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| Agenda Item |
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| Joint Commissioning Committee |
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| Performance Report |
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| Dyddiad y Cyfarfod / Date of Meeting | 18/03/2025 |
| Statws Cyhoeddi / Publication Status | Open/ Public |
| | Not Applicable |
| Awdur yr Adroddiad / Report Authors | Daniel Lewis – Business Information Manager |
| Cyflwynydd yr Adroddiad / Report Presenter | Stacey Taylor, Interim Chief Commissioner |
| Noddwr yr Adroddiad / Report Sponsor | Stacey Taylor, Interim Chief Commissioner |

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| 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 |
| N/A | Click or tap to enter a date. | Choose an item. |

| Acronyms / Glossary of Terms | |
|-------------------------------------|---|
| JCC | NHS Wales Joint Commissioning Committee |
| CVUHB | Cardiff & Vale University Health Board |
| CTM | Cwm Taf Morgannwg University Health Board |
| SBU | Swansea Bay University Health Board |
| PET | Positron Emission Tomography |
| ScHS | Specialist Community Health Services |
| ALAS | Artificial Limb and Appliance Service |

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| TAVI | Transcatheter Aortic Valve Implantation |
| BCU | Betsi Cadwaladr University Health Board |
| WFT | Waiting for Treatment |
| ABUHB | Aneurin Bevan University Health Board |
| QPS | Quality and Patient Safety |
| DHCW | Digital Health and Care Wales |
| RTT | Referral to Treatment |
| CAMHS | Child and Adolescent Mental Health Services |
| OP | Outpatient |
| LHB | Local Health Board |
| PETIC | Positron Emission Tomography Imaging Centre |
| IVF | In Vitro Fertility |
| QAIS | Quality Assurance Improvement Service |
| OOA | Out of Area |

1. SITUATION/BACKGROUND

The Month 9 Performance Report identifies key trends and challenges across various NHS Wales services, with six services currently under escalation. These include neonatal and paediatric intensive care in Cardiff & Vale University Health Board (C&VUHB), adult burns and plastic surgery in Swansea Bay, and cardiac surgery at Cardiff & Vale. The escalation objectives for these services continue to be monitored in collaboration with health boards.

2. KEY INFORMATION FOR MARCH 2025

2.1 Specialised Services

2.1.1 Cardiac Surgery

Despite fluctuations, waiting times remain a concern, particularly in Cardiff & Vale, where the demand continues to exceed capacity. Efforts are underway to optimise service delivery through revised commissioning strategies.

2.1.2 Plastic Surgery

The service remains under Level 2 escalation, with 706 patients waiting over a year for treatment at Swansea Bay UHB, including 89 exceeding two years. Additional clinics and backlog reduction initiatives are in place to mitigate delays.

2.1.3 Bariatric Services

Swansea Bay UHB has significantly improved waiting times and contract compliance in 2024/25, yet pressures remain on post-surgical follow-up for patients returning from private overseas treatment.

2.1.4 Paediatric Surgery

Following de-escalation in June 2024, services continue to meet waiting time targets, with no breaches reported.

2.1.5 Neurosurgery

While C&VUHB has maintained a zero-patient backlog over 52 weeks, there are concerns about future demand pressures. The Walton Centre reports six patients waiting over 52 weeks.

2.2 Ambulance and NHS 111 Wales

2.2.1 999 Emergency Calls

In December 2024, 43,480 emergency calls were received, with 6,001 classified as RED calls (immediately life-threatening). However, the national target for an 8-minute response time (65%) was not met.

2.2.2 Handover Delays

Only 13.3% of hospital handovers were completed within 15 minutes, leading to 27,129 lost hours due to delays at emergency departments.

2.2.3 NHS 111 Wales Usage

The NHS 111 service handled over 557,000 visits, with dental issues being the most common reason for calls.

2.3 Mental Health & Learning Disabilities

2.3.1 Medium Secure Services

The lack of seclusion facilities in key units affects the ability to admit and repatriate patients with high acuity needs. Performance monitoring is ongoing to address capacity concerns.

2.3.2 Child & Adolescent Mental Health Services (CAMHS)

While out-of-area placements have decreased, workforce shortages in North Wales continue to pose challenges.

2.3.3 Mental Health Transport (Taith Dda Project)

Despite financial constraints due to provider cost increases, service levels have been maintained through strategic adjustments with health boards.

2.3.4 NHS 111 Press 2 for Mental Health

Over 126,000 calls have been managed, with high patient satisfaction, though some delays persist during peak periods. A one-year review by the Royal College of Psychiatry is in progress.

2.4 Quality & Patient Safety Concerns

25 serious incidents were reported within mental health services, with five related to a single patient. Ongoing monitoring ensures that appropriate safety measures are in place.

2.4.1 Escalation of Neonatal & Paediatric Intensive Care

These services remain under Level 3 escalation due to staffing shortages, capacity limitations, and quality concerns.

2.4.2 PET Scanning Delays

Limited supply of radioisotope PSMA for prostate cancer scans at Cardiff PETIC has led to six-week wait times, significantly exceeding the 10-day target. Alternative suppliers are being explored.

3. ASSESSMENT

| Objectives / Strategy | |
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| Dolen i Amcan (au) Strategol CBC Link to JCC Strategic Objectives(s) | Choose an item. |
| 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 Healthier Wales |
| | If more than one applies please list below: |
| Dolen i Hwyluswyr Ansawdd <i>(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) / Link to Enablers of Quality</i> (Duty of Quality Statutory Guidance (gov.wales)) | Data to Knowledge |
| | If more than one applies please list below: |
| Dolen i Feysydd Ansawdd <i>(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) / Link to Domains of Quality</i> (Duty of Quality Statutory Guidance (gov.wales)) | Choose an item. |
| | If more than one applies please list below: |
| Effaith Amgylcheddol/ Cynaliadwyedd (5R) / Environmental /Sustainability Impact (5Rs) | Choose an item. |
| | If more than one applies please list below: |

| Impact Assessment | | |
|--|---|--|
| 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> | Yes: <input type="checkbox"/> | No: <input checked="" type="checkbox"/> |
| | Outcome: | If no, please include rationale below: Not Required |
| Cydraddoldeb <i>Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Gydraddoldeb? /</i> Equality <i>Have you undertaken an Equality Impact Assessment Screening?</i> | Yes: <input type="checkbox"/> | No: <input checked="" type="checkbox"/> |
| | Outcome: | If no, please include rationale below: Not Required |
| 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 <i>(Pobl / Ariannol) /</i> Resource Impact <i>(People / Financial)</i> | There is no direct impact on resources as a result of the activity outlined in this report. | |
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4. RECOMMENDATIONS

The JC are asked to:

- **Discuss** the performance information for services commissioned by the NHS Wales Joint Commissioning Committee contained within the appendix; and
- **Note** the on-going work to align indicators and metrics into an integrated performance report for the JCC.