,232	376,402	368,974	362,537	286,919	358,112	363,696	364,457	355,185	472,826	3,682,340	355	386	300	263	334	418	408	351	374	360	3,549
	■NICE		8,707	19,455	25,936	20,619	19,256	112,995	52,927	52,176	82,580	68,294	462,945											
	■ East Forensics		1,256,167	1,256,167	1,256,167	1,256,167	1,256,167	1,256,167	1,256,166	1,256,167	1,256,166	1,256,167	12,561,666											
	■ Devices																							
	■ Academic Fee		11,368	11,368	11,368	11,368	11,368	11,368	11,368	11,368	11,368	11,368	113,680											
	■IVF		270,435	259,041	268,562	329,982	296,899	285,010	284,988	284,988	284,988	284,988	2,849,881	80	70	86	86	89	82	114	122	72	109	910
OTHER	3171	Cryopreservation												90	90	91	92	90	92	91	95	92	94	917
	■ Pay award		307,609	307,609	307,609	307,609	307,609	307,609	307,609	307,609	307,609	307,610	3,076,092											
	■ Major Trauma Plastics		79,516	79,516	79,516	79,516	79,516	79,516	79,516	79,516	79,516	816,016	1,531,659											
	■ Major Trauma ODN		44,389	44,389	44,389	44,389	44,389	44,389	44,389	44,389	44,389	127,722	527,223											
	⊕ Perinatal		152,083	152,083	152,083	152,083	152,083	-10,417	100,000	169,334	127,416	127,970	1,274,720											
	■MPK		18,500	18,500	18,500	18,500	18,500	18,500	18,500	18,500	18,500	68,500	235,000											
	OTHER Total		2,148,774	2,148,128		2,220,233	2,185,787	2,105,137	2,155,464	2,224,047	2,212,532	3,068,635	22,632,866	170	160	177	178	179	174	205	217	164	203	1,827
	Grand Total		_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	10,008,066	9,727,109	_,	10,073,291	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	9,896,188	10,391,626	10,499,380	11,109,222	101,524,054		10,701	10,498	10,357	11,332	11,156	11,077	11,148	10,742		108,949
			,,,,,,,,,,	,000,000	_,,.50	_,552,55	,,	,,	_,000,.00	,,	,,	.,,	.0.,02.,001	.0,0.2	.0,. 01	.5,.00	,	,,,,,,,	,	,	,	,	,	.00,010

APPENDIX 1

Admitted Patient Care Data for WHSSC English contract providers (DHCW data warehouse – all reported episodes Spec+NonSpc) Table 1 – Analysis by NHS England Provider by Month

Episodes by provider - full years except current year (d					T-4-1		· ·	· ·		CountEpisode 2022/23
Main HB	2019/20	2020/21	2021/22	2022/23	lotal	2019/20 (M1-10)	2020/21 (M1-10)	2021/22 (M1-10)	2022/23 (M1-10)	% diff from 19/20
⊟	4,213	2,532	3,515	3,028	13,288	3,638	2,116	2,902	3,028	-17%
□ Cambridge University Hospitals Nhs Foundation tr	80	27	44	62	213	63	25	39	62	-2%
	326	193	353	216	1,088	295	176	307	216	-27%
⊞ Guy's And St Thomas' Nhs foundation trust	446	182	326	302	1,256	395	150	262	302	-24%
∃ Imperial College Healthcare Nhs Trust	302	134	263	289	988	270	108	216	289	7%
─ King's College Hospital Nhs Foundation trust	130	61	93	85	369	109	49	81	85	-22%
	80	24	55	24	183	73	23	43	24	-67%
	193	121	170	162	646	160	100	137	162	1%
⊞ Royal Papworth Hospital Nhs Foundation trust	105	32	63	53	253	91	29	52	53	-42%
The Newcastle Upon Tyne Hospitals nhs foundation	132	103	60	46	341	126	99	45	46	-63%
	52	54	57	65	228	47	45	46	65	38%
The Royal Orthopaedic Hospital Nhs foundation tr	159	98	144	110	511	130	78	123	110	-15%
	357	216	349	350	1,272	306	188	272	350	14%
⊞ University Hospitals Bristol And Weston nhs foun	1,851	1,287	1,538	1,264	5,940	1,573	1,046	1,279	1,264	-20%
☐ Major North Wales provider	14,810	9,783	12,700	10,959	48,252	12,479	7,976	10,518	10,959	-12%
Alder Hey Children's Nhs Foundation trust	3,669	2,816	3,205	2,956	12,646	3,158	2,287	2,647	2,956	-6%
⊞ Liverpool Heart And Chest Hospital nhs foundatio	1,400	1,129	1,542	1,198	5,269	1,152	880	1,281	1,198	4%
E Liverpool University Hospitals Nhs Foundation tr	2,572	1,454	2,094	1,881	8,001	2,202	1,186	1,667	1,881	-15%
	1,106	571	975	712	3,364	944	459	803	712	-25%
∃ Salford Royal Nhs Foundation Trust	301	109	166	190	766	238	90	135	190	-20%
	221	155	195	189	760	190	134	169	189	-1%
St Helens And Knowsley Teaching Hospitals nhs tr	1,655	1,010	1,362	1,191	5,218	1,374	836	1,150	1,191	-13%
■ The Christie Nhs Foundation Trust	620	542	485	454	2,101	489	435	420	454	-7%
The Clatterbridge Cancer Centre Nhs foundation t	351	212	302	152	1,017	315	176	269	152	-52%
The Walton Centre Nhs Foundation trust	1,895	1,170	1,635	1,367	6,067	1,606	950	1,384	1,367	-15%
	1,020	615	739	669	3,043	811	543	593	669	-18%
☐ Major Powys provider	17,650	11,590	15,685	13,776	58,701	14,928	9,464	13,143	13,776	-8%
⊞ Birmingham Women's And Children's Nhs foundation	414	313	399	311	1,437	349	255	322	311	-11%
The Robert Jones And Agnes Hunt Orthopaedic hospit	5,188	2,192	3,913	3,443	14,736	4,344	1,813	3,301	3,443	-21%
University Hospitals Birmingham Nhs Foundation t	1,154	702	875	813	3,544	981	611	717	813	-17%
■ University Hospitals Of North Midlands nhs trust	903	738	830	760	3,231	775	602	698	760	-2%
⊞ Wye Valley Nhs Trust	9,991	7,645	9,668	8,449	35,753	8,479	6,183	8,105	8,449	-0%
Total	36,673	23,905	31,900	27,763		31,045	19,556	26,563	27,763	-11%

Admitted Patient Care Data for WHSSC English contract providers (DHCW data warehouse – all reported episodes Spec+NonSpc) Table 2 – High level summary by LHB of residence (Note. Variance to the previous table relates to border/unknown residents)



Admitted Patient Care Data for WHSSC English contract providers (DHCW data warehouse – all reported episodes Spec+NonSpc) Table 3 (4 pages) – Analysis by Specialty – Comparison of episodes to current month in 2022/23 to previous years

Episodes by provider - full	years exc	ept 2022/2	3 (data: DI	HCW)	TreatmentSpecialtyDescription	CountEpisode	CountEpisode	CountEpisode	CountEpisode	CountEpisode ^
TreatmentSpecialtyDesc	2019/20	2020/21	2021/22	2022/23 ^	•	for 2019/20 (M1-10)	for 2020/21 (M1-10)	for 2021/22 (M1-10)	for 2022/23 (M1-10)	2022/23 % diff from 19/20
⊞ (Unknown)			2	23	⊕ (Unknown)			1	23	
⊞ Accident & Emergency	384	194	298	193	⊕ Accident & Emergency	343	155	246	193	-44%
Adult Cystic Fibrosis Service	69	34	17	10	Adult Cystic Fibrosis Service	60	30	16	10	-83%
Adult Mental Illness	2			2	Adult Mental Illness	1			2	100%
Allergy Service	91	54	137	93	Allergy Service	74	37	106	93	26%
⊞ Anaesthetics	20	15	154	120	Anaesthetics	19	8	136	120	532%
⊞ Blood And Marrow Transplantation	137	83	113	62	Blood And Marrow Transplantation	109	75	100	62	-43%
⊞ Breast Surgery	89	61	84	86	⊞ Breast Surgery	72	52	68	86	19%
⊞ Burns Care	95	77	78	45	⊞ Burns Care	69	67	70	45	-35%
□ Cardiac Rehabilitation				2					2	
□ Cardiac Surgery	602	376	579	474	⊞ Cardiac Surgery	501	316	466	474	-5%
⊞ Cardiology	1,665	1,330	1,789	1,575	⊞ Cardiology	1,414	1,065	1,486	1,575	11%
⊞ Cardiothoracic Surgery	72	52	63	71	⊞ Cardiothoracic Surgery	63	45	55	71	13%
⊞ Cardiothoracic Transplantation	71	29	53	33		66	23	42	33	-50%
	3	2		1	⊞ Chemical Pathology	3	1		1	-67%
⊞ Child & Adolescent Psychiatry		2	2	1			2	2	1	
⊞ Clinical Genetics	1		1			1		1		
⊞ Clinical Haematology	1,055	926	1,000	710	⊞ Clinical Haematology	872	756	833	710	-19%
⊞ Clinical Immunology	22	6		23	⊞ Clinical Immunology	17	6		23	35%
⊞ Clinical Immunology And	17	15	46	15	□ Clinical Immunology And	13	10	40	15	15%
		2			□ Clinical Microbiology		2			
⊞ Clinical Neurophysiology	4		2	1	⊞ Clinical Neurophysiology	4		2	1	-75%
 Clinical Oncology (previously Radiotherapy) 	491	406	362	293	Clinical Oncology (previously Radiotherapy)	410	352	313	293	-29%
⊞ Clinical Pharmacology	7	23	20	6		6	17	15	6	0%
⊞ Colorectal Surgery	270	204	239	197	⊞ Colorectal Surgery	218	158	208	197	-10%
⊞ Community Paediatrics					⊞ Community Paediatrics					
⊞ Congenital Heart Disease	29	28	30	21	⊞ Congenital Heart Disease	20	19	25	21	5%
⊞ Critical Care Medicine	201	116	166	159		168	97	128	159	-5%
□ Dental Medicine Specialties		1	2	1	□ Dental Medicine Specialties		1	2	1	
⊞ Dermatology	503	404	401	316 🗸	⊕ Dermatology	402	317	335	316	-21% 🗸
Total	36,673	23,905	31,900	27,763	Total	31,045	19,556	26,563	27,763	-11%

