GIG CYMRU NHS WALES | Cyd-bwyllgor Comisiynu Joint Commissioning Committee

Agenda Item
2.4

Joint Commissioning Committee

NHS Wales Joint Commissioning Committee Organisational Risk Register – March 26

Dyddiad y Cyfarfod / Date of Meeting	26/05/2026
Statws Cyhoeddi / Publication Status	Open/ Public
Awdur yr Adroddiad / Report Author	Aaron Fowler, Committee Secretary/Deputy Director of Corporate Governance
Cyflwynydd yr Adroddiad / Report Presenter	Aaron Fowler, Committee Secretary/Deputy Director of Corporate Governance
Noddwr yr Adroddiad / Report Sponsor	Georgina Galletly, Director of Corporate Planning & Strategy

Pwrpas yr Adroddiad / Report Purpose	For Approval Choose an item.

Engagement (internal/external) undertaken to date (including receipt /consideration at Committee/Group)		
Committee / Group / Individuals	**Date**	**Outcome**
Senior Leadership Team	20 May 2026	Approved for Committee Approval 26 May 2026
Planning, Performance and Finance Sub-Committee	28 April 2026	Endorsed for Committee Approval on the 26 May 2026
Quality, Safety and Outcomes Sub-Committee	27 April 2026	Endorsed for Committee Approval on the 26 May 2026

1. SITUATION

The purpose of this report is to present, for approval, the NHS Wales Joint Commissioning Committee's (NWJCC) Organisational Risk Register ("ORR") as of 31 March 2026, which encompasses risks scoring 15 and above.

1.1 Background

In accordance with the Hosting Agreement ("the HA") between CTMUHB ("Cwm Taf Morgannwg University Health Board") and the NWJCC, the NWJCC has adopted the Risk Management provisions of CTMUHB (para. 5.2 of the HA). To this end, the NWJCC has developed an NWJCC ORR which details those risks scoring 15 (out of 25) or above and/or those that cannot be managed locally across the NWJCC through adopted risk management processes. This process mirrors the risk management process adopted by CTMUHB, as set out within the CTMUHB Risk Management Strategy.

Each of the high/extreme scoring risks within the ORR are assigned to one of the NWJCC Sub-Committees (Quality, Safety & Outcomes Sub-Committee ("QSOC") and the Planning, Performance & Finance Sub-Committee ("PPF")) to be reviewed, and for assurance to be provided that risks are being appropriately mitigated, with robust actions in place for their ongoing management.

Additionally, each Sub-Committee provides onwards assurance, via Sub-Committee Highlight Reports, to the NWJCC Joint Committee (the "JC") regarding the management of risk.

Work has been undertaken to develop a Joint Committee Assurance Framework ("JAF") and Risk Appetite Statement that recognises the risks identified in the NWJCC Annual Plan and strategic priorities for 2026-27 and beyond. Following appropriate consultation and scrutiny by the NWJCC Senior Leadership Team ("SLT") and Sub-Committees, the JAF, Risk Appetite Statement and Risk Management Procedure will be shared for consideration and approval at JC sessions scheduled during Q1 of 2026. These documents will align with CTMUHB's iterations of these documents.

It is anticipated that the new NWJCC Chief Commissioner will, once appointed, want to provide their own input into the strategic risks that are monitored by the JAF, and it is therefore expected that an iteration of this document will first be shared publicly during Q2 of 2026-27.

2. ROLE OF THE NWJCC SUB-COMMITTEES

The QSOC and PPF Sub-Committees each have a role to play in ensuring that effective risk management processes are in place. To fulfil this role each Sub-Committee monitors and scrutinises the risks assigned to them and provides onwards assurance to the JC regarding the processes and procedures in place to manage and mitigate risk.

In addition to the local review of risk by operational teams and the scrutiny provided by the Senior Leadership Team (see section 3 below), the following reviews of the March 2026 ORR have been undertaken at Sub-Committee meetings:

- Quality Safety and Outcomes Sub-Committee – 27 April 2026
  - The QSOC undertook a review of all patient quality, safety and outcome related risks within the ORR as of 31 March 2026. This meeting was attended by three NWJCC Lay Members, apologies were given for the appointed CEO lead for the Sub-Committee.
- Planning, Performance and Finance Sub-Committee – 28 April 2026
  - The PPF undertook a review of all planning, performance and finance related risks within the ORR as of 31 March 2026. This meeting was attended by three NWJCC Lay Members and the appointed CEO deputy for the Sub-Committee.

3. SPECIFIC MATTERS FOR CONSIDERATION

3.1 Review of Risks

Commissioning Directorates continue to manage, and review reported risks at an operational level and refer extreme risks to the Corporate Governance Team (CGT) for scrutiny.

Following review by the CGT, the ORR and any emerging risks are reviewed by the SLT to ensure that the risks detailed within the ORR remain appropriate, and to consider whether emerging risks are suitable for addition to the ORR taking into consideration the potential impact of the risk on the NWJCC, the risk score and its description.

In addition to Sub-Committee scrutiny the SLT reviewed the March ORR and emerging risks at its meetings of the 22 April 2026. Within these reviews it was acknowledged that operational teams had taken steps to implement the JC's direction that risks should be described so that they set out the operational and system-based commissioning risks that the NWJCC is holding, rather than the operational provider risks to be held by Health Boards.

It is acknowledged that further improvement will continue to be targeted over the coming months as the new approach beds in and teams become more familiar with the style and expectations of the JC in the effective reporting and management of risk. Following feedback at QSOC and PPF, effort will be focussed on ensuring that risk controls and actions are appropriately defined and updated.

