



Agenda Item
2.5

Joint Commissioning Committee		
Director of Commissioning for Ambulance Services and 111 Report		
Dyddiad y Cyfarfod / Date of Meeting	27/01/2026	
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	Not Applicable	
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Noddwr yr Adroddiad / Report Sponsor	Huw George, Interim Chief Commissioner, NWJCC	
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
NWJCC Senior Leadership Team	21/01/2026	Noted
Acronyms / Glossary of Terms		
ACCTS	Adult Critical Care Transfer Services	
ADEs	Accelerated Design Events	
CHANTS	Cymru Inter-Hospital Acute Neonatal Transport Service	
EMRTS	Emergency Medical Retrieval and Transfer Service Review	
JC	Joint Commissioning Committee	
NEPTS	Non-Emergency Patient Transport Services	
NWJCC	NHS Wales Joint Commissioning Committee	
STEMI	ST-elevation myocardial infraction	
WAST	Welsh Ambulance Service	

1. EXECUTIVE SUMMARY

The purpose of this report is to update Members of the JC on the specific areas related to the work of the Director and the team on issues across the commissioning portfolio.

Specifically, this report will update Members on the specific matters for consideration (including progress against strategic programmes from the NWJCC Foundation Plan, high scoring and emerging risks and emerging and future developments) for each commissioned service.

Emergency Ambulance Services have implemented Phase 2 of the new performance framework, with early indications of improved handover performance, and ongoing work on the Manchester Arena Inquiry assessment and the Strategic Productivity Review.

NEPTS continues to face capacity pressures, driven by increased complexity, rising provider costs, and longer journey requirements. Targeted system-wide actions and additional funded capacity are supporting discharge resilience, with broader roster and efficiency work progressing toward implementation in 2026/27.

For NHS 111 Wales, work is progressing on the independent re-roster review alongside significant enhancements to the digital front end, including virtual agent deployment, wider digital access channels, and strengthened inclusion features. Platform challenges with the 111 website remain an area for planned improvement through the IMTP process.

Within EMRTS, work is ongoing to address overnight Major Trauma Desk pressures, and planned aircraft servicing in early 2026 may have limited operational effects, with mitigation arrangements in place.

CHANTS is a key area of focus, with the need to secure sustainable Clinical Lead hosting arrangements and to reassess the interim overnight model, which has extended significantly beyond its intended duration. Both issues are central to the wider neonatal commissioning reset underway.

Within the Major Trauma Network, ongoing delays in outcome data via the NMTR (National Major Trauma Registry) continue to affect reporting. A phased approach has been agreed to progress data quality and availability, alongside work to renew the Major Trauma Strategy and undertake all-Wales benchmarking of trauma provision.

For 111 Press 2, commissioning responsibilities have now been clarified. The service is not a national commissioned function, and responsibility sits with individual Health Boards. It is therefore recommended that any implied commissioning role for the Ambulance Services and 111 Commissioning Team ceases.

Work on Mental Health Transport continues with partners to strengthen pathways and improve outcomes for section 136 patients, supported by improvements in ambulance response and enhanced multiagency processes.

2. SPECIFIC MATTERS FOR CONSIDERATION

2.1 Emergency Ambulance Services

2.1.1 New Emergency Ambulance Performance Framework

Phase 2 of the ambulance performance framework went live on **2 December 2025**, introducing enhanced clinical triage, modernised call categorisation, and outcome based clinical indicators.

The month one implementation report is due in January 2026 and will be reviewed by the commissioning team as part of the ongoing assurance of the framework delivery.

2.1.2 Ambulance Patient Handover - National Improvement Approach

The National Ambulance Handover Taskforce continues to drive the all Wales approach to improving hospital handover performance.

Since the renewed emphasis on Handover 45, measurable improvement has continued across most Health Boards. December 2025 saw a recovery in many areas following deterioration in November, reflecting the positive impact of targeted intervention.

