Risk Dashboard (Risks Graded 15 and Above) - May 2026

LIKELIHOOD (L)	CxL	1 - Negligible	2 - Minor	3 - Moderate	4 - Major	5 - Catastrophic
	1 – Highly Unlikely					
	2 – Unlikely					
	3 – Likely					**80** JACIE accreditation - south Wales CAR T service **81** JACIE accreditation - south Wales BMT service
	4 – Highly Likely				**61** Obesity surgery at Salford Royal Hospital waiting times **65** Renal dialysis capacity across Wales **68** Specialist Auditory Implant Device Service' CVUHB - **82** Neuro-rehabilitation service at SBUHB **87** Commissioning of Acute Neurosurgery Therapy MDT at CVUHB **89** Paediatric Neurology Service provision for North Wales **95** Neuro-rehabilitation services at C&VUHB	**88** Commissioning of 24/7 South Wales Thrombectomy Service **96** Delivery and Sustainability of Commissioned Capacity for the Emergency Ambulance Service (EMS)
	5 – Almost Certain			**84** Financial Break-even 2025/26	**94** High-cost medicines	

JCC RISK REGISTER - RISKS WITH SCORES >15

Risk Ref	Risk Title	Risk Descriptor	Controls in place	Action Plan	Strategic Risk Owner Commissioning Portfolio	NWJCC Strategic Objective/ Annual Plan Priority	NWJCC Risk Domain	NWJCC JAF Strategic Risk Risk Appetite Level Risk Treatment	Provider/s	Provider Risk Indicator	Provider Risk Indicator Link	NWJCC Assuring Committees / Sub-Committees	Rating (current) (C x L)	Rating (Target) (C x L)	Trend	Risk Opened	Last Reviewed
													C L	C L			
61	**Obesity surgery for the population of North Wales**	**If...**the JCC is unable to secure an alternative provider for obesity surgery for the North Wales population **Then...**patients from Betsi Cadwaladr University Health Board (BCUHB) and North Powys will be unable to access the surgery they require, or the need to travel a distance to receive their surgery. This would lead to fragmented care and extended delays for BCUHB patients, worsening an already deteriorating waiting list position. **Resulting in...** • the potential for poorer population outcomes and inequity of service provision across Wales. • alternative service provision from another provider being at a potential increased financial cost to the JCC, and • the JCC being open to reputational risk and potential litigation	• Director oversight in place, action plan and task finish group established to manage the required change.	• The SBUHB Executive Board approved the business case proposal on 10 June 2026. Regular meetings have taken place between SBUHB, Northern Care Alliance (NCA) and Betsi Cadwaladr University Health Board, with discussions continuing regarding the transfer of patients on the waiting list from NCA to WIMOS. • Continue the process to identify a new provider of obesity surgery for the North Wales population. **Update July 2026:** The risk score remains unchanged. The Commissioning Team will review the risk score once confirmation has been received that implementation of the business case is underway and the transfer of patients to WIMOS has been completed.	Director of Commissioning for Specialised Services Cardiac	**Improve equity and population health:** ensure that people are able to access the right service when they need it whoever they are, wherever they live. **Cardiac Review**	Health Inequalities Strategic Commissioning Resources	Strategic Risk 2 - Service Sustainability, Fragility and Equity of Access Open Tolerate	BCUHB/Salford Royal Hospital			• Joint Commissioning Committee • Planning, Performance & Finance Sub-Committee • Senior Leadership Team • CTMUHB Audit & Risk Committee	16 4 4	4 4 1	⟷	Dec-23	Jul-2026
65 WKN18	**Renal Dialysis Capacity across Wales**	**If...**the number of patients requiring dialysis continues to grow annually at a rate of 3–4% (or higher based on some projections) **Then...**the demand will exceed current commissioned capacity across Wales for both unit-based and home dialysis, and there will be delays or limits on the number of patients accessing home dialysis, as the growing demand exceeds the capacity of the nursing workforce to provide timely training and ongoing monitoring. **Resulting in...