Llywodraeth Cymru
Welsh Government

STATISTICS

NHS activity and capacity during the coronavirus (COVID-19) pandemic: 28 October 2021

Data on coronavirus and NHS activity and capacity up to 26 October 2021.

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Introduction

In response to the coronavirus (COVID-19) pandemic, daily information on health care has been produced to support transparency and understanding of the NHS activity and capacity. The release includes figures on invasive ventilated beds by use, and admissions and hospitalisations of COVID-19 related patients.

Main points

- In the last 7 days, an average of 45 people a day were admitted to hospital with confirmed or suspected COVID-19. This is an increase compared to the average of 40 for the week to 19 October 2021 and is at comparable levels to mid-March 2021.
- As at 26 October 2021, 780 beds were occupied with COVID-19 related patients (confirmed, suspected and recovering), representing 9.1% of all hospitalisations. This is an increase from 708 on 19 October 2021 (8.3% of all hospitalisations) and is at comparable levels to mid-March 2021.

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- The number of beds occupied with COVID-19 related patients (confirmed, suspected and recovering) fluctuates. The increase in COVID-19 related patients over the latest week was driven by an increase in confirmed and recovering patients offsetting a decrease in suspected patients.
- As at 26 October 2021, 62 invasive ventilated beds were occupied with COVID-19 related patients (confirmed and suspected). This is an increase compared to 52 invasive ventilated beds on 19 October 2021 and is at comparable levels to late February 2021.

Accompanying tables for this release are available, including all the data shown below and also data concerning general and acute beds.

Statistics on NHS staff absence are available on **StatsWales** as well as all other statistics in this release.

Additionally, information on beds, hospitalisations and admissions is published on weekdays at 12pm, on **StatsWales** containing data up to the previous day. After 12pm on Thursdays, the data shown in this release will not contain the most up to date published data. However, this weekly release provides additional commentary on trends in the data.

The data are taken from management information and are subject to change. They have not been subject to the same validation processes undertaken for official statistics releases. Where available, the official statistics should continue to be considered the authoritative source of data. Please see the **Chief Statistician's blog** for more information on reporting management information, data quality and transparency.

Hospital activity and capacity

This section covers the number of admissions and hospitalisations of COVID-19 related patients and invasive ventilated beds occupied with COVID-19 related patients, to support transparency and provide an understanding of NHS activity and capacity during the COVID-19 pandemic.

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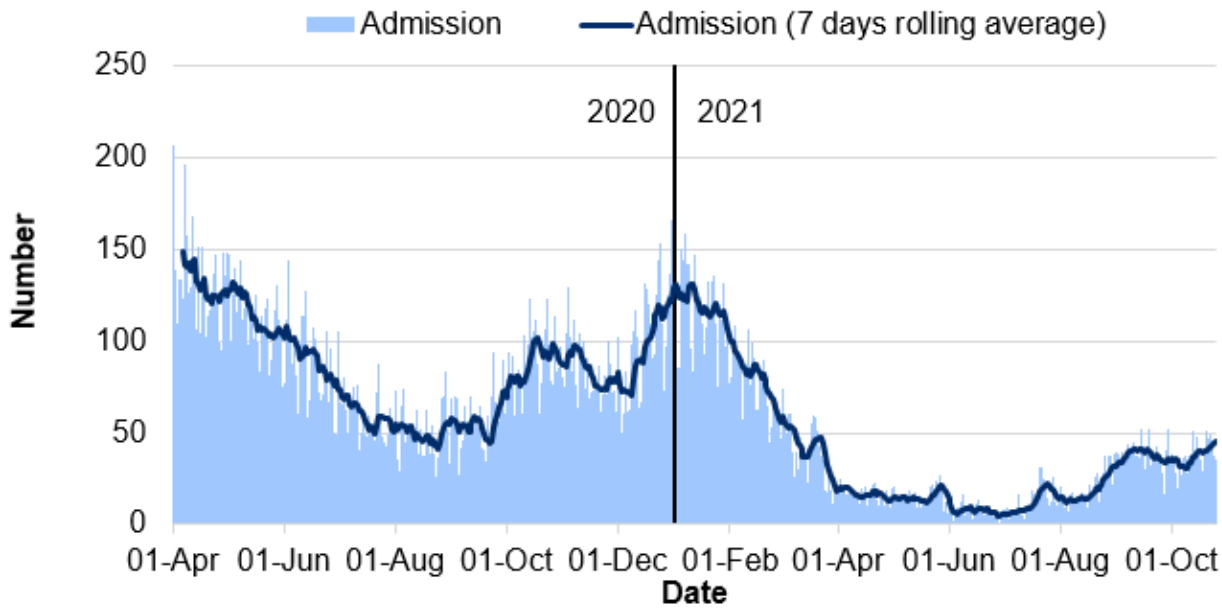
Hospital coverage has changed over time, please see the **quality and methodology information section** for more information.