Amber 95th percentile response times continue to show long-term improvement when viewed against 2024–25 data. With Phase 2 now fully implemented, monitoring has transitioned to Orange and Yellow categories from January 2026 onwards.

2.1.3 Manchester Arena Inquiry Assessment (MAI)

The Ambulance Services and 111 Commissioning Team has commissioned an independent external review focussing specifically on whether the recommendations made by WAST are proportionate and appropriate in the context of the MAI. This process was protracted due to the procurement process however is due to be concluded in January 2026. Checkpoint discussions have

taken place between the Ambulance Services and 111 Commissioning Team and the reviewer.

The Ambulance Services and 111 Commissioning Team is in the process of preparing the recommendations to be considered by the Joint Committee with the recommendations being presented to the Joint Committee Strategy Session in February 2026 for consideration.

2.1.4 Strategic Productivity Review

The strategic productivity review of WAST delivered services is progressing to plan.

By the end of January 2026:

- Baseline data gathering of publicly available information has been completed.
- A multi-layer dashboard model is being refined.
- Benchmarking opportunities are being confirmed.

Completion remains on track for the end of the current financial year.

2.2 Non-Emergency Patient Transport Services (NEPTS)

2.2.1 Capacity Issues

The NEPTS service across Wales is under significant challenge due to a number of key drivers including but not limited to:

- Health Board reconfiguration of services resulting in increased travel distances for patients
- Significant increases in NEPTS private provider costs, commissioned via WAST
- Increase in complex patient mobilities and patient journey lengths (both discharge and transfer journeys).

As a result, the NEPTS service is having to frequently cancel patient journeys for eligible patients to prioritise the use of resources available.

The NWJCC's Foundation Plan for 2025-26 was developed in alignment with the NEPTS Future Vision (2030) with a focus on creating capacity through productivity and efficiency improvements.

In response to challenges around discharge capacity, the Ambulance Services and NHS 111 Commissioning Team established a working group with key stakeholders in senior operational roles within Health Boards and WAST under the NEPTS Future Vision (2030). The group's remit is to drive strategic integration and improve the efficiency of discharge vehicle processes. Eight high-impact

actions have been identified for testing, including advanced transport booking, patient readiness for discharge, optimisation of electronic booking systems, and rollout of the Ambulance Care Live Discharge and Transfer Dashboard. This work was used to support the resilience of urgent and emergency care system during the winter sprint period, linking in with the Six Goals for UEC programme to ensure alignment and maximise impact across the system. The working group will continue to oversee delivery of these actions to maximise impact.

Additional NEPTS capacity has been commissioned following an allocation of funding from the six goals programme, providing extra resilience within WAST's discharge and transfer function to support timely patient discharge and improve system flow.

In addition to the above, WAST are also undertaking a complex review of NEPTS rosters, aimed at improving transport capacity within existing resources through enhanced operational efficiency. This work is progressing toward implementation in Q1 2026/27.

2.3 NHS 111 Wales

2.3.1 NHS 111 Wales Re-Roster Review

The findings of the Phase 1 independent 111 rostering practices review was presented to the Ambulance Services and 111 Commissioning Group on 12th January 2025. It was agreed to continue with the re-roster based on the current resource envelope available, continue discussions between WAST and JCC around commissioned performance metrics, and to continue to strengthen the 111 Digital Front end and review its inter-relationship with call and clinical demand.

2.3.2 NHS 111 Wales Digital Front End Improvements

Following receipt of non-recurrent Welsh Government funding, the Ambulance Services and 111 Commissioning Team has been working closely with WAST to improve the digital experience for patient accessing the NHS 111 Wales website.

- The NHS 111 Wales virtual agent (Albot) has been developed and functional since August 2025 with approaching 6000 contacts per month (approx. 7% of 111 call volumes) with a 'soft launch' and no advertising or promotion.
- WhatsApp integration is being developed to replicate NHS 111 Wales functionality through the WhatsApp broadening accessibility and engagement across a widely used messaging platform.
- Enhancing digital inclusion by introducing multilingual support and a text-only channel that allows users to connect with 111 call handlers without relying on voice calls.