** • the need to commission additional capacity, at financial risk to the NWJCC, to avoid population harm • Increased pressure on the commissioned NEPTS service to transport a greater number of patients to and from dialysis session 3 times per week at a financial risk to the JCC	• Value in Health Care funding secured to increase the number of transplant and home dialysis patients • Monitoring through provider WKN meetings through the WKN commissioning performance dashboard • Additional capacity provided in Welshpool and through the new Bridgend Dialysis Unit will be monitored through provider meetings • A focus on increasing home therapies and transplant will increase capacity in the units, although a percentage of patients will retun to unit dialysis for respite or due to kidney transplant failure, which needs to be accounted for when assessing capacity pressures • The following strategic Prevention workstreams are expected to have a medium/long term effect, led by the WKN Clincial Prevention Lead: - All Wales Community Healthcare Pathway for referrals for Chonric Kidney Disease have been agreed and introduced into Primary Care - Regional actions plans have been developed and introduced for increasing patient numbers for home dialysis and transplantation, monitored through the WKN Regional performance meetings • National Primary Care CKD optimisation project approved as a mandatory component of the new GMS contract for all GP practices in Wales £4.5m budget. Educational webinar to completed to supported by regional workshops and implementation. Target metrics have been developed by DHCW and EMIS searches • CKD e-learning module for primary care focusing on prevention, screening and optimisation for early CKD - CPD-approved is now live, awaiting a report on the level of uptake by cluster areas	Prevention workstream medium/long term effect: • Community Cardiorenal clinic pilot being developed in SBUHB - start date to be confirmed Commissioned services: • A focus on increasing home therapies and transplant will increase capacity in the units, although a percentage of patients will retun to unit dialysis for respite or due to kidney transplant failure, which needs to be accounted for when assessing capacity pressures • Commission a distinct piece of work on Demand and Capacity Modelling, The HEOR presentation was provided to WKN Network Board meeting 24/09/25 on the demand, Further workshops to be held with the regional providers (x3) to go through the regional detail - This session took place on 10th December 2025 with further refinement required by end of January 2026 • Full workforce analysis with Regions and bench marking to quantify the various staffing costs per session by Quarter 4 2025/26 This action will now be picked up in the WKN Deep Dive review in 2026/27. • Monitor the variation between the 1.77% uplift applied as part of the IMTP Foundation plan and the projected 3.7% growth for dialysis across Wales - Qtr 4 2025/26 • Development of action plans for increasing capacity to include opening of Twillight • Risk will form part of the IMTP plan for 2026/2027 • Deep dive review to include projecting the inflationary costs requirement and projected growth for 2026/27 • Development of a report with recommendations and next steps to deliver system value and improve efficiency and sustainability **Update for July 2026 -** Risk reviewed and risk remains unchanged, awaiting Care Closer to Home submissions from Regions for NWJCC Foundation plan funding allocation.	Director of Commissioning for Specialised Services Welsh Kidney Network	**Ensure quality:** with a commissioning approach that is fostered in a quality management system, provide quality outcome, evidence based service specifications for commissioned services and monitor delivery against these. **Renal Deep-Dive**	Strategic Commissioning Resource	Strategic Risk 2 - Service Sustainability, Fragility and Equity of Access Open Tolerate	BCUHB, CVUHB, SBUHB			• Joint Commissioning Committee • Welsh Kidney Network Board • Quality & Patient Safety Sub-Committee • Senior Leadership Team • CTMUHB Audit & Risk Committee	16 4 4	8 4 2	⟷	Jan-24	Jul-2026
68 NCC064	**Specialist Auditory Implant Device Service' CVUHB**	**If...**CVUHB South Wales Specialist Auditory Implant Device Service continues to experience staffing shortages, high sickness absence, poor staff morale and ongoing funding pressures within the specialist Audiology, while the service remains at escalation level 3 **Then...**South Wales patients requiring a Cochlear Implant or Bone Conduction Hearing Implant (BCHI) will be unable to access the Specialist Service within the national standard waiting times target, with the potential for poorer population outcomes and inequity of service provision between the South and North Wales service **Resulting in...