Hospital admissions

Chart 1: Patients admitted to hospital as suspected or confirmed with COVID-19, from 1 April 2020



Source: Digital Health and Care Wales (DHCW)

Patients admitted to hospital as suspected or confirmed with COVID-19, from 1 April 2020 (MS Excel)

Notes

Admissions are the number of patients admitted to hospital within a 24-hour period from midnight to midnight each day, for example, 00:00 to 23:59 Monday to be reported on a Tuesday. COVID-19 related admissions include COVID-19 suspected or confirmed patients.

Please see the **quality and methodology information section** for the

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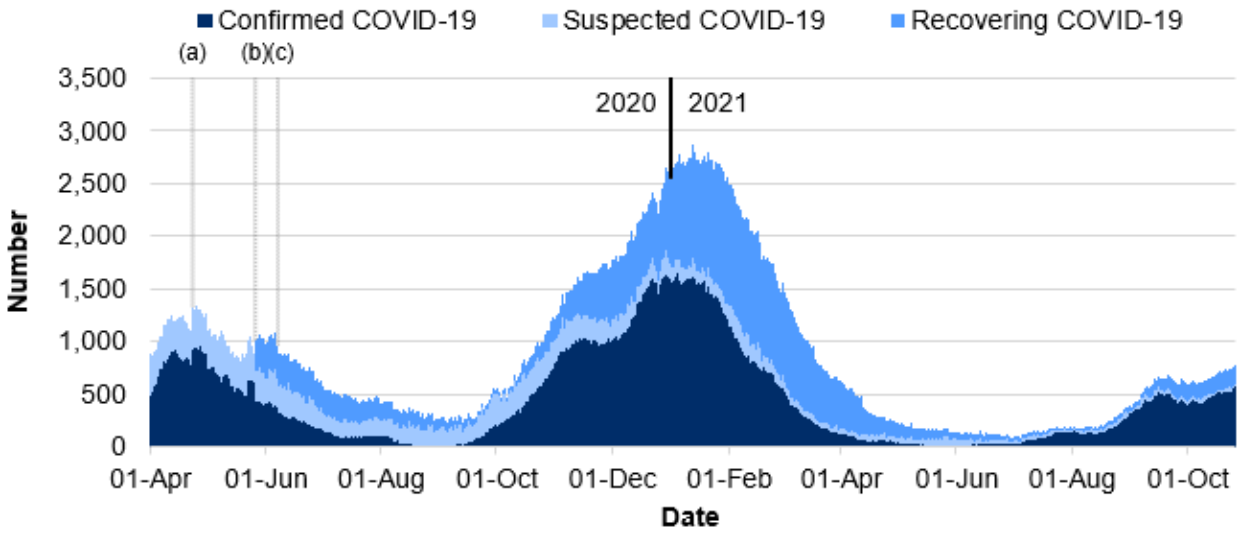
complete set of notes and historical changes relating to admission figures.

Main points

- In the last 7 days, an average of 45 people a day were admitted to hospital with confirmed or suspected COVID-19. This is an increase compared to the average of 40 for the week to 19 October 2021 and is at comparable levels to mid-March 2021.
- The number of new daily admissions with suspected or confirmed COVID-19 fluctuates. Taking that into account, the 7 day rolling average generally decreased from January 2021 to June 2021, before increasing again until mid-September 2021. The average has increased over the latest week.

