

**Unconfirmed Minutes of the
NHS Wales Joint Commissioning Committee Meeting
held in public on
Tuesday 16 September 2025**

Microsoft Teams and In Person at Charnwood Court

Members:

Paul Worthington (PW)	Lay Member, NHS Wales Joint Commissioning Committee [NWJCC] (In Person)
Susan Elsmore (SE)	Lay Member, NWJCC
Philip Kloer (PK)	Chief Executive Officer, Hywel Dda University Health Board (In Person)
Paul Mears (PM)	Chief Executive Officer, Cwm Taf Morgannwg University Health Board
Shameem Nawaz (SN)	Lay Member, NWJCC (In Person)
Suzanne Rankin (SR)	Chief Executive Officer, Cardiff and Vale University Health Board
Mandy Rayani (MR)	Lay Member, NWJCC (In Person)
Carol Shillabeer (CB)	Chief Executive Officer, Betsi Cadwaladr University Health Board
Hayley Thomas (HT)	Chief Executive Officer, Powys Teaching Health Board
Melanie Wilkey (MW)	Director of Commissioning for Specialised Services, NWJCC (In Person)

Associate Member:

Huw George (HG)	Interim Chief Commissioner, NWJCC (In Person)
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Deputies:

Richard Evans (RE)	Executive Medical Director, Swansea Bay University Health Board
Rob Holcombe (RH)	Executive Director of Finance, Procurement and Value, Aneurin Bevan University Health Board

In Attendance:

Stacey Taylor (ST)	Deputy Chief Commissioner and Director of Finance and Value, NWJCC (In Person)
Carole Bell (CB)	Director of Nursing and Quality, NWJCC (In Person)
Joanna Dainton (JD)	Assistant Director of Commissioning for Mental Health, Learning Disabilities and Vulnerable Groups, NWJCC (In Person)
Iolo Doull (ID)	Medical Director, NWJCC (In Person)
Georgina Galletly (GG)	Interim Director of Corporate Planning and Strategy, NWJCC (In Person)
Melanie Wilkey (MW)	Director of Commissioning for Specialised Services, NWJCC (In Person)

Ross Whitehead	(RW)	Director of Commissioning for Ambulance Services and 111, NWJCC (In Person)
Rachel Marsh	(RM)	Interim Chief Executive, Welsh Ambulance Services University NHS Trust
Angela Mutlow	(AM)	Director of Operations, Llais
Nick Wood	(NW)	Deputy Chief Executive NHS Wales, Welsh Government
Matthew Edwards	(ME)	Interim Assistant Committee Secretary, NWJCC (In Person)

Apologies:

Ian Green (Chair)	(IG)	Independent Chair, NWJCC
Abigail Harris	(AH)	Chief Executive Officer, Swansea Bay University Health Board,
Adrian Clarke	(AC)	Interim Director of Commissioning for Mental Health, Learning Disabilities and Vulnerable Groups, NWJCC
Nicola Prygodzicz	(NP)	Chief Executive Officer, Aneurin Bevan University Health Board
Nia Roberts	(NR)	Lay Member, NWJCC

The meeting opened at 11:15am following a preceding in-committee meeting held in private.

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	Preliminary Matters
JCC25/050	<p>1.1 Welcome and Introductions</p> <p>The Chair, Paul Worthington (PW) welcomed Members and attendees to the Joint Commissioning Committee (JC) meeting held in public and introductions were made.</p> <p>There were no objections to the meeting being recorded which would be available on the NHS Wales Joint Commissioning Committee (NWJCC) website following the meeting. It was noted that a quorum had been achieved.</p>
JCC25/051	<p>1.2 Apologies for Absence</p> <p>Apologies for absence were noted as above.</p>
JCC25/052	<p>1.3 Declarations of Interest</p> <p>There were no additional declarations of interest relating to the items for discussion on the agenda.</p>
JCC25/053	<p>1.4 Minutes of Meeting held on 15 July 2025 and Matters Arising</p>

