

Agenda Item

3.2

Joint Commissioning Committee

Executive Summary of the Combined NWJCC Performance Report

Dyddiad y Cyfarfod / Date of Meeting	26/05/2026
Statws Cyhoeddi / Publication Status	Open/ Public
	Not Applicable
Awdur yr Adroddiad / Report Author	Alex Thomson (Head of Information and Performance) Stacey Taylor, Director of Finance and Value
Cyflwynydd yr Adroddiad / Report Presenter	Stacey Taylor, Director of Finance and Value
Noddwr yr Adroddiad / Report Sponsor	Stacey Taylor, Director of Finance and Value

Pwrpas yr Adroddiad / Report Purpose	For Noting Choose an item.
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Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/Group)		
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Committee / Group / Individuals	Date	Outcome
N/A	Click or tap to enter a date.	Choose an item.

1. SITUATION/BACKGROUND

The Performance Report is regular agenda item which is detailed in Appendix 1. It aims to provide an executive summary of the current operational performance, an update on the foundation plan and a report on the NHS Wales Joint Commissioning Committee (NWJCC) workforce.

1. SPECIFIC MATTERS FOR CONSIDERATION

Although a highlight summary is provided in this paper, more details can be found in Appendix 1 and a Power BI dashboard.

1.1 Improvement

For Planned Care Specialties, the NWJCC continues to see no waiters over 104 weeks in contrast to the last financial year. There are considerably less long waiters for plastic surgery, a reduction from 45 in 24/25 to 0 in 25/26.

For dialysis patients in BCUHB, 30% are now on home dialysis which is the aspirational target, 10% over the national GIRFT target (20%). They are the only centre to achieve that so far.

The neonatal intensive care service care service in CVUHB was de-escalated to Level 1 in December due to significant progress made with regard to the neonatal quality of care and governance.

For Positron Emission Tomography (PET) Scans, although still awaiting M12 data, in M11 following resolution of the disruption to services earlier in the year, PETIC (Cardiff) was able to meet the target - 90% of Cancer Pathway scans being reported within 10 working days of referral.

1.2 Services in Escalation

The number of services in escalation are described below in Table 1.

Table 1. The number of services in escalation.

Provider	Service	Level of Escalation	Escalation/ De-Escalation Date
MWL	Plastic Surgery Outreach	WGov Escalation	
SBUHB	Plastic Surgery	Level 2	Escalation Date:11/2022
CVUHB	Cardiac Surgery	Level 1	Escalation Date:07/2021
CVUHB	Neonatal Intensive Care	Level 1	De-escalation Date:12/2025
CVUHB	South Wales Specialist Auditory Implant Device Service	Level 3	Escalation Date: 10/2025
SBUHB	Adult Medium Secure - Caswell Clinic	Level 3	Escalation Date: 10/2025

1.3 Performance

1.3.1 Finance

Table 2 shows the end of year financial performance. In M12 there was a final overspend £6.3M. CVUHB and the Non-Welsh SLA remain the main drivers of this trend. A Finance Report Dashboard can be accessed for more details of the financial performance.

Table 2 The M10 financial performance is shown.

Area	Annual Budget £'000	Budget to date £'000	Spend to date £'000	Variance to date £'000	Forecast Outturn £'000	Forecast Variance £'000
<input type="checkbox"/> NHS Wales	£919,317	£919,317	£925,132	£5,814	£925,132	£5,814
Cardiff & Vale	£346,789	£346,789	£350,036	£3,247	£350,036	£3,247
WAST	£291,813	£291,813	£291,708	(£105)	£291,708	(£105)
Swansea Bay	£155,118	£155,118	£157,988	£2,870	£157,988	£2,870
Betsi Cadwaladr	£54,718	£54,718	£54,387	(£331)	£54,387	(£331)
Velindre	£40,861	£40,861	£41,211	£351	£41,211	£351
Aneurin Bevan	£13,975	£13,975	£13,824	(£152)	£13,824	(£152)
Cwm Taf Morgannwg	£13,704	£13,704	£13,638	(£66)	£13,638	(£66)
Hywel Dda	£2,339	£2,339	£2,339	-	£2,339	-
<input type="checkbox"/> Non Welsh SLA	£160,733	£160,733	£163,206	£2,473	£163,206	£2,473
<input type="checkbox"/> IPC	£97,444	£97,444	£104,254	£6,810	£104,254	£6,810
<input type="checkbox"/> Mental Health	£45,303	£45,303	£41,766	(£3,537)	£41,766	(£3,537)
<input type="checkbox"/> CIAG & Prior Year Commitments	£37,321	£37,321	£26,089	(£11,232)	£26,089	(£11,232)
<input type="checkbox"/> Direct Running Costs	£9,991	£9,991	£9,764	(£227)	£9,764	(£227)
<input type="checkbox"/> Renal	£3,334	£3,334	£2,975	(£359)	£2,975	(£359)
<input type="checkbox"/> Releases	-	-	(£451)	(£451)	(£451)	(£451)
<input type="checkbox"/> Savings	(£11,377)	(£11,377)	(£4,364)	£7,013	(£4,364)	£7,013
JCC Total Expenditure	£1,262,066	£1,262,066	£1,268,371	£6,304	£1,268,371	£6,304

