Agenda Item
4.1

Joint Commissioning Committee

NHS Wales Joint Commissioning Committee
Joint Committee Assurance Framework Report

Dyddiad y Cyfarfod / Date of Meeting	24/11/2026
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Pwrpas yr Adroddiad / Report Purpose	For Approval For Noting

Engagement (internal/external) undertaken to date (including receipt /consideration at Committee/Group)		
Committee / Group / Individuals	**Date**	**Outcome**
Senior Leadership Team	16/11/2026	Endorsed for Committee Approval on the 24 November 2026

1. SITUATION

The purpose of this report is to present the updated NHS Wales Joint Commissioning Committee (NWJCC) Joint Committee Assurance Framework (JAF) Report and provide the Joint Committee with assurance on the organisation's principal strategic risks, including the adequacy of current controls, sources of assurance, identified gaps and mitigating actions.

The JAF is the NWJCC's primary mechanism for strategic risk oversight. It enables the Joint Committee to assess whether significant risks to delivery of statutory responsibilities, strategic objectives and planning priorities are being identified, managed and scrutinised through the appropriate assurance committees.

The report also provides a summary of the NWJCC Organisational Risk Register (ORR) position as of 30 September 2026.

2. KEY MATTERS FOR CONSIDERATION

2.1 Strategic Risk Profile

The updated JAF, provided at **Appendix 1**, comprises six strategic risks. Each risk has a Lead Director, assurance route, current and target score, risk appetite and treatment position, together with controls, sources of assurance, gaps, mitigating actions and indicators of success.

No.	Strategic risk	Current	Target	Risk appetite	Treatment
1	Commissioning of Sustainable High Quality, Safe and Effective Services	**20**	**15**	Cautious	Treat
2	Service Sustainability, Fragility and Equity of Access	**20**	**15**	Open	Tolerate
3	Ambulance Commissioning Model	**15**	**6**	Open	Tolerate
4	Commissioning Boundaries and Accountability	**15**	**9**	Open	Treat and Transform
5	Data Quality, Analytical Capability and Capacity and Contract Management	**12**	**8**	Cautious moving to Open	Treat
6	Financial Sustainability and Affordability	**15**	**5**	Cautious	Treat

The overall strategic risk profile remains significant. The two highest-rated risks relate to the ability to commission sustainable, high-quality, safe and effective services, and to service sustainability, fragility and equity of access. Both are currently rated 20. The remaining risks continue to require active oversight because of whole-system dependencies, financial constraints, unclear commissioning boundaries and limitations in data quality and analytical capacity.

2.2 Significant activity and developments

Key developments during the reporting period include continued escalation and assurance activity across fragile and quality-sensitive services; commencement of independent clinical and commissioning reviews of the Welsh Gender Service; ongoing risks relating to cardiac surgery, specialist auditory implants, neuro-rehabilitation and JACIE accreditation; a temporary variation to paediatric neurology on-call arrangements at CVUHB; and a significant increase in the South Wales Trauma Desk risk following confirmation that no additional commissioned investment is available to sustain overnight provision.

The report also highlights continuing financial pressure. At Month 6, a forecast underspend of £2.4 million was reported towards the £16.2 million funding reduction request, with a further £5.1 million identified as available for release into the 2026/27 position for Month 7 reporting. This has resulted in a revised year end forecast at month 7 of £7.5m.

2.3 Assurance assessment and management response

The detailed risk entries identify established controls and assurance routes, but also material residual gaps. The table below summarises the principal assurance issue and the planned management response for each strategic risk.

Risk	Principal assurance gap	Management response
1	Inconsistent commissioning practice; limited alternative provision; reliance on provider action; fragmented quality intelligence.	Implement a single NWJCC management framework, standard provider assurance requirements, contingency review and integrated quality intelligence.
2	Limited investment and capacity; capital constraints; workforce shortages; unwarranted variation.	Use clinically led prioritisation, maintain a consolidated view of capital dependencies, strengthen workforce intelligence and focus pathway reviews.
3	Limited leverage over whole-system flow drivers outside NWJCC control.	Maintain system-wide visibility, strengthen planning and escalation with WAST and Health Boards, and use scenario modelling.

Risk	Principal assurance gap	Management response
4	Unclear commissioning responsibilities; recurring IPFR demand; emerging technologies; insufficient funding; and the developing National Clinical Services Plan for Wales.	Publish commissioned-service responsibilities, develop an accountability map, strengthen horizon scanning and IPFR adoption arrangements, contribute to the National Clinical Services Plan, and escalate unfunded requirements.
5	Data lag, provider-system dependence, analytical capacity gaps and restricted access to Health Board data.	Strengthen provider engagement, validation, recruitment and training, national data networks and formal information-sharing arrangements.
6	No-investment constraints, savings-delivery risk and in-year volatility.	Maintain close financial management, progress savings and sustainability plans, and use LTA reviews, strategic reviews and deep dives.

2.4 JAF maturity and data quality

The final JAF establishes a strengthened baseline across the six strategic risks, including revised risk-score rationales, clearer controls and sources of assurance, more specific gaps and mitigating actions, and measurable indicators of success. Risk-score trajectories will be populated over time, with target scores, actions and assurance gaps kept under review and routinely reported to the Joint Committee.