Hospitalisations

Chart 2: Number of people in hospital as suspected, confirmed or recovering with COVID-19, from 1 April 2020



Source: Digital Health and Care Wales (DHCW)
(a) From 23 April 2020, data from community hospitals are included.
(b) From 26 May 2020, a new category for recovering patients was introduced.
(c) From 7 June 2020, Aneurin Bevan started reporting recovering patients but these were previously captured in the confirmed COVID-19 category.

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Number of people in hospital as suspected, confirmed or recovering with COVID-19, from 1 April 2020 (MS Excel)

Notes

Recovering patients was a category introduced on 26 May 2020 to capture patients who were COVID-19 positive in hospital and who showed no symptoms for 14+ days but remained in hospital on a COVID-19 treatment pathway, often for rehabilitation. There have been some differences in reporting by health boards in the time series which are outlined in more detail in the **quality and methodology information section**.

Please see the **Chief Statistician's blog** for more information on reporting on recovering patients.

Please see the **quality and methodology information section** for the complete set of notes and historical changes relating to hospitalisation figures.

Main points

- The total number of beds occupied with COVID-19 related patients (confirmed, suspected and recovering) increased from the end of September 2020 and reached its highest reported level on 12 January 2021 (2,879 patients). From January 2021 to June 2021, COVID-19 related patients generally decreased and reached the lowest reported levels on 30 June 2021 and 4 July 2021 at 86 patients.
- Between early July 2021 and mid-September 2021, the number of beds occupied with COVID-19 related patients generally increased. After a recent period of stabilisation, the number of hospitalisations have increased over the latest week and is at comparable levels to mid-March 2021.
- The number of confirmed COVID-19 patients and the number of recovering COVID-19 patients peaked at different times; with highest numbers of confirmed patients occurring early in January 2021 (1,643 on 4 January 2021) and highest numbers of recovering patients seen a few weeks later (1,192 on 31 January 2021).

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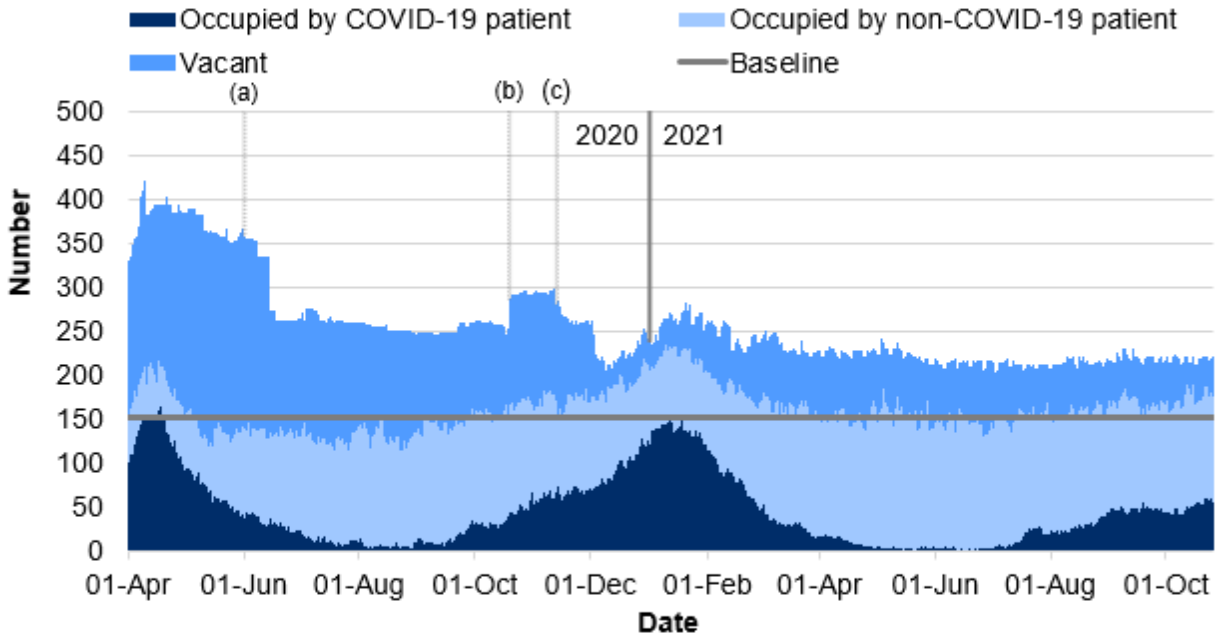
As at 26 October 2021

