Archwilio Cymru
Audit Wales

Review of Non-Emergency Patient Transport Services

Welsh Ambulance Services University NHS Trust

July 2026

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Contents

Audit snapshot

What we looked at

1 We looked at how well the Welsh Ambulance Services University NHS Trust (the Trust) is set up to improve the Non-Emergency Patient Transport Service (NEPTS).

2 We have not looked at the NEPTS eligibility criteria, which are set by the Welsh Government, the role of the Joint Commissioning Committee (JCC), or the actions taken by the seven health boards.[1]

Why this is important

3 The Trust is responsible for running NEPTS, which is commissioned by the JCC, on behalf of the seven health boards in Wales.

4 NEPTS provides transport for people who are unable to make their own way to and from their medical appointments. It is an important service that ensures patients across Wales can access vital NHS treatment.

5 In recent years, the service has struggled with rising demand, limited resources, and a high number of on-the-day and last-minute cancelled journey appointments.[2] This has affected how efficiently the service runs.

6 In March 2025, the JCC approved The Future Vision for Non-Emergency Patient Transport in Wales 2030 (the Future Vision). This sets out five key priority areas to transform and improve NEPTS so it can meet future demand and provide good patient care.

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[1] The Joint Commissioning Committee (JCC) was established in April 2024 as a joint committee of the seven health boards in Wales. The JCC plans and commissions a range of specialised services and other healthcare services, including emergency medical services, on behalf of the seven health boards.

[2] Cancelled journeys are caused by a range of factors, including cancellations by patients, hospitals and due to lack of capacity within the Trust.

What we have found

7 The Trust has ambitious plans to improve NEPTS. These plans are aligned to the Future Vision and informed by performance data. However, expected benefits and outcomes are not yet defined, roles and responsibilities across partners are not fully agreed, and plans are not fully costed or prioritised.

8 The Trust is developing programme management arrangements for NEPTS improvements, but these are not yet fully established. The Trust and the JCC monitor actions and performance, but the Trust does not yet have clear sight of progress against the expected outcomes of the Future Vision across the system as a whole. Achieving those outcomes will require faster delivery, a clearer focus on benefits, and closer working with key partners.

9 Delivery of key improvement actions has been slower than planned in some areas. While performance has improved for some journey types, pressures such as rising demand, more complex patient needs, cancellations, delays, and communication issues continue to affect patient experience. Reporting does not consistently link improvement actions to milestones, benefits, or measurable impact. This makes it hard to assess whether changes are delivering the intended outcomes.

What we recommend

10 We have made four recommendations as part of this report. They are focussed on the following areas:

- making plans clearer by better defining outcomes and resources;
- setting up clearer programme, risk, and oversight arrangements;
- delivering improvements more quickly and working better with partners; and
- improving reports so they more clearly demonstrate the impact of actions.

Key facts and figures

570,000	The average number of NEPTS journeys each year in Wales.
640	Number of staff that work for NEPTS.
161	Number of volunteer car drivers.
42%	Percentage of journeys completed by private providers, taxis, and the voluntary and community sector (VCS) on behalf of WAST.
63,000	The number of short-notice cancellations (within four hours) in 2025.
14%	The number of on-the-day journey appointments cancelled during March 2025.
18,000	Number of additional journeys per year the Trust anticipates will be created by digital and rostering changes, once fully implemented.

Our findings

Planning for NEPTS improvements

Improvement plans are ambitious and align to the Future Vision, but benefits and shared responsibilities are not yet fully defined

11 The Trust has set out ambitious plans to modernise NEPTS in line with the Future Vision, mainly through its Integrated Medium Term Plan (IMTP) 2026-29. This plan identifies NEPTS as a key priority. This reflects ongoing concerns about cancellations, delays and overall patient experience.

12 The Trust's plans for NEPTS are based on a wide range of performance data and show a good understanding of current service pressures.