**the potential need to seek an alternative provider at an increased financial cost and reputational impact to the NWJCC	• The service is at Level 3 of the NWJCC Escalation Framework wef October 2025	As a result of lack of progress in improving performance and meeting waiting time targets, the service was put into level 3 of the NWJCC Escalation Framework in October 2025. • 52 week breaches were addressed by March 2026 and at the last escalation meeting (5th August 2026) it was reported that that there was only 1 patient waiting over 36 weeks that would be cleared by September. Sustainability remains a key concern. • Contract re baselining discussions have begun to ensure sustainable and efficient resource allocation to deliver activity levels to agreed quality standards. • A number of quality related issues raised and staff wellbeing concerns. Due to the impact on the quality of service delivery this risk was re-escalated in January 2026. • The next executive level escalation meeting is scheduled for mid September 2026. A key action prior to the next meeting is for JCC and CVUHB finance colleagues to have a focused discussion regarding the baselining of the contract, to ensure delivery against contracted quality and activity, and adequate staffing is in place. This will aim to fully support performance and quality whilst meeting and sustaining waiting time targets. **Update for July 2026 -** the risk has been reviewed and remains unchanged. Consideration is currently being given to a consolidated number of themed risks for Neurosciences that more accurately reflect their cumulative impact on the NWJCC.	Director of Commissioning for Specialised Services Neurosciences	**Improve equity and population health:** ensure that people are able to access the right service when they need it whoever they are, wherever they live. **Sustainability & Efficiency**	Strategic Commissioning Resources Reputation	Strategic Risk 2 - Service Sustainability, Fragility and Equity of Access Open Tolerate	CAVUHB			• Joint Commissioning Committee • Planning, Performance and Finance Sub-Committee • Senior Leadership Team • CTMUHB Audit & Risk Committee	16 4 4	8 4 2	⟷	Mar-25	Jul-2026
80 CB12	**JACIE certification south Wales CAR T service**	**If...**CVUHB does not achieve JACIE certification for its CAR-T service due to facilities not meeting standards **Then...**pharmaceutical companies will withdraw their approvals for CVUHB to administer their products and there will be no CAR-T service in Wales for the NWJCC to commission leading to: • patients having to travel further for treatment at a certified centre; • an increased risk of patients not receiving treatment in a timely manner • risk of poorer patient outcomes and adverse impact on patient and family experience **Resulting in...** significant increase in costs to the JCC and NHS Wales due to commissioning additional services in England and an inability to deliver against the strategic intention of ATMP delivery in Wales therefore damaging the reputation of the JCC and NHS Wales	• The NWJCC continues to work with providers to ensure that services are being delivered to previously agreed service specifications, or where this is not possible that assurance is provided that appropriate mitigations are in place, including stringent infection control measures	• In conjunction with the provider, to advise Welsh Government on the implications for the service and patients if JACIE certification is not achieved. • Continue to meet with the service on a regular basis to monitor progress - ~~next meeting 5th June 2026~~ COMPLETE • Meet CVUHB and SBUHB to discuss the revenue business case on 7th August. **Update for July 2026 -** JACIE report received by CVUHB on 8th January deferring their final decision with regards to recertification pending CVUHB's submission of their corrective actions by 8th July. It is noted that there is acceptance that deficiencies requiring longer-term solutions (such as construction) are not expected to be complete by the deadline~~, they expect the pl~~plans for such corrections ~~to be~~ were included with the response ~~with as much detail as possible~~ submitted to JACIE on 8th July~~. An action list has been drawn up by the service in order to provide a response to JACIE by the deadline.~~ showing that CVUHB ~~expects to have~~ compliesd with all the standards which do not require further investment. ~~Submission of a~~ A proposal to address areas highlighted by JACIE report as requiring staff ~~is expected~~ has been received from the health board and is being scrutinised by the Cancer & Blood team. The Cancer & Blood commissioning team has reviewed the score using the JCC domains and risk scoring matrix and the scoring remains unchanged.	Director of Commissioning for Specialised Services Cancer & Blood	**Ensure quality:** with a commissioning approach that is fostered in a quality management system, provide quality outcome, evidence based service specifications for commissioned services and monitor delivery against these	Strategic Commissioning Resources Reputation	Strategic Risk 1 – Commission to Sustain High Quality, Safe and Effective Services Cautious Treat	CVUHB	Bone Marrow Transplant/2 010-1102	https://cavuhb.nhs.wales/files/board-and-committees/board-2025-26/2025-11-27-board-papers-bundle-pdf/ Page 360 and 361	• Joint Commissioning Committee • Quality, Safety & Outcomes Sub-Committee • Senior Leadership Team • CTMUHB Audit & Risk Committee	15 5 3	5 5 1	⟷	May-25	Jul-2026