Episodes by provider - ful	l years exc	ept 2022/2	3 (data: DI	HCW)	TreatmentSpecialtyDescription	CountEpisode	CountEpisode	CountEpisode	CountEpisode	CountEpisode
TreatmentSpecialtyDesc	2019/20	2020/21	2021/22	2022/23 ^		for 2019/20 (M1-10)	for 2020/21 (M1-10)	for 2021/22 (M1-10)	for 2022/23 (M1-10)	2022/23 % diff from 19/20
□ Diabetic Medicine	29	20	28	23	Diabetic Medicine	24	17	22	23	-4%
⊞ Diagnostic Imaging	199	186	217	205	⊞ Diagnostic Imaging	176	145	183	205	16%
⊞ Endocrinology	91	72	108	82	⊞ Endocrinology	74	61	89	82	11%
⊕ ENT	322	127	223	170	⊞ ENT	275	113	184	170	-38%
⊞ Gastroenterology	1,695	1,343	1,853	1,531	⊞ Gastroenterology	1,447	1,038	1,505	1,531	6%
⊞ General Medicine	3,018	2,431	2,567	1,902	⊞ General Medicine	2,587	1,953	2,177	1,902	-26%
⊞ General Surgery	1,799	1,101	1,446	1,435	⊞ General Surgery	1,557	905	1,209	1,435	-8%
⊞ Geriatric Medicine	376	367	441	467	⊞ Geriatric Medicine	314	306	377	467	49%
⊞ Gynaecological Oncology	9	17	12	13	⊞ Gynaecological Oncology	8	15	7	13	63%
⊞ Gynaecology	448	238	366	375		371	199	315	375	1%
Haemophilia Service		3	4	6	⊞ Haemophilia Service		3	2	6	
⊞ Hepatobiliary & Pancreatic Surgery	297	188	233	260	Hepatobiliary & Pancreatic Surgery	259	152	191	260	0%
⊞ Hepatology	216	194	207	138	⊞ Hepatology	185	167	169	138	-25%
⊞ Infectious Diseases	38	17	28	16	⊞ Infectious Diseases	32	13	26	16	-50%
⊞ Intermediate Care			2	2	⊞ Intermediate Care			2	2	
⊞ Interventional Radiology	138	103	161	135		121	82	127	135	12%
■ Maxillo-Facial Surgery	110	29	34	36	⊞ Maxillo-Facial Surgery	96	27	26	36	-63%
	474	266	380	303		411	218	332	303	-26%
■ Midwifery Service	15	12	8	11	⊞ Midwifery Service	13	10	7	11	-15%
■ Neonatology	77	74	92	87		62	63	74	87	40%
	425	303	388	339	□ Nephrology	360	284	291	339	-6%
	962	652	915	738	⊞ Neurology	803	518	766	738	-8%
Neurosurgery ■	1,376	830	1,096	875	⊞ Neurosurgery	1,174	684	928	875	-25%
⊞ Nuclear Medicine	9	6	15	25	■ Nuclear Medicine	9	5	10	25	178%
⊕ Obstetrics Hospital Bed	343	366	422	330	⊞ Obstetrics Hospital Bed	285	307	355	330	169
⊕ Ophthalmology	1,530	689	1,118	1,000	⊕ Ophthalmology	1,157	560	895	1,000	-149
⊞ Oral Surgery	198	101	112	98	⊞ Oral Surgery	179	82	96	98	-459
⊕ Orthoptics	1				⊕ Orthoptics	1				
⊕ Orthotics			1		⊞ Orthotics			1		
⊞ Paediatric Audiological		1			⊕ Paediatric Audiological		1			
Total	36,673	23,905	31,900	27,763	Total	31,045	19,556	26,563	27,763	-11%

Episodes by provider - full	years exc	ept 2022/2	3 (data: DF	HCW)	Tr	reatmentSpecialtyDescription	CountEpisode	CountEpisode	CountEpisode	CountEpisode	CountEpisode ^
TreatmentSpecialtyDesc	2019/20	2020/21	2021/22	2022/23 ^			for 2019/20 (M1-10)	for 2020/21 (M1-10)	for 2021/22 (M1-10)	for 2022/23 (M1-10)	2022/23 % diff from 19/20
⊞ Paediatric Burns Care	58	53	41	28	+	Paediatric Burns Care	50	48	35	28	-44%
Paediatric Cardiac Surgery	153	159	162	122	+	Paediatric Cardiac Surgery	135	135	134	122	-10%
Paediatric Cardiology	355	267	325	252	+	Paediatric Cardiology	313	219	271	252	-19%
⊞ Paediatric Clinical Haematology	354	162	227	169	+	Paediatric Clinical Haematology	291	115	180	169	-42%
Paediatric Clinical Immunology And Allergy Service	47	18	22	40	+	Paediatric Clinical Immunology And Allergy Service	40	11	16	40	0%
⊕ Paediatric Dentistry	52	28	35	36	+	Paediatric Dentistry	45	26	30	36	-20%
□ Paediatric Dermatology	31	18	37	32	+	Paediatric Dermatology	28	17	30	32	14%
■ Paediatric Diabetic Medicine		3	1		+	Paediatric Diabetic Medicine		1			
⊞ Paediatric Ear Nose and Throat	205	107	148	95	+	Paediatric Ear Nose and Throat	173	83	129	95	-45%
■ Paediatric Endocrinology	122	78	101	81	+	Paediatric Endocrinology	104	59	89	81	-22%
□ Paediatric Epilepsy	24	11	12	7	+	Paediatric Epilepsy	22	11	12	7	-68%
□ Paediatric Gastroenterology	221	217	342	320	+	Paediatric Gastroenterology	193	170	270	320	66%
□ Paediatric Infectious Diseases	1				+	Paediatric Infectious Diseases	1				
⊞ Paediatric Intensive Care	158	132	185	109	+	Paediatric Intensive Care	135	116	157	109	-19%
Paediatric Interventional Radiology	26	12	17	16	+	Paediatric Interventional Radiology	24	9	15	16	-33%
	2	1	6	7	+	Paediatric Maxillo-Facial Surgery	2	1	5	7	250%
□ Paediatric Medical Oncology	679	553	448	521	+	Paediatric Medical Oncology	568	480	337	521	-8%
■ Paediatric Metabolic Disease	17	17	19	15	+	Paediatric Metabolic Disease	14	13	17	15	7%
⊞ Paediatric Nephrology	367	267	322	216	+	Paediatric Nephrology	322	215	280	216	-33%
		2	1		+	Paediatric Neuro-Disability		2	1		
□ Paediatric Neurology	151	99	120	80	+	Paediatric Neurology	133	85	98	80	-40%
⊞ Paediatric Neurosurgery	193	141	180	147	+	Paediatric Neurosurgery	171	119	152	147	-14%
□ Paediatric Ophthalmology	95	94	108	77	+	Paediatric Ophthalmology	78	73	92	77	-1%
■ Paediatric Pain Management			1		+	Paediatric Pain Management			1		
■ Paediatric Plastic Surgery	188	141	164	176	+	Paediatric Plastic Surgery	162	114	139	176	9%
⊞ Paediatric Respiratory Medicine	158	100	125	89	+	Paediatric Respiratory Medicine	135	80	108	89	-34%
⊞ Paediatric Rheumatology	103	95	91	93	+	Paediatric Rheumatology	89	77	78	93	4%
⊞ Paediatric Surgery	513	440	442	390	+	Paediatric Surgery	445	371	372	390	-12%
⊞ Paediatric Thoracic Surgery	6	2	5	2	+	Paediatric Thoracic Surgery	6		3	2	-67%
Paediatric Transplantation Total	10 36,673	23,905	31,900	7 v 27,763	+	Paediatric Transplantation Total	7 31,045	19,556	26,563	7 27,763	-11%