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	The minutes of the JC meeting held on 15 July 2025 were received and approved as a true and accurate record of the meeting. There were no matters arising.
JCC25/054	<p>1.5 Action Log</p> <p>Members noted the progress on the actions outlined on the action log and agreed the completion of the eight actions marked as 'closed'.</p>
Setting the Scene	
JCC25/055	<p>2.1 Chair's Report</p> <p>The Chair's Report was received, and Members noted the key meetings attended in the last period, the discussions at the JC's Strategy Session on 19 August 2025 and the further updates provided.</p> <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> • Note the report.
JCC25/056	<p>2.2 Chief Commissioner's Report</p> <p>The Chief Commissioner's Report was received. Members noted:</p> <ul style="list-style-type: none"> • Stakeholder panels and interviews were held week commencing 1 September 2025 for the role of Director of Commissioning for Mental Health, Learning Disabilities and Vulnerable Groups (MHLDVG). Unfortunately, no appointment was made, however Adrian Clarke had agreed to continue in the post and recruitment would be re-run in the forthcoming months • The first phase of prioritised recruitment had been completed with appointments made at Deputy Director and Assistant Director levels. Most individuals would commence in post by 1 October 2025 • The second phase of prioritised recruitment has commenced and was expected to be completed by December 2025. Development opportunities had been shared with Health Board colleagues • The continued development of an organisational development programme including strategic workforce planning with support from Cwm Taf Morgannwg University Health Board's People Services team • Correspondence received from the NHS Wales Chief Executive confirming that the NWJCC Foundation Plan for 2025-26 had been assessed as satisfactory and a set of accountability actions had also been agreed to support the Plan's implementation • The progress made in securing public health input into the NWJCC's commissioning activities • The updates provided against the national programmes discussed at the previous meeting

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	<ul style="list-style-type: none"> An update on the status of the NWJCC's Willowford office was given, which was currently closed due to Estates and Health and Safety issues. <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> Note the report.
JCC25/057	<p>2.3 NHS Wales Joint Committee Risk Register – July 2025</p> <p>The report presented the NWJCC's Risk Register (risks scoring 15 and above) as of 31 July 2025. Members noted:</p> <ul style="list-style-type: none"> As of 31 July 2025, there were 20 risks with a score of 15 and above, with 17 risks across the commissioning portfolio and 3 open Corporate/Organisational risks Three new risks had been added, one risk had been escalated, three risks had been de-escalated, and one risk had been closed since the last report. <p>Members discussed:</p> <ul style="list-style-type: none"> Whether the risk around equity should be considered an issue rather than a risk, Huw George (HG) stated that this would be considered in the work to be undertaken to differentiate between commissioner risks and provider risks The impact of reducing handover delays and the ability of the ambulance service to respond in the community. Members discussed the need for clear public messaging around this. <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> Note the report Approve the NWJCC Risk Register as of 31 July 2025 Note the continued development of the Joint Committee's Risk Appetite and the NWJCC's Assurance Framework as priority areas for the new Committee Secretary.
JCC25/058	<p>2.4 Director of Commissioning for Ambulance Services and 111 Report</p> <p>The report from the Director of Commissioning for Ambulance Services and 111 was received. Members noted:</p> <ul style="list-style-type: none"> That Phase 2 of the New Ambulance Response Model in Wales, due for implementation by 31 December 2025, introduces a more clinically focused approach to emergency care by refining call categories and prioritising patient outcomes over response times. Members noted several key delivery risks due to the capacity of the external provider to make the required changes to the WAST clinical infrastructure. The Ambulance Services and 111 Commissioning Team continue to work with the Welsh Ambulance Services University NHS Trust (WAST) and partners regarding delivery within the timescale set out above