81 CB13	**JACIE certification - south Wales BMT service**	**If**... CVUHB does not achieve JACIE certification for its BMT service due to facilities not meeting standards **Then**...a commissioning decision will need to be made by NWJCC to either commission from a non-certified centre (CVUHB) or from certified centres in NHS England meaning that: • either patients will receive treatment from a centre which does not meet national standards or the NWJCC service specification, or • there is an increased risk of patients not receiving treatment in a timely manner leading to poorer patient outcomes and experience due to complex pathways with multiple providers requiring significant coordination and administration **Resulting in**... If continuing to commission from CVUHB: Patients receiving treatment from a centre which is deemed not to reach national standards or the NWJCC service specification. If outsourcing: significant increase in costs and administration to the JCC and NHS Wales due to commissioning additional services in England	• The NWJCC continues to work with providers to ensure that services are being delivered to previously agreed service specifications, or where this is not possible that assurance is provided that appropriate mitigations are in place, including stringent infection control measures	• In conjunction with the provider, to advise Welsh Government on the implications for the service and patients if JACIE certification is not achieved. • Continue to meet with the service on a regular basis to monitor progress - ~~next meeting 5th June 2026~~ COMPLETE • Meet CVUHB and SBUHB to discuss the revenue business case on 7th August. **Update for July 2026 -** JACIE report received by CVUHB on 8th January deferring their final decision with regards to recertification pending CVUHB's submission of their corrective actions by 8th July. It is noted that there is acceptance that deficiencies requiring longer-term solutions (such as construction) are not expected to be complete by the deadline~~, they expect the pl~~plans for such corrections ~~to be~~ were included with the response ~~with as much detail as possible~~ submitted to JACIE on 8th July~~. An action list has been drawn up by the service in order to provide a response to JACIE by the deadline.~~ showing that CVUHB ~~expects to have~~ compliesd with all the standards which do not require further investment. ~~Submission of a~~ A proposal to address areas highlighted by JACIE report as requiring staff ~~is expected~~ has been received from the health board and is being scrutinised by the Cancer & Blood team. The Cancer & Blood commissioning team has reviewed the score using the JCC domains and risk scoring matrix and the scoring remains unchanged.	Director of Commissioning for Specialised Services Cancer & Blood	**Ensure quality:** with a commissioning approach that is fostered in a quality management system, provide quality outcome, evidence based service specifications for commissioned services and monitor delivery against these	Strategic Commissioning Resources Legal	Strategic Risk 1 – Commission to Sustain High Quality, Safe and Effective Services Cautious Treat	CVUHB	Bone Marrow Transplant/2 025-2601	https://cavuhb.nhs.wales/files/board-and-committees/board-2025-26/2025-11-27-board-papers-bundle-pdf/ Page 360 and 361	• Joint Commissioning Committee • Quality, Safety & Outcomes Sub-Committee • Senior Leadership Team • CTMUHB Audit & Risk Committee	15 5 3	5 5 1	⟷	May-25	Jul-2026

Organisational Risk Register (Risks Graded 15 and Above) - May 2026

Risk Ref	Risk Title	Risk Descriptor	Controls in place	Action Plan	Strategic Risk Owner Commissioning Portfolio	NWJCC Strategic Objective/ Annual Plan Priority	NWJCC Risk Domain	NWJCC JAF Strategic Risk Risk Appetite Level Risk Treatment	Provider/s	Provider Risk Indicator	Provider Risk Indicator Link	NWJCC Assuring Committees / Sub-Committees	Rating (current) (C x L)	Rating (Target) (C x L)	Trend	Risk Opened	Last Reviewed
82 NCC057	**Neuro-rehabilitation service at SBUHB**	**If...**the NWJCC is unable to support the investment required to recruit to the multi-disciplinary staffing establishment at the SBUHB Inpatient Neuro-rehabilitation Unit to meet the minimum BSPRM standards **Then...**specialist neuro-rehabilitation at the Unit will be compromised or lost **Resulting in...** • the potential for poorer population outcomes for South West Wales • inequity of service provision • and the JCC being open to reputational risk and potential judicial review of decisions linked to service investment • placing the service into escalation and the potential need to seek an alternative provider at an increased financial cost	• Recommendations to mitigate the current risks and medium to longer term staffing requirements by recruiting and maintaining a well-resourced and competent multidisciplinary team. • SBUHB have reduced the number of Neuro-rehabilitation inpatient beds from 14 to 10 beds in the short term whilst recruitment gaps are resolved. • Information re: delayed admissions/discharges shared with the JCC • Half yearly Performance meetings with the service in place.	