1.3.2 Specialised Services

1.3.2.1 Waiting Times

When it comes to the currently monitored specialised services, no patient is waiting over the 104-week referral to treatment Welsh Government target. However, there are fewer waiters compared to the same period last year, notably within Cardiology (3.6k in 25/26 to 3.4k 25/26) and Posture and Mobility (C&V 5 in 25/26 from 14 24/25)

1.3.2.2 In-patient Specialised Services

Most of the Planned Care specialties currently reported in this paper show a slight decline in in-patient activity. In total the in-patient activity has decreased by 1.2% compared to the last financial year same period (Month 1-12). The largest decline in activity was seen in Cardiac surgery (-7.9%), Paediatrics Surgery (-5.3%) and Neurosurgery (-3.6%).

1.3.2.3 Outpatient Specialised Services

All of the planned Care specialties currently reported in this paper show a slight to moderate decline in outpatient activity, although overall approximately 300 appointments more in totality when compared to M1-M12 last year – this is due to an increase in Plastic Surgery which has comparable high volumes. The largest

decline in activity was seen in Paediatric Surgery (-4.7%) and Cardiac surgery (-1.6%).

1.3.3 Mental Health

One 14 bed ward at Caswell Clinic remains unavailable for medium secure admissions due to the Health Board repurposing the ward following a fire in their Low Secure service. Caswell Clinic (SBUHB) remains at Level 3 escalation. The NWJCC Commissioning team meet fortnightly with the Caswell Clinic senior operational team to review progress against their escalation action plan. The service was reopened to admissions on 6 January 2026 following assurance that immediate safety concerns had been addressed.

The perinatal mental health unit at Tonna Hospital has recently reopened following essential maintenance works. The newly commissioned 2 beds at Ty Seren, Countess of Chester Hospital provided by Cheshire & Wirral Partnership are now on-line.

The activity for various mental health services in shown in Table 3.

Table 3. The performance of Mental Health Services.

Service Name	Site	Commissioned capacity (bed-days)	Patient No. month end.	Occupancy (bed-days)	% Utilisation
Adult Medium Secure	Caswell (SBUHB)	1891	37	1149	61%
	Ty Llewelyn (BCUHB)	775	20	620	80%
	Non-NHS Wales Commissioned Units	N/A	39	1243	N/A
Child & Adolescent Mental Health Service (CAMHS)	Ty Lliard -General Adolescent Unit (CTMUHB)	465	15	421	91%
	NWAS - General Adolescent Unit (BCUHB)	372	6	187	50%
	Non-NHS Wales Commissioned Units	N/A	6	331	N/A
Neuropsychiatry	Hafod y Coed (CVUHB)	310	8	217	70%
Perinatal Mental Health	Uned Gobaith (SBUHB)	186	5	180	97%
	Seren Lodge, (Cheshire & Wirral)	62	1	26	42%
	Non-NHS Wales Commissioned Units	N/A	0	0	N/A
	Ashworth (Males)	N/A	24	744	N/A

High Secure Mental Health	Rampton (Females)	N/A	2	62	N/A
	Rampton (Learning Disability)	N/A	0	0	N/A
Eating Disorder-Tier 4 inpatients	Non-NHS Wales Commissioned Units	N/A	11	354	N/A

1.3.4 Welsh Ambulance & NHS Wales 111

The performance indicators for the Welsh Ambulance and NHS Wales 111 are shown in Table 4 which indicates that the Median response time for Red Emerg, Emergency calls is slightly outside of the performance measure of 6 to 8 minutes.