To assist members in identifying changes since the previous report, updates provided are highlighted in **red** text within the individual risk reports.

2.5 Organisational Risk Register

The relationship between the Organisational Risk Register (ORR) and Joint Assurance Framework (JAF) is important. The ORR provides detailed oversight of operational risks that cannot be effectively managed through local risk management arrangements, while the JAF focuses on the broader strategic themes and systemic risks that may impact achievement of NWJCC objectives. Together, they provide the Joint Committee with a comprehensive view of strategic and operational risk exposure and enable significant operational risks and emerging themes to inform strategic oversight and, where appropriate, escalation to the JAF.

The ORR is subject to detailed scrutiny through the Quality, Safety and Outcomes Sub-Committee (QSOC) or Planning, Performance and Finance Sub-Committee (PPF), providing assurance that appropriate controls and mitigating actions are in place.

As of 30 September 2026, the ORR contained 13 high and extreme risks, which were reviewed by the relevant Sub-Committees during October 2026.

During the reporting period, the ORR was updated to reflect the Welsh Gender Service escalation and associated risks to NWJCC, together with two further escalated risks relating to Paediatric Neurology and Cardiac Surgery at Cardiff and Vale University Health Board (CVUHB).

Members will recall that Neurosciences risks were reviewed and consolidated into a smaller number of thematic risks to better reflect their cumulative organisational impact. These consolidated risks are now included within the ORR and aligned to the relevant strategic risks within the JAF, strengthening visibility of their wider implications.

The underlying specialty-specific risks remain within the Directorate Risk Register, maintaining operational oversight by commissioning teams. This tiered approach enables significant themes, emerging trends and escalating concerns to be reflected within the ORR, while also providing greater visibility of lower-scoring risks which, collectively, may present a material risk to service sustainability, quality, performance and patient outcomes.
Thematic consolidation will continue to be applied, where appropriate, across other commissioning portfolios to strengthen consistency in risk identification, escalation and management, and alignment between Directorate, organisational and strategic risk oversight.

Full details of the ORR are provided at **Appendix 2**. Updates made during August and September 2026 are highlighted in red within individual risk entries. Risks where movement has occurred during the reporting period, including changes to risk score, are identified in white font within the overarching NWJCC Risk Dashboard below.

	CONSEQUENCE (C)					
LIKELIHOOD (L)	C x L	5 Catastrophic	4 Major	3 Moderate	2 Minor	1 Neg'ble
	5 Almost Certain		**94** High-cost medicines	**84** Financial Break-even 2025/26		
	4 Highly Likely	**88** Commissioning of 24/7 South Wales Thrombectomy Service **96** Delivery and Sustainability of Commissioned Capacity for the Emergency Ambulance Service (EMS)	**61** Obesity surgery at Salford Royal Hospital waiting times **97** Unsustainable Neurosciences Capacity and Workforce Resilience (Replaces Risk 68) **98** Neurosciences service pressures due to NWJCC investment decisions (Replaces Risks 82, 87 & 95) **89** Paediatric Neurology Service provision for North Wales **99** Paediatric Neurology Service provision for South Wales - New Risk added Sept 2026 **100** Commissioning of the Welsh Gender Service - New Risk Added Sept 2026 **101** Quality, Safety and Patient Outcomes for the Welsh Gender Service - New Risk Added Sept 2026			
	3 Likely	**80** JACIE accreditation - south Wales CAR T service **81** JACIE accreditation - south Wales BMT service		**65** Renal dialysis capacity across Wales - De-escalated from 16 to 12 Sept 26		
	2 Un-likely					
	1 High Un-likely					

3. 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: Efficient Equitable Safe	
Effaith Amgylcheddol/ Cynaliadwyedd (5R) / Environmental /Sustainability Impact (5Rs)	No - Not Applicable	
	If more than one applies, please list below:	
Impact Assessment		
Ansawdd *Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Ansawdd? /* **Quality**	Yes: ☐	No: ☒
	Outcome:	If no, please include rationale below: Not required for the JAF or ORR. Individual risks

Have you undertaken a Quality Impact Assessment Screening?		may have been subject to a QIA.
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: Not required for the JAF or ORR. Individual risks may have been subject to an Impact Assessment.
Cyfreithiol / Legal	Yes (Include further detail below) See detail captured for each risk	
Enw da / Reputational	Yes (Include further detail below) See detail captured for each risk	
Effaith Adnoddau *(Pobl /Ariannol) /* **Resource Impact** *(People / Financial)*	Yes (Include further detail below)	
	See detail captured for each risk	

4. RECOMMENDATIONS

The members of the Joint Committee are asked to:

- **Receive and Approve** the JAF report.
- **Review** the strategic risk content and the adequacy of controls and assurances presented.
- **Consider** any identified assurance gaps and planned mitigating actions.
- **Support** the continued development and embedding of the JAF as the NWJCC's primary mechanism for strategic risk oversight and assurance.
- **Note** the ORR update as of 30th September 2026.