There remains an ongoing challenge with the functionality of the 111 website and its development to support the aim of 'digital first' services. The option for resolution of this will be considered through the IMTP development.

2.4 Emergency Medical Retrieval and Transfer Service (EMRTS)

2.4.1 Major Trauma Desk Overnight Cover

EMRTS has highlighted issues regarding the service's continued ability to provide night-time cover for the Major Trauma Desk. In response, a series of discussions have taken place involving EMRTS, the Major Trauma Network, the Major Trauma Centre, WAST, and the NWJCC to assess the potential impact on service resilience and patient care. The organisations are jointly exploring feasible options to mitigate identified risks and to ensure safe and sustainable coverage going forward.

2.4.2 Operational Impact of Scheduled Aircraft Servicing

Ongoing aircraft servicing and upgrade activity may result in some operational impact during January and February 2026, with planned crew and aircraft movements required to maintain continuity of service. A mitigation plan is in place, including the option to utilise a road-based response as appropriate.

2.5 Adult Critical Care Transfer Service (ACCTS)

2.5.1 Hosting Arrangements

The Ambulance Services and 111 Commissioning team are progressing with reviewing the current hosting arrangements for the ACCTS service which is currently hosted by Swansea Bay University Health Board and is aligned with the Emergency Medical Retrieval and Transportation Service (EMRTS).

The review has commenced and will consider the options available to enable the service to sustainably develop, ensure that the clinical needs are met and governance is robust to support the service going forward.

2.6 Cymru Inter-Hospital Acute Neonatal Transport Service (CHANTS)

2.6.1 Clinical Lead Hosting Arrangements

The Neonatal Transport Service Clinical Leads are currently hosted by NHS Performance and Improvement (P&I). Following changes to the remit of NHS P&I the requirement for a different arrangement for the clinical lead role has been identified. The NWJCC has been asked to consider how these arrangements can be delivered moving forward.

Discussions continue between NWJCC and NHS P&I regarding the future options for hosting the clinical lead roles, including appropriate governance, and funding arrangements. The clinical lead role has been extended until the end of March 2026 within NHS P&I whilst a longer-term solution is agreed and established.

2.6.2 Interim Overnight Model

Neonatal transfer services are core component of the provision of high quality and responsive neonatal provision. Whilst broader work is currently being undertaken on the provision of neonatal services across Wales, there is a need to consider and review the delivery of the transfer services in South Wales. The interim overnight model has been in place significantly past the original anticipated timeframe and is not a sustainable solution moving forward.

Members will note that the Director of Ambulance Services & 111 and the Director of Nursing and Quality are undertaking a reset review of neonatal commissioning, both issues highlighted here will form part of that work.

2.7 South Wales Major Trauma Network (SWTN)

2.7.1 Access to Benchmarking Data

In December 2022, the University of Manchester agreed to transfer ownership of the Trauma Audit Research Network (TARN) to NHS England under the Outcomes and Registries Programme. Following a cyber-attack in June 2023, the TARN database was taken offline, accelerating the transition. From 1 April 2024, TARN became the NMTR. The combination of the transition, development of the registry, has resulted in significant backlogs, for Wales there has been an additional delay due to information governance challenges. NHS Wales initiated its Information Governance process in October 2023, and the SWTN went live on the NMTR platform on 28 October 2024.

On 13 November 2025 the Ambulance Services and 111 Commissioning Team held a meeting with senior colleagues from South Wales Trauma Network (SWTN) focused on the challenges experienced and risk with the delays in receiving outcome data. This meeting was following escalating meetings with all the networks across England, Wales, Northern Ireland and Republic of Ireland with NHS England (NMTR).