13 We reviewed the Trust's plans and supporting documents for delivering the five priority areas set out in the Future Vision. A summary of our assessment is set out in **Exhibit 1**. Taken together, these findings show that the Trust has identified the right improvement actions, but further work is needed to turn them into a deliverable programme.

Exhibit 1: Trust plans to deliver key aims of NEPTS Future Vision

Key strategic priority	Findings
Modernising for change: Adapting resources and approach to service delivery, to respond to the changing needs of the population and healthcare system.	Plans show a strong strategic intention to improve NEPTS, with clear actions on patient eligibility, staff rostering, fleet, and estates. Specific actions in the IMTP include: • using staff and transport more effectively through better rostering and planning so more patients can be transported; • agreeing the future shape of the ambulance care fleet to ensure it continues to minimise carbon emissions; and • using technology and equipment to improve safety and working standards. The Future Vision also highlights the need to review the patient transport eligibility criteria to ensure it better meets the need of NHS Wales. This review is the responsibility of the Welsh Government, the JCC, and health boards, but it is not yet clear when it will take place. In the meantime, the Trust has started to apply the existing eligibility criteria more strictly to help manage demand.
Digital transformation: Leveraging technology to improve co-ordination, efficiency and patient experience.	Plans include many digital changes to how bookings and patient communication are managed, such as linking the NEPTS booking system with health boards. But some actions do not have clear timelines or measures of success. Also, the Trust's plans to link its booking system with health boards' systems are not included in its digital plans or reported to the relevant committees.

Key strategic priority	Findings
Strategic integration: Ensuring non-emergency patient transport services are integrated within the wider healthcare system.	The Trust can point to examples of integration activity with system partners, including pilot work with Hywel Dda University Health Board to coordinate data, improve booking efficiency, and reduce short notice cancellations. But at the time of our work, the Trust had not set out a clear approach to learning from the system-integration pilots or how this would be applied more widely if successful.
Patient focused: Prioritising patient needs and feedback to enhance service delivery.	Although the Trust does not have a dedicated workstream for this pillar, it is taking action through other NEPTS improvement work. This includes improving access to booking systems and changing staff rosters to increase capacity. The Trust gathers feedback from patients through surveys, complaints, and patient stories. This feedback consistently highlights concerns about cancellations, which are affecting patient confidence in the service. The Trust expects its wider improvement programme to help reduce these concerns and improve the patient experience over time.
Working in partnership: Building strong collaborative relationships with partnership organisations to improve service outcomes.	The Trust's digital transformation actions aim to improve co-ordination and joint planning for NEPTS. By using new technology and offering more ways to book journeys, the Trust aims to simplify processes and strengthen how it works together with transport providers, patients, and health boards. This should help deliver a more efficient and responsive service.

Source: Audit Wales

14 While the Trust’s plans for NEPTS are set out in its IMTP 2026-29, there is no jointly owned implementation plan that clearly allocates responsibilities, milestones, and accountability across system partners. This means it is not always clear which actions the Trust will take on its own and which are the responsibility of health boards.

15 The Trust has mapped the Future Vision’s actions against its plans to show where actions align and where there are gaps. The gaps mainly relate to actions that need joint working with the JCC and partners. These include applying eligibility rules, providing alternative transport, and sharing data. Without a shared plan, it is difficult to set clear milestones and ensure accountability for delivery of the Future Vision across partners.

16 The Trust's plans recognise the need for changes to staffing, rostering, and service delivery to support improvements to NEPTS. But actions to improve NEPTS are largely non-cash releasing and have not been fully costed. This makes it hard to know if all planned improvements can be delivered within available resources (see **paragraph 21**).

Programme management and leadership

Programme and risk management arrangements for NEPTS are not yet fully developed or joined up, limiting assurance over delivery

Programme management

17 At the time of our work, the Trust was setting up a NEPTS Improvement Programme. The draft Project Initiation Document notes that governance and oversight will be through the Trust's existing Strategic Transformation Board. Key project management roles are clear and include the Executive Director of Operations as the Executive Sponsor and the Assistant Director of Operations (Ambulance Care) as the Senior Responsible Officer.

