

**Unconfirmed Minutes of the
NHS Wales Joint Commissioning Committee Meeting
held in public on
Tuesday 15 July 2025**

Microsoft Teams and In Person at Willowford

Members:

Ian Green (Chair)	(IG)	Lay Member, NHS Wales JCC (In Person)
Susan Elsmore	(SE)	Lay Member, NHS Wales JCC (In Person)
Paul Mears	(PM)	Chief Executive Officer, Cwm Taf Morgannwg University Health Board
Shameem Nawaz	(SN)	Lay Member, NHS Wales JCC (In Person)
Nicola Prygodzicz	(NP)	Chief Executive Officer, Aneurin Bevan University Health Board (In Person)
Suzanne Rankin	(SR)	Chief Executive Officer, Cardiff and Vale University Health Board
Nia Roberts	(NR)	Lay Member, NHS Wales JCC
Carol Shillabeer	(CB)	Chief Executive Officer, Betsi Cadwaladr University Health Board
Hayley Thomas	(HT)	Chief Executive Officer, Powys Teaching Health Board
Paul Worthington	(PW)	Lay Member, NHS Wales JCC (In Person)

Associate Member:

Huw George	(HG)	Interim Chief Commissioner, NHS Wales JCC (In Person)
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Deputies:

Lee Davies	(LD)	Executive Director of Strategy and Planning, Hywel Dda University Health Board (In Person)
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In Attendance:

Stacey Taylor	(ST)	Deputy Chief Commissioner and Director of Finance and Value, NHS Wales JCC (In Person)
Carole Bell	(CB)	Director of Nursing & Quality, NHS Wales JCC (In Person)
Iolo Doull	(ID)	Medical Director, NHS Wales JCC (In Person)
Adrian Clarke	(AC)	Interim Director of Commissioning for Mental Health, Learning Disabilities and Vulnerable Groups, NHS Wales JCC (In Person)
Gavin Owen	(GO)	Deputy Director of Commissioning for Ambulance Services and 111, NHS Wales JCC (In Person)
Melanie Wilkey	(MW)	Director of Commissioning for Specialised Services, NHS Wales JCC (In Person)
Karen Stapleton	(KS)	Deputy Director of Strategy, Swansea Bay University Health Board (In Person)

Rachel Marsh	(RM)	Executive Director of Strategy, Planning and Performance, Welsh Ambulance Service University NHS Trust
Liam Williams	(LW)	Executive Director of Quality and Nursing, Welsh Ambulance Services University NHS Trust
Matthew Edwards	(ME)	Acting Assistant Corporate Secretary, NHS Wales JCC (In Person)

Observing:

Aimee Osborne	(AO)	Graduate Trainee
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Apologies:

Jason Killens	(JK)	Chief Executive, Welsh Ambulance Services University NHS Trust
Nick Wood	(NW)	Deputy Chief Executive NHS Wales, Welsh Government
Georgina Galletly	(GG)	Director of Corporate, Planning and Strategy, NHS Wales JCC
Mandy Rayani	(MR)	Lay Member, NHS Wales JCC
Philip Kloer	(PK)	Chief Executive Officer, Hywel Dda University Health Board
Ross Whitehead	(RW)	Director of Commissioning for Ambulance Services and 111, NHS Wales JCC
Abigail Harris	(AH)	Chief Executive Officer, Swansea Bay University Health Board,
Angela Mutlow	(AM)	Director of Operations, Llais

Minutes:

Gareth Mitchell	(GM)	Corporate Governance Manager, NHS Wales JCC
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The meeting opened at 9:30am

Min Ref	Agenda Item
	Preliminary Matters
JCC25/027	<p>1.1 Welcome and Introductions</p> <p>The Chair, Ian Green (IG) welcomed Members, attendees and observers to the Public meeting 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>
JCC25/028	<p>1.2 Apologies for Absence</p> <p>Apologies for absence were noted as above.</p>

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JCC25/029	<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>
JCC25/030	<p>1.4 Minutes of Meeting held on 20 May 2025 and Matters Arising</p> <p>The minutes of the JC meeting held on 20 May 2025 were received and approved as a true and accurate record of the meeting. There were no matters arising.</p>
JCC25/031	<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 actions marked as 'closed'.</p> <p>Members noted that some of the remaining open risks were scheduled for future Joint Commissioning Committee (JC) Strategy Sessions and that a date had been scheduled to visit the Mother and Baby Unit at Tonna Hospital.</p>
Setting the Scene	
JCC25/032	<p>2.1 Learning from Patient Experience</p> <p>Liam Williams shared a patient story from the Welsh Ambulance Services University NHS Trust (WAST). The story was told from the perspective of the Maxwell family who had suffered a family death due to a six-hour delay in ambulance arrival. The Maxwell family stated that they had since begun the complaints process against WAST in an effort to ensure that this did not happen again.</p> <p>Members noted the changes that have been made in the ambulance service since the Maxwell family's experience.</p> <p>ACTION: IG agreed to write to the Maxwell family to express the JC's condolences, to thank the family for sharing their story and to let them know that changes have since been made including the introduction of a new service model.</p> <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> • Note the patient story.
JCC25/033	<p>2.2 Chair's Report</p> <p>The Chair's Report was received and Members noted the key meetings attended in the last period and the updates provided.</p> <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> • Note the report.

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JCC25/034	<p>2.3 Chief Commissioner's Report</p> <p>The Chief Commissioner's Report was received. Members noted:</p> <ul style="list-style-type: none"> • The good progress being made in terms of recruitment that would impact in September/October 2025 • A noticeable uptake in attendance at the Chief Commissioner's Collaborative Commissioning Leadership Group (CCLG) following the conversation at the previous JC meeting • The work programme within the NWJCC Foundation Plan and, as expected, the need to reassess the workplan and priorities as the year had developed • Work being undertaken in relation to National Commissioning Arrangements for Third Sector Organisations, Continuing Health Care including Direct Payments and Sexual Assault Referral Centres and that updates would be brought to future meetings. <p>Members discussed:</p> <ul style="list-style-type: none"> • A lack of capacity to address core issues, such finance and performance. It was noted that there had not been much of a change since the last meeting but that this would change as people worked their notice and commenced with the NWJCC • The need to ensure there was a balance between delivering the priorities in the NWJCC Foundation Plan and in responding to additional requests and new pieces of work • The need for a standard agenda item at the CCLG providing an update on delivery against the NWJCC Foundation Plan. <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> • Note the report.
JCC25/035	<p>2.4 NHS Wales Joint Committee Risk Register – May 2025</p> <p>The NHS Wales Joint Committee Risk Register – May 2025 Report was received. Members noted:</p> <ul style="list-style-type: none"> • That the Risk Register would be presented to the CTMUHB Audit, Risk and Assurance Committee in August 2025 • That each risk had been assigned to either the Quality, Safety and Outcomes (QSO) or the Planning, Performance and Finance (PPF) Sub-Committees, with each group's role to monitor and scrutinise risks and to provide assurance to JC Members • The risk summary identified 19 risks (with a score of 15 or above) of which 17 were commissioning risks from across the portfolio. The two remaining risks were corporate risks • Four new commissioning risks had been added

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	<p>That a number of activities occurred in June and early July 2025 which would enable the NWJCC to review and adjust the risk ratings that would be reflected in the next update.</p> <p>Members discussed:</p> <ul style="list-style-type: none"> • That whilst there had been many actions, no risks had been de-escalated or closed • That Cardiff and Vale University Health Board (CVUHB) neonatal risks were featured on the Risk Register because the neonatal service was currently in escalation • That further work was scheduled to be undertaken to determine NWJCC’s risk appetite, to understand the risk landscape and to ensure a robust approach to risk management at the JC Strategy Session in December 2025. <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> • Note the report; and • Approve the NWJCC Risk Register as of 31 May 2025.
JCC25/036	<p>2.5 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"> • WAST successfully implemented a revised ambulance response model on 1 July 2025 as part of a 12-month pilot. This change reflected a strategic shift from time-based targets to clinically driven, outcome-focused care. The new response categories introduced included: <ul style="list-style-type: none"> ○ Purple Category: For patients in cardiac or respiratory arrest—highest priority ○ Red Category: For patients at imminent risk of arrest without urgent intervention • A debrief of the go-live process had been held with WAST, Welsh Government (WG) and NWJCC colleagues on 4 July and 11 July 2025 with no significant issues reported • A national ambulance handover taskforce had been established, with membership drawn from clinical executives from HBs. The forum met regularly and advised the Cabinet Secretary via the NHS Leadership Board. • Non-Emergency Patient Transport Services (NEPTS) Capacity Issues - Following the last JC meeting, a more detailed discussion took place at the CCLG meeting on 24 June 2025. The group provided clear direction to the Ambulance Services and 111 commissioning team on priority areas to improve capacity and availability. Further detailed work would be progressed through the NEPTS Delivery Assurance Group (DAG) and the JC would be kept updated when necessary

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	<ul style="list-style-type: none"> • That the NHS 111 Wales digital front-end, including the website and symptom checkers, were currently out of date and in need of improvement. This issue had been highlighted in the recent Audit Wales report on Urgent and Emergency Care. The NWJCC had worked with WG, the Six Goals Programme, and WAST to secure additional funding to accelerate improvements this year with a focus on exploring digital solutions. <p>Members discussed:</p> <ul style="list-style-type: none"> • That the outcome, for patients in cardiac and respiratory arrest, was now considered the top measure within the new performance framework. The rates within Wales were currently the lowest in the UK, so this was now the focus • The need to ensure that the work on the digital front-end was tied up with other pieces of work including the emergency care pathway to improve the experience of users of the service, with a workshop due to take place in August 2025 • The impact of a significant number of outpatient cancellations between April and mid-June in Aneurin Bevan Health Board resulting from NEPTS which had been picked up with WAST. Members noted the opportunities that had been discussed at the recent CCLG including the roster review currently being undertaken by WAST and work to reduce the number of same day cancellations • Members noted that discussions have been held to combine the two strategic priorities within the NWJCC Foundation Plan relating to ambulance services <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> • Note the report.
JCC25/037	<p>2.6 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"> • The commencement of the CVUHB thrombectomy service on 1 July, the service will move to 24-hour thrombectomy services for South Wales patients to improve outcomes for patients by receiving more timely treatment • Correspondence to HBs to signal the intention to suspend the Hepato-Pancreato-Biliary Service Model Programme • The need for HBs to make their own commissioning arrangements for patients with severe acute pancreatitis • A new risk around Chimeric Antigen Receptor T-cell (CAR-T) and Joint Accreditation Committee of the European BMT Society (JACIE) accreditation, with mitigations being worked

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	<p>through with CVUHB colleagues. Concerns related to facilities, not the quality of the service. The risk of non-accreditation was noted as high and would result in a higher number of patients requiring commissioned care form elsewhere and, as such, would be a risk to the NWJCC's overall commissioning position.</p> <p>Members discussed:</p> <ul style="list-style-type: none"> • The need for a conversation at QSO Sub-Committee to ensure mitigations were correct and also to ensure Members were fully sighted on these matters • That CAR-T and Bone Marrow Transplant (BMT) need to be looked at separately as there may not be capacity in NHS England to take BMT patients in England • The need to balance the risk and the need for further conversations on this matter • Concern around the waiting times for obesity surgery at Salford Royal Hospital and the escalation of this matter. While the waiting times were a cause for concern with the service, it was noted that there were currently no quality concerns with the service. <p>Action: Update on the CAR-T risk, mitigations and accreditation process to be provided to the QSO Sub-Committee and the next JC meeting.</p> <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> • Note the specialised commissioning updates summarised in this report; and • 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.
JCC25/038	<p>2.7 Director of Commissioning for Mental Health, Learning Disabilities and Vulnerable Groups Report</p> <p>The report from the Director of Commissioning for Mental Health, Learning Disabilities and Vulnerable Groups was received. Members noted:</p> <ul style="list-style-type: none"> • Care Home Framework Agreement – with changes to procurement regulations and the current Agreement expiring at the end of March 2026, engagement had been undertaken with stakeholders and key changes made to the new Agreement. The framework needed to be in place by April 2026. The need to include Directors of Planning and Finance in the work around the Care Home Framework Agreement was noted.

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	<ul style="list-style-type: none"> • That discussions were underway between the NWJCC and Public Health Wales on the hosting of the Traumatic Stress Wales service • That the NJWCC had met with colleagues from SBUHB regarding Caswell Clinic and Glanrhyd Hospital. The required remedial work following a fire had not yet commenced, it was indicated that the work would take between 12 and 18 months to complete. Options had been discussed and it was agreed that SBUHB would work through the options and attend the CCLG meeting in August 2025 to presenting the plan to mitigate the impact of medium secure beds for patients • The concern around occupancy (approximately 75%-80% occupancy) at both Caswell Clinic and Ty Llewellyn medium secure units. It was agreed that a standardised all-Wales approach would be adopted to address this. <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> • Note the report.
Committee Briefing	
JCC25/039	<p>3.1 EMRTS Judicial Review Judgment</p> <p>A report on the EMRTS Judicial Review was received. Members noted:</p> <ul style="list-style-type: none"> • That a judgement had been handed down on the 19 June 2025 • That the claimant had submitted an application for permission to appeal and this had been responded to by the legal counsel for the defendants. As such, there was a need for the JC to continue to fully consider the outcome of the Judicial Review and await the outcome regarding the appeal process • That, should an appeal be granted, there would be further legal costs to be funded by the HBs and the risk of a prolonged appeals process. <p>IG stated that an update would be provided at the JC Strategy Session in August 2025.</p> <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> • Note the report.
Delivering the JCC Plan	
JCC25/041	<p>4.1 Financial Forecast and Risk</p> <p>The month 3 report on the NWJCC Financial Risks was received. Members noted:</p> <ul style="list-style-type: none"> • The approval of the Financial Plan for 2025-26 as part of the NWJCC Foundation Plan (2025-26), based on a number of assumptions

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	<ul style="list-style-type: none"> • That the final NWJCC Financial Plan reflected an overall uplift of 4% and represented a challenging plan • The draft NWJCC financial position at Month 3 as an overspend of £1.3m with a forecast year-end overspend position of £3.7m with further risks of £16.6m • The emerging key variances from the plan and a number of risks and opportunities • A range of savings and efficiencies <p>Members discussed:</p> <ul style="list-style-type: none"> • The need to address the challenges with pace and rigour • That the NWJCC, as an organisation, was still not at a full complement of staff • The current risks in light of the additional programmes of work • The matter of cross-border referrals and WG funding, the need to understand if there was a more cost-effective means of caring for these patients. <p>IG acknowledged that this was a challenging situation and stated that further conversations were needed with WG.</p> <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> • Note the month-end financial position for the first quarter • Discuss actions to mitigate the forecast overspend and potential risks.
JCC25/042	<p>4.1 Financial Performance Report - Month 2 2025-2026</p> <p>The month 2 NWJCC Financial Performance Report was received. Members noted:</p> <ul style="list-style-type: none"> • The financial position as an overspend of £1.7m • The appended Financial Position Report including risks to the position and commissioner and provider overviews. <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> • Note the month-end financial position.
JCC25/043	<p>4.2 Combined NWJCC Performance Report</p> <p>The month 2 operational performance report was received. Members noted:</p> <ul style="list-style-type: none"> • The report remained under development • The report detailed that Neurosurgery, Plastic Surgery and Bariatrics were a cause for concern. • The improved trajectory in ambulance handover delays however there was a need for ongoing conversations on performance monitoring and the improvement trajectory • That NWJCC sickness rates were being reduced and Personal and Development Review rates were now increasing.

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	<p>Members discussed:</p> <ul style="list-style-type: none"> • The need for continued development of the report to include a set of key indicators, to ensure the report was more transparent, easier to read and supported decision-making • The need to link the Risk Register with performance reporting through an assurance framework • The need to highlight what was going well <p>Action: Conversations around additional resource for performance reporting to be held. Update to be brought to the next meeting.</p> <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> • Discuss the May 2025 Combined NWJCC Report; and • Note the on-going work to align indicators and metrics.
JCC25/044	<p>4.3 Manchester Arena Inquiry: Review of R106 WAST Capability Report Update on Progress.</p> <p>The report was received and members noted that the R106 WAST Capability Report was developed in response to Recommendation 106 the Manchester Arena Inquiry. The report has identified critical failings in emergency response, coordination and capability. As a result, WAST undertook a detailed review of its preparedness and response functions (Recommendation 105), submitting the report to JC in line with national recommendations. The review of the Report had been prioritised as a key programme in the NWJCC's Foundation Plan and will include an independent expert review.</p> <p>Members discussed:</p> <ul style="list-style-type: none"> • The approach being adopted by other ambulance services in NHS England • Conversations with providers regarding what HBs saw as WAST's responsibility and what they saw as WG's responsibility • The timescales for this work being influenced by the independent reviewer. <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> • Note the content of the report; and • Note the project risks outlined in the report.
Governance and Assurance	
JCC25/045	<p>5.1 Corporate Governance Report</p> <p>The Corporate Governance Report was received. Members noted:</p> <ul style="list-style-type: none"> • That the Accountability Report 2024-25 (Annual Governance Statement) would be presented to the CTMUHB Annual General Meeting (AGM) on 31 July 2025

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	<ul style="list-style-type: none"> The findings from the Annual Committee Effectiveness Survey and the key development areas. These related to the development of the NWJCC Strategy and ensuring a focus on population-based needs, continuation of the development of the NWJCC Risk Register and strengthening report-writing and the quality of papers. <p>IG acknowledged the work that had been undertaken in relation to effective report writing, with further work scheduled.</p> <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> Note the report; and Note the results of the NWJCC's Annual Committee Effectiveness Survey 2024-2025 and the key areas for development in 2025-2026.
For Information	
JCC25/046	<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 Audit Risk and Assurance Committee (ARAC)</p> <p>6.1.2 Quality, Safety and Outcomes Sub-Committee (QSO)</p> <p>6.1.3 Planning Performance and Finance Sub-Committee (PPF)</p> <p>6.1.4 Individual Patient Funding Request (IPFR) Panel</p> <p>6.1.5 Welsh Kidney Network (WKN)</p> <p>Members noted that feedback was awaited from the WKN Chair on the WKN Governance Report. A report would be brought to a future JC meeting, this was unlikely to be ready for the JC Strategy Session in August 2025.</p> <p>The Joint Commissioning Committee resolved to:</p> <ul style="list-style-type: none"> Note the content of the reports.
Concluding Business	
JCC25/047	<p>7.1 Any Other Business</p> <p>There was no other business to report.</p>
JCC25/048	<p>7.2 Review of Meeting</p> <p>IG further confirmed that an 'In Committee' meeting would take place following the meeting in public.</p>
JCC25/049	<p>7.3 Date of Next Meeting</p> <p>The next routine meeting was scheduled for 16 September 2025 and the JC Strategy Session on 19 August 2025.</p>

The meeting concluded at 13:00.

Chair's Signature:

Date:

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