Episodes by provider - full	years exc	ept 2022/2	3 (data: DI	HCW)	TreatmentSpecialtyDescription	CountEpisode	CountEpisode	CountEpisode	CountEpisode	CountEpisode ^
TreatmentSpecialtyDesc	2019/20	2020/21	2021/22	2022/23 ^		for 2019/20 (M1-10)	for 2020/21 (M1-10)	for 2021/22 (M1-10)	for 2022/23 (M1-10)	2022/23 % diff from 19/20
Paediatric Rheumatology	103	95	91	93	Paediatric Rheumatology	89	77	78	93	4%
⊞ Paediatric Surgery	513	440	442	390	Paediatric Surgery	445	371	372	390	-12%
□ Paediatric Thoracic Surgery	6	2	5	2	⊕ Paediatric Thoracic Surgery	6		3	2	-67%
 Paediatric Transplantation Surgery 	10	2	9	7	Paediatric Transplantation Surgery	7	2	5	7	0%
 Paediatric Trauma and Orthopaedics 	143	95	131	151	Paediatric Trauma and Orthopaedics	121	75	111	151	25%
⊞ Paediatric Urology	331	235	325	310		279	183	278	310	11%
	708	361	413	533	Paediatrics	598	304	347	533	-11%
⊞ Pain Management	126	75	52	50	⊕ Pain Management	115	72	48	50	-57%
⊞ Palliative Medicine	1	5	4		Palliative Medicine	1	4	3		
⊞ Physiotherapy				1	⊕ Physiotherapy				1	
⊞ Plastic Surgery	1,490	939	1,309	1,210	⊞ Plastic Surgery	1,301	780	1,084	1,210	-7%
□ Podiatric Surgery	109	22	78	77	⊕ Podiatric Surgery	101	22	66	77	-24%
□ Psychotherapy				3	⊕ Psychotherapy				3	
⊞ Rehabilitation Service	46	37	32	25	⊞ Rehabilitation Service	36	30	24	25	-31%
⊞ Respiratory Medicine	875	510	665	763	Respiratory Medicine	757	409	559	763	1%
⊞ Respiratory Physiology	4	3	4	11	⊞ Respiratory Physiology	4	3	2	11	175%
⊞ Restorative Dentistry	2	3	1	1	Restorative Dentistry	2	3	1	1	-50%
⊞ Rheumatology	728	550	902	883	⊞ Rheumatology	614	428	746	883	44%
	235	84	96	114		205	73	84	114	-44%
⊞ Spinal Surgery Service	27	39	35	76		22	30	28	76	245%
	157	171	166	147		137	138	147	147	7%
	309	210	343	270	⊞ Thoracic Surgery	261	162	283	270	3%
Transient Ischaemic Attack				1	Transient Ischaemic Attack				1	
	242	158	162	159		195	133	130	159	-18%
	5,429	2,171	4,089	3,601		4,554	1,854	3,426	3,601	-21%
	2		2	1	Tropical Medicine	2			1	-50%
□ Upper Gastrointestinal Surgery	87	46	72	80		76	38	56	80	5%
⊕ Urology	1,103	718	1,107	933	⊕ Urology	960	562	944	933	-3%
∀ascular Surgery	113	64	79	80	⊞ Vascular Surgery	98	53	61	80	-18%
⊞ Well Babies	22	14	22	21	⊕ Well Babies	15	9	17	21	40%
Total	36,673	23,905	31,900	27,763	Total	31,045	19,556	26,563	27,763	-11%

Admitted Patient Care Data for WHSSC English contract providers (DHCW data warehouse – all reported episodes Spec+NonSpc) Table 4 (8 pages) – Analysis by Specialty – Comparison of episodes to current month between 2019/20 and 2022/23 (All-Wales and each Health Board of residence)

4.1 All-Wales:

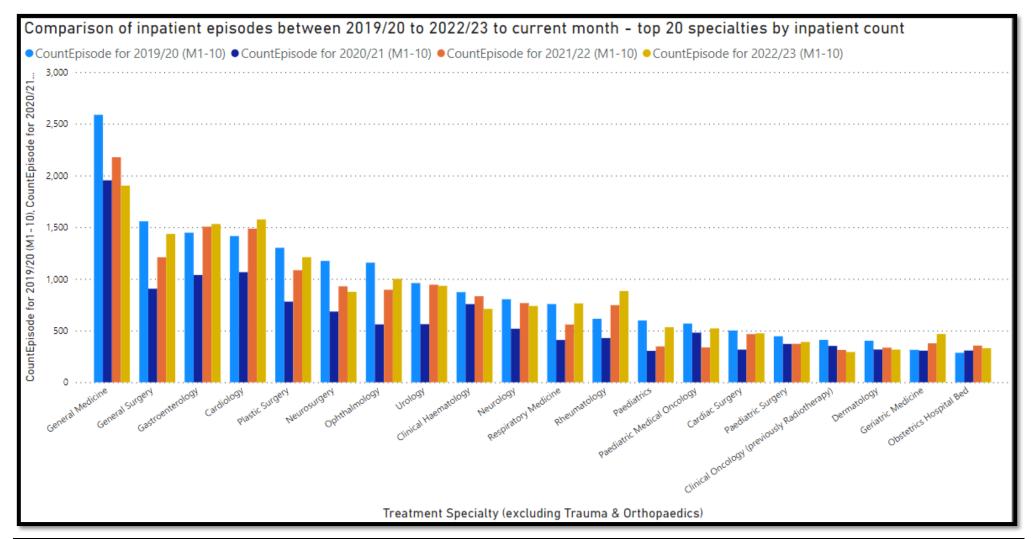


Table 4.2 - Aneurin Bevan UHB - Analysis by Specialty - Comparison of episodes to current month between 2019/20 and 2022/23

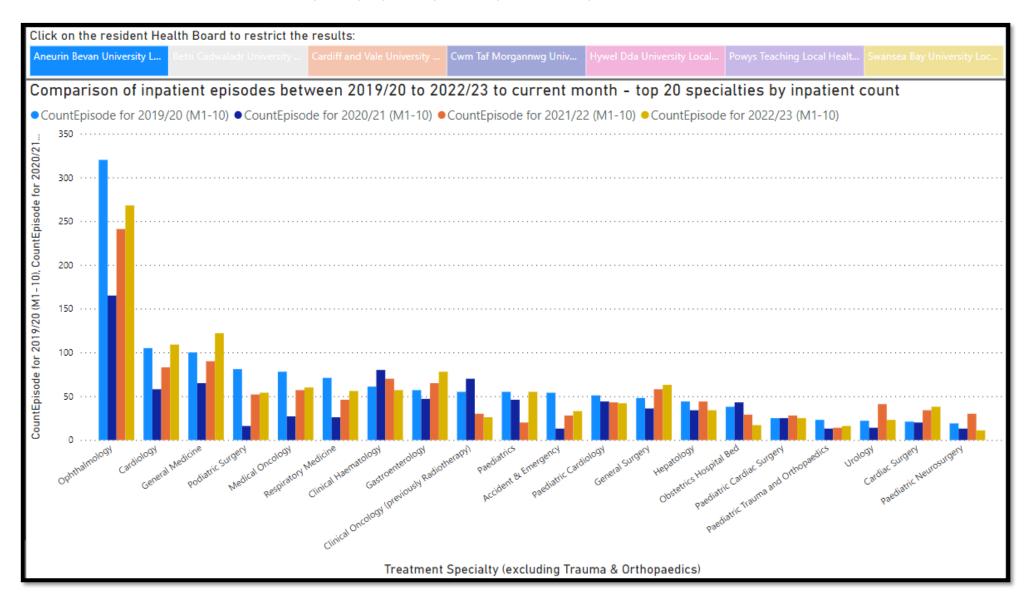


Table 4.3 – Betsi Cadwaladr UHB - Analysis by Specialty – Comparison of episodes to current month between 2019/20 and 2022/23