18 However, the NEPTS Improvement Programme is not yet fully operational. Key elements were still being developed at the time of our work. These include confirming workstream leads, agreeing formal reporting arrangements, completing the risk register, and agreeing SMART benefit measures.[3] These gaps make it hard to be fully assured that improvement activity is being prioritised, co-ordinated, monitored, and delivered in a way that will achieve the intended outcomes. Addressing these gaps is important given the financial pressures the Trust expects in 2026-27 (see **paragraph 21**).

Risk management

19 The Trust's Board Assurance Framework highlights strategic risks that could affect improvements to NEPTS. These include workforce capacity, financial pressures, and reliance on system partners. However, these risks are spread across a number of corporate risks and have not been brought together in one place. This makes it hard to see how NEPTS risks, improvement plans, actions, and assurances fit together.

[3] Specific, Measurable, Achievable, Relevant, and Time-Bound

20 The IMTP 2026-29 recognises that delivering improvement priorities alongside day-to-day services is a key risk. To mitigate this risk, the Trust states that it is prioritising improvement activity and strengthening programme management arrangements. However, it is not yet clear whether these actions will provide sufficient capacity to deliver all planned improvements within the timescales set out in the Future Vision.

21 The Trust faces significant financial pressures in 2026-27. These include delivering a £9 million savings requirement, rising non-pay costs, and limited funding for investment. While the Board Assurance Framework recognises financial pressure as a strategic risk, it is not clearly linked to NEPTS delivery. As a result, there is a risk that not all planned improvements to NEPTS can be funded and delivered.

22 These pressures mean the Trust needs to prioritise its improvement actions and make clear decisions about how it uses resources to support delivery. Without a stronger link between priorities, actions, resources, and risks, the Trust may take longer to deliver the improvements and intended outcomes. Effective risk management arrangements are important in supporting these decisions.

23 The draft Project Initiation Document includes a process for identifying, escalating, and monitoring NEPTS Improvement Programme risks. However, many risks were not fully developed at the time of our work. This limits assurance that programme risks are being managed in a consistent way.

Monitoring and oversight

Current reporting provides good visibility of operational performance, but limited assurance that improvement activity is delivering measurable benefits

Monitoring of improvement actions

24 NEPTS improvement work is monitored through actions set out in the IMTP 2026-29, with updates set out in quarterly performance reports to the Board and the Finance and Performance Committee. The Trust also reports to these fora on key work, such as re-rostering and service pressures affecting NEPTS.

25 At the time of our work, progress in delivering many of the Trust's NEPTS Future Vision actions was slower than planned. Many actions were described as being in development or at an early stage of delivery. For example, the need to re-roster, identified in 2019, was delayed due to the COVID-19 pandemic and the need to prioritise Emergency Medical Services. The project was then delayed further by more complex demand patterns, concerns about proposed shift patterns, discussions with trade unions, and the challenges of redesigning the service model. As a result, implementation is now planned for the first quarter of 2026-27. This suggests the Board needs to strengthen its oversight of improvement action delivery.

26 Performance is monitored by both the Trust and the JCC through its Commissioning Assurance Group (CAG). However, the Trust does not yet have an agreed way of tracking the cross-organisation changes that its NEPTS improvement plans depend on. This makes it hard for it to assess if those plans are on track. A Task and Finish Group, previously suggested by the JCC, could give the Trust clearer sight of delivery and a route to escalate delays that affect its actions.

Performance monitoring

27 The Trust routinely monitors NEPTS performance through dashboards, structured reports, and committee oversight. Performance data is shared regularly with the JCC, the CAG, and health boards, giving a clear view of trends and risks across the system.