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	<ul style="list-style-type: none"> • The multi-faceted review process to ensure a comprehensive and transparent evaluation of the R106 WAST Capability Report (Manchester Arena Inquiry [MAI] Assessment). This included stakeholder input, legal and expert perspectives, and a structured assessment of the Report's recommendations. The Ambulance Services and 111 Commissioning Team were in the process of commissioning an independent external review which would focus specifically on whether the recommendations made by WAST were proportionate and appropriate in the context of the MAI • Challenges for the Non-Emergency Patient Transport Service (NEPTS) due to many factors including Health Board reconfiguration, significant increases in NEPTS private provider costs, and an increase in complex patient mobilities and patient journey lengths (both discharge and transfer journeys). Consequently, the NEPTS service was having to frequently cancel patient journeys for eligible patients to prioritise the use of resources available. The Ambulance Services and 111 Commissioning Team were working in conjunction with WAST and Health Boards to collaboratively develop and implement solutions • The establishment of the 111 Re-Roster Project Board to ensure efficient rostering practices and to ensure patients have timely access • The update on the EMRTS Judicial Review. Ross Whitehead (RW) further confirmed that there was regular communication with the Wales Air Ambulance Charity to understand the implications of the process being elongated • Discussions between NWJCC and NHS Performance and Improvement regarding the future options for hosting the neonatal clinical lead roles, including appropriate governance, and funding arrangements. <p>Members discussed:</p> <ul style="list-style-type: none"> • The work around neonatal transport, the sustainability of the existing model, and the need to align to the broader neonatal review • The need for a timely response on the recommendations of the MAI <p>ACTION: Convene an urgent meeting, with relevant colleagues, to address concerns and clarify responsibilities regarding the Manchester Arena Inquiry recommendations.</p> <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> • Note the report.

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JCC25/059	<p>2.5 Director of Commissioning for Specialised Services Report</p> <p>The report from the Director of Commissioning for Specialised Services was received. Members noted:</p> <ul style="list-style-type: none"> • Cardiff and Vale University Health Board (CVUHB) had been asked to submit a revised business case by the end of September 2025 for the expansion of Thrombectomy Services in South Wales (moving the service to a 24/7 model). This would need to include an impact assessment of this not taking place due to current financial restraints • Following a formal provider designation process, a formal letter has been sent to Betsi Cadwaladr University Health Board confirming the decision of Collaborative Commissioning Leadership Group (CCLG) and advising that the NWJCC intends to commission the Health Board as a designated Stereotactic Ablative Body Radiotherapy (SABR) provider for the population of North Wales • The Joint Accreditation Committee of the European BMT Society (JACIE) accreditation inspection was taking place week commencing 15 September 2025. Early feedback was expected to provide an indication of the position which would inform the commissioning response. Several alternative courses of action had previously been discussed. MW confirmed that Estates issues continued to be experienced • The Project Initiation Document (PID) for Cardiac Review Phase 2, to be delivered in collaboration with CVUHB, Swansea Bay University Health Board (SBUHB), and the Regional Specialised Services Provider Planning Partnership (RSSPPP). The Review would be progressed, noting discussions at the JC's Strategy Session in August 2025 around the need for meaningful stakeholder engagement and wider consultation and ensuring robust and inclusive decision-making. <p>Members discussed:</p> <ul style="list-style-type: none"> • The need to explore all opportunities to access a 24-hour thrombectomy service • The need for clear timescales for the thrombectomy service, this was expected in Quarter 3 or Quarter 4 and the opportunity to work collaboratively between Cardiff and Bristol, in the meantime, whilst changes were being made • Work between the Ambulance Services and 111 and the Specialised Services Commissioning Team around the ambulance elements of the stroke pathway and the opportunities for collaboration • Mandy Rayani (MR) asked if there is a role for the NWJCC in having conversations with Welsh Government in terms of the risks related to the wider NHS infrastructure.

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	<p>ACTION: ST to have conversations with Welsh Government colleagues around capital requirements and infrastructure.</p> <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> • Note the specialised commissioning updates summarised in this report • Note the summary of specialised risks described, mindful that these were managed and services in escalation were reported to the NWJCC QSO Sub-Committee for detailed scrutiny.
JCC25/060	<p>2.6 Director of Commissioning for Mental Health, Learning Disabilities and Vulnerable Groups Report</p> <p>The report from the Interim Director of Commissioning for Mental Health, Learning Disabilities and Vulnerable Groups was received. Members noted:</p> <ul style="list-style-type: none"> • The update provided on the Care Home Framework Agreement, the key risks and matters for escalation and discussions on the potential to extend the existing Framework as a contingency measure • The work being undertaken by SBUHB in relation to the Caswell Clinic and the review by the NWJCC team of the service delivered there to consider the best approach to commission a service which offers good quality and safety alongside value for money • The update provided against the separate Agenda item on the work being undertaken by the NWJCC with Cwm Taf Morgannwg University Health Board and Public Health Wales colleagues in relation to Traumatic Stress Wales. <p>Members discussed:</p> <ul style="list-style-type: none"> • The urgent need to convene a conversation around the Continuing Healthcare Framework Agreement. The deadline for this was 30 September 2025 and if a new Agreement was not signed off, existing and new patients would not be covered • That JC Members had visited the Caswell Clinic on 28 July 2025, meeting with the heads of each clinical professional group and looking around the environment. Some significant issues were noted. Following this, the NWJCC had started a review of the service, and a report would be produced with recommendations and next steps • That SBUHB were also undertaking a review so it would be useful to compare the findings of these two separate reviews to understand any significant differences. <p>ACTION: AC to provide an update on progress at the Caswell Clinic at the next JC meeting in November 2025.</p>