• JCC drafted a specialised rehabilitation strategy, the unit is to be included in this project. The strategy has been paused for review in 25/26. • A performance meeting with the NPT Rehabilitation Service was held on the 22nd of September 25 and quarterly meetings with the NWJCC and NPT Rehabilitation Service have been arranged, these meetings continue to monitor the position. **Update for July 2026 -** the risk has been reviewed and remains unchanged. Consideration is currently being given to a consolidated number of themed risks for Neurosciences that more accurately reflect their cumulative impact on the NWJCC.	Director of Commissioning for Specialised Services Neurosciences	**Improve equity and population health:** ensure that people are able to access the right service when they need it whoever they are, wherever they live. **Sustainability & Efficiency**	Strategic Commissioning Resources Reputation	Strategic Risk 1 – Commission to Sustain High Quality, Safe and Effective Services Cautious Treat	SBUHB			• Joint Commissioning Committee • Quality, Safety & Outcomes Sub-Committee • Senior Leadership Team • CTMUHB Audit & Risk Committee	16 4 4	8 4 2	⟷	Apr-25	Jul-2026
84	**Financial break-even 2026/27**	**If...**the NWJCC overspends against the agreed Annual Plan 2026/27 **Then...**the Health Boards will have to include the relevant amounts in their own financial reporting **Resulting in...**unexpected overspends/restriction of JCC/HB services to patients/breaching HB statutory financial requirements. If this happens there is a risk that the JCC financial position will have a detrimental impact on individual Health Board financial positions leading to potential reputational damage to the JCC	• Financial performance monitored and reported to LHBs on a monthly basis providing key variance analysis in a timely manner to allow LHBS to make their own financial provisions or to take mediating actions to manage their demand. • Business partner arrangements with monthly directorate team meetings • Internal budget management regime updated in tandem with the scheme of delegation. • Bi-monthly CCLG and collaborative commissioning group meetings. • Bi-monthly Joint Committee meetings to discuss key variances from plan, formulate plans to manage demand where possible and to provide LHBS with sufficient information and financial forecasts to be able to make their own financial provisions in advance.	• Continuation of discussion with Welsh Government and Health Boards • SLT prioritising the work plan aligned to the risk based foundational plan and strategic priorities. **Update for July 2026 -** Continued monitoring of strategic sustainability and efficiency to ensure a break even position, with a view to go further and reduce commissioner contributions. A paper was presented to the JCC on the 21st July outlining progress to date in respect of financial sustainability. The previous dispute with C&VUHB with regards to their LTA has been concluded, the outcome being NWJCC is able to include a 2% savings requirement as part of the 2026/2027 LTA. At month 3 there does not appear to be any financial risk to break even.	Director of Finance & Value	**Maximise Value:** through our expertise and advice, determine where resources are best focussed and prioritised to inform choices that support the improvement of patient outcomes and commission appropriate services where value is demonstrated.	Strategic Commissioning Resources	Strategic Risk 6 - Financial Sustainability and Affordability Cautious Treat	N/A			• Joint Commissioning Committee • Planning, Performance & Finance Sub-Committee • Senior Leadership Team • CTMUHB Audit & Risk Committee	15 3 5	9 3 3	⟷	Apr-25	Jul-2026
87 NCC059	**Commissioning of Acute Neurosurgery Therapy MDT at CVUHB**	**If...**the NWJCC is unable to provide funding to address the insufficient commissioned establishment for the Neurosurgery Therapy MDT at Cardiff & Vale University Health Board **Then...**there is a risk of delay to acute therapy service provision for patients on the acute neurosurgery pathway, the potential for poorer population outcomes for South Wales and inequity of service provision compared to North Wales **Resulting in...** The JCC being open to reputational risk and potential judicial review of decisions linked to service investment	• Continue to monitor the position at the quarterly Neurosciences Performance Meeting. • Acute Neurosurgery therapies was approved in the ICP 24/25.	