

Risk Dashboard (Risks Graded 15 and Above) - June 2025

		CONSEQUENCE (C)				
CxL		1 - Negligible	2 - Minor	3 - Moderate	4 - Major	5 - Catastrophic
LIKELIHOOD (L)	1 - Highly Unlikely					
	2 - Unlikely					
	3 - Likely					77 Commissioning of sufficient Emergency Ambulance Services capacity 80 JACIE accreditation - south Wales CAR T service NEW RISK ADDED MAY 2025 81 JACIE accreditation - south Wales BMT service - NEW RISK ADDED MAY 2025
	4 - Highly Likely			85 CAR T Capacity - RISK DE-ESCALATED FROM 16 TO 12 JUNE 2025	28 Business Continuity 53 C&VUHB Neurosciences Staffing issues/level 56 CVUHB Neo-natal infection control 61 Obesity surgery waiting times 65 Renal dialysis capacity across Wales 79 Type A Aortic Dissection 82 SBUHB Neuro-rehabilitation 86 C&VUHB Neurosciences National Standards - NEW RISK ADDED MAY 2025	55 CVUHB Neo-natal workforce 69 Paediatric Radiology out of hours provision
	5 - Almost Certain			03 Plastic surgery delays 83 Full commissioning of paediatric orthopaedic surgical service 84 Financial Break-even 2025/26	68 C&VUHB Specialist Auditory Hearing service waiting times	78 Utilisation of Emergency Ambulance capacity

Organisational Risk Register (Risks Graded 15 and Above) - June 2025

Risk Ref	Risk Title	Risk Description	Strategic Risk Owner	Commissioning Team/ Directorate	Identified Risk Owner/ Manager	JCC Strategic Objective	CTM Risk Domain	Risk Appetite Level	Provider/ s	Controls in place	Action Plan	Assuring Committees / Sub-Committees	Rating (current)		Rating (Target)		Target Deadline	Trend	Opened	Last Reviewed	Next Review Date
													(C x L)		(C x L)						
													C	L	C	L					
3 CB03	Plastic Surgery Delays	If...the maximum waiting times target is not achieved for plastic surgery patients in south Wales Then...some patients will be waiting in excess of WG waiting time targets Resulting in...poor patient experience and poor outcome which may lead to a commissioned service that does not meet waiting times standards and therefore does not provide the required quality of service	Director of Commissioning for Specialised Services	Cancer & Blood	Head of Commissioning, Cancer and Blood	Ensure quality: with a commissioning approach that is fostered in a quality management system, provide quality outcome, evidence based service specifications for commissioned services and monitor delivery against these	Safety & Well-being - Patients/ Staff/ Public Quality/ Complaints/ Assurance/ Patient Outcomes	Cautious - Preference for safe delivery options that have a low degree of inherent risk and may only have limited potential for reward.	SBUHB	<ul style="list-style-type: none"> The service is in escalation level 2 due to the waiting times performance position. The delivery plan to maintain the Welsh Government target through 2025/26 has been received from SBUHB. Continue to monitor progress against the delivery plan. SBUHB has received additional planned care funding to maintain achievement of the 104wk waiting time target through the 2nd quarter 2025/26 (planned care funding is released by Welsh Government on a quarter by quarter basis). 	<ul style="list-style-type: none"> To monitor progress against the plastic surgery delivery plan for quarter 2 via monthly commissioner assurance meetings with SBUHB – next escalation meeting 21/07/25. Re-benchmark efficiency - in progress. Request comprehensive demand and capacity plan. REQUESTED (expected in July 2025) <p>Update for June 2025 - The health board has confirmed that the 104wks maximum waiting time target was maintained during quarter 1. The delivery plan forecast that this position will not be sustainable without additional funding above baseline in 25/26 from quarter 2 onwards. Planned care funding has been made available for quarter 2. The C&B Commissioning team reviewed the risk which remains unchanged since additional funding above baseline is forecast to be required in quarters 3 and 4 to maintain the target.</p>	<ul style="list-style-type: none"> Joint Commissioning Committee Planning, Performance & Finance Sub-Committee Senior Leadership Team CTMUHB Audit & Risk Committee 	15	9	3	3	↔	26/02/2021	Jun-2025	Jul-2025	
28 CS3/ CD01	Business Continuity	If...JCC staff are unable to deliver core business whilst implementing the transition plan to form the new JCC Then...this will have an impact on the ability to deliver core business on delivery of the integrated commissioning plan and/or the actions to implement new systems and processes Resulting in... the workforce being under pressure and affecting morale; a negative impact on the reputation of the JCC and failure to deliver all of our plans and transition to the new operating model.	Director of Corporate Planning & Strategy	Corporate Services	Director of Corporate Planning & Strategy	Facilitate Integration: through effective engagement and collaboration, provide the key mechanism to support regional and national integration for commissioning services for the people of Wales	Service/ business interruption	Cautious - Preference for safe delivery options that have a low degree of inherent risk and may only have limited potential for reward.	N/A	<ul style="list-style-type: none"> A Transition Director has been appointed to lead the work to implement the new operating model for the JCC. The Transition Plan has been agreed with the SLT to ensure realistic timescales are set for implementation. The overarching governance framework for the JCC is complete. As part of the establishment of the JCC, the staffing structure for the JCC team will be reviewed following the appointment of the JCC Directors in June/July to ensure we have the right people in the right teams to fulfil our commissioning responsibilities. Any risks or gaps will be identified and mitigations developed – either by identifying work that will be de-prioritised, with agreement of the JCC where necessary, or by ensuring the right resources are in place by increasing the Direct Running Costs (subject to JCC approval). Any new areas of work coming into the JCC remit will be fully scoped to identify the resource implications for the JCC team, with the resource identified explicitly before the new responsibilities are accepted and endorsed. Close working with CTM as the host body in respect of timely recruitment of staff where vacancies arise, or new posts are established should minimise gaps in the core JCC team. Prioritised recruitment plan in place. Re-aligning existing resources to key priorities focussed on delivering the annual foundation plan 25/26. 	<ul style="list-style-type: none"> The Director of Transition and Transformation is leading work to develop the directorate structures to support the new operating model for the JCC - COMPLETE A vacancy scrutiny panel has been established to review the organisational finances and workforce structures - COMPLETE Following the announcement that the interim Chief Commissioner has attained a new role with SBUHB and left in October 2024, the process to recruit a substantive replacement commenced with plans in place to identify interim leadership arrangements - COMPLETE Interim cover arrangements are planned for the Director of Commissioning (Specialised Services) and Director of Planning & Performance whilst substantive appointments are made/commence - COMPLETE <p>Update for June 2025 -</p> <ul style="list-style-type: none"> OCF continues to be implemented – all key roles recruited to in line with prioritised recruitment plan but lag with start dates due to notice periods – majority will commence in post Sept/Oct 2025. Group induction being arranged to support early integration and collaboration for new starters. Interim arrangements to support the Senior Leadership Team are in place <p>Delivery of the Foundation Plan is being monitored and risk assessed given the capacity and resource constraints in the JCC. With support from our member CEOs, opportunities are being explored with CTM (host) and HEIW to secure additional short term capacity through secondments and training/development placements.</p>	<ul style="list-style-type: none"> Joint Commissioning Committee Planning, Performance & Finance Sub-Committee Senior Leadership Team CTMUHB Audit & Risk Committee 	16	12	3	3	↔	16/09/2021	Jun-2025	Jul-2025	
61	Obesity surgery waiting times	If...long waiting times for obesity surgery continue (which Salford Royal hospital have advised will be unlikely to reduce significantly in the medium to long-term) Then...patients from Betsi Cadwaladr University Health Board and North Powys awaiting obesity surgery procedures in Salford Royal Hospital will have their treatment delayed Resulting in...poor patient experience, poor outcomes and inequity of service provision between the North and South Wales service	Director of Commissioning for Specialised Services	Cardiac	Head of Commissioning, Cardiac	Ensure quality: with a commissioning approach that is fostered in a quality management system, provide quality outcome, evidence based service specifications for commissioned services and monitor delivery against these	Safety & Well-being - Patients/ Staff/ Public Quality/ Complaints/ Assurance/ Patient Outcomes	Minimal - Preference for ultra-safe delivery options that have a low degree of inherent risk and may only have limited potential for reward.	BCUHB/Salford Royal Hospital	<ul style="list-style-type: none"> Salford Royal Hospital extending operating hours and working with private provider to increase the number of procedures undertaken JCC and BCUHB Level 3 service communicating proactively to ensure that the health board is fully cognisant of the identity of longer waiters JCC corresponding with Salford Royal to monitor current waiting list position JCC pursuing mitigating actions with South Wales to be able to make a better offer to patients 	<ul style="list-style-type: none"> A meeting will be arranged with the level 2/3 BCUHB Obesity service with a view to exploring the options for an alternative provider - August/September 2025 Head of Commissioning for Cardiac is arranging to meet with the Commissioning Lead for Obesity Services (Greater Manchester ICB) in NHSE - July 2025 JCC to commence work to identify an alternative English provider - September 2025 JCC to initiate the process for escalation of the service - December 2024 The process for the escalation of the Salford obesity surgery service to Level 3 of the NWJCC Escalation Framework was initiated in December 2024 and endorsed by the NWJCC Senior Leadership Team in January 2025. A letter was sent to Salford in February informing them of the escalation and process (no response has yet been received).A chasing communication was sent by the Director of Commissioning for Specialised Services in April 2025. An escalation meeting will be arranged with the Salford service as soon as a response has been received from Salford. WIMOS have recruited the Dietician post, who has commenced in post, thereby increasing the staffing capacity to enable the service to receive a small number of referrals from North Wales. <p>Update June 2025 – WIMOS have confirmed that the service are progressing with arranging a clinic for a small number of BCUHB patients (a date has not yet been confirmed). The risk score will be reviewed following confirmation that WIMOS are receiving referrals from North Wales; no change to the risk score.</p>	<ul style="list-style-type: none"> Joint Commissioning Committee Planning, Performance & Finance Sub-Committee Senior Leadership Team CTMUHB Audit & Risk Committee 	16	4	4	3	↔	01/12/2023	Jun-2025	Jul-2025	
68 NCC064	C&VUHB Specialist Auditory Hearing Service Waiting Times	If...staffing difficulties, and an increase in BCHI referrals being received from Aneurin Bevan University Health Board continues Then...south Wales patients requiring a Cochlear Implant or Bone Conduction Hearing Implant are unable to access the Specialist Auditory Hearing Service within a timely manner Resulting in...the service cutting short the pathway to enable the service to see more patients within the current staff resources which is resulting in the quality of the service being compromised	Director of Commissioning for Specialised Services	Neurosciences	Head of Commissioning, Neurosciences	Ensure quality: with a commissioning approach that is fostered in a quality management system, provide quality outcome, evidence based service specifications for commissioned services and monitor delivery against these	Safety & Well-being - Patients/ Staff/ Public Quality/ Complaints/ Assurance/ Patient Outcomes	Minimal - Preference for ultra-safe delivery options that have a low degree of inherent risk and may only have limited potential for reward.	CVUHB	<ul style="list-style-type: none"> JCC have increased the frequency of meetings with C&VUHB Specialist Auditory Hearing Service to discuss performance, staffing issues/level and risks. Receiving and monitoring performance information Performance reporting and oversight via assurance and performance meetings, SLA meetings, Quality Safety Outcomes meetings. 	<ul style="list-style-type: none"> JCC has met regularly with the C&VUHB team to discuss performance and understand the risks. In March 2025 the service presented a waiting list plan and trajectory of how the service will move towards achieving a 26 week wait. In March 25 CVUHB shared the work force requirement to right size the service, indicating significant investment required. The JCC has requested that CVUHB considers this internally as it has been identified that CVUHB receives more income than it costs to deliver the current service. The JCC are awaiting confirmation from CVUHB regarding the financial position and recruitment to right size the service. The next performance meeting with the south Wales Specialist Auditory Hearing Service has been arranged for the 7th August 25 where an update from CVUHB is expected. <p>Update for June 2025 - Commissioning Team undertaken a review of this risk which remains unchanged</p>	<ul style="list-style-type: none"> Joint Commissioning Committee Planning, Performance & Finance Sub-Committee Senior Leadership Team CTMUHB Audit & Risk Committee 	20	4	4	1	↔	06/02/2024	Jun-2025	Jul-2025	
69 P/21/25	Paediatric Radiology Service	If...the commissioned 24/7 paediatric radiology service model is not operationalised within the children's hospital Then...this may leave a prolonged gap in out of hours' provision Resulting in...patients being transferred out of Wales, out of hours, for diagnostic assessment and potentially their ongoing treatment	Director of Commissioning for Specialised Services	Women & Children	Head of Commissioning, Women & Children	Ensure quality: with a commissioning approach that is fostered in a quality management system, provide quality outcome, evidence based service specifications for commissioned services and monitor delivery against these	Safety & Well-being - Patients/ Staff/ Public Quality/ Complaints/ Assurance/ Patient Outcomes	Minimal - Preference for ultra-safe delivery options that have a low degree of inherent risk and may only have limited potential for reward.	CVUHB	<ul style="list-style-type: none"> Revised business case against the 2021 investment received in May 2024 Quarterly assurance & performance meetings to monitor progress commenced July 2024 New proposal for service agreed September 2024 	<ul style="list-style-type: none"> Arrange meeting with service leads to discuss new proposal - Complete Paper to be presented to JCC Senior Leadership Team to outline changes to original business case and phased approach to delivering a 24/7 service agreed September 2024 Progression against business plan monitored through quarterly assurance meetings with service leads - Next quarterly assurance meeting with service leads 01/09/25 <p>Update for June 2025 - The W&C Commissioning team have reviewed the risk which remains unchanged.</p>	<ul style="list-style-type: none"> Joint Commissioning Committee Planning, Performance & Finance Sub-Committee Senior Leadership Team CTMUHB Audit & Risk Committee 	20	4	5	2	↔	20/03/2024	Jun-25	Jul-25	
77	Commissioning of sufficient Emergency Ambulance Services capacity	If...the NWJCC does not commission sufficient capacity of services Then...the providers will be unable to deliver their commissioned requirements Resulting in...reduced performance and quality standards, increased risk of harm, reduced system flow and NWJCC reputational risk	Director of Commissioning for Ambulance Services and 111	Ambulance Services and 111	Deputy Director of Commissioning for Ambulance Services and 111	Facilitate Integration: through effective engagement and collaboration, provide the key mechanism to support regional and national integration for commissioning services for the people of Wales	Safety & Well-being - Patients/ Staff/ Public Quality/ Complaints/ Assurance/ Patient Outcomes	Cautious - Preference for safe delivery options that have a low degree of inherent risk and may only have limited potential for reward.	WAST / EMRTS	<ul style="list-style-type: none"> If the NWJCC failed to commission sufficient ambulance services capacity to respond to the needs of the population of Wales, significant harm, disability or death would occur. The NWJCC have commissioned ambulance services capacity in line with the 2019 ambulance services demand and capacity review. In addition to the 2019 demand and capacity review, the NWJCC and Welsh Government have commissioned additional ambulance service capacity, to respond to the changing demands for ambulance services. It is recognised though, that the level of commissioned ambulance resources are not being fully utilised due to ambulance handover delays and therefore presents a higher scoring risk, under the risk of capacity utilisation. 	<ul style="list-style-type: none"> Increase the number of patients managed at Step 2 of the ambulance commissioning framework Investment in additional ambulance service capacity by pass through of 2024/25 uplift. Completion of 2024 Demand and Capacity review - findings being considered as part of 2025/26 IMTF plan development Assessment of implications of Manchester Arena Inquiry submission by the ambulance service being undertaken The Ministerial Advisory Group report into NHS Wales Performance and Productivity (Recommendation 13) recommends urgent action should be taken to reduce ambulance handover delays at emergency departments by implementing a national improvement programme, supported by real-time data, operational standards, and accountability mechanisms. JCC are working collaboratively to support implementation of this recommendation including taking a lead on the development of a performance dashboard. Establishment of the clinically led National Improvement Delivery Group on 1st July 2025 to reduce ambulance handover delays of which the JCC is an active participant Number of lost hours due to handover delays reduced in June 2024 to 14,410 hours which is an improving trend. <p>Update for June 2025 - Ambulance & 111 Commissioning Team have reviewed the risk score which has remained unchanged.</p>	<ul style="list-style-type: none"> Joint Commissioning Committee Planning, Performance & Finance Sub-Committee Senior Leadership Team CTMUHB Audit & Risk Committee 	15	10	5	2	↔	Sep-24	Jun-2025	Jul-2025	

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84	Financial break-even 2025/26	<p>If...the NWJCC overspends against the agreed Annual Foundation Plan 2025/26</p> <p>Then...the Health Boards will have to include the relevant amounts in their own financial reporting</p> <p>Resulting in...unexpected overspends/restriction of JCC/HB services to patients/breaching HB statutory financial requirements. If this happens there is a risk that the JCC financial position will have a detrimental impact on individual Health Board financial positions.</p>	Director of Finance & Value	Finance & Value	Deputy Director of Finance & Value	Maximise Value: through our expertise and advice, determine where resources are best focussed and prioritised to inform choices that support the improvement of patient outcomes and commission appropriate services where value is demonstrated	Financial Stability & Impact of Litigation		N/A	<ul style="list-style-type: none"> Financial performance monitored and reported to LHBS on a monthly basis providing key variance analysis in a timely manner to allow LHBS to make their own financial provisions or to take mediating actions to manage their demand. New business partner arrangements with monthly directorate team meetings Internal budget management regime to be updated in tandem with the scheme of delegation. Bi-monthly CCLG and collaborative commissioning group meetings. Bi-monthly Joint Committee meetings to discuss key variances from plan, formulate plans to manage demand where possible and to provide LHBS with sufficient information and financial forecasts to be able to make their own financial provisions in advance. 	<ul style="list-style-type: none"> Continuation of discussion with Welsh Government and Health Boards SLT prioritising the work plan aligned to the risk based foundational plan and strategic priorities. <p>Update for June 2025 - M3 reported position is a forecast £3.6m overspend, with £16.6m of Risks. Work will be ongoing at pace around Savings and work with BC and Powys around their NHSE usage.</p>	<ul style="list-style-type: none"> Joint Commissioning Committee Planning, Performance & Finance Sub-Committee Senior Leadership Team CTMUHB Audit & Risk Committee 	15	9			01/04/2025	Jun-2025	Jul-2025
												3	5	3	3				

New Risks Added (Risks Graded 15 and Above) - June 2025

JCC RISK REGISTER FOR NEW RISKS <15																
Datix ID	Risk Title	Risk Description	Strategic Risk owner	Commissioning Team / Directorate	Identified Risk Owner / Manager	JCC Strategic Objective	CTM Risk Domain	Risk Appetite Level	Provider(s)	Controls in place	Action Plan	Assuring Committees / Sub-Committees	Rating (current) C x L	Rating (Target) C x L	Target Deadline	Month Added
85 CB14	CAR T Capacity	<p>If... the strategic capital plan for cellular therapy does not include sufficient capacity for the south Wales CAR T service to accommodate NICE approvals beyond those currently delivered</p> <p>Then...increasing levels of capacity will need to be sought from CAR T centres outside of Wales to ensure timely and equitable access for patients to treatment</p> <p>Resulting in...</p> <ul style="list-style-type: none"> increasing numbers of patients having to travel further to receive treatment; an increased risk of patients not receiving treatment in a timely manner leading to poorer patient outcomes; adverse impact on patient and family experience; increase in costs to NHS Wales; threat to the long term sustainability of CAR T delivery in Wales due to not keeping up with NICE approvals; inability to deliver against the strategic intention of ATMP delivery in Wales therefore damaging reputation of NHS Wales; an increase in administrative burden 	Director of Commissioning for Specialised Services	Cancer & Blood	Head of Commissioning, Cancer and Blood	Ensure quality: with a commissioning approach that is fostered in a quality management system, provide quality outcome, evidence based service specifications for commissioned services and monitor delivery against these	Safety & Well-being - Patients/ Staff/ Public Quality/ Complaints/ Assurance/ Patient Outcomes		CVUHB	Maximising use of Auto-BMT capacity at SBUHB within the current commissioning framework to release capacity in CVUHB.	<ul style="list-style-type: none"> To work with the provider to advise WG on the implications of the options for capital development to meet strategic ambitions of ATMP delivery in Wales To explore the potential for further increasing Auto-BMT capacity at SBUHB to release additional capacity in CVUHB for CAR-T. <p>Update for May 2025 - New risk added</p>	<ul style="list-style-type: none"> Joint Commissioning Committee Planning, Performance & Finance Sub-Committee Senior Leadership Team CTMUHB Audit & Risk Committee 	16 (4x4)	8 (4x2)		May-25

De-Escalated Risks (Risks Graded 15 and Above) - June 2025

JCC RISK REGISTER FOR DE-ESCALATED RISKS <15												
Datix ID	Risk Title	Risk Description	Strategic Risk owner	Strategic Objective	Risk Domain	Controls in place	Action Plan	Assuring Committees	Rating (current)	Rating (Target)	Month De-escalated	De-escalation Rationale
85 CB14	CAR T Capacity	<p>If... the strategic capital plan for cellular therapy does not include sufficient capacity for the south Wales CAR T service to accommodate NICE approvals beyond those currently delivered</p> <p>Then...increasing levels of capacity will need to be sought from CAR T centres outside of Wales to ensure timely and equitable access for patients to treatment</p> <p>Resulting in...</p> <ul style="list-style-type: none"> increasing numbers of patients having to travel further to receive treatment; an increased risk of patients not receiving treatment in a timely manner leading to poorer patient outcomes; adverse impact on patient and family experience; increase in costs to NHS Wales; threat to the long term sustainability of CAR T delivery in Wales due to not keeping up with NICE approvals; inability to deliver against the strategic intention of ATMP delivery in Wales therefore damaging reputation of NHS Wales; an increase in administrative burden 	Director of Commissioning for Specialised Services	Ensure quality: with a commissioning approach that is fostered in a quality management system, provide quality outcome, evidence based service specifications for commissioned services and monitor delivery against these	Safety & Well-being - Patients/ Staff/ Public Quality/ Complaints/ Assurance/ Patient Outcomes	Maximising use of Auto-BMT capacity at SBUHB within the current commissioning framework to release capacity in CVUHB.	<ul style="list-style-type: none"> To work with the provider to advise WG on the implications of the options for capital development to meet strategic ambitions of ATMP delivery in Wales To explore the potential for further increasing Auto-BMT capacity at SBUHB to release additional capacity in CVUHB for CAR-T. 	<ul style="list-style-type: none"> Joint Commissioning Committee Planning, Performance & Finance Sub-Committee Senior Leadership Team CTMUHB Audit & Risk Committee 	12 (Risk reduced from a 16)	6	Jun-25	Following review of the risk score by the Associate Medical Director for C&B, it was considered that the risk from a commissioner's perspective might have previously been overstated, as patients would still have access to CAR T albeit not from Cardiff UHB.