

Joint Commissioning Committee

Pre-Joint Committee Questions and Queries

Dyddiad y Cyfarfod / Date of Meeting	22/09/2026
Statws Cyhoeddi / Publication Status	Open/ Public Choose an item.

Pwrpas yr Adroddiad / Report Purpose	For Noting Choose an item.
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Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/Group)		
Committee / Group / Individuals	Date	Outcome
Not Applicable		Choose an item.

Whilst Joint Committee (JC) meetings are 'meetings in public' it is important to note that JC meetings are not public meetings. In a public meeting, questions may be asked during the course of the meeting, whilst appropriate questions are addressed after consideration of all agenda items during a meeting in public.

Members of the public have been invited to submit questions in advance of the meeting and as at 1pm on Friday 18th September 2026 over 160 questions from different requestors were received.

The NHS Wales Joint Commissioning Committee has considered all questions received. Given the volume and complexity of the submissions, responses will be provided against the key themes identified through the review process.

Where matters have been addressed within meeting papers, presentations, or discussions shared in advance of the meeting or raised during the meeting, the Joint Committee may deem the question to have been answered through those proceedings. Where a significant number of questions have been received on similar topics, responses will be provided collectively by the theme rather than

on an individual basis to ensure the meeting is conducted efficiently and fairly. The Joint Committee will not disclose, confirm, or comment on information where there is no lawful basis to do so, including where information is exempt from disclosure or remains confidential.

A comprehensive review of all questions and queries received has been undertaken. Publication of the submissions in full in advance of the meeting would not be appropriate, as this could enable the identification of the individuals concerned. Accordingly, to provide the public with a clear overview of the matters raised, the questions have been consolidated under the following themes, which will be addressed during the meeting:

1. **Evidence and rationale for the pause**
Detail regarding specific clinical concerns, complaints, data or risks related to the suspension of surgical referrals, surgical assessments and surgeries.
 2. **Decision-making and accountability**
Confirmation of the decision-making process undertaken.
 3. **Proportionality and alternative options**
Confirmation of whether alternative options were considered in response to clinical concerns, including individual case review, enhanced scrutiny or allowing approved surgeries to proceed.
 4. **Data quality and comparison with England**
Challenges to the methodology, referral and progression rates, use of population comparisons, absolute versus relative thresholds, and whether England is an appropriate benchmark.
 5. **Clinical advice and independent review**
Who provided the clinical advice, their relevant expertise, the review's independence, terms of reference, methodology, timescale and criteria for resuming treatment.
 6. **Impact on patients and route back to treatment**
Effects on waiting times, mental health, continuity of care, scheduled operations and waiting-list priority, including whether favourable individual reviews will allow treatment to restart promptly.
 7. **Equality, dignity and patient harm**
What consideration has been given to risks to wellbeing, dignity, trust and access to healthcare. How have equality and quality impact assessments informed and supported this.
 8. **Patient and stakeholder involvement**
Whether affected patients, the Welsh Gender Service, Trans Partnership Cymru, Llais and other representative groups were consulted before the decision and how they will be engaged moving forward.
 9. **Transparency, communication and publication**
Concerns about limited notice, inconsistent communication, the sequence of notifications, publication of evidence and correspondence, and provision of clear written answers.
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10. Political or external influence and consistency of treatment

Whether political representations, media, campaigning material or ideological considerations influenced the decision, and whether the same governance threshold would apply to other NHS surgical pathways.

Where relevant developments arise after publication of the papers and before the scheduled meeting date, these may be reported verbally during the meeting where it is appropriate and permissible to do so. The Joint Committee is not obliged to provide information that is unavailable, incomplete, subject to ongoing consideration, or otherwise unsuitable for disclosure at the time of the meeting.