A considerable review of the challenges has been undertaken, and a series of recommendations have been put forward. The SWTN have reviewed the recommendations, considered other possible options, have reached out to Health Board leads and have concluded they support the recommendations as the most viable option.

They have proposed an agreement whilst also seeking strengthened assurances around the governance and processes surrounding the data and progress delivery through the service level agreements.

The Ambulance Services and 111 Commissioning Team support this approach as the most viable option. A number of immediate improvements have been put in place, the proposal is to pause the backlog, focus on high level recent data input from the most recent two quarters to enable delivery. A second phase will then seek to address the backlog at a later date.

2.7.2 Major Trauma Strategy

The Major Trauma Network Strategy is scheduled for renewal, following the conclusion of its initial five-year implementation period.

To support the continued development of the Operational Delivery Network (ODN), work to shape the strategy for the next five years commenced in Quarter 3 of 2025/26.

2.7.3 Benchmarking North and South Wales Major Trauma Network Provision

The Ambulance Services and 111 Commissioning Team is collaborating with the Major Trauma Network Operational Delivery Network (ODN) and the Clinical Lead for the Strategic Network for Critical Care and Trauma to undertake a comprehensive benchmarking exercise. This initiative aims to assess trauma service provision across both North and South Wales, with a focus on identifying areas of equity and inequity in access, outcomes, and resource distribution. The findings will inform future strategic planning and ensure that trauma care is delivered consistently and fairly across the Welsh population.

A benchmarking questionnaire was issued to all sites in North Wales in November 2025 to assess current capabilities and alignment with major trauma standards. To date, information has been received from one site, and follow-up requests have been sent to secure the outstanding responses. It is anticipated that this work will conclude by the end of Q4 and will inform the broader programme of work supporting the development of the Major Trauma Network.

2.8 111 Press 2

2.8.1 Hosting Arrangement

In April 2025 111 press 2 moved to the Ambulance Services and 111 Commissioning Team's portfolio as the Team commission the NHS 111 service from the Welsh Ambulance Service, however the only 111 press 2 element

provided by WAST is use of the telephony system to re-direct calls to health boards.

The Ambulance Services and 111 Commissioning Team have reviewed the commissioning arrangements and identified a lack of clarity in terms of the role of the team and of the NWJCC.

The NHS 111 press 2 service is not commissioned nationally as a service; health boards are funded directly by Welsh Government to provide the service, against a national specification published in June 2023 by the NCCU. Local arrangements are in place for the running of the service and local pathways for clinicians to follow. It is clear that services differ dependent on those local pathways for service users.

Given the above it, it is clear there is no current commissioning role for the Ambulance Services and 111 Commissioning Team in relation to the press #2 service, it is therefore recommended that any implied commissioning responsibility ceases, with individual health boards maintaining responsibility for the service.

2.9 Mental Health Transport

2.9.1 Right Care Right Person (RCRP) and Section 136

Collaborative work has escalated with WAST, NHS Performance and Improvement and Police to progress the implementation of Phases 3 and 4 of RCRP, improving the response for mental health patients in crisis and recognising the needs of those that are detained under the Mental Health Act, particularly s136.

There have been concerns raised by Police on the response times of the ambulance service. A recent meeting recognised the significant reduction in handover delays and new ambulance response model has the potential to improve the response provided to s136 patients.

There was also collective agreement for a renewed focus on processes that will enable the better recording of activity, reduction of s136, improving outcomes for patients, but also more effective use of resources for police and the ambulance service through earlier contact and assessment of appropriate response. The work on processes and systems to support continues.

3. KEY RISKS / MATTERS FOR ESCALATION

3.1 New Emergency Ambulance Performance Framework

Work required with Welsh Government colleagues to ensure the successful implementation of the Phase 2 of the evolved clinical response model by 31 December 2025.

