

Agenda Item

2.5

Joint Commissioning Committee

Director of Commissioning for Ambulance Services and 111 Report
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Dyddiad y Cyfarfod / Date of Meeting	25/11/2025
Statws Cyhoeddi / Publication Status	Open/ Public
	Not Applicable
Awdur yr Adroddiad / Report Author	Ross Whitehead, Director of Commissioning for Ambulance Services and 111, NWJCC
Cyflwynydd yr Adroddiad / Report Presenter	Ross Whitehead, Director of Commissioning for Ambulance Services and 111, NWJCC
Noddwr yr Adroddiad / Report Sponsor	Huw George, Interim Chief Commissioner, NWJCC

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
NWJCC Senior Leadership Team	12/11/25 19/11/25	Noted

Acronyms / Glossary of Terms	
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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 infarction
WAST	Welsh Ambulance Service

1. SITUATION/BACKGROUND

The purpose of this report is to update Members of the Joint Commissioning Committee (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 NHS Wales Joint Commissioning Committee's (NWJCC) Foundation Plan, high scoring and emerging risks and emerging and future developments) for each commissioned service including:

- Emergency Ambulance Services
- Non-Emergency Patient Transport Services (NEPTS)
- NHS 111 Wales
- Emergency Medical Retrieval and Transfer Service Review (EMRTS)
- Adult Critical Care Transfer Services (ACCTS)
- Cymru Inter-Hospital Acute Neonatal Transport Service (CHANTS)
- Spinal and Major Trauma Operational Delivery Networks
- 111 Press 2 and Mental Health Transport

2. SPECIFIC MATTERS FOR CONSIDERATION

2.1 Emergency Ambulance Services

2.1.1 New Emergency Ambulance Performance Framework

Following the introduction of the revised ambulance performance framework on 1 July 2025, the Cabinet Secretary for Health announced on 16 July 2025 the implementation of Phase 2 of the New Ambulance Response Model.

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.

Enhanced clinical screening ensures patients with conditions like stroke or ST-elevation myocardial infarction (STEMI) receive timely and appropriate care, while the Red category continues to target life-threatening emergencies. This phase aims to improve resource use, reduce unnecessary hospital conveyance, and deliver better clinical outcomes. In October 2025, the publication of new

clinical indicators as part of the Ambulance Service Indicators commenced to report the outcomes of:

- Average pain score change
- Average oxygen saturation change (SpO2)
- Top Three Call Categorisations (e.g. Convulsion, Dyspnoea etc)

The Ambulance Services and 111 Commissioning Team continue to work with WAST and partners regarding the delivery of Phase 2 of the Ambulance Response Model within the timescale set out above.

Phase 2 is scheduled to go live on 2 December 2025, aligning with the expectations set by the Cabinet Secretary for Health and timed to avoid the pressures of the holiday and winter period.

There remain a number of key risks to delivery of Phase 2 primarily due to the capacity of the external provider to make the required changes to WAST clinical system infrastructure to facilitate the changes in the response model.

2.1.2 Ambulance Patient Handover - National Improvement Approach

The National Ambulance Handover Taskforce continues to lead efforts to improve ambulance handover performance across NHS Wales. The Taskforce is being led by several clinical executives from NHS Wales, and the NWJCC are represented on the Taskforce Board by the Director of Commissioning for Ambulance Services and 111.