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	<p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> • Note the report.
	<p>Committee Briefing</p>
JCC25/061	<p>No items were available to present at this time.</p>
	<p>Delivering the JCC Plan</p>
JCC25/062	<p>4.1 NWJCC Financial Forecast and Financial Performance Report - Month 5 2025-2026</p> <p>The Month 5 Financial Performance Report was received. Members noted the Month 5 reported position of an overspend to date of £2.4m with a forecast overspend of £3.7 million.</p> <p>Members discussed that this was a challenging financial position. It was agreed that further conversations would be picked up via the Planning, Performance and Finance Sub-Committee, providing assurance to the JC.</p> <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> • Note the month-end financial position.
JCC25/063	<p>4.2 Combined Performance Report</p> <p>The Combined Performance report was received. Members noted:</p> <ul style="list-style-type: none"> • The report pulled together the operational data as of Month 4 • The new, more succinct version of the Performance Report and the progress made in response to the feedback previously received from Members • That the format of this report would continue to evolve and improve • A Quarter 2 Update against the NWJCC Foundation Plan would be available at the next meeting. <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> • Note the report.
JCC25/064	<p>4.3 NWJCC Integrated Medium-Term Plan 2026-29</p> <p>Members received a presentation on the approach to develop the NWJCC Integrated Medium-Term Plan [IMTP] (2026-29). Members noted:</p> <ul style="list-style-type: none"> • The update provided on the development of the IMTP to date • Discussions at the CCLG meeting in August to ensure support for the approach and draft Commissioning Principles • The IMTP would define the NWJCC's role in supporting Health Boards on delivery for Better Health and Care

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	<ul style="list-style-type: none"> The IMTP as a Corporate Plan with agreed Commissioning Principles The timelines as presented including a discussion on high level risks at October's CCLG and a draft IMTP being presented at to the JC meeting in January. <p>Members discussed:</p> <ul style="list-style-type: none"> The difficult choices that would need to be made going forward and the need to set out clearly how the commissioning plan is going to be set within available resources The requirement for regular updates to inform the assumptions in the respective Health Board plans That draft commissioning intentions were being developed in the various commissioning groups Where the risk lies in instances where the JC chooses not to commission The need to consider the yearly aims with the priorities stated in the commissioning principles The need to ensure that the plan is balanced from both a strategic and operational perspective. <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> Note the report Approve the proposed Commissioning Principles for the continued development of the NWJCC's IMTP for 2026-29.
	<p>Governance and Assurance</p>
JCC25/065	<p>5.1 Plastic Surgery Commissioning Project Report</p> <p>The Plastic Surgery Commissioning Report was received. Members noted:</p> <ul style="list-style-type: none"> The work undertaken to date and the outcome of the first phase of the plastic surgery commissioning project to realign commissioning responsibilities for plastic surgery between the NWJCC and Health Boards The practical challenges encountered to using Office of Population Censuses and Surveys Classification of Interventions and Procedures (OPCS) codes as the basis for commissioning and to outline the specific concerns raised by the provider of plastic surgery in south Wales regarding the feasibility of this approach Challenges and concerns that had been raised regarding commissioning on the basis of clinical coding and the opportunity to consider the feasibility and implications of re-aligning commissioning between specialised and non-specialised plastic surgery Three options for future commissioning arrangements that had been put forward:

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	<ul style="list-style-type: none"> ○ Option 1: To adopt the proposed 141 specialised codes and transfer commissioning responsibility for non-specialised adult plastic surgery from NWJCC to Health Boards ○ Option 2: Transfer commissioning responsibility for all plastics from NWJCC to Health Boards. This has been actioned in England ○ Option 3: Retain current commissioning arrangements <ul style="list-style-type: none"> ● CCLG had endorsed Option 3 due to capacity constraints and coding concerns within the Health Boards. <p>Members discussed:</p> <ul style="list-style-type: none"> ● That this would be a good opportunity to understand how the cost of commissioning could be brought down across the whole pathway. This is a complex issue because of the secondary care health board pathways that feed into the specialised plastic surgery service ● That there was not enough information to disaggregate effectively and suggested some work may need to be undertaken on referral criteria within the specialist end of the service as the current coding issues mean that there is insufficient information to be able to repatriate the service at this time ● That the original decision was made within the Specialised Services predecessor organisation and that there are now wider opportunities for the NWJCC to commission services on behalf of Health Boards that sit outside of the current commissioning directorates ● Further work required in Health Boards to improve the coding ● Support for the CCLG position in endorsing Option 3. <p>ACTION: An overview of national/once for Wales commissioning outside of the current remit of the three commissioning directorates, would be shared at a future meeting.</p> <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> ● Note the work undertaken to date on the first phase of the plastic surgery commissioning project to realign commissioning responsibilities for plastic surgery between NWJCC and Health Boards ● Discuss the 3 options set out in the paper, namely Option 1 to transfer non-specialised plastics to Health Board commissioning, Option 2 to transfer all plastics to Health Board commissioning, and Option 3 to retain current arrangements ● Note the view and advice of the Collaborative Commissioning Leadership Group and differing advice of NWJCC officers ● Support the continuity of current commissioning arrangements with a view to realign commissioning responsibility back to Health Boards through the IMTP, working collaboratively with Health

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	Boards to identify improved pathway commissioning and to seek assurance from the provider Health Board that they are addressing the coding issues.
JCC25/066	<p>5.2 Welsh Kidney Network Governance Report</p> <p>The Welsh Kidney Network (WKN) Governance Report was received. Members noted:</p> <ul style="list-style-type: none"> • The independent review undertaken on the governance and reporting arrangements of the WKN • Engagement with the current Independent Chair of the WKN and the agreed actions to be taken in response to the review • Conversations regarding future chairing arrangements for the WKN. <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> • Note the findings and recommendations within the Independent Review Report (Appendix 1) • Note the management response to the report and actions within (Appendix 2) to strengthen the governance and reporting arrangements for the WKN in the new NWJCC operating model.
JCC25/067	<p>5.3 Corporate Governance Report</p> <p>The Corporate Governance Report was received. Members noted:</p> <ul style="list-style-type: none"> • The NWJCC's Internal Audit programme for 2025-26 • That the new Committee Secretary would start on 22 September 2025 and that priority areas for focus would be agreed with the Chair and Chief Commissioner • Closure of the NWJCC's Willowford building following advice from CTMUHB Estates Department and that a wider review of accommodation for the NWJCC would continue. <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> • Note the report; and • Note the internal audit programme for the NWJCC for 2025-26.
For Information	
JCC25/068	<p>6.1 Highlight Reports from the Joint Sub-Committees</p> <p>The highlight reports from the following recent Joint Sub-Committees were received:</p> <p>6.1.1 Quality, Safety and Outcomes Sub-Committee (QSO)</p> <p>6.1.2 Planning Performance and Finance Sub-Committee (PPF)</p> <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> • Note the content of the reports.
Concluding Business	

Min Ref	Agenda Item
JCC25/069	7.1 Any Other Business There was no other business to report.
JCC25/070	7.2 Review of Meeting No review of the meeting was given during the meeting.
JCC25/071	7.3 Date of Next Meeting The next routine meeting was scheduled for 25 November 2025 and the JC's Strategy Session on 21 October 2025.

The meeting concluded at 13:30.

Chair's Signature:

Date:

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