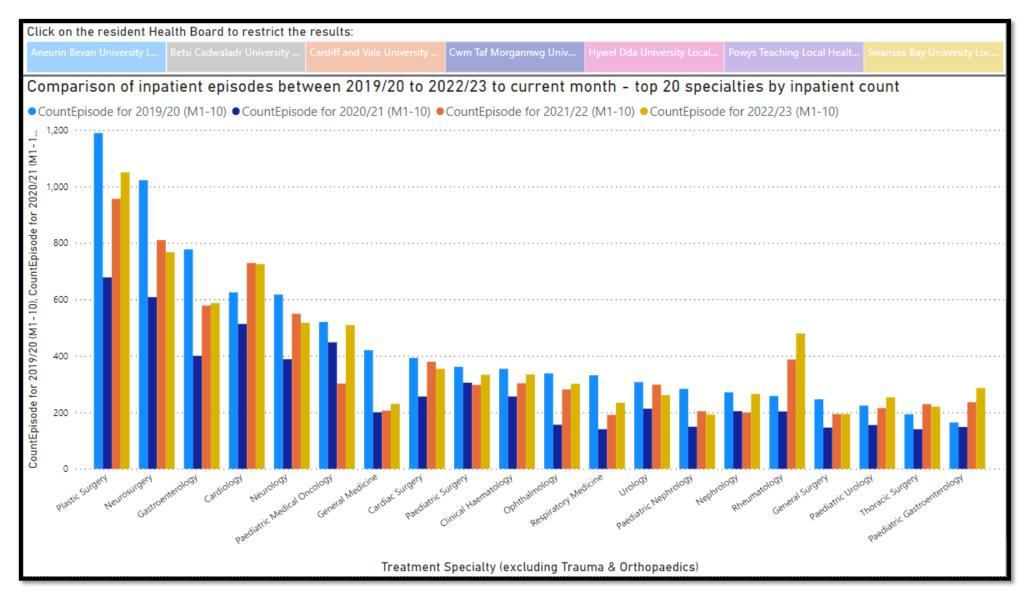


Table 4.4 - Cardiff & Vale UHB - Analysis by Specialty - Comparison of episodes to current month between 2019/20 and 2022/23

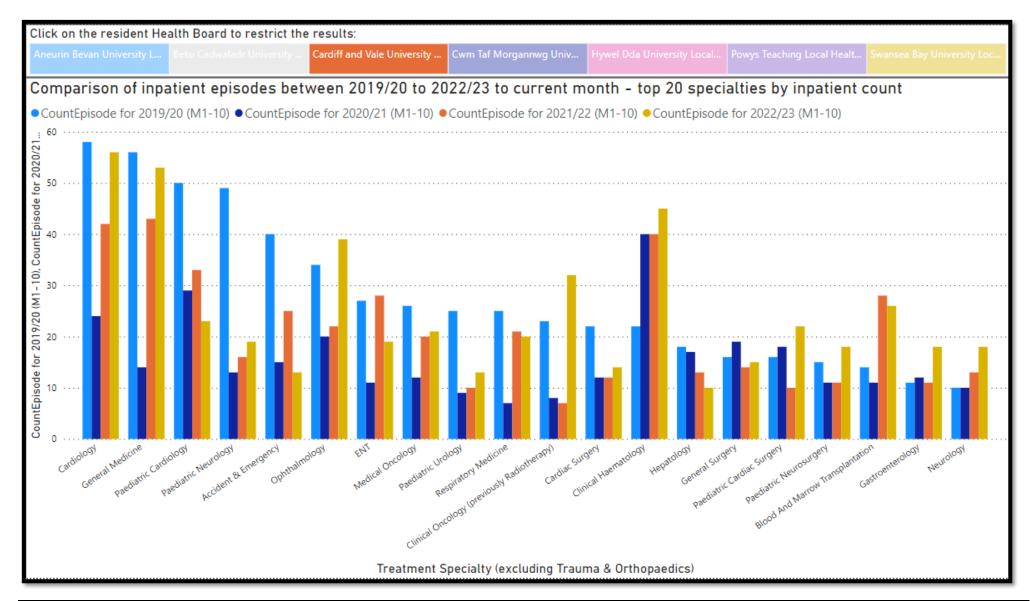


Table 4.5 – Cwm Taf Morgannwg UHB - Analysis by Specialty – Comparison of episodes to current month between 2019/20 and 2022/23

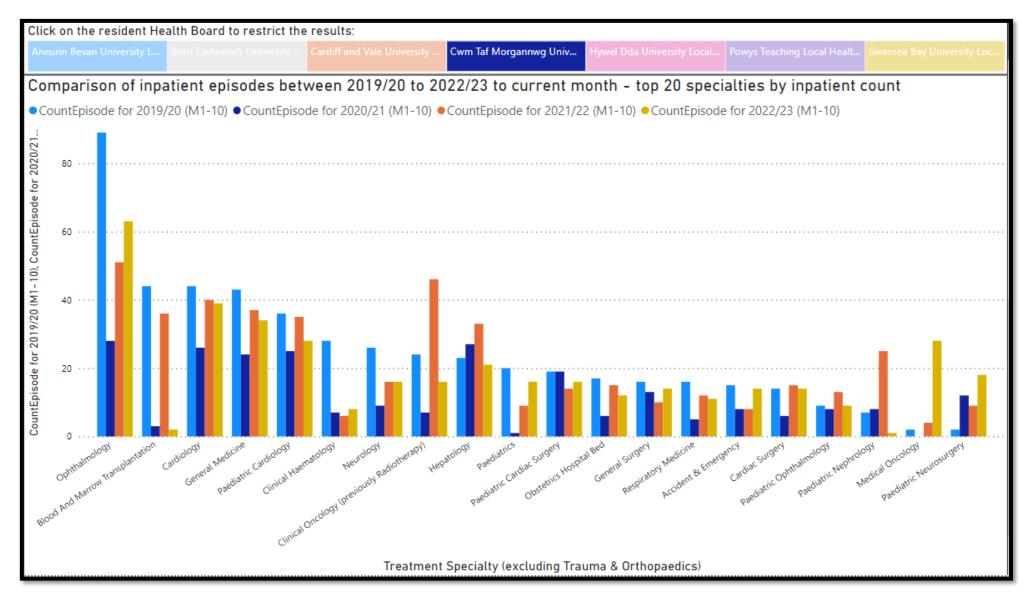


Table 4.6 - Hywel Dda HB - Analysis by Specialty - Comparison of episodes to current month between 2019/20 and 2022/23

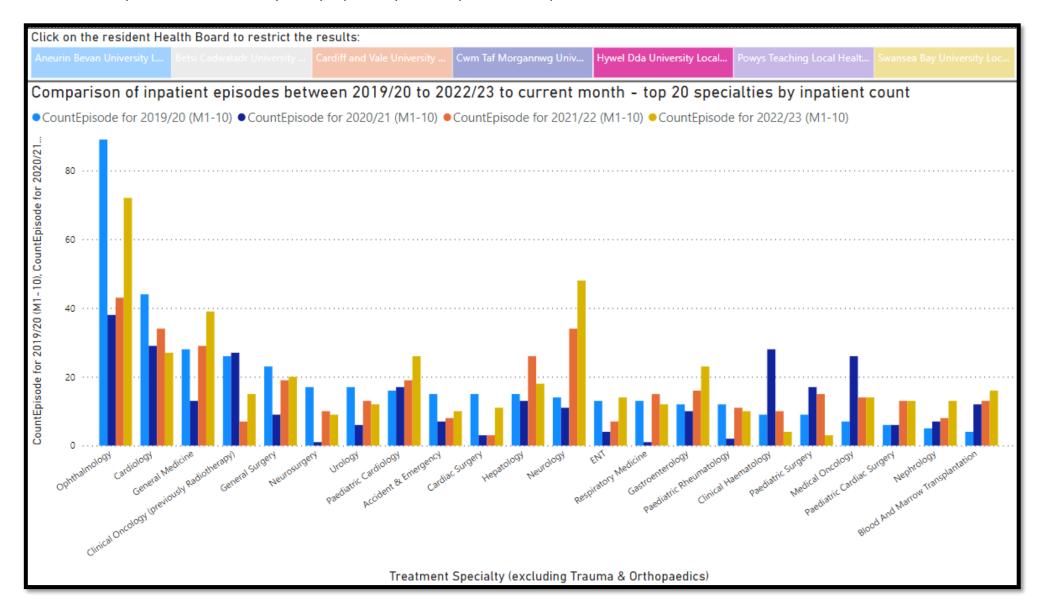


Table 4.7 - Powys THB - Analysis by Specialty - Comparison of episodes to current month between 2019/20 and 2022/23

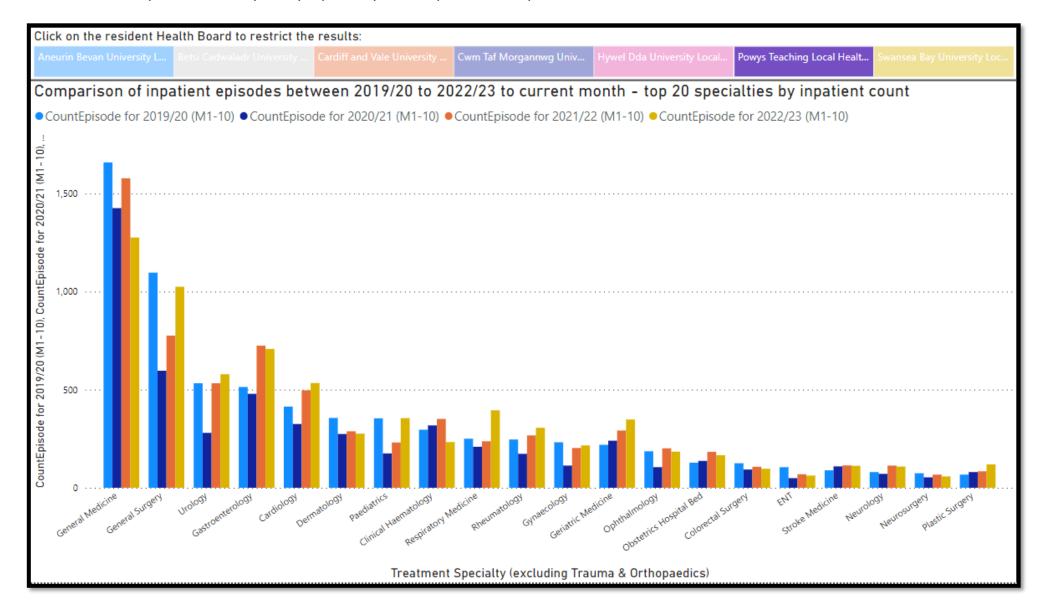
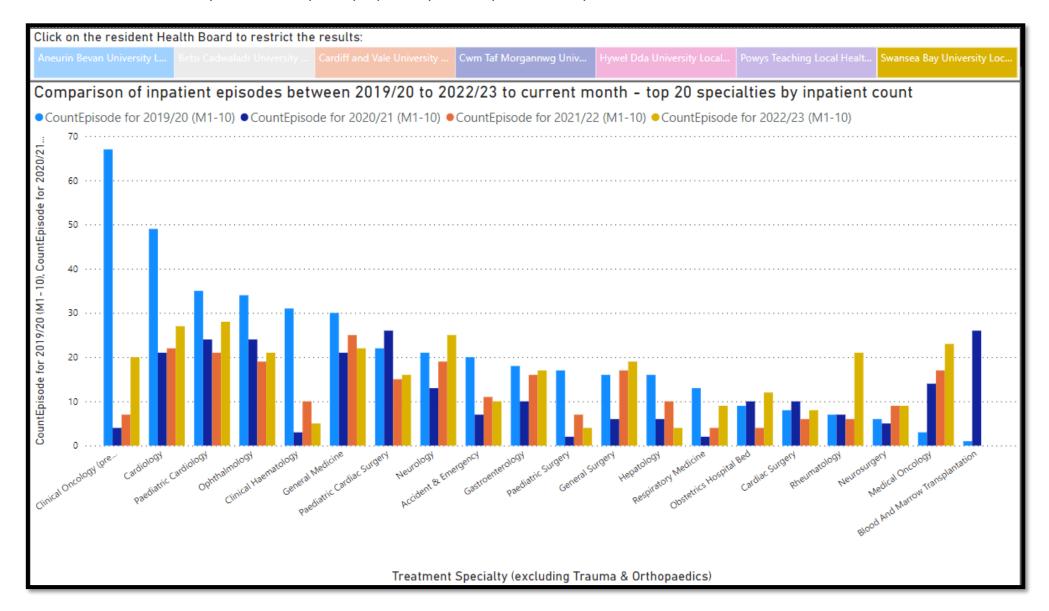


Table 4.8 - Swansea Bay UHB - Analysis by Specialty - Comparison of episodes to current month between 2019/20 and 2022/23



APPENDIX 2

New Welsh Government performance measures

New performance measures were announced by Welsh Government in January 2022, with a new Performance Framework for 2022/23, as per the below extracts.

	Per	formance Measure	Target	Reporting Frequency	Source	Ministerial Priority				
	38	their first definitive cancer treatment within 62 days from point of suspicion (regardless	Improvement trajectory towards a national target of 80% by 2026	Monthly	Suspected Cancer Pathway Data Set (NDR – DHCW)	✓				
ned Care		of the referral route)	Rationale: An early diagnosis and treatment of cancer will increase an individual's chance of survival and reduce the likely harm to the individual's health and quality of life. Therefore, there is a need to diagnose and treat patients with cancer as promptly as possible. This measure includes all suspected cancers and starts from the point a patient is suspected of having cancer.							
Elective Planr	39 Number of patients waiting over 8 weeks for a diagnostic endoscopy		Improvement trajectory towards a national target of zero by Spring 2024	Monthly	Diagnostic & Therapies Waiting Times Dataset	✓				
Ele			Rationale: Endoscopy services play an essential part in investigating suspected cance serious non-cancerous conditions such as inflammatory bowel disease. Due to pope changes, a lower threshold for suspected cancer investigation and increasing cancer surveithe demand for endoscopy services is out of balance with core capacity. To address to improvement plan has been introduced to support health boards to develop sustained endoscopy services.							

	40	Number of patients waiting more than 8 weeks for a specified diagnostic	12 month reduction trend towards zero by spring 2024	Monthly	Diagnostic & Therapies Waiting Times Dataset						
			or injury. Diagnostic test make the right clinical dec	Rationale: Diagnostic tests and investigations are used to identify a patient's condition, diseas or injury. Diagnostic testing provides essential information to enable clinicians and patients to make the right clinical decisions. Early detection and diagnosis can prevent the patient suffering unnecessary pain and it can reduce the scale and cost of treatment.							
	41	Number of patients waiting more than 14 weeks for a specified therapy	12 month reduction trend towards zero by spring 2024	Monthly	Diagnostic & Therapies Waiting Times Dataset						
d Care			Rationale: Patients receiving timely access to a specified therapy should experience improved outcomes. Reducing the time that a patient waits for a therapy service reduces the risk of the condition deteriorating and alleviates the patient's symptoms sooner. This measure provides greater transparency and encourages improvement in the timeliness of accessing NHS therapy services.								
Elective Planned Care	42	Number of patients waiting over 52 weeks for a new outpatient appointment	Improvement trajectory towards eliminating over 52 week waits by 31 December 2022	Monthly	Referral to Treatment (combined) Dataset	✓					
Ele			Rationale: The number of patients waiting for a new outpatient appointment has increased year on year whilst capacity has been unable to meet demand. NHS organisations are required to improve service planning and clinical pathways to deliver sustainable planned care services, where waiting lists are reduced to a manageable level.								
	43	Number of patients waiting for a follow-up outpatient appointment who are delayed by over 100%	Improvement trajectory towards a reduction of 30% by March 2023 against a baseline of March 2021	Monthly	Outpatient Follow- Up Delay Monitoring Return (Welsh Government)	✓					
			Rationale: Delaying a follow-up outpatient appointment not only gives the service user a negative impression of NHS services, but it can be a clinical risk if the patient's condition deteriorates whilst waiting for the appointment. Through service re-design, health boards are required to reduce the number of patients waiting long delays for a follow-up outpatient appointment.								

	Per	formance Measure	Target	Reporting Frequency	Source	Ministerial Priority				
d Care			Improvement trajectory towards a national target of zero by 2024	Monthly	Referral to Treatment (combined) Dataset	✓				
Elective Planned			Rationale: Patients receiving timely access to high quality elective treatment and care should experience improved outcomes. Reducing the time that a patient waits for treatment reduces the risk of the condition deteriorating and alleviates the patient's symptoms, pain and discomfo sooner. This measure provides greater transparency and encourages improvement in the timeliness of treatment across NHS services.							
Ele	46	Number of patients waiting more than 36 weeks for referral to treatment	Improvement trajectory towards a national target of zero by 2026	Monthly	Referral to Treatment (combined) Dataset	✓				
			Rationale: As above.							
	47	Percentage of patients waiting less than 26 weeks for referral to treatment	Improvement trajectory towards a national target of 95% by 2026	Monthly	Referral to Treatment (combined) Dataset	✓				
			Rationale: As above.							

Please note the above schedule was slightly updated with the Planning Framework for the 23-26 ICP templates, as follows; this relates to the above measure numbers 42 and 45 and will be reported on from April onwards.