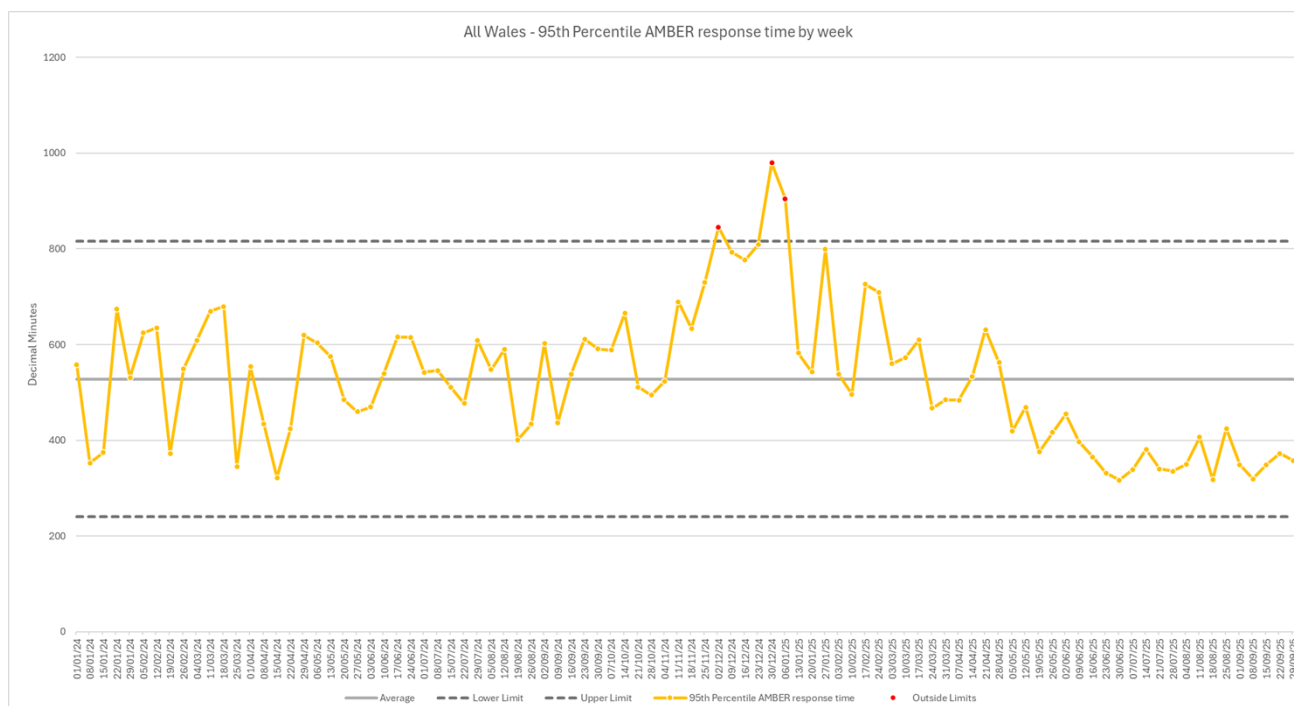
Accelerated Design Events (ADEs) have been conducted across all six Health Boards in Wales, involving acute hospitals, to identify opportunities for delivering sustainable improvements in ambulance handover processes. An additional ADE is planned with the Welsh Ambulance Services University NHS Trust (WAST) to ensure the organisation fully capitalises on the reduction in handover delays and identifies actions it can take to contribute to wider system improvements.

Since the focus on Handover 45, ensuring patients are handover over within 45 minutes, there has been measurable improvement across NHS Wales. The table below sets out the percentage of patients handed over within 45 minutes from November 2024 to September 2025

Hospital Name	Nov 24	Dec 24	Jan 25	Feb 25	Mar 25	Apr 25	May 25	Jun 25	Jul 25	Aug 25	Sep 25
Bronglais General Hospital Aberystwyth	35%	36%	36%	34%	45%	47%	40%	55%	75%	59%	63%
Glangwili Hospital Carmarthen	33%	35%	32%	39%	33%	36%	34%	36%	43%	54%	78%
Grange University Hospital Cwmbran	41%	33%	31%	30%	36%	33%	41%	41%	45%	37%	68%
Morrison Hospital Swansea	33%	33%	33%	32%	37%	33%	37%	73%	84%	87%	82%
Prince Charles Hosp Merthyr	50%	41%	41%	52%	46%	42%	42%	64%	88%	96%	99%
Princess Of Wales Bridgend	55%	38%	48%	54%	48%	48%	67%	77%	75%	74%	70%
Royal Glamorgan Hosp Pontyclun	60%	46%	36%	51%	43%	39%	50%	91%	87%	79%	76%
University Hospital Of Wales Cardiff	57%	53%	50%	56%	56%	53%	60%	62%	64%	92%	95%
Withybush Hospital Haverfordwest	47%	34%	49%	67%	53%	58%	52%	47%	48%	51%	56%
Wrexham Maelor Hospital Wrexham	37%	35%	26%	29%	31%	31%	29%	34%	52%	29%	30%
Ysbyty Glan Clwyd Hospital	40%	37%	31%	38%	30%	35%	50%	41%	43%	55%	47%
Ysbyty Gwynedd	35%	33%	26%	33%	32%	31%	30%	36%	33%	33%	27%

Performance remains variable across Health Boards and individual hospital sites, indicating the need for continued targeted support and localised interventions.