28 Performance data shows that demand for renal transport is increasing and that patients' needs are becoming more complex. Together, these factors lead to greater use of ambulances. This can reduce ambulance capacity for outpatient appointments and patient discharges. Performance data shows improvement across key journey types, but pressures on the service remain.

29 Patient feedback for NEPTS consistently highlights concerns about cancellations and delays, which are affecting patient confidence in the service and the Trust. The Trust's performance reports also show that short-notice cancellations, delays, and poor communication remain key challenges.

30 Cancellations are caused by a mix of patient, hospital, system, and WAST capacity issues. There were 42,827 cancellations from January to March 2026. Over half were due to hospital and patient cancellations, showing that the Trust cannot address this issue on its own. However, capacity remains a key constraint for the Trust, with around one in six cancellations linked to no resources being available at the time of planning.

31 Around 37% of journeys were cancelled within four hours of travel between January and March 2026, leaving little time to reuse capacity or arrange alternatives. This shows the Trust needs to improve capacity planning, booking accuracy, and communication with patients, while also working with hospitals and health boards to reduce avoidable and late cancellations. The Trust is taking some action, including changes to rostering and digital systems, but these are not yet leading to consistent improvement in the areas of concern patients highlight most.

32 At the time of our work, reporting did not consistently link improvement initiatives to delivery milestones and expected benefits. This makes it hard to show the impact of specific actions on performance and patient experience. The Trust has set up a team within its Digital Services to focus on service improvement. However, senior managers recognise that the Trust's approach to change management needs to improve.

33 Taken together, the current monitoring arrangements provide good visibility of performance trends and areas of operational pressure. However, to support delivery of the Future Vision, routine reporting should more clearly show how priority improvement actions (including digital, rostering, and joint working with partners) are expected to reduce cancellations and improve communication. It should also set out delivery timescales and show progress against agreed benefits. This would strengthen accountability and improve assurance that improvement activity is delivering the intended benefits for patients and partners.

Recommendations

34 The following table details the recommendations arising from our work.

Strengthening planning and shared delivery

R1 The Trust should strengthen planning for NEPTS to support delivery of the Future Vision by clearly defining outcomes, responsibilities, and resource requirement. It should:

- **R1.1** Define measurable outcomes and benefits for key improvement actions (**paragraphs 13 and 33**).
- **R1.2** Agree a shared delivery plan with the JCC and health boards, setting out roles, responsibilities, and joint actions (**paragraphs 14 and 15**).
- **R1.3** Set out resource requirements and what can be delivered within available resources, including where trade-offs or prioritisation are needed (**paragraphs 16, 21, and 22**).

Strengthening programme and risk management

R2 The Trust should fully establish its NEPTS Improvement Programme and ensure risks and oversight arrangements support delivery. It should:

- **R2.1** Put in place core programme arrangements, including workstream leads, reporting, a full risk register, and measures of success (**paragraphs 17 and 18**).
- **R2.2** Ensure NEPTS risks are clearly aligned across programme and corporate risk frameworks (**paragraphs 19 and 23**).
- **R2.3** Strengthen links between priorities, risks, resources, and delivery plans (**paragraphs 20 to 22**).
- **R2.4** Agree system-level oversight arrangements with the JCC and health boards to support delivery of the Future Vision across organisations (**paragraph 26**).

Improving delivery and system coordination

R3 The Trust should accelerate delivery of improvement actions and strengthen coordination with partners. It should:

R3.1 Set out and deliver against a clear timeline for the actions to reduce cancellations and improve patient experience, including communication with patients (**paragraphs 25 and 29 to 31**).

R3.2 Evaluate and apply learning from system-integration pilots (**paragraph 13**).

Strengthening performance reporting, oversight, and impact

R4 The Trust should strengthen reporting and Board oversight to clearly show the impact of improvement actions on performance and patient experience. It should:

R4.1 Link improvement actions to milestones, expected benefits, and outcomes in routine reporting, enabling the Board to track delivery (**paragraphs 32 and 33**).