- 780 beds were occupied with COVID-19 related patients (confirmed, suspected and recovering), representing 9.1% of all hospitalisations. Of these, 571 were confirmed COVID-19 patients, 19 were suspected COVID-19 patients and 190 were recovering patients. This compares to 708 COVID-19 related patients (72 more occupied beds) on 19 October 2021.
- The number of beds occupied with COVID-19 related patients (confirmed, suspected and recovering) fluctuates. The increase in COVID-19 related patients over the latest week was driven by an increase in confirmed and recovering patients offsetting a decrease in suspected patients.

Invasive ventilated beds

Chart 3: Number of invasive ventilated beds by use, from 1 April 2020



Source: Digital Health and Care Wales (DHCW)
(a) From June 2020, hospitals began closing some of the additional surge capacity that was previously put in place for the COVID-19 pandemic.
(b) From 19 October 2020 specialist critical care beds have been included.
(c) From 13 November 2020, only critical care beds that could be staffed are included.

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Number of invasive ventilated beds by use, from 1 April 2020 (MS Excel)

Notes

Baseline relates to the number of beds that were available prior to the COVID-19 pandemic. There are usually 152 critical care beds available. Invasive ventilated beds include beds in and outside a critical care setting, and include surge capacity. COVID-19 patients in this chart include suspected, confirmed, and recovering COVID-19 patients. Between 26 May 2020 and 17 January 2021 some patients were categorised as ‘recovering’. From 18 January 2021 these patients were categorised as confirmed COVID-19 patients. This change did not affect the overall number of COVID-19 related patients.

Please see the **quality and methodology information section** for the complete set of notes and historical changes relating to the invasive ventilated beds figures.

Main points

- The number of invasive ventilated beds occupied with COVID-19 related patients generally increased from September 2020, reaching 150 on 12 January 2021. After this, the number decreased to its lowest levels since reporting began. Only 1 occupied invasive bed was reported for several days during May 2021 and June 2021.
- From late June 2021 to mid-September 2021, the number of invasive beds occupied with COVID-19 related patients increased to levels comparable to late February 2021. After a recent period of stabilisation, the number of invasive beds occupied with COVID-19 related patients has increased over the latest week and is at comparable levels to late February 2021.

As at 26 October 2021

- 62 invasive ventilated beds were occupied with COVID-19 related patients (confirmed and suspected). This compares to 52 (10 more occupied beds)

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on 19 October 2021 and compares to 164 at the peak in April 2020.
- 126 invasive ventilated beds were occupied with non-COVID-19 related patients. This compares to 119 (7 more occupied beds) on 19 October 2021.
- There were 40 vacant invasive ventilated beds that could be staffed. This compares to 48 (8 fewer vacant beds) on 19 October 2021.

Information on healthcare presented in the **UK Government COVID-19 dashboard** and in the **Public Health Wales (PHW) dashboard** differ from this publication. Please see the **quality and methodology information section** and the comparability with other publications section for more information.

Quality and methodology information

The data are taken from management information and are subject to change. They have not been subject to the same validation processes undertaken for official statistics releases. However, they are provided to support transparency and understanding of NHS activity at this time. The official statistics should continue to be considered the authoritative source of data.

Historic data are subject to revisions and therefore may differ slightly to previously published information.

Content changes to this publication

From 17 June 2021, the content of this release changed, as outlined below.

NHS staff absence and self-isolation rate

This information was published each Thursday on **StatsWales**. From 17 June 2021, we moved this collection from weekly to fortnightly.