Table 4. The Ambulance & NHS Wales 111 performance

Metric	M12 24/25	M12 25/26	M1-12 24/25	M1-12 25/26
NHS 111 Wales Website visits	496k	477k	5.53M	5.0M
Number of 999 calls	42.3k	44.6k	529.7k	549.2k
Number of Verified Incidents	33.5k	35.2k	417.4k	418.7k
Numbers Conveyed to Hospital	11.1k	13.6k	148.6k	152.4k
Most Common Call Reason	Breathing problems, Falls, Chest Pain	Breathing problems, Falls, Chest Pain	Breathing problems, Falls, Chest Pain	Breathing problems, Falls, Chest Pain
Number of Arrest Incidents	-	934		7.8k
Number of EMERG Incidents	-	4,780		42.3k
Median Response Time to Arrest Incidents	-	7:37 min		7.18 min avg
Median Response Time to EMERG Incidents	-	9:25min		9.01 min avg
90 th Percentile Response Time to Arrest Incidents	-	16:57 min		17:02 min avg
90 th Percentile Response Time to EMERG Incidents	-	22:23 min		21:53 min avg

For NEPTS, there is a significant increase in the demand for transport showing in the number of bookings, however the number of journeys has decreased by 3%. Positively the percentage of patients being booked after 12pm has decreased, which has been an area of collaborative focus, with Health Boards and the provider during the period.

Table 5. The NEPTS metrics for M12.

Metric Type	M12 2024	M12 2025	Movement from previous year
Total Number of Bookings	20,901	22,899	Increase
Total Number of Journeys	92,222	89,464	Decrease
% Aborted Journeys	10.0%	11.6%	Increase
% Booking after 12 pm on the Day	71.0%	59.5%	Decrease
% Patients Arriving Late for Appointment	27.6%	26.5%	Decrease
% Patients Collected After 1 Hours	16.60%	18.1%	Increase
% Discharge and Transfer (D&T) Booking on the Day	73.30%	71.80%	Decrease

1.3.5 Workforce

The data for Q4 indicates steady workforce levels, moderately stable absence rates, and a manageable turnover rate, despite recent organisational changes. However, there are areas requiring attention, particularly around the PADR completion and Statutory and Mandatory Training compliance. These deficits pose risks to staff development, pay progression, and organisational safety standards.

Table 6. The Workforce metrics for M12.

Metric	Value	Comments / Actions
Sickness Absence FTE (Year to Date)	2.34%	Remains within a manageable range but warrants continued monitoring to maintain service delivery. There was a 0.49% increase in Q4.
Total Sickness Absence (Year to Date)	343 Days	
Total Sickness Absence Cost	£26,491	
Long-term Sickness Rate	2.83%	Enhance collaboration with Occupational Health to ensure every long-term absence has a structured return-to-work plan. Encourage regular check-ins and offer tailored adjustments where possible.
Short-Term Sickness Rate	0.68%	Encourage Staying Well Plans which is a shared responsibility by employee and employer. In addition, promote usage of Wellbeing Hub and Employee Assistance Programme.
Rolling Staff Turnover Rate	1.66%	This is a decrease from 13.88% (YTD) in the previous quarter.
Performance Appraisal and Development Review (PADR) Completion Rates	56.14%	This has decreased by 22.76% over the last quarter despite a targeted approach by Senior Leaders. This requires concerted focus to ensure improvement in performance. Year-end appraisals/objective setting for 2026/27 will be a priority for managers in Qtr 1.
Statutory & Mandatory Training Compliance rates	74.13%	The threshold is 80% and there is wide variation by directorates. This has decreased by 2.75% over the last quarter.
Staff Survey Response Rate	67.90%	The Staff engagement index score increased by 1.8%.

		During the next reporting period, results are being reviewed and a draft action will be developed by end of Q1 of the new financial year to address organisational areas of focus.
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2. ASSESSMENT

Objectives / Strategy	
Dolen i Amcan (au) Strategol CBC / Link to JCC Strategic Objectives(s)	Maximise Value
	If more than one applies please list below:
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:
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>	Whole-systems Perspective
	If more than one applies please list below:
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>	Equitable
	If more than one applies please list below: Efficient
Effaith Amgylcheddol/ Cynaliadwyedd (5R) / Environmental /Sustainability Impact (5Rs)	Yes - Refine
	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 type="checkbox"/>
Outcome:	

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 type="checkbox"/>
	Outcome:	If no, please include rationale below:
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.	

3. RECOMMENDATIONS

Members of the Joint Commissioning Committee are asked to:

- **Note** the information described in this paper and **Appendix 1**.