. Planned Care, Recovery, Diagnostics and Pathways of Care

52 weeks Outpatient Assessment and 104 weeks treatment recovery milestones to be achieved by 30 June 2023 and maintained throughout 2023/24 moving to 36 weeks RTT standards by March 2024

This appendix contains the available performance data against the following specialties:

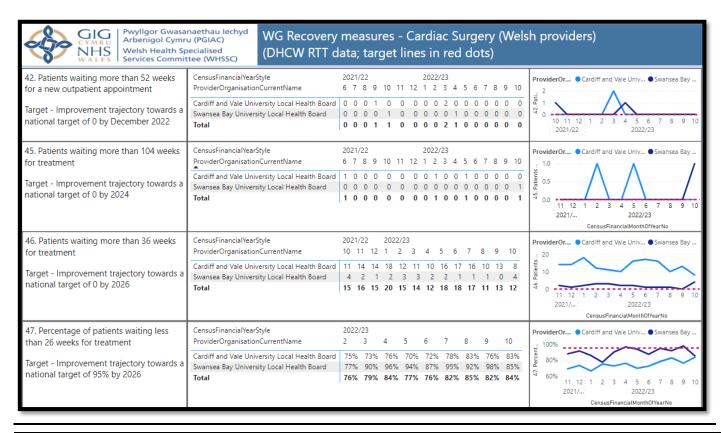
- Cardiac Surgery
- Thoracic Surgery
- Neurosurgery
- Plastic Surgery
- Paediatric Surgery

Please note that the Referral to Treatment (RTT) dataset does not split out the pathway point (eg. New outpatient, Inpatient treatment) for English providers, so the total patient set has been used.

The Suspected Cancer Pathway dataset is held by DHCW, and is currently being discussed internally by them around the format to make this data available (measure 38).

The Outpatient Follow-up delay data (measure 43) is available only from Welsh Government direct, but is reported by provider as totals, so is not applicable for Specialist-only reporting.

Cardiac Surgery (measures 42, 45-47)



CYMRU Pwyllgor Gwasani Arbenigol Cymru NHS Welsh Health Spe Services Committee	(PGIAC) WG F	Recovery measures - Cardiac Surgery (Liverpool Heart & Chest) from provider; target lines in red dots)
42. Patients waiting more than 52 weeks for a new outpatient appointment Target - Improvement trajectory towards a	Organisation Code (Code of Provider)	2021/22 2022/23 1 2 3 4 5 6 7 8 9 10 11 12 1 2 3 4 5 6 7 8 9 10 3 2 1 0 2 0 1 1 1 0 0 0 0 1 0 2 1 0 1 2 1 0
national target of 0 by December 2022	Total	3 2 1 0 2 0 1 1 1 0 0 0 0 1 0 2 1 0 1 2 1 0 0 0 0
45. Patients waiting more than 104 weeks for treatment	Fyear Organisation Code (Code of Provider)	2021/22 2022/23 1 2 3 4 5 6 7 8 9 10 11 12 1 2 3 4 5 6 7 8 9 10
Target - Improvement trajectory towards a national target of 0 by 2024	RBQ Total	0 1 1 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
46. Patients waiting more than 36 weeks for treatment	Fyear Organisation Code (Code of Provider)	2021/22 2022/23 5 6 7 8 9 10 11 12 1 2 3 4 5 6 7 8 9 10 10 10 10 10 10 10 10 10 10 10 10 10
Target - Improvement trajectory towards a national target of 0 by 2026	RBQ Total	26 22 21 21 22 25 17 15 18 19 18 16 17 20 21 21 24 33 26 22 21 21 22 25 17 15 18 19 18 16 17 20 21 21 24 33 29 2022/23 Month
47. Percentage of patients waiting less than 26 weeks for treatment	Fyear Organisation Code (Code of Provider)	the distribution of the di
Target - Improvement trajectory towards a national target of 95% by 2026	RBQ Total	50% 58% 54% 59% 64% 62% 54% 47% 47% 39% 46% 50% 50% 58% 54% 59% 64% 62% 54% 47% 47% 39% 46% 50% 1 2 3 4 5 6 7 8 9 10 2022/23 Month

Thoracic Surgery (measures 42, 45-47)

CYMRU NHS WALES Pwyllgor Gwasani Arbenigol Cymru Welsh Health Spe Services Committe	(PGIAC) WG Recovery m	easures - Thoracic Surgery (Welsh a; target lines in red dots)	providers)
42. Patients waiting more than 52 weeks for a new outpatient appointment Target - Improvement trajectory towards a national target of 0 by December 2022	CensusFinancialYearStyle ProviderOrganisationCurrentName Cardiff and Vale University Local Health Board Swansea Bay University Local Health Board Total	2021/22 2022/23 6 7 8 9 10 11 12 1 2 3 4 5 6 7 8 9 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Provider • Cardiff and Vale • Swansea Bay 12
45. Patients waiting more than 104 weeks for treatment Target - Improvement trajectory towards a national target of 0 by 2024	CensusFinancialYearStyle ProviderOrganisationCurrentName Cardiff and Vale University Local Health Board Swansea Bay University Local Health Board Total	2021/22 2022/23 6 7 8 9 10 11 12 1 2 3 4 5 6 7 8 9 10 1 2 1 3 1 2 0 0 0 0 0 1 1 0 0 0 0 0 0 0 0 0 0 0	Provider • Cardiff and Vale • Swansea Bay • 2
46. Patients waiting more than 36 weeks for treatment Target - Improvement trajectory towards a national target of 0 by 2026	CensusFinancialYearStyle ProviderOrganisationCurrentName Cardiff and Vale University Local Health Board Swansea Bay University Local Health Board Total	2021/22 2022/23 8 9 10 11 12 1 2 3 4 5 6 7 8 9 10 15 19 15 13 9 7 6 8 7 7 5 3 3 3 8 3 2 3 2 2 2 2 2 2 2 0 0 0 0 18 21 18 15 11 9 8 10 9 9 7 3 3 3	Provider • Cardiff and Vale • Swansea Bay
47. Percentage of patients waiting less than 26 weeks for treatment Target - Improvement trajectory towards a national target of 95% by 2026	CensusFinancialYearStyle ProviderOrganisationCurrentName Cardiff and Vale University Local Health Board Swansea Bay University Local Health Board Total	2022/23 2 3 4 5 6 7 8 9 10 73% 70% 83% 80% 76% 88% 79% 75% 77% 90% 94% 93% 89% 91% 100% 96% 95% 100% 80% 79% 87% 83% 81% 90% 84% 80% 81%	Provider • Cardiff and Vale • Swansea Bay 100% 80% 80% 1 2 3 4 5 6 7 8 9 10 2022/23 CensusFinancialMonth0fYearNo

CYMRU Pwyllgor Gwasani Arbenigol Cymru Welsh Health Spe Services Committee	PGIAC) WG REC	covery measures - Thoracic Surgery (Liverpool Heart & Chest) from provider; target lines in red dots)
42. Patients waiting more than 52 weeks for a new outpatient appointment Target - Improvement trajectory towards a national target of 0 by December 2022	of Provider) RBQ 0 0	2 3 4 5 6 7 8 9 10 11 12 1 2 3 4 5 6 7 8 9 10
45. Patients waiting more than 104 weeks for treatment Target - Improvement trajectory towards a national target of 0 by 2024	Organisation Code (Code 1 2 of Provider)	21/22
46. Patients waiting more than 36 weeks for treatment Target - Improvement trajectory towards a national target of 0 by 2026	Organisation Code (Code 1 2 of Provider)	21/22
47. Percentage of patients waiting less than 26 weeks for treatment Target - Improvement trajectory towards a national target of 95% by 2026	Fyear 2022 Organisation Code (Code of Provider) RBQ 1009 Total 1009	· · · · · · · · · · · · · · · · · · ·

Neurosurgery (measures 42, 45-47)

CYMRU Pwyllgor Gwasana Arbenigol Cymru Welsh Health Sper Services Committee	(PGIAC) WG RECOV	very measures - Neurosurgery (Welsh pro IT data; target lines in red dots)	oviders)
42. Patients waiting more than 52 weeks for a new outpatient appointment Target - Improvement trajectory towards a national target of 0 by December 2022	CensusFinancialYearStyle ProviderOrganisationCurrentName Cardiff and Vale University Local Health Board Total	2021/22 3 4 5 6 7 8 9 10 11 12 1 2 3 4 5 6 7 8 9 10 0 0 0 1 1 0 1 0 0 0 0 0 0 0 0 0 0 0	Provider • Cardiff and Vale University Local Heal 1
45. Patients waiting more than 104 weeks for treatment Target - Improvement trajectory towards a national target of 0 by 2024	CensusFinancialYearStyle ProviderOrganisationCurrentName Cardiff and Vale University Local Health Board Total	2021/22 3 4 5 6 7 8 9 10 11 12 1 2 3 4 5 6 7 8 9 10 0 0 0 0 1 3 1 1 1 0 0 0 0 0 2 2 0 0 0 0 0 0 0 1 3 1 1 1 0 0 0 0 0 2 2 0 0 0 0	Provider • Cardiff and Vale University Local Heal 2
46. Patients waiting more than 36 weeks for treatment Target - Improvement trajectory towards a national target of 0 by 2026	CensusFinancialYearStyle ProviderOrganisationCurrentName Cardiff and Vale University Local Health Board Total	2021/22 2022/23 7 8 9 10 11 12 1 2 3 4 5 6 7 8 9 10 68 48 53 47 52 51 46 48 45 48 39 35 26 20 23 13 68 48 53 47 52 51 46 48 45 48 39 35 26 20 23 13	Provider • Cardiff and Vale University Local Heal 50 12 1 2 3 4 5 6 7 8 9 10 2022/23 Census Financial Month Of Year No
47. Percentage of patients waiting less than 26 weeks for treatment Target - Improvement trajectory towards a national target of 95% by 2026	CensusFinancialYearStyle ProviderOrganisationCurrentName Cardiff and Vale University Local Health Board Total	2022/23 1 2 3 4 5 6 7 8 9 10 66% 61% 66% 68% 73% 76% 79% 77% 72% 81% 66% 61% 66% 68% 73% 76% 79% 77% 72% 81%	Provider • Cardiff and Vale University Local Heal 100% 80% 60% 1 2 3 4 5 6 7 8 9 10 2022/23 CensusFinancialMonthOfYearNo