This data collection was introduced early in the pandemic to help understand and manage capacity within the NHS to rapidly respond to the changing needs

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and priorities. This data collection was resource intensive for NHS organisations and, as staff absence due to COVID is no longer a major factor in delivering critical NHS services, we decided to reduce the burden on organisations who collect and supply this data.

Attendances in NHS Wales' accident and emergency departments

This information was published within this statistical release and also on StatsWales each Thursday. From 17 June 2021, we removed this section from the statistical release and no longer update this data on **StatsWales**.

At the start of the pandemic, official statistics on attendances at A&E departments were paused, and daily data taken from management information was introduced. However, official statistics on A&E attendances are once again published every month as part of the **NHS activity and performance** statistical release. Also, in recent months the data shows that attendances are now similar levels to the 2015 to 2019 average.

Calls made to 111 and NHS direct

This was published each Thursday on **StatsWales**. From 17 June 2021, we no longer update this data.

Calls to 111 and NHS direct are published by Public Health Wales on their **Rapid COVID-19 surveillance** dashboard. Information is available for all calls and the proportion of calls that are for any COVID-19 like symptoms. The information is available at health board level.

Emergency ambulance calls, by date

This was published each Thursday on **StatsWales**. From 17 June 2021, we no longer update this data.

At the start of the pandemic, official statistic on emergency calls to the

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ambulance service were paused, and daily data taken from management information was introduced. However, official statistics on calls to the ambulance service are once again published every month as part of the **NHS activity and performance** statistical release.

Hospital activity and capacity

The health minister announced on 13 March 2020 that all non-urgent activity should stop to prepare for the pandemic.

Following further validation, admissions and hospitalisation data prior to 1 April 2020 were decided to not be suitable for publication. Therefore, the time series begins on 1 April 2020.

Figures on hospitalisations and activity include data from acute hospitals from 1 April 2020, field hospitals from 20 April 2020, community hospitals from 23 April 2020, mental health units from 10 July 2020, and exclude data from private hospitals.

Hospital admissions

Admissions are the number of patients admitted to hospital within a 24-hour period from midnight to midnight each day, for example, 00:00 to 23:59 Monday to be reported on a Tuesday. COVID-19 related admissions include COVID-19 suspected or confirmed patients.

A COVID-19 related admission is defined as an emergency admission to any medical specialty and is either:

- within 14 days of a positive COVID-19 sample being taken; or
- where a COVID-19 sample is taken on the first day of the admission, regardless of whether the result is positive or negative

The emergency medical admissions criteria are intended to provide an approximation for suspected COVID-19 patients.

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Patients transferred between hospitals within the same organisation should be excluded from the count of admissions.

Please note that during July and August 2021 Betsi Cadwaladr University Health Board were unable to supply data on the number of patients admitted to Ysbyty Glan Clwyd due to a data processing issue. For the specific dates please see the note on **StatsWales**. The number of patients admitted to this hospital with confirmed or suspected COVID-19 is now generally relatively low.

From 3 July 2020, guidance was updated to only include emergency admissions in the COVID-19 related admissions figures.

From 29 June 2020, the guidance changed to explicitly ask health boards to exclude transfers between acute and community hospitals from admissions figures. Prior to this, some transfers may have been captured as new admissions.

From 29 June 2020, patients admitted for elective procedures were only included in COVID-19 related admissions if they received a positive COVID-19 test result on arrival at the hospital.

Following the re-introduction of elective procedures from June 2020, patients admitted for elective procedures suspected of having COVID-19 were initially captured in COVID-19 related admissions, even if they received a negative test later. This inflated the numbers of suspected cases in hospital at the time of reporting.

Hospitalisations

The number of COVID-19 related hospitalisations is the number of staffed beds occupied by a patient that satisfies the definition of a ‘Confirmed’, ‘Suspected’ or ‘Recovering’ patient as set out below.

A patient is defined as ‘Confirmed’ COVID-19 only following a positive test and will remain until downgrading criteria are met. (See recovering COVID-19 below).