• Commissioning team to clarify if the funding release can proceed in 25/26 which will be dependent on the ICP for 26/27. **Update for July 2026 -** the risk has been reviewed and remains unchanged. Consideration is currently being given to a consolidated number of themed risks for Neurosciences that more accurately reflect their cumulative impact on the NWJCC.	Director of Commissioning for Specialised Services Neurosciences	**Improve equity and population health:** ensure that people are able to access the right service when they need it whoever they are, wherever they live. **Sustainability & Efficiency**	Health Inequalities Resources Reputation	Strategic Risk 2 - Service Sustainability, Fragility and Equity of Access Open Tolerate	CVUHB			• Joint Commissioning Committee • Planning, Performance & Finance Sub-Committee • Senior Leadership Team • CTMUHB Audit & Risk Committee	16 4 4	8 4 2	⟷	Jul-25	Jul-2026
88	**Commissioning of 24/7 South Wales Thrombectomy Service**	**If...**the JCC is unable to commission a 24/7 mechanical thrombectomy service on behalf of South Wales Health Board's and their populations **Then...**there is a risk of continued inequity of access to services between patients in South Wales and South Powys, compared to those in North East Wales and North Powys who have access to a 24/7 Mechanical Thrombectomy Service and the potential for poorer population outcomes in South Wales and South Powys **Resulting in...** • the JCC being open to significant reputational risk and potential judicial review of decisions linked to service provision	• Four phase investment plan for the provision of a 24/7 service in place with CVUHB. Business case received from CVUHB 4 phase plan to provision of 24/7 service. • Ongoing discussions with North Bristol Hospital Trust (NBHT) being held regarding service provision.	• JCC were awaiting a business case from CAVUHB by end of September 2025. CVUHB advised that they were not in a position to submit a revised business case to expedite the 4 phase plan (agreed with Joint Committee in 2024) to mitigate the risk of lack of 24/7 access. The NWJCC continue to discuss the 24/7 service provision with North Bristol Hospital Trust • JCC to continue to meet Cardiff service regularly as required (currently fortnightly) to monitor activity. • A deep dive into Mechanical Thrombectomy provision has been included as a strategic priority for 26/27 and aims to conclude by Q3 to update a way forward for this service and addresing this risk in the long term. **Update for July 2026 -** the risk has been reviewed and remains unchanged. Consideration is currently being given to a consolidated number of themed risks for Neurosciences that more accurately reflect their cumulative impact on the NWJCC.	Director of Commissioning for Specialised Services Neurosciences	**Improve equity and population health:** ensure that people are able to access the right service when they need it whoever they are, wherever they live. **Thrombectomy Deep Dive**	Health Inequalities Legal Reputation	Strategic Risk 2 - Service Sustainability, Fragility and Equity of Access Open Tolerate	CVUHB	No risk for Thrombectomy on CVUHB Risk Register or BAF - From the provider's perspective, it delivers to its current contract.	N/A	• Joint Commissioning Committee • Quality, Safety & Outcomes Sub-Committee • Senior Leadership Team • CTMUHB Audit & Risk Committee	20 4 5	8 4 2	⟷	Jul-25	Jul-2026
89 P/21/28	**Paediatric Neurology Service provision for North Wales**	**If...**neurology services in Alder Hey NHSE remain under resourced **Then...**North Wales paediatric patients will not have access to the full range of specialised Paediatric neurology services with the potential for poorer population outcomes in North and inequity of access between North Wales and South Wales **Resulting in...** • the JCC being open to significant reputational risk and potential judicial review of decisions linked to service provision • the need to re-commission Paediatric Neurology services for North Wales at a potential financial consequence to the JCC	• Continue regular SLA perfomance meetings with Alder Hey to discuss JCC commissioned services.	• The next SLA meeting, scheduled for the 19th March 2026, will discuss the continued reduced service due to work force constraints. Members of the commissioning team will be attending in person and confirmation of consultation start date, full service capacity and plan to mitigate any backlog caused from lack of resource. **Update for July 2026 -** W&C Commissioning Team have reviewed the risk which remains unchanged. Meeting held on 19th June to discuss the planned tertiary paediatric neurology MDT. BCUHB agree with Alder Hey on the planned tertiary neurology MDT. The MDT clinics will only involve clinicians. Patients/families will have appointments with their local consultant who will update them on the decisions made in these meetings regarding their care. There is currently no planned start date as this will be dependent on the approval of SLAs. Contact has been made with Alder Hey regarding the start date and the team in Alder Hey is currently arranging a meeting with BCUHB colleagues to discuss, with the JCC to be included.	Director of Commissioning for Specialised Services Women & Children	**Improve equity and population health:** ensure that people are able to access the right service when they need it whoever they are, wherever they live. **Sustainability & Efficiency**	Health Inequalities Strategic Commissioning Resource Reputation	Strategic Risk 2 - Service Sustainability, Fragility and Equity of Access Open Tolerate	Alder Hey			• Joint Commissioning Committee • Quality, Safety & Outcomes Sub-Committee • Senior Leadership Team • CTMUHB Audit & Risk Committee	16 4 4	8 4 2	⟷	Jul-25	Jul-26
94	**High-Cost Medicines**	**If...**Medicine costs increase by a predicted 30% plus inflation due to geo-political pressures and inflation **Then...**the JCC's expenditure could increase by circa £39m **Resulting in...**significant financial pressures for the organisation which will impact on our ability to achieve financial targets and/or savings. Additionally this will impact on our ability to deliver our Foundational Plan or future IMTP plans	• Whilst we do not have any control over the organisations responsible for this risk, financial mitigations could be put in place within our commissioning plans for the future.	• Make representations and lobby key stakeholders - ABPI, Welsh Government • Review all medicines commissioned to ensure they all remain appropriate for JCC commissioning **Update for July 2026 -** The Medical team has reviewed the risk using the JCC domains and risk scoring matrix and the risk remains unchanged	Medical Director	**Maximise value –** through our expertise and advice, determine where resources are best focussed and prioritised to inform choices that support the improvement of patient outcomes and commission appropriate services where value is	Resources	Strategic Risk 6 - Financial Sustainability and Affordability Cautious Treat	ALL			• Joint Commissioning Committee • Planning, Performance & Finance Sub-Committee • Senior Leadership Team • CTMUHB Audit &	15 3 5	9 3 3	⟷	Nov-25	Jul-2026
95	**Neuro-rehabilitation services at C&VUHB**	**If...**The JCC does not provide funding to increase the commissioned establishment to meet the minimum BSPRM standards **Then...**The service will not have the staffing levels required to respond to the patient needs (complexity) that change over time meaning potentially poorer outcomes for the patient population **Resulting in...** • CVUHB being unable to take patients with more complex needs or admit new patients in line with demand thereby not fulfilling their contractual obligations • Financial implications for both the JCC and CVUHB and the need to consider the re-commissioning of services (bed closures)	• CVUHB have successfully recruited to the commissoned staffing establishment, however still remain below the minimum standards for the British Society Physical Rehabilitation Medicine. • JCC receiving and monitoring performance and repatriation delay information • Performance reporting and oversight via Risk Assurance and Recovery meetings, SLA meetings and to Management Group and JCC	• JCC to continue meeting quarterly with the C&VUHB team to understand the risks • The concerns raised by the Rehabilitation team will be addressed in the Rehabilitation Strategy which is currently paused for review in 25/26. **Update for July 2026 -** the risk has been reviewed and remains unchanged. Consideration is currently being given to a consolidated number of themed risks for Neurosciences that more accurately reflect their cumulative impact on the NWJCC.	Director of Commissioning for Specialised Services Neurosciences	**Maximise value –** through our expertise and advice, determine where resources are best focussed and prioritised to inform choices that support the improvement of patient outcomes and commission appropriate services where value is demonstrated. **Sustainability & Efficiency**	Strategic Commissioning Resources	Strategic Risk 1 – Commission to Sustain High Quality, Safe and Effective Services Cautious Treat	CAVUHB			• Joint Commissioning Committee • Quality, Safety & Outcomes Sub-Committee • Senior Leadership Team • CTMUHB Audit & Risk Committee	16 4 4	8 4 2	⟷	Jan-26	Jul-2026

Organisational Risk Register (Risks Graded 15 and Above) - May 2026

Risk Ref	Risk Title	Risk Descriptor	Controls in place	Action Plan	Strategic Risk Owner Commissioning Portfolio	NWJCC Strategic Objective/ Annual Plan Priority	NWJCC Risk Domain	NWJCC JAF Strategic Risk Risk Appetite Level Risk Treatment	Provider/s	Provider Risk Indicator	Provider Risk Indicator Link	NWJCC Assuring Committees / Sub-Committees	Rating (current) (C x L)	Rating (Target) (C x L)	Trend	Risk Opened	Last Reviewed
96	**Delivery and Sustainability of Commissioned Capacity for Emergency Ambulance Service (EMS)**	**If...**The Welsh Ambulance Service University NHS Trust (WAST) is unable to fully utilise the Emergency Ambulance Service capacity commissioned by the NWJCC due to provider and wider NHS Wales system pressures, including increased demand, ambulance handover delays, and limited alternative care pathways. **Then...** Health Board populations may not receive timely access to pre-hospital emergency care **Resulting in..**Patient harm, poorer patient experience, reputational damage to the NWJCC, and additional financial pressures, with the commissioning of additional ambulance capacity alone unlikely to fully mitigate the risk without wider system improvements. Commissioning of additional capacity alone will not mitigate current inefficiencies.	• NWJCC EAS (WAST) commissioning forum • JCC system/health boards touchpoints (plan to be instated) • Strategic review on Ambulances (provider) • NWJCC annual plan - planning / forecasting current and future demand (increase/decreases) • Commissioning Intentions 26/27 specific to the provider to deliver against non-cash releasing productivity gains (2%) • Joint demand & capacity reviews • NWJCC strategic review, and a more evidenced based Commissioning approach (framework) • Regularly reviewed performance, and in collaboration with HB's • NWJCC continued conversations with Committee - Ongoing (Joint agreed acceptance of tolerance for commissioning of current 6.000 hours or when required JCC to provide options) • Monitoring for Assurances; WAST IMTP service improvement delivery 2026/2027-29 - Ongoing e.g. WAST culture change programme, areas outlined inc. Workforce; sickness absence challenges and monitoring provider service improvements e.g. meal breaks	• Forecasting population for Commissioning (deprivation metrics) - Q3 2026 • JCC Assurance - Regular (weekly) monitoring of utilisation, UHP and performance reporting inc % provision - Ongoing • Agree Provider targets (notification if exceeds threshold for escalating) - Q2 2026 **Update for July 2026** - The Ambulance services and National programmes team have reviewed new risk 96. The score rating of 20 current, with target 10 remains unchanged, based on provider performance during the month of June where WAST declared a critical incident, due to the increase in temperatures across Wales, and the impact this has had on Wales population. WAST have since returned from REAP4 escalation to REAP2 and with continuous close monitoring and updates provided in place, for planning ahead. Handover lost hours for June 14,263 although higher than the target (of 9,000hrs) has decreased by 11% compared to June 2025 (15,948). This remains challenging across health boards, who continue to undertake assessments in relation to further expectations around handover improvement. No recent updated timescales shared for this NHS Wales wide work. The month of July has seen an improvement to 9,167 lost hours. This trajectory will be closely monitored, as if contiues this could bring the lost hours target back in line with WAST Commissionned levels. Ambulance service Unit Hour Production (UHP) continues to be monitored as part of regular commissioning performance monitoring. Against the action plan a JCC performance dashboard is developed to provide metrics required for commissioning population forecasting with a focus on deprivation.To inform demand and capacity. Areas of provider targets are set out in the WAST MIQPR (Monthly Integrated Quality Performance Report) although full agreement of these remains' dependant on the strategic review outputs to be delivered later in the year.	Director of Commissioning for Ambulance Services and National Programmes Emergency Ambulance Service	**Facilitate Integration:** through effective engagement and collaboration, provide the key mechanism to support regional and national integration for commissioning services for the people of Wales. **Ambulance / 111 Review**	Strategic Commissioning Health Outcomes Resources Reputation	Strategic Risk 3 – Ambulance Commissioning Model Open Tolerate	WAST NEPTS NHS 111 WALES EMRTS	WAST Risk 223 QUEST *Trust inability to reach Patients in the Community. Causing patient harm and death.*	https://ambulance.nhs.wales/files/trust-board-papers/papers-27-november-2025/ Agenda Item 10	• Joint Commissioning Committee NWJCC • Planning, Performance & Finance Sub-Committee PPF • Senior Leadership Team SLT • CTMUHB Audit & Risk Committee ARAC	**20** 5 4	**10** 5 2	⟷	May-26	Jul-2026