The Ambulance Services and 111 Commissioning Team continues to play a central role in supporting the work of the Taskforce, through the provision of data, presenting and supporting facilitation of discussion at the ADEs and working with Health Boards and WAST to ensure the expected improvements to ambulance response. In addition, the Ambulance Services and 111 Commissioning Team is working in conjunction with WAST by monitoring performance metrics in relation to community response times. The chart below illustrates the improvement in 95th percentile amber response times from January 2024 to September 2025.



2.1.3 Manchester Arena Inquiry (MAI) Assessment

To ensure a comprehensive and transparent evaluation of the R106 WAST Capability Report, the Ambulance Services and 111 Commissioning Team has implemented a multi-faceted review process. This approach is designed to incorporate stakeholder input, legal and expert perspectives, and a structured assessment of the report's recommendations. The process comprises four key components: WAST Presentation and Stakeholder Engagement Workshops, Legal Advice, Independent Expert Review and a Collaborative Assessment Workshop.

A final workshop took place, facilitated by the Ambulance Services and 111 Team, in September 2025 with Health Boards and WAST to enable an informed view on each of the outstanding recommendations. A report on the outcomes of the workshops is being prepared with input from Health Board colleagues.

The Ambulance Services and 111 Commissioning Team is in the process of commissioning an independent external review which will focus specifically on whether the recommendations made by WAST are proportionate and appropriate in the context of the MAI. This is due to be concluded in January 2026 and will form part of the recommendations to Joint Committee in Quarter 4 2025/26.

2.1.4 Strategic Productivity Review

NHS Wales continues to operate under significant and sustained pressure. Demand for urgent and emergency care is rising, driven by projected changes in population size, age profile, and clinical complexity. These pressures are compounded by financial constraints and workforce challenges, which limit the system's ability to respond effectively and sustainably.

In this context, and in line with the priorities within the 2025/26 Foundation Plan, the ambulance services and 111 commissioning team are undertaking a strategic productivity review of services delivered by the Welsh Ambulance Service.

The review will adopt an outcome-led, system-focused, collaborative, and evidence-based approach, supporting long term commissioning decision making for the committee. The review is expected to be completed by the end of this 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.

The NEPTS Commissioning Assurance Group has been formally established with the first meeting held on 22 September 2025. The group will provide the forum to work together for collective solutions and improvement of the capacity challenges. A number of actions were agreed focussing on information sharing and improving operational efficiency including setting up a sub-group to improve productivity and efficiency at the interface of WAST and Health Boards.

In response to the specific challenge around discharge capacity the Ambulance Services and 111 Commissioning Team are leading a weekly forum with key stakeholders, under the remit of the NEPTS Future Vision (2030), with a focus on strategic integration and enhancing the efficiency of discharge vehicle processes. This work will support the resilience of urgent and emergency care system during the winter period, linking in with the Six Goals for UEC programme, particularly the discharge productivity reset fortnight planned for early December, to ensure alignment and maximise impact across the system.

In addition to the above, WAST are 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 Q4 2025/26.

2.3 NHS 111 Wales

2.3.1 NHS 111 Wales Re-Roster Review

Further work has been undertaken by WAST on the performance of the service's 111 call-handling capacity and a 111 Re-roster Project Board has been established.

The focus of this work is ensuring rostering practices are designed and implemented to be as efficient as possible within the resources available to ensure patients have timely access to the 111 service. Additional modelling was presented in October 2025. The Ambulance Services and 111 Commissioning Team have requested further clarification of the impact on key performance indicators of the implementation of revised roster keys.

2.3.2 NHS 111 Wales Winter Communications

NWJCC is taking a coordinating and supportive role for NHS Wales during the 2025/26 winter campaign.

The focus is on enhancing awareness and utilisation of the 111 service through refreshed communications and targeted messaging aligned with Cabinet Secretary priorities and the Help Us Help You (HUHY) and building on the key learning points from the Strategic NHS 111 Wales Communications review.

2.3.3 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 EMRTS Judicial Review

On 19 June 2025, the High Court handed down its judgment that the JC had acted lawfully and rationally in reaching its decision. The JC were informed that permission to appeal this judgment was rejected by the court on the 29 July 2025. An application was subsequently made to the Court of Appeal which was refused on 15 October 2025.