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A patient is defined as ‘Suspected’ COVID-19 if they are awaiting the result of a test having been admitted as an emergency under a medical specialty or if they become symptomatic following admission for any other reason. This also includes patients testing negative but continuing to display COVID-19 symptoms, patients returning a low level positive test result prior to a retest, and discharged COVID-19 patients readmitted with COVID-19 symptoms prior to a retest.

A patient is defined as ‘Recovering’ COVID-19 if either they have a negative test result as confirmation of transition to recovering COVID or they meet the following criteria:

- completed 14 days post a positive COVID-19 test
- shown clinical improvement in their condition, with at least some respiratory recovery
- had no fever (> 37.8°C) for 48 hours
- no underlying severe immunosuppression

A ‘Non-COVID-19’ related patient is a patient that does not satisfy any of the suspected, confirmed or recovering COVID-19 criteria described above. Where a patient has acquired a COVID-19 infection during their hospital stay and subsequently meets the downgrading criteria set out above, they should be reported as non-COVID-19.

To ensure accurate and consistent reporting of COVID-19 recovering patients in the hospitalisations data, all health boards were reminded to follow the national guidance for SITREP reporting, and asked to ensure any necessary changes to their daily reporting were implemented by 12 April 2021. Contrary to the guidance, some health boards were counting long stay patients who had fully recovered from COVID-19 in the COVID-19 recovering category, rather than the non-COVID-19 category, which inflated the number of COVID-19 recovering patients. This change resulted in a step-change decrease in the number of recovering patients (a decrease of around 123 patients at the point of implementation). Whilst the impact was seen across most health boards, it mainly impacted the Swansea Bay University Health Board.

From 8 March 2021, Cardiff and Vale University health board aligned their data

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more closely to the national guidance for SITREP reporting. This change had a small impact on the hospitalisation figures, which resulted in a small increase in the number of confirmed COVID-19 patients and a small decrease in the number of recovering COVID-19 patients.

From 1 February 2021, guidance was reiterated to health boards that patients who were already in hospital and contracted COVID-19, but have now recovered and are back on their original setting, should be reported as non-COVID-19. This may have affected a small number of patients who were in acute hospitals or mental health settings and may have resulted in a decrease in recovering patients and an increase in non-COVID-19 patients.

From 16 November 2020, data is included from the Grange University Hospital in Aneurin Bevan University Health board. This increased the total number of beds available by around 450 beds.

Data from mental health units were included retroactively from 10 July 2020 for the first time in the release on 20 August 2020. The inclusion of mental health beds had a small impact on beds occupied with COVID-19 patients' figures but a large impact on all beds occupied with non-COVID19 patients and vacant beds, as the majority of mental health beds are not occupied by COVID-19 patients. Mental health units' data are submitted each Friday, and the Friday position is used as proxy for the following week, unless there is a major change in circumstances.

Recovering patients was a category introduced on 26 May 2020 to capture patients who were COVID-19 positive in hospital and who showed no symptoms for 14+ days but remained in hospital on a COVID-19 treatment pathway, often for rehabilitation. There have been some differences in reporting by health boards in the time series which are outlined below.

Please see the **Chief Statistician's blog** for more information on reporting on recovering patients.

On reporting recovering patients, Aneurin Bevan started reporting recovering patients from 7 June 2020, but these were captured in the confirmed COVID-19 category before. Cardiff and Vale classified recovering patients as non-

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COVID-19 patients between 1 May 2020 and 22 May 2020. Following the change in guidance, Cardiff and Vale re-categorised these patients as COVID-19 patients, capturing them in the confirmed COVID-19 category until the recovering category was introduced on 26 May 2020.

From June 2020, hospitals began closing some of the additional surge capacity that was previously put in place for the COVID-19 pandemic.

Invasive ventilated beds

From 18 January 2021, no patients occupying an invasive ventilated bed (critical care bed) should be counted as ‘recovering’ COVID-19 patients as they are still requiring a high level of care. Any patient previously reported as ‘recovering’ are now counted under ‘confirmed’. This resulted in an increase in the number of invasive ventilated beds occupied by ‘confirmed’ COVID-19 patients (an increase of around 14 patients at the point of implementation) and no invasive ventilated beds showing as occupied by ‘recovering’ patients. This change had no impact on the total number of COVID-19 related patients.

From 13 November 2020, only critical care beds that could be staffed were included as available. Previously all critical care beds had been included regardless of whether they could be staffed. Staffed beds are those that can be staffed at the time of the census. General and acute beds only include beds that can be staffed. However, not all health boards implemented this change on that date. Following and update to guidance, more local health boards implemented this change from 4 December 2020.

From 19 October 2020, data for specialist critical care beds (such as those in Burns and Plastic in Morriston) and other specialist acute beds (such as maternity) across other acute sites have been included. These beds have been included in the data as they are part of the available bed stock, and may be used for COVID-19 patients in exceptional circumstances. The majority of these beds are not occupied with COVID-19 patients. Therefore the inclusion of these had very little impact on the number of beds occupied with COVID-19 patients but a larger impact on vacant beds and those occupied with non-COVID19 patients.

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Comparability

Please see the **UK Government COVID-19 dashboard** for information on healthcare at a UK level. Note: the healthcare data presented in the UK dashboard differs from this publication. Data for Wales on the UK dashboard includes data for acute hospitals only which was initially provided to enable better comparability with other countries. Whereas this publication includes data from acute, community, field hospitals and mental health units to provide a more comprehensive view of the system in Wales. From 11 December 2020, data for England presented on the UK dashboard was updated to align with NHS England publications and as a result the full time series for this item was revised. Data for England on the UK dashboard now includes data from acute, community, field hospitals and mental health units. Due to this reporting change, we are reviewing the suitability of data currently provided for Wales. Estimates of the number of people who had coronavirus in England and Wales is also published by the Office for National Statistics in **Coronavirus (COVID-19) Infection Survey**.

Please note that health care surveillance data presented in the **Public Health Wales (PHW) dashboard** differ from this publication. The PHW dashboard uses data systematically collected through ICNET, the hospital infection control data system used across Wales. It includes hospital in-patients with a laboratory confirmed result and does not count any patients who were admitted and discharged on the same day.

The Welsh Government publication uses data sourced from daily management information provided by health boards. Guidance was issued to local health boards for completion and submission of the data return. However, data collection methods may vary between health boards. It includes COVID-19 related patients as suspected, confirmed and recovering, as well as non-COVID-19 patients.

The narrower definition used by PHW will likely result in smaller numbers of reported COVID-related admissions compared to the Welsh Government publication, but provides a systematic way of carrying out surveillance of

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patients requiring hospital stays with confirmed COVID-19.

National Statistics status

These statistics are not National Statistics. However, as far as has been practicable, they have been collected and validated in accordance with the pillars and principles within the **Code of Practice for Statistics**. We continue to develop the data collection and quality assurance process to improve the data.

These statistics have been produced quickly in response to developing world events.

Well-being of Future Generations Act (WFG)

The Well-being of Future Generations Act 2015 is about improving the social, economic, environmental and cultural wellbeing of Wales. The Act puts in place seven wellbeing goals for Wales. These are for a more equal, prosperous, resilient, healthier and globally responsible Wales, with cohesive communities and a vibrant culture and thriving Welsh language. Under section (10)(1) of the Act, the Welsh Ministers must (a) publish indicators ('national indicators') that must be applied for the purpose of measuring progress towards the achievement of the wellbeing goals, and (b) lay a copy of the national indicators before Senedd Cymru. The 46 national indicators were laid in March 2016.

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

Further information on the **Well-being of Future Generations (Wales) Act 2015**.

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

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Next update

The next release will be at 9.30am Thursday 4 November 2021.

We want your feedback

We are considering reducing the frequency of some of the COVID-19 related statistical releases, including this publication. We welcome any comments or feedback on how you use these releases, and any changes to them via **kas.covid19@gov.wales**.

Contact details

For queries about the data:
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Email: **kas.covid19@gov.wales**

Media: 0300 025 8099

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