The emerging financial and strategic risks will be captured in the coming months, particularly in respect to financial break-even for 2026-27 and the impact of the planned strategic reviews reflected within the Annual Plan for 2026-27 as these will likely identify further risks for the JCC.

Moving forward all risks for April 2026 and beyond will also be aligned to the Strategic Reviews and Deep Dives to be undertaken as part of the NWJCC 2026/27 Annual Plan delivery. This will ensure that the NWJCC's Operational Risks continue to inform strategic decision-making.

3.2 NWJCC Risk Profile – March 2026

3.2.1 Risk Summary

As of 31 March 2026, there were **15** risks with a score of 15 and above (high risks) on the ORR, see **Appendix 1.** A summary of these risks is outlined below:

- **Commissioning Risks -** There are **12** risks open with a risk score of 15 and above:
  - Ambulance Services x 2
  - Cancer and Blood x 3
  - Cardiac x 1
  - Neurosciences x 4
  - Welsh Kidney Network x 1
  - Women and Children x 1

A summary of the changes that have taken place since the last report to the JC are outlined in **Table 1** below:

Table 1 – Commissioning Risk Profile – March 2026

Commissioning Risk Activity	Movement to ORR between February and March 2026
New Commissioning Risks	No new risks have been added.
Escalated Commissioning Risks	One risk has been escalated. • Risk 68 - Specialist Auditory Implant Device Service' CVUHB This risk was de-escalated from 20 to 12 in January 2026 on the basis that an improvement plan had been agreed to address the number of 52-week breaches. The next step was to work on a sustainable plan to achieve 26-week RTT and right sizing of the service in order to be in a position to designate a permanent provider by Q4 2026-27. However, since January there have been a number of quality related issues raised. Due to the impact on the quality of service delivery, this risk has been re-escalated. The next executive level escalation meeting is scheduled for late April 2026 where there will be a focused discussion to address accurate baselining of the contract and to ensure that adequate staffing is in place. The service remains in escalation level 3 and as a result of the recent concerns this risk has been re-escalated from a risk score of 12 to 16.

Commissioning Risk Activity	Movement to ORR between February and March 2026
De-escalated Commissioning Risks	One risk has been de-escalated: • Risk 61 - Obesity surgery for the population of North Wales This risk was escalated In January 2026 from 16 to 20 on the basis that the risk will 'Almost Certainly Happen' (5) following the NWJCC's receipt of a notice to terminate the existing provider contract at Salford Royal Hospital. However, following a full review in March 2026, the risk has reduced to 'Likely' (4), therefore decreasing the overall risk from 20 back down to 16. This reduction is based on current progress in establishing the interim provider solution with the Welsh Institute of Metabolic and Obesity Surgery (WIMOS) service, Swansea Bay University Health Board (SBUHB). This risk will remain under review and will continue to be reported on the ORR.
Emerging Commissioning Risks	There were no emerging risks highlighted.
Closed Commissioning Risks	No risks have been closed.

- **Corporate/Organisational Risks -** There are 2 risks open with a risk score of 15 and above:
  - Finance x 1
  - Medical x 1

A summary of the changes that have taken place since the last report to the JC is outlined in **Table 2** below.

Table 2 – Corporate/Organisational Risk Profile – March 2026

Corporate Risk Activity	Movement to ORR between February and March 2026
New Corporate Risks	No new risks have been added.
Escalated Corporate Risks	No risks have been escalated.
De-escalated Corporate Risks	No risks have been de-escalated.
Emerging Corporate Risks	No emerging risks were highlighted.

Closed Corporate Risks	No risks were closed.

4. ASSESSMENT

Objectives / Strategy		
Dolen i Amcan (au) Strategol CBC / Link to JCC Strategic Objectives(s)	Ensure Quality All of the Strategic Objectives apply	
Dolen i Ddeddf Llesiant Cenedlaethau'r Dyfodol – Nodau Llesiant / Link to Wellbeing of Future Generations Act – Wellbeing Goals *150623-guide-to-the-fg-act-en.pdf (futuregenerations.wales)*	A Resilient Wales If more than one applies please list below: A Healthier Wales A More Equal Wales	
Dolen i Hwyluswyr Ansawdd *(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) /* **Link to Enablers of Quality** *(Duty of Quality Statutory Guidance (gov.wales))*	Whole-systems Perspective If more than one applies please list below:	
Dolen i Feysydd Ansawdd *(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) /* **Link to Domains of Quality** *(Duty of Quality Statutory Guidance (gov.wales))*	Effective If more than one applies please list below: Person Centred Timely Safe	
Effaith Amgylcheddol/ Cynaliadwyedd (5R) / Environmental /Sustainability Impact (5Rs)	No - Not Applicable If more than one applies please list below:	
Impact Assessment		
Ansawdd	Yes: ☐	No: ☒

Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Ansawdd? / **Quality** *Have you undertaken a Quality Impact Assessment Screening?*	Outcome:	If no, please include rationale below: N/A
Cydraddoldeb *Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Gydraddoldeb? /* **Equality** *Have you undertaken an Equality Impact Assessment Screening?*	Yes: ☐	No: ☒
	Outcome:	If no, please include rationale below: N/A
Cyfreithiol / Legal	There are no specific legal implications related to the activity outlined in this report.	
Enw da / Reputational	There is no direct impact on the reputation of the Joint Committee as a result of the activity outlined in this report.	
Effaith Adnoddau *(Pobl /Ariannol) /* **Resource Impact** *(People / Financial)*	There is no direct impact on resources as a result of the activity outlined in this report.	

5. RECOMMENDATIONS

The members of the Joint Commissioning Committee are asked to:

- **Note** the report.
- **Note** the work carried out to improve the ORR, and
- **Approve** the NWJCC Organisational Risk Register as of 31 March 2026.