A detailed update on this issue is provided separately as part of this Committee meeting.

2.5 Adult Critical Care Transfer Service (ACCTS)

2.5.1 Increased Demand

In response to Health Board service change and patient need, demand for ACCTS continues to increase as a result there are challenges in delivering the expected core service provision. Given the small size of the service, opportunities for bolstering of ACCTS capacity in 2025-26 are limited. The Ambulance Services and 111 Commissioning Team is working with the service, Health Boards and WAST to find solutions to meet this need.

As part of the development of the NWJCC plan for 2026-27, work will need to be explored to consider the opportunities for expansion of ACCTS' capacity to meet Health Board requirements as part of their strategic service changes.

2.5.2 Hosting Arrangements

The Ambulance Services and 111 Commissioning team are reviewing the current hosting arrangements for the ACCTS service which is currently hosted by Swansea Bay University Health Board aligned with the Emergency Medical Retrieval and Transportation Service (EMRTS). A terms of reference for the review has been developed and the outcome of the review is planned to be delivered by Q4 2026.

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.

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 resent review of neonatal commissioning, both issues highlighted here will form part of that work.

2.7 South Wales Spinal Network

2.7.1 Stakeholder Engagement

Engagement and attendance at Delivery Assurance Group (DAG) meetings continues to remain challenging resulting in meeting not being quorate and unable to progress the work of the Operational Delivery Network (ODN) with sufficient pace. Efforts are ongoing by the Operational Delivery Network (ODN) with the support of the Ambulance Services and 111 Commissioning Team to improve attendance at future DAGs.

2.8 South Wales Major Trauma Network (SWTN)

2.8.1 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 National Major Trauma Registry (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 NWJCC attended an extraordinary meeting with senior colleagues from 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 proposing agreement whilst also seeking strengthened assurances around the governance and processes surrounding the data and progress delivery through the service level agreements.

A formal response to the recommendations has been requested by NHS England by the 24th November 2025. The NWJCC support this approach as the most viable option. The risks will remain in the short term. 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.

2.8.2 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 will begin in Quarter 3 of 2025/26

2.8.3 Benchmarking North and South Wales Major Trauma Network Provision

The Joint Commissioning Committee (JCC) 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.

2.9 111 Press 2

2.9.1 Hosting Arrangement

Since the establishment of 111 press 2, the service has been delivered by individual Health Boards on a nationally commissioned, locally delivered basis. National coordination of training, administrative support, and communications support was provided by the former National Collaborative Commissioning Unit, some of this work has continued following the establishment of the NWJCC, however this is not a sustainable position moving forward.

We are currently awaiting receipt of the evaluation of the service undertaken by the Royal College of Psychiatrists, following this the Ambulance Services and 111 Commissioning Team will consider the steps required to place the service on a sustainable and efficient basis.

2.10 Mental Health Transport

2.10.1 St Johns Cymru

St Johns Cymru continues to be commissioned on a fixed term basis to provide additional transport for patients with mental health needs.

Work is ongoing between the Ambulance Services and 111 Commissioning Team and Health Board Directors of Mental Health to consider revised arrangements for service delivery. The Ambulance Services and 111 Commissioning Team will work with St Johns Cymru to implementation the changes during Quarter 3 2025/26.

2.10.2 Right Care Right Person (RCRP) and Section 136 (s136)

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.

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

Impact Assessment	
Ansawdd <i>Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Ansawdd? / Quality</i>	Yes: <input type="checkbox"/>
	No: <input checked="" type="checkbox"/>
Outcome:	If no, please include rationale below: This is an update from the Director of

<i>Have you undertaken a Quality Impact Assessment Screening?</i>		Commissioning to the Committee.
Cydraddoldeb <i>Ydych chi wedi ymgymryd â Sgrinio Aseiad o'r Effaith ar Gydraddoldeb? /</i>	Yes: <input type="checkbox"/>	No: <input checked="" type="checkbox"/>
Equality <i>Have you undertaken an Equality Impact Assessment Screening?</i>	Outcome:	If no, please include rationale below: 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>	Yes (Include further detail below)	
Resource Impact <i>(People / Financial)</i>	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.