CYMRU Pwyllgor Gwasan. Arbenigol Cymru Welsh Health Spe Services Committe	(PGIAC) WG RO	very measures - Neurosurgery (English providers) TT data; target lines in red dots)	
42. Patients waiting more than 52 weeks for a new outpatient appointment (data for all pathways used) Target - Improvement trajectory towards a national target of 0 by December 2022	CensusFinancialYearStyle ProviderOrganisationCurrent Name The Walton Centre Nhs Foundation trust Total	1 6 7 8 9 10 11 12 1 2 3 4 5 6 7 8 9 11 6 9 11 10 9 10 13 15 23 16 15 15 12 11 9 12	alton Centre Nhs Foundation 2 3 4 5 6 7 8 9 2022/23
45. Patients waiting more than 104 weeks for treatment (data for all pathways used) Target - Improvement trajectory towards a national target of 0 by 2024	CensusFinancialYearStyle ProviderOrganisationCurrent Name The Walton Centre Nhs Foundation trust Total	3 4 5 6 7 8 9 10 11 12 1 2 3 4 5 6 7 8 9 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	2 3 4 5 6 7 8 9 2022/23 usFinancialMonthOffYearNo
46. Patients waiting more than 36 weeks for treatment (data for all pathways used) Target - Improvement trajectory towards a	CensusFinancialYearStyle ProviderOrganisationCurrent Name The Walton Centre Nhs	7/22 2022/23 6 7 8 9 10 11 12 1 2 3 4 5 6 7 8 9 30 33 41 48 50 48 51 46 54 42 39 37 39 39 39 37	alton Centre Nhs Foundation
national target of 0 by 2026	Foundation trust Total	30 33 41 48 50 48 51 46 54 42 39 37 39 39 39 37	2 3 4 5 6 7 8 9 2022/23 usFinancialMonthOfYearNo
47. Percentage of patients waiting less than 26 weeks for treatment (data for all pathways used)	Census Financial Year Style Provider Organisation Current Name	11 12 1 2 3 4 5 6 7 8 9	alton Centre Nhs Foundation
Target - Improvement trajectory towards a national target of 95% by 2026	The Walton Centre Nhs Foundation trust Total	80% 81% 83% 79% 81% 81% 82% 85% 86% 86% 87% 89% 88% 88% 88% 88% 88% 88% 88% 88% 88	3 4 5 6 7 8 9 2022/23 susFinancialMonthOfYearNo

Plastic Surgery (measures 42, 45-47)

CYMRU Pwyllgor Gwasana Arbenigol Cymru Welsh Health Spec Services Committee	(DHCW RTT data: target lines in red dots)	roviders)
42. Patients waiting more than 52 weeks for a new outpatient appointment Target - Improvement trajectory towards a national target of 0 by December 2022	CensusFinancialYearStyle 2021/22 2021/25 2022/25 2021/26 2021/26 2021/27 2022/25 2021/26	Provider • Swansea Bay University Local Health 200 100 112 1 2 3 4 5 6 7 8 9 10 2 CensusFinancialMonth0fYearNo
45. Patients waiting more than 104 weeks for treatment Target - Improvement trajectory towards a national target of 0 by 2024	CensusFinancialYearStyle 2021/22 2022/23 2021/25	Provider • Swansea Bay University Local Health 9 500 12 1 2 3 4 5 6 7 8 9 10 2 2022/23 CensusFinancialMonth0fYearNo
46. Patients waiting more than 36 weeks for treatment Target - Improvement trajectory towards a national target of 0 by 2026	Financial Year 2022/23 7	Provider • Swansea Bay University Local Health 1
47. Percentage of patients waiting less than 26 weeks for treatment Target - Improvement trajectory towards a national target of 95% by 2026	CensusFinancialYearStyle 2021/22 2022/23 4 5 6 7 8 9 10 Swansea Bay University Local Health Board 35% 39% 42% 40% 39% 39% 39% 38% 39% 39% 38% <td>Provider • Swansea Bay University Local Health 100% 50% 1 2 3 4 5 6 7 8 9 10 2022/23 CensusFinancialMonth0fYearNo</td>	Provider • Swansea Bay University Local Health 100% 50% 1 2 3 4 5 6 7 8 9 10 2022/23 CensusFinancialMonth0fYearNo

CYMRU Arbenigol Cymru WHS WALES Services Committee	(DHCW RTT data: target lines in red dots)
42. Patients waiting more than 52 weeks for a new outpatient appointment (data for all pathways used) Target - Improvement trajectory towards a national target of 0 by December 2022	CensusFinancialYearStyle 2021/22 2022/23 ProviderOrganisationCurrentName 10 11 12 1 2 3 4 5 6 7 8 9 Countess Of Chester Hospital Nhs foundation trus St Helens And Knowsley Teaching Hospitals nhs tr 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
45. Patients waiting more than 104 weeks for treatment (data for all pathways used) Target - Improvement trajectory towards a national target of 0 by 2024	CensusFinancialYearStyle 2021/22 2022/23 ProviderOrganisationCurrentName 6 7 8 9 10 11 12 1 2 3 4 5 6 7 8 9 Countess Of Chester Hospital Nhs foundation trus St Helens And Knowsley Teaching Hospitals nhs tr Total ProviderOrganisationCurrentName 0 0 0 0 15 15 6 9 4 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
46. Patients waiting more than 36 weeks for treatment (data for all pathways used) Target - Improvement trajectory towards a national target of 0 by 2026	CensusFinancialYearStyle 2022/23 ProviderOrganisationCurrentName 1 2 3 4 5 6 7 8 9 Countess Of Chester Hospital Nhs foundation trus St Helens And Knowsley Teaching Hospitals nhs tr 63 92 86 76 78 80 87 93 93 St Helens And Knowsley Teaching Hospitals nhs tr 111 122 139 143 159 164 179 182 169 Total 174 214 225 219 237 244 266 275 262 2021/ 2022/ 2022/
47. Percentage of patients waiting less than 26 weeks for treatment (data for all pathways used) Target - Improvement trajectory towards a national target of 95% by 2026	CensusFinancialYearStyle 2021/22 2022/23 ProviderOrganisationCurrentName 2 1 2 3 4 5 6 7 8 9 Countess Of Chester Hospital Nhs foundation trus 53% 58% 55% 57% 58% 54% 50% 47% 46% 49% St Helens And Knowsley Teaching Hospitals nhs tr 68% 64% 62% 64% 60% 62% 58% 58% 58% 59% Total 63% 62% 61% 60% 62% 58% 58% 58% 59%

Paediatric Surgery (measures 42, 45-47)