R4.2 Track and report progress against key measures, including cancellations, timeliness, and patient experience, so the Board can assess whether performance is improving (**paragraphs 27 to 31**).

R4.3 Use performance and patient feedback to assess whether improvements are delivering the intended impact and support the Board in challenging and refining the approach where progress is limited (**paragraphs 29 to 33**).

1 About our work

Scope of the audit

We looked at how well the Trust is set up to deliver improvements to NEPTS. In particular, we considered how well the Trust's plans align to the ambitions of the Future Vision. We also considered how the Trust was managing, monitoring, and overseeing progress against its plans and their impact on NEPTS performance.

Audit questions and criteria

Questions

Our audit addressed the following questions

- Does the Trust have clear and realistic plans to deliver the aims set out in the NEPTS Future Vision 2030 around modernising for change?
- Has the Trust reviewed and costed the resources needed to ensure the effective delivery of the NEPTS Future Vision 2030?
- Are there clear leadership and oversight arrangements to ensure the successful delivery of the NEPTS Future Vision by 2030?
- Is the Trust effectively monitoring NEPTS performance and delivery of its improvement plans?

Criteria

We assessed the Trust's approach against audit criteria shaped by key strategic plans, including The Future Vision for Non-Emergency Patient Transport in Wales – 2030.

Methods

We reviewed a range of documents, including:

- Board and committee papers and minutes, including the Monthly Integrated Quality and Performance Report and Integrated Medium Term Quarterly Monitoring Report.
- Key strategies and plans, including the Trust's Integrated Medium-Term Plan (2026-29), and the draft Project Initiation Document for the NEPTS Improvement Programme;
- Key risk management documents, including the Trust's board assurance framework and operational risk registers.
- Relevant Internal Audit reports, including Capacity Management Plan (2026).

We interviewed the following key stakeholders:

- Executive Director of Operations;
- Executive Director of Strategy, Planning and Performance;
- Assistant Director of Operations (Ambulance Care);
- Assistant Director of Digital;
- Head of Financial Management;
- Director of Commissioning for Ambulance Services and 111 (JCC).

We also reviewed data available from the Trust's regular performance reports. We have not audited the validity of the data from this source.

2 Management Response

Recommendation	Commentary on planned actions	Completion date	Responsible officer
R1 The Trust should strengthen planning for NEPTS to support delivery of the Future Vision by clearly defining outcomes, responsibilities, and resource requirement. It should: **R1.1** Define measurable outcomes and benefits for key improvement actions.	The Trust accepts this recommendation and has already established a NEPTS Improvement Programme, supported by appropriate governance, reporting into Strategic Transformation Board. TOR are established and have	April 2027	Assistant Director of Operations (ADO), Ambulance Care who is also Senior Responsible

Recommendation	Commentary on planned actions	Completion date	Responsible officer
	been agreed by STB. Outcomes and resource responsibilities will be reported through the programme by April 2027. Evidence will be via Highlight reports, AAA – from the improvement programme to STB.		Officer (SRO) – NEPTS Improvement Programme
R1.2 Agree a shared delivery plan with the JCC and health boards, setting out roles, responsibilities, and joint actions.	The Trust will engage with JCC and will provide meeting minutes/correspondence to evidence engagement.	December 2026	ADO, Ambulance Care
R1.3 Set out resource requirements and what can be delivered within available resources, including where trade-offs or prioritisation are needed.	As R1.1	April 2027	ADO, Ambulance Care

Recommendation	Commentary on planned actions	Completion date	Responsible officer
R2 The Trust should fully establish its NEPTS Improvement Programme and ensure risks and oversight arrangements support delivery. It should:			
R2.1 Put in place core programme arrangements, including workstream leads, reporting, a full risk register, and measures of success.	The Trust accepts this recommendation and has already established a NEPTS Improvement Programme, supported by appropriate governance, reporting into Strategic Transformation Board. ToR are established and have been agreed by STB. A risk register has been developed as part of this programme and is reviewed at each programme board meeting. A workstream for benefits mapping is set to deliver	April 2027	ADO, Ambulance Care