3.2 Ambulance Patient Handover - National Improvement Approach

Utilisation of commissioned ambulance capacity remains a high risk for the NWJCC. This has been closely monitored and due to ongoing improvements in handover delays across Wales the risk score was de-escalated from 25 to 20 due to a reduction in the likelihood of recurrence. This remains under continual review.

3.3 Manchester Arena Inquiry Assessment

There will likely be an expectation from the Inquiry for services to report back on their progress with the recommendation, this is likely to attract both media and political attention.

3.4 NEPTS Capacity Issues

Increased costs and service demand are impacting on WAST's ability to provide sufficient capacity to support planned care, enhanced care and discharge and transfer journeys.

3.5 ACCTS Increased Demand

Work will continue with the service and HBs to find solutions for enhanced and critical care transfers, efforts will focus on expanding ACCTS' capacity to meet HB requirements in 2025-26 to support the wider system.

3.6 Neonatal Transfer Services

There are a number of sustainability risks in relation to neonatal transfer provision that require resolution, including hosting of clinical leads and overnight provision.

3.7 Right Care, Right Person

Resolution of this issue previously has proven challenging, a further lack of progress is likely to impact relationships between partner organisation and escalation to Welsh Government.

4. ASSESSMENT

Objectives / Strategy	
Dolen i Amcan (au) Strategol CBC / Link to JCC Strategic Objectives(s)	Facilitate Integration
	All JCC strategic objectives are applicable.
	A Healthier Wales

<p>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)</p>	<p>If more than one applies please list below: A more equal Wales.</p>
<p>Dolen i Hwyluswyr Ansawdd <i>(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) /</i> Link to Enablers of Quality <i>(Duty of Quality Statutory Guidance (gov.wales))</i></p>	<p>Leadership</p> <p>If more than one applies please list below: All enablers of quality are applicable.</p>
<p>Dolen i Feysydd Ansawdd <i>(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) /</i> Link to Domains of Quality <i>(Duty of Quality Statutory Guidance (gov.wales))</i></p>	<p>Safe</p> <p>If more than one applies please list below: All domains of quality are applicable.</p>
<p>Effaith Amgylcheddol/ Cynaliadwyedd (5R) / Environmental /Sustainability Impact (5Rs)</p>	<p>No - Not Applicable</p> <p>If more than one applies please list below:</p>

Impact Assessment		
<p>Ansawdd <i>Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Ansawdd? /</i> Quality <i>Have you undertaken a Quality Impact Assessment Screening?</i></p>	<p>Yes: <input type="checkbox"/></p>	<p>No: <input checked="" type="checkbox"/></p>
<p>Cydraddoldeb <i>Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Gydraddoldeb? /</i> Equality</p>	<p>Yes: <input type="checkbox"/></p>	<p>No: <input checked="" type="checkbox"/></p>
<p>Quality <i>Have you undertaken a Quality Impact Assessment Screening?</i></p>	<p>Outcome:</p>	<p>If no, please include rationale below: This is an update from the Director of Commissioning to the Committee.</p>
<p>Equality</p>	<p>Outcome:</p>	<p>If no, please include rationale below:</p>

<i>Have you undertaken an Equality Impact Assessment Screening?</i>		This is an update from the Director of Commissioning to the Committee.
Cyfreithiol / Legal	Yes (Include further detail below)	
	This report aims to update members, but all decisions are subject to legal recourse e.g. the Judicial Review information.	
Enw da / Reputational	Yes (Include further detail below)	
	Ambulance services are regularly in the media and subject to scrutiny and discussion.	
Effaith Adnoddau <i>(Pobl / Ariannol) /</i> Resource Impact <i>(People / Financial)</i>	Yes (Include further detail below)	
	The report identifies areas where resource impacts are likely to be required and therefore further work is required to present at future meetings.	

5. RECOMMENDATIONS

Members of the Joint Commissioning Committee are asked to:

- **Note** the report.

6. NEXT STEPS

Ongoing work for each item will progress as described in this report, the JC will be kept updated.