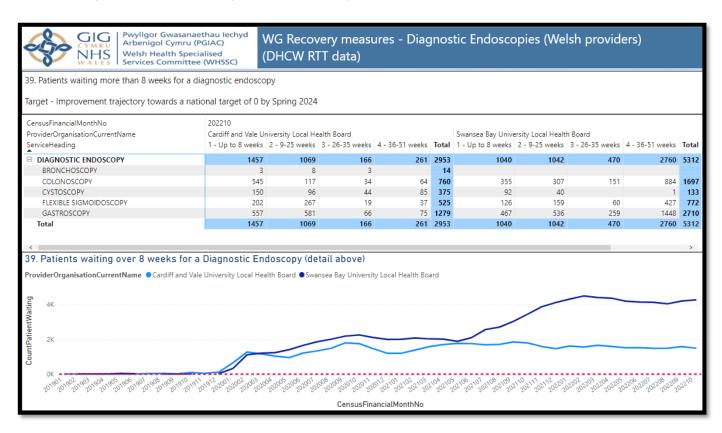
CYMRU Pwyllgor Gwasana Arbenigol Cymru Welsh Health Sper Services Committee	(PGIAC) WG RECOV	very measures - Paediatric Surgery (Welsl TT data; target lines in red dots)	h providers)
42. Patients waiting more than 52 weeks for a new outpatient appointment Target - Improvement trajectory towards a national target of 0 by December 2022	CensusFinancialYearStyle ProviderOrganisationCurrentName Cardiff and Vale University Local Health Board Total	2021/22 3 4 5 6 7 8 9 10 11 12 1 2 3 4 5 6 7 8 9 10 0 0 0 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0	Provider • Cardiff and Vale University Local Heal 1
45. Patients waiting more than 104 weeks for treatment Target - Improvement trajectory towards a national target of 0 by 2024	CensusFinancialYearStyle ProviderOrganisationCurrentName Cardiff and Vale University Local Health Board Total	2021/22 2022/23 6 7 8 9 10 11 12 1 2 3 4 5 6 7 8 9 10 8 13 15 15 15 23 26 26 25 25 16 11 10 8 6 6 1 8 13 15 15 15 23 26 26 25 25 16 11 10 8 6 6 1	Provider • Cardiff and Vale University Local Heal
46. Patients waiting more than 36 weeks for treatment Target - Improvement trajectory towards a national target of 0 by 2026	CensusFinancialYearStyle ProviderOrganisationCurrentName Cardiff and Vale University Local Health Board Total	2021/22 2022/23 11 12 1 2 3 4 5 6 7 8 9 10 208 218 229 220 232 239 243 230 216 214 249 246 208 218 229 220 232 239 243 230 216 214 249 246	Provider • Cardiff and Vale University Local Heal 20 20 21 21 2 3 4 5 6 7 8 9 10 2 2022/23 CensusFinancialMonth0fYearNo
47. Percentage of patients waiting less than 26 weeks for treatment Target - Improvement trajectory towards a national target of 95% by 2026	CensusFinancialYearStyle ProviderOrganisationCurrentName Cardiff and Vale University Local Health Board Total	2022/23 1 2 3 4 5 6 7 8 9 10 44% 43% 44% 43% 41% 40% 40% 39% 37% 37% 44% 43% 44% 43% 41% 40% 40% 39% 37% 37%	Provider • Cardiff and Vale University Local Heal 100% 50% 1 2 3 4 5 6 7 8 9 10 2022/23

Pwyllgor Gwasana Arbenigol Cymru Welsh Health Spe Services Committee	(PGIAC) WG RECO	very measures - Paediatric Surgery (Englis TT data; target lines in red dots)	sh providers)
42. Patients waiting more than 52 weeks for a new outpatient appointment (data for all pathways used) Target - Improvement trajectory towards a national target of 0 by December 2022	CensusFinancialYearStyle ProviderOrganisationCurrentName Alder Hey Children's Nhs Foundation trust Total	2021/22 2021/23 2022/2	Provider • Alder Hey Children's Nhs Foundatio 1
45. Patients waiting more than 104 weeks for treatment (data for all pathways used) Target - Improvement trajectory towards a national target of 0 by 2024	CensusFinancialYearStyle ProviderOrganisationCurrentName Alder Hey Children's Nhs Foundation trust Total	2021/22 1 2 3 4 5 6 7 8 9 10 11 12 1 2 3 4 5 6 7 8 9 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Provider • Alder Hey Children's Nhs Foundatio 1 1 0
46. Patients waiting more than 36 weeks for treatment (data for all pathways used) Target - Improvement trajectory towards a national target of 0 by 2026	CensusFinancialYearStyle ProviderOrganisationCurrentName Alder Hey Children's Nhs Foundation trust Total	2022/23	Provider • Alder Hey Children's Nhs Foundatio 5
47. Percentage of patients waiting less than 26 weeks for treatment (data for all pathways used) Target - Improvement trajectory towards a national target of 95% by 2026	CensusFinancialYearStyle ProviderOrganisationCurrentName Alder Hey Children's Nhs Foundation trust Total	2021/22 2022/23 11 12 1 2 3 4 5 6 7 8 9 80% 88% 90% 91% 78% 74% 72% 70% 67% 71% 69% 80% 88% 90% 91% 78% 74% 72% 70% 67% 71% 69%	Provider • Alder Hey Children's Nhs Foundatio 100% 80% 12 1 2 3 4 5 6 7 8 9 2022/23

Patients waiting over 8 weeks for a Diagnostic Endoscopy (measure 39)

This measure is derived from a national DHCW dataset around patients waiting for Diagnostics. Specialties are not separated out, hence the figures below relate to the provider as a whole, and will include patients that are not in a pathway relating to specialist treatments.

Please note that only Cardiff & Vale and Swansea Bay figures are shown, as the largest specialist providers, and that the bulk of this activity relates to non-specialist activity not related to WHSSC.



Patients waiting over 8 weeks for Diagnostics (measure 40)

This measure is derived from a national DHCW dataset around patients waiting for Diagnostics. Specialties are not separated out, hence the figures below relate to the provider as a whole, and will include patients that are not in a pathway relating to specialist treatments.

Please note that only Cardiff & Vale and Swansea Bay figures are shown, as the largest specialist providers, and that the bulk of this activity relates to non-specialist activity not related to WHSSC.

WG Recovery measures - Diagnostics (Welsh providers) Welsh Health Specialised Services Committee (WHSSC) WG Recovery measures - Diagnostics (Welsh providers) 40. Patients waiting more than 8 weeks for Diagnostics; target is 0 by Spring								pring 202	24	
Census Financial Month No Provider Organisation Current Name Service Heading	202210 Cardiff and Vale U	2 - 9-25	3 - 26-35	4 - 36-51	Total	Swansea Bay 1 - Up to 8	2 - 9-25	3 - 26-35	4 - 36-51	Total
<u> </u>	weeks	weeks	weeks	weeks		weeks	weeks	weeks	weeks	
☐ AUDIOLOGY (ADULT HEARING AIDS)	523	927	184	34	1668	391	108			499
CONSULTANT	523	927	184	34	1668	46	4			50
GP						345	104			449
□ CARDIOLOGY	2045	848	24	63		2080	430	37	13	
BLOOD PRESSURE MONITORING	99	9			108	59	8	1		68
CARDIAC COMPUTED TOMOGRAPHY (CARDIAC CT)	103	15	1		119	215	97	2	2	316
CARDIAC MAGNETIC RESONANCE IMAGING (CARDIAC MRI)	83	83	4	2		93				93
DIAGNOSTIC ANGIOGRAPHY	61	88	17	11	177	5	2			7
DIAGNOSTIC ELECTROPHYSIOLOGY (EP STUDY)	1	1			2	1				1
DOBUTAMINE STRESS ECHOCARDIOGRAM (DSE)	45	36			81	26	7	1	1	35
ECHO CARDIOGRAM	1046	168			1214	1016	171			1187
HEART RHYTHM RECORDING	523	375			898	527	70			597
MYOCARDIAL PERFUSION SCANNING	5	27		50	82	60	61	30	7	158
STRESS TEST	61	39	2		102	74	5			79
TRANS OESOPHAGEAL ECHOCARDIOGRAM (TOE)	18	7			25	4	9	3	3	19
□ IMAGING	92				92	130	22			152
FLUOROSCOPY	92				92	130	22			152
□ NEUROPHYSIOLOGY	73				73	282	324	88	46	740
ELECTROMYOGRAPHY	61				61	51	59	19	8	137
NERVE CONDUCTION STUDIES	12				12	231	265	69	38	603
☐ PHYSIOLOGICAL MEASUREMENT	218	64	19	32	333	381	324	132	104	941
LIMITED CHANNEL CARDIO-RESPIRATORY SLEEP STUDY						140	215	115	101	571
OVERNIGHT PULSE OXIMETRY						135	77	16	3	231
URODYNAMIC TESTS	74	64	19	32	189					
VASCULAR TECHNOLOGY	144				144	106	32	1		139

☐ RADIOLOGY - CONSULTANT REFERRAL	4054	996	31	38	5119	3514	366	28	2	3910
BARIUM ENEMA						3				3
NON CARDIAC COMPUTED TOMOGRAPHY	874	1	2	1	878	948	162			1110
NON CARDIAC MAGNETIC RESONANCE IMAGING (MRI)	1708	710	29	37	2484	1397	12			1409
NON CARDIAC NUCLEAR MEDICINE	135	11			146	297	72	28	2	399
NON-OBSTETRIC ULTRASOUND	1337	274			1611	869	120			989
☐ RADIOLOGY - GP REFERRAL	3409	905	1		4315	2200	155			2355
NON CARDIAC COMPUTED TOMOGRAPHY	539	2			541	731	80			811
NON CARDIAC MAGNETIC RESONANCE IMAGING (MRI)	312	123	1		436	169				169
NON CARDIAC NUCLEAR MEDICINE	9				9	10	1			11
NON-OBSTETRIC ULTRASOUND	2549	780			3329	1290	74			1364
Total	10414	3740	259	167	14580	8978	1729	285	165	11157

Patients waiting over 14 weeks for Therapies (measure 41)

This measure is derived from a national DHCW dataset around patients waiting for Therapies. Specialties are not separated out, hence the figures below relate to the provider as a whole, and will include patients that are not in a pathway relating to specialist treatments.

Please note that only Cardiff & Vale and Swansea Bay figures are shown, as the largest specialist providers, and that the bulk of this activity relates to non-specialist activity not related to WHSSC.

