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

Joint Commissioning Committee

Joint Committee Meeting: Responses to Themed Questions

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.

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/Group)		
Committee / Group / Individuals	**Date**	**Outcome**
Not Applicable		Choose an item.

This note summarises the responses provided at the Joint Committee meeting held in public on 22 September 2026 to the principal themes arising from questions submitted in advance. It should be read alongside the published meeting papers and the full recording of the discussion.

More than 160 questions were received by the published deadline. The NHS Wales Joint Commissioning Committee (NWJCC) reviewed all submissions and consolidated overlapping questions into ten themes so that the main issues could be addressed clearly, consistently and without publishing information that could identify individuals.

The responses below reflect the information presented and discussed at the meeting. They do not disclose confidential information or individual patient details, and the position may be updated as the independent clinical review and wider service review progress.

1. **Evidence and rationale for the pause**
   The Committee heard that the pause followed a combination of information sources identified through routine quality, safety and assurance processes. This included referral data showing Welsh referral rates for gender-affirming surgery were around three to five times higher than those recorded by English gender services; concerns raised by clinicians about the appropriateness of some referrals; complaints and concerns received and a higher recorded rate of patients not progressing after entering the surgical pathway. The Committee emphasised that these indicators identified a potential safety and quality concern requiring investigation; they did not predetermine the outcome of the review.

2. **Decision-making and accountability**

   The decision was taken through the NWJCC's established escalation and clinical governance arrangements, reflecting its responsibility to commission safe, high-quality services. The Welsh Gender Service was placed at escalation level 3 and the pause was introduced on clinical advice. The Quality, Safety and Outcomes Sub-Committee scrutinised the evidence and advised as part of the decision-making process; its papers and minutes are subject to the usual public publication arrangements. Ongoing oversight is being provided through senior leadership, a dedicated programme team and further scrutiny by the Quality, Safety and Outcomes Sub-Committee.

3. **Proportionality and alternative options**

   The Committee was advised that alternative scopes were considered, including limiting action to people awaiting assessment, excluding those with scheduled surgery, or extending escalation across the whole Welsh Gender Service. Clinical advice was that the proportionate response was to pause new surgical referrals, surgical assessments and relevant scheduled surgeries while urgent individual reviews were undertaken. Other Welsh Gender Service provision continues, as do clinically necessary follow-up care, treatment of complications and procedures forming part of an already commenced staged surgical pathway.

4. **Data quality and comparison with England**

   The referral comparison was one indicator within a wider body of evidence, not the sole basis for the decision. The data came from the NHS England-commissioned Gender Dysphoria National Referral Support Service, which validates and routes surgical referrals. The independent review will test whether the observed variation reflects appropriate practice or a

substantive quality or safety concern. The wider Welsh Gender Service review will also include fact-finding, data collection, validation and analysis across demand, waiting times, workforce, pathways and service-user outcomes.

5. **Clinical advice and independent review**

   Three experienced clinicians with relevant expertise in gender care have been appointed to the independent clinical review panel. The review will include examination of the patient's records and a consultation with the patient, followed by collective consideration by the three reviewers to support consistency and objectivity. The terms of reference for the independent clinical review are available here. Updates linked to the Welsh Gender Service and the independent review can also be found at the following links: Cardiff and Vale University Health Board FAQs and NWJCC updates).

6. **Impact on patients and route back to treatment**

   Priority is being given to patients whose surgery was paused between the end of August and December 2026, with the aim of reviewing those patients within the calendar year. Patients do not need to wait for all reviews to finish; where surgery is confirmed as appropriate, the NWJCC will work with surgical providers to reinstate it as soon as possible. Providers have indicated that affected Welsh patients will be prioritised rather than returned to the back of the queue. Patients already seen by surgeons but without a 2026 date, followed by those awaiting surgical assessment, will then be considered. Cardiff and Vale University Health Board has confirmed that support is available through the Welsh Gender Service, including psychological support and routes for individual queries.

7. **Equality, dignity and patient harm**

   The Committee acknowledged the distress, uncertainty and potential impact on wellbeing caused by the pause. The published Equality and Welsh Language Impact Assessment and Quality Impact Assessment are live documents and will continue to guide communication, support and mitigation.

   The Welsh Gender Service remains available to provide information, reassurance and support during the pause and independent clinical review. Further support and advocacy information is available on the Welsh Gender Service webpages.

8. **Patient and stakeholder involvement**

NWJCC is working closely with Cardiff and Vale University Health Board, the Welsh Gender Service, surgical providers and Llais. The wider review of the Welsh Gender Service will include direct service-user engagement, service-level feedback and input from commissioners, service leaders, clinical and operational staff. The individual clinical review will also involve consultation with each affected patient. Engagement will continue as the review proceeds and its findings emerge.

9. **Transparency, communication and publication**

The meeting was recorded and was attended online by a substantial public audience. The NWJCC confirmed that the relevant Quality, Safety and Outcomes Committee papers and minutes would be published through established processes and that publication should be expedited where possible. Cardiff and Vale University Health Board advised that information had been issued to affected patients, that the Welsh Gender Service remained available for queries and support, and that public information would be updated as arrangements were confirmed. Official links are provided at the end of this note.

10. **Political or external influence and consistency of treatment**

The Committee confirmed that the pause was a clinical governance decision based on safety and quality concerns, not a judgement about gender-affirming care. The NWJCC reaffirmed its commitment to commissioning gender-affirming surgery and described level 3 escalation as part of its established approach to commissioned services.

Further information

The full Joint Committee meeting of 22 September 2026 can be viewed online, and the agenda, questions and meeting papers—including the Chief Commissioner's report, Quality Impact Assessment and Equality and Welsh Language Impact Assessment—can be accessed on the NWJCC Committee Meeting Papers page.