



### QUARTER 3

### UPDATE AGAINST JCC ADOPTED PLANS

Key



Complete



Delayed started



Delayed not started



Not yet due

**1. Specialised Services (2024-25) – Implementation of Q3 Deliverables**

<b>CANCER &amp; BLOOD</b>				
<b>GOAL</b>	<b>METHOD</b>	<b>OUTCOME</b>	<b>PROGRESS</b>	<b>STATUS</b>
<b>All Wales Acute Myeloid Leukemia (AML)</b>				
All Wales Acute Myeloid Leukemia (AML)	Develop AML MDT and immunophenotyping service specifications.	Ensures patients receive the correct therapy in the timeliest and most cost efficient manner. Improves efficiency of existing Multi-Disciplinary Team (MDT) by having all results available for discussion in a single MDT meeting. Improves efficiency of existing MDT by having all results available for discussion in a single MDT meeting. Brings Welsh immunophenotyping and genetic services into compliance with national and international standards.	All Wales Acute Myeloid Leukemia and immunophenotyping service specifications developed and published	Q1
<b>Bone Marrow Transplant (BMT)</b>				
Strategic service development - implementation of haematology specialised commissioning review: To commission the full Bone marrow transplant (BMT) pathway.	Identify existing funding through resource mapping. Review service specification.	Ensures patients with complications from treatment are provided with specialist care required. Ensures consistency and equity across Wales. Provides a platform for	<b>The service specification has been revised to include patient management post day 100 (complete). However, the work to identify resources currently in the system for post day 100 remains in</b>	Q3 Re-profiled to Q4

		development of optimal service model.	<b>progress. This work is being undertaken by Cardiff and Vale University Health Board haematology and finance leads. Once identified and agreed within the Bone Marrow Transplant working group.</b>	
<b>Stereotactic Ablative Body Radiotherapy (SABR)</b>				
To continue to implement the expansion of SABR.	<p>To increase the range of SABR indications commissioned from SBUHB for the population of south West Wales.</p> <p>To apply the designation framework to commission SABR in BCUHB for the population of north Wales.</p>	Improved patient experience due to care being delivered closer to home.	<b>The first objective to increase the range of Stereotactic Ablative Body Radiotherapy indications commissioned from Swansea Bay University Health Board has been completed. However, the designation of Betsi Cadwaladr University Health Board to provide the expanded service was postponed while the Health Board addressed other priorities within its oncology service. These have now been addressed and Betsi Cadwaladr University Health Board has recently indicated it is ready to engage with the NWJCC designation process. The proposal is currently being taken through the Health Board's corporate approval process. If the</b>	<p>Q2</p> <p>Re-profiled to Q4</p>

			proposal is signed-off and submitted to NWJCC in January 2025, it is intended that the designation will complete within Q4.	
<b>All Wales Lymphoma Panel Review (AWLP)</b>				
To implement the recommendations of the All Wales Lymphoma Panel Review.	Dependent on outcome of AWLP review.	Dependent on outcome of AWLP review.	Professor Chris Fegan presented the findings from his review of AWLP to NWJCC SLT in August 2024. It is anticipated that this Goal Method & Outcome (GMO) will be carried over into 2025/26 and re-profiled once the plan of action is agreed.	Re-profiled to 2025/26
<b>Positron Emission Tomography (PET)</b>				
To commission new PET indications as part of the strategic development of PET (based on evidence based expert advice from AWPET).	Update PET commissioning policy. Commission additional indications.	Improved patient outcomes. To obtain best value from resources.	Updated PET commissioning policy incorporating additional indications developed and published.	Q1
<b>Neuroendocrine Tumours (NETS)</b>				
To consider commissioning a provider within South Wales to repatriate the service for patients with NETs (in accordance with WHSSC's designation process).		Peptide Receptor Radionuclide Therapy (PRRT) for NET: designation and repatriation to south Wales.	Velindre University NHS Trust designated as a provider of PRRT (peptide receptor radionuclide therapy) for NETs; service due to commence imminently, pending which the pathway for current south Wales patients is to the Royal Free.	Q1