Recommendation	Commentary on planned actions	Completion date	Responsible officer
	in September 2026 and this will also be reported to STB. Evidence will be via Highlight reports, AAA – from the improvement programme to STB.		
R2.2 Ensure NEPTS risks are clearly aligned across programme and corporate risk frameworks.	As R2.1	April 2027	ADO, Ambulance Care
R2.3 Strengthen links between priorities, risks, resources, and delivery plans.	The improvement programme workstreams have begun to review this and this will continue to be reviewed through the programme structures that are in place. Any requirements not deliverable within available resources will be routinely	April 2027	ADO, Ambulance Care

Recommendation	Commentary on planned actions	Completion date	Responsible officer
R2.4 Agree system-level oversight arrangements with the JCC and health boards to support delivery of the Future Vision across organisations.	highlighted to STB and also placed into consideration for future IMTP cycles. Evidence will be via Highlight reports, AAA – from the improvement programme to STB and through notes of STB meetings. WAST will establish regular engagement with commissioners to provide updates on both progress of the improvement programme and delivery of the future vision. However, it our view is that this will require JCC to lead this process as lead commissioners. This will be evidenced through minutes from these commissioning fora.	October 2026	ADO, Ambulance Care

Recommendation	Commentary on planned actions	Completion date	Responsible officer
R3 The Trust should accelerate delivery of improvement actions and strengthen coordination with partners. It should:			
R3.1 Set out and deliver against a clear timeline for the actions to reduce cancellations and improve patient experience, including communication with patients.	The improvement programme will provide a clear timeline for agreed actions and patient engagement, which will be reported into STB. Progress with reducing cancellations will be reported through the MIQPR. Evidence will be provided through AAA/highlight reports into STB and the MIQPR.	April 2027	ADO, Ambulance Care
R3.2 Evaluate and apply learning from system-integration pilots.	We will ensure that this is built into the relevant workstreams within	April 2027	ADO, Ambulance Care

Recommendation	Commentary on planned actions	Completion date	Responsible officer
	the improvement programme and reflected within the benefits realisation plan.		
R4 The Trust should strengthen reporting and Board oversight to clearly show the impact of improvement actions on performance and patient experience. It should:			
R4.1 Link improvement actions to milestones, expected benefits, and outcomes in routine reporting, enabling the Board to track delivery.	This will be implemented through the improvement programme; We will ensure that this is reported quarterly through the improvement programme into the STB and to	April 2027	ADO, Ambulance Care

Recommendation	Commentary on planned actions	Completion date	Responsible officer
	Trust Board through reporting on IMTP delivery and via the MIQPR. Evidence will be provided through AAA/highlight reports into STB and the MIQPR.		
R4.2 Track and report progress against key measures, including cancellations, timeliness, and patient experience, so the Board can assess whether performance is improving.	As R4.1		ADO, Ambulance Care
R4.3 Use performance and patient feedback to assess whether improvements are delivering the intended impact and support the Board in challenging and refining	We have already established robust arrangements to capture, review and report patient feedback through patient surveys, feedback channels via SMS messaging, CMP surveys and	April 2027	ADO, Ambulance Care

Recommendation	Commentary on planned actions	Completion date	Responsible officer
the approach where progress is limited.	through PECI engagement with patients. We will ensure that this process remains able to capture the required information as delivery of the improvement programme progresses. This will be reported and reviewed at the WAST Operations Directorate Senior Operations Team (SOT) and Senior Leadership Team (SLT) meetings. Evidence will be provided through the NEPTS Quality Dashboard and minutes/AAA from the above meetings.		

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We welcome correspondence and telephone calls in Welsh and English.

Rydym yn croesawu gohebiaeth a galwadau ffôn yn Gymraeg a Saesneg.