<b>Cardiac</b>				
<b>Goal</b>	<b>Method</b>	<b>Outcome</b>	<b>Progress</b>	<b>Status</b>
<b>Obesity Surgery</b>				
Commission Level 4 obesity surgery services that integrate seamlessly with the All-Wales Weight Management Pathway and ensure equitable access for all Welsh patients.	Work with the Welsh Government to ensure pathway integration and consistent approach to patients who have received private procedures.	A fully integrated Weight Management pathway with equitable access for all Welsh patients.	<b>The Welsh Government and Public Health Wales continue to develop an addendum to the All Wales Weight Management Pathway to address the needs of patients who have received private procedures. The NHS Wales Joint Commissioning Committee has contributed where apposite, although timescales for completion of the exercise remain outside its influence</b>	Q1  Re-profiled to Q4; Timescales outside of NWJCC influence
	Mitigate capacity constraints.	Provision of sufficient capacity to meet demand for Level 4 services, subject to funding constraints.	Included as a risk on the Cardiac Risk Register. Focus has been on ascertaining whether Swansea Bay University Health Board may undertake procedures for patients from North Powys and Betsi Cadwaladr, and how any increase may be funded (noting the cost-effective Swansea Bay tariff). This has recently been agreed	Q1
	Explore potential for alternative English provider and scope for NW patients to	Equity of access for all Welsh patients.	The Welsh Institute of Metabolic and Obesity Surgery (WIMOS) has been allocated additional resource	Q1

	undergo procedures in SW.		to receive referrals from BCUHB and North Powys.	
<b>Inherited Cardiac Conditions (ICC)</b>				
Develop proposals for the delivery of WHSSC-commissioned ICC services that build on the work already undertaken to identify gaps in current provision.	Work with stakeholders to develop a service model and to identify commissioning needs, mindful of planned investment in Clinical Nurse Specialist and Administrative staff having been paused.	Service model that delivers care closer to home and ensures equity of access for patients.	<b>Exercise to develop proposals for the delivery of NWJCC-commissioned Inherited Cardiac Condition services paused as a consequence of Commissioning Team staff secondment.</b>	Q3 Re-profiled to Q1 2025/26
<b>Type A aortic dissection</b>				
Commission a single site for Type A aortic dissections (including the Frozen Elephant Trunk technique).	Application of WHSSC designated provider process to enable the selection of preferred provider.	Single provider for Type A aortic dissections and the Frozen Elephant Trunk technique, enabling improved care of Welsh patients closer to home.	<b>Designated provider process undertaken, but NWJCC advised that neither of the two South Wales Cardiac Surgery Centres would be in a position to submit a proposal to be the single site for Type A aortic dissections (including the Frozen Elephant Trunk technique) as a result of ongoing service pressures and concurrent priorities.</b>	Q3 Planned action complete, however to be followed by a further exercise
	Commission single provider and manage period of transition and proctorship.		<b>Second phase of exercise dependent on identifying a suitable provider. NWJCC now proactively working with the two South Wales</b>	Q3 Re-profiled to Q1 2025/26

			<b>Centres to identify an appropriate way forward.</b>	
<b>Pulmonary Hypertension (PH)</b>				
To optimise the delivery of Pulmonary Hypertension (PH) services.	Develop and implement a Pulmonary Hypertension service specification that supports current services whilst enabling future repatriation in line with recommendations of the previously undertaken WHSSC PH review.	PH services available closer to home for Welsh patients.	<b>Further delay to proposed completion as a consequence of Commissioning Team staff secondment. Re-profiled for completion in Q4.</b>	Q2 Re-profiled to Q4
<b>Cystic Fibrosis (CF)</b>				
Commission Cystic Fibrosis (CF) services whose form and focus reflect the impact of Cystic fibrosis transmembrane conductance regulators (CFTR modulators) on the long-term management of patients with Cystic Fibrosis.	Review and reconfigure WHSSC-commissioned CF services.	Welsh patients have access to CF services that support the needs of current patients and which can accommodate future clinical needs.	<b>Service review led by the NWJCC Finance Team has gathered evidence and completed reporting, which will be used as the basis of a negotiation with Cardiff and Vale University Health Board to reconfigure the current contractual arrangements. Commissioning Team working to develop a framework for negotiation. Self-assessment of current service to be undertaken under routine commissioning</b>	Q2 Re-profiled to Q3 but now complete

Agenda Item 2.3.1

Appendix 1

			<b>arrangements. Action complete.</b>	
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<b>Mental Health</b>				
<b>Goal</b>	<b>Method</b>	<b>Outcome</b>	<b>Progress</b>	<b>Action Status</b>
Welsh patients requiring secure service provision are able to access high quality services with an effective pathway across the entire system.	<p>Consider Demand and Capacity report and recommendations as part of strategy development.</p> <p>Options appraisal on long term secure services model.</p> <p>Development of any business cases for the preferred option for future secure services provision.</p> <p>To consider blended models of care.</p>	<p>To enhance the patient pathway and flow between differing components of the secure service for both men and women (inclusive of patients with a learning disability).</p> <p>To ensure adequate low and medium secure provision is available for Welsh patients.</p> <p>Provision as close to home as possible.</p> <p>Assurance of quality and performance of provision.</p>	<p><b>Low secure commissioning to be reviewed during Q1 2025/26. Medium Secure pathways and flow to be considered during 2025/26 as part of the strategy revision in line with NWJCC priorities.</b></p>	<p>Q3</p> <p>Re-profiled to Q3 2025/26</p>
<b>Child and Adolescent Mental Health Services (CAMHS)</b>				
<p>To ensure that Child and Adolescent Mental Health Services (CAMHS) services are available and delivered in compliance with the WHSSC service specification.</p>	<p>To develop the strategy to reflect the demand and capacity report.</p> <p>Identify options for future service development.</p> <p>Conduct a full options appraisal to determine the preferred option</p>	<p>Published CAMHS Service specification.</p> <p>To ensure service provision is correct for population need.</p> <p>Ensure patients are treated as close to home as possible.</p> <p>Ensure that out of area placements are</p>	<p>Mental Health strategy reflective of the demand and capacity work undertaken and options for future service development identified. Full options appraisal to determine the preferred option for future service development undertaken.</p>	<p>Q2</p>

	for future service development.	appropriate for individual need.		
<b>Vulnerable Groups</b>				
<b>Goal</b>	<b>Method</b>	<b>Outcome</b>	<b>Progress</b>	<b>Action Status</b>
To ensure that adults in Wales have access to non-surgical gender identity services in a timely manner.	Continue to monitor and address the waiting list for new and follow up patients.	Adults in Wales have increased timely access to appropriately resourced non-surgical gender identity services.	<b>Welsh Gender Service provision in place. Ongoing monitoring in place.</b>	Complete
	Repatriation of open cases from the London Gender Identity Clinic (Tavistock and Portman NHS Foundation Trust) to the Welsh Gender Service.	Adults on the NHS Wales pathway have timely and equitable access to gender identity services.	Repatriation process is underway.	Q2
<b>Forensic Adolescent Consultation Service (FACS)</b>				

Agenda Item 2.3.1

Appendix 1

To commission the Forensic Adolescent Consultation Service (FACS) for Youth Justice Services in Wales.	Evaluate the current service provided by FACS for Youth Justice Services	The FACS for Youth Justice Service's service specification is informed by an evaluation.	<b>Service specification drafted. Evaluation to be conducted in Q4.</b>	Q3 Re-profiled to Q4
		Access for complex children and young people that may not be in receipt of mental health services	<b>To be considered further once service specification is published.</b>	Q3 Re-profiled to Q4

<b>NEUROSCIENCES AND LONG TERM CONDITIONS</b>				
<b>Goal</b>	<b>Method</b>	<b>Outcome</b>	<b>Progress</b>	<b>Action Status</b>
<b>Specialist Auditory Hearing Service</b>				
To ensure that the North Wales Paediatric Cochlear Implant patients receive follow up care closer to home.	Repatriate the north Wales Paediatric Cochlear Implant patients from Manchester University Hospital.  Monitor the transformation through regular meetings with the service and at BCUHB interface meetings.	Improve patient flow across the pathway.  Ensure value for money in commissioning.  Care is provided closer to home.	Repatriation process is underway.	Complete
<b>Deep Brain Stimulation (DBS)</b>				
To develop a Movement Disorder service Model and review current commissioning arrangements for the Deep Brain Stimulation (DBS) Service.	Work with Health Boards to develop a service model which provides a high quality sustainable service. Establish a framework for the subsequent DBS service modelling work for the south Wales population, using the Designated Provider Framework. Work with Neurology and Gerontology teams across the south Wales region to	Improved patient flow across the DBS service pathway. Increased staff skills and knowledge.	<b>Due to a temporary arrangement with regards current service provision, and the need for an interim alternate pathway, the future service model work has been delayed, and will re-commence at the appropriate time.</b>	Q2  Re-profiled to Q4

	<p>help identify the surgical patient cohort.</p>			
<p><b>Thrombectomy</b></p>				
<p>To commission a Thrombectomy Service for the South Wales region.</p>	<p>Review and update the current policy.</p> <p>Provide opportunity for review of these patients within the CVUHB neurology service with active feedback to referring teams to aid with continuous professional development and education.</p> <p>Develop a separate service specification to include new access criteria, patient outcome measures and value based healthcare to shape our commissioning decisions.</p> <p>Utilise Stroke national clinical guidelines to shape the commissioning of Thrombectomy services.</p>	<p>All Thrombectomy patients get access to expert Thrombectomy treatment and opinion.</p> <p>Equity of provision, and effective use of resource.</p> <p>Compliance with National Clinical Guidelines for Stroke standards for Thrombectomy services.</p>	<p><b>In August 2024, the NWJCC funded a Phase 1 investment for the Delivery of Mechanical Thrombectomy Capacity in south Wales to provide a Monday to Friday 9-5pm service at Cardiff and Vale Health Board with the North Bristol NHS Trust providing a wraparound service from 6am-9am and 5pm to midnight.</b></p> <p><b>The NWJCC received a benefits realisation and workforce plan from Cardiff and Vale University Health Board in November 2024 indicating a delayed start until Q1 2025.</b></p> <p><b>The NWJCC is meeting with the service regularly to review progress and mitigate the risks of the delay.</b></p>	<p>Q3</p> <p>Re-profiled to Q1 2025/26</p>

Agenda Item 2.3.1

Appendix 1

	Work in partnership with health boards and clinical networks to improve standardisation across patient pathways.			
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<b>Women and Children</b>				
<b>Goal</b>	<b>Method</b>	<b>Outcome</b>	<b>Progress</b>	<b>Action Status</b>
<b>Paediatric Infectious Diseases</b>				
Commission Paediatric Infectious Diseases	Work with provider on business case Consideration by Implementation Board prior to formal NWJCC process (SLT / MG)	Equitable access with equitable waiting times for all patients monitored through activity numbers and waiting times for treatment	<b>Approved by Management Group May 2024. Provider now undertaking recruitment to the service.</b>	Complete
<b>Paediatric Orthopaedic Surgery</b>				
Entire Paediatric Orthopaedic Surgery pathway is commissioned effectively.	Undertake Needs assessment and gap analysis to inform future requirements. Consideration by Implementation Board prior to formal NWJCC process (SLT / MG)	Equitable access with equitable waiting times for all patients monitored through activity numbers and waiting times for treatment	<b>Needs assessment and gap analysis conducted; funding release approved.</b>	Complete
<b>Paediatric Service Reviews</b>				
To ensure <b>Endocrinology</b> is an efficient and equitable service through the review of services are available for children across Wales both in-reach and outreach	Contract re-basing for each reviewed service.	Improved access to paediatric services for all patients across Wales.	<b>Request to services for additional information that will inform the planned contract re-basing and individualised quality indicators (including outreach clinics, benefits realisation, improvement plan, proposed performance indicators</b>	Q2 Re-profiled to Q4
	Individualised quality indicators published and reported against for each reviewed service.	Publish Service Specification for each reviewed service  Efficient models of delivery for all paediatric services.		

		<p>Equitable access to services in line with the STEEEP (Safe, timely, efficient, effective, equitable, patient centred quality framework.</p>	<p>and peer) requested and in progress.</p>	
<p>To ensure <b>Oncology</b> is an efficient and equitable service through the review of services are available for children across Wales both in- reach and outreach.</p>	<p>Contract re-basing for each reviewed service.</p> <p>Individualised quality indicators published and reported against for each reviewed service.</p>	<p>Improved access to paediatric services for all patients across Wales.</p> <p>Publish Service Specification for each reviewed service.</p> <p>Efficient models of delivery for all paediatric services.</p> <p>Equitable access to services in line with the STEEEP (Safe, timely, efficient, effective, equitable, patient centred quality framework.</p>	<p>Service specification developed and published 2024; review of Paediatric Oncology Shared Care Units undertaken.</p> <p>Financial deep dive and contract re-basing remains in progress.</p>	<p>Q3</p> <p>Re-profiled to Q4</p>
<p>To ensure <b>Cleft Lip and Palate</b> is an efficient and equitable service through the review of the services available for children across Wales both in-reach and outreach.</p>	<p>Contract re-basing for each reviewed service.</p> <p>Individualised quality indicators published and reported against for each reviewed service.</p>	<p>Improved access to paediatric services for all patients across Wales.</p> <p>Publish Service Specification for each reviewed service.</p> <p>Efficient models of delivery for all paediatric services.</p> <p>Equitable access to services in line with the</p>	<p>Contract re-basing for each reviewed service undertaken and individualised quality indicators published and reported against for each reviewed service.</p>	<p>Q1</p>



		STEEEP (Safe, timely, efficient, effective, equitable, patient centred quality framework.		
<b>Paediatric Ophthalmology</b>				
To ensure paediatric ophthalmology services are available for the people of Wales.	Formally Commission Paediatric Ophthalmology.  Work with provider to develop business case; followed by consideration by the Specialised Paediatric Strategy Implementation Board.	Equitable access to Specialised Paediatric Ophthalmology for the population of Wales.	<b>Initial discussions taken place with National Clinical lead; workshop with all Welsh health boards with multi-disciplinary input to discuss progression of business case and service development scheduled for February 2025.</b>  <b>Service specification in development and Specialised Paediatric Strategy Implementation Board updated in January 2025 meeting.</b>	Q3  Re-profiled to Q1 2025/26

<b>Welsh Kidney Network</b>				
<b>Goal</b>	<b>Method</b>	<b>Outcome</b>	<b>Progress</b>	<b>Action Status</b>
<b>Vascular Access</b>				
Strategy Vascular Access.	Refresh Vascular Access Commissioning Policy and Service specification.	Reduction of variation of vascular access across Wales.  There is equitable access and service provision for patients.	<b>Commissioning Policy and Service Specification in final draft to present at NWJCC Policy Group in March 2025. New Clinical Lead for Vascular Access came into post in November 2024 and brought suggested changes to documents.</b>	Q2  Re-profiled to Q4
Strengthen national approach on Information Technology.	Development of Renal Digital Strategy.	Increasing and enabling standardisation where appropriate.  Utilising existing systems to achieve maximum benefit.  Reduction of inconsistent reporting on funded and unfunded capacity throughout Wales, through the development of digital intelligence solutions  An increased offering of a digitised provision of Kidney Services in Wales.	<b>Draft document Welsh Kidney Network: IT System Integration and workforce analysis, has been drafted by Head of Informatics within Joint Commissioning Committee and shared with Welsh Kidney Network Information Technology Lead.  Task and Finish Group to be established in February to review and implement recommendations.  Wider strategic direction of Digital within Welsh Kidney Network will move into 2025/2026 aligning</b>	Q1*  Re-profiled to Q4

		<p>An established workforce model for Renal Digital Service across Wales.</p> <p>Develop population health resources which will provide greater intelligence for Kidney Services in Wales.</p>	<p>with the recently published Ministerial priorities for 2025-2028</p>	
<b>Major Trauma</b>				
<b>Goal</b>	<b>Method</b>	<b>Outcome</b>	<b>Progress</b>	<b>Action Status</b>
<p>Continued delivery of planned South Wales Major Trauma Network and Major Trauma Centre evaluations.</p>	<p>Undertake Gateway5 external assurance post implementation review.</p>	<p>Welsh Government and WHSSC assured that planned benefits are being achieved and that strategic outcomes are being met.</p>	<p>WG gateway review undertaken Q1, resulting in a green delivery confidence rating. of Green against the original Business Case.</p>	<p>Complete</p>
<p>Robust commissioner oversight, facilitated by revised reporting.</p>	<p>Development of annual report, measuring performance against service specification and PBC investment objectives.</p>	<p>Demonstrable and measurable health gains, equity, clinical and skills sustainability, and value for money.</p>	<p>Annual report developed that measures performance against service specification and PBC investment objectives</p>	<p>Complete</p>
	<p>Proactively identify and ameliorate potential underperformance or divergence from</p>			

	requirements of service specification.			
<b>Spinal Services</b>				
<b>Goal</b>	<b>Method</b>	<b>Outcome</b>	<b>Progress</b>	<b>Action Status</b>
Robust commissioner oversight, facilitated by appropriate reporting.	Delivery Assurance Group (DAG) reporting to be developed with WHSSC that measures performance against service specification.	Demonstrable improvements to the experience and outcomes of patients who require elective or emergency spinal surgery.	Reporting developed and performance monitored at Delivery Assurance Group meetings.	Complete
	Development of annual report that provides system evaluation, governance, performance and quality improvement.		Annual report has been submitted and will be reviewed by JCC governance structures as required.	Complete
<b>Cross Cutting</b>				
<b>Goal</b>	<b>Method</b>	<b>Outcome</b>	<b>Progress</b>	<b>Action Status</b>
<b>Positron Emission Tomography (PET)</b>				
Continue to deliver the all-Wales Positron Emission Tomography (PET) Programme which includes establishment of four new PET centres in Wales.	Effective oversight and assurance function of the three Projects (SBUHB, BCUHB and PETIC), in addition to implementation of other service enabling activity.	Improvement in key clinical and process outcomes.	<b>Progress continues, with Swansea Bay University Health Board business case approved and Betsi Cadwaladr University Health Board outline case being submitted to their Board in January 2025. Business Case for the Wales Research and</b>	Ongoing objective; reported in Q4

			<b>Diagnostic Positron Emission Tomography Imaging Centre (PETIC) uptake rooms is in development. Regular programme Board and All Wales PET Meetings continue however programme funding is yet to be confirmed</b>	
<b>Molecular Radiotherapy (MRT)</b>				
Develop the all-Wales strategic plan for the delivery of Molecular Radiotherapy (MRT) services in Wales.	Set up appropriate programme infrastructure using established methodology.	Allows service providers and commissioners to prepare for the introduction of clinically and cost effective MRT treatments for Welsh patients.	Molecular Radiotherapy programme infrastructure established and Molecular Radiotherapy strategic plan developed. Funding request to Welsh Government for programme continuation submitted.	Q2
Inform a future programme of work for a WHSSC Outcomes Framework.	Carry out an initial feasibility study in order to design a programme of work for Value-Based commissioning.	Develop and collect clinical and process outcome measures (including PROMs and PREMs) to determine treatment effectiveness and enable effective performance management.	<b>ATMP Outcomes Programme in progress. Discussions around expanding to other areas planned</b>	Ongoing objective; reported in Q4
To provide WHSSC with a comprehensive and	Continue to provide a robust and efficient	Strengthens financial governance and supports greater value for	<b>Blueteq process in place and medicines</b>	Complete

effective medicines optimisation resource.	Blueteq process for all medicines that are commissioned by WHSSC.	specialised medicine spend in NHS Wales. Ensures equitable access to medicines across Wales. Improves communication between WHSSC and clinicians.	<b>optimisation team fully staffed.</b>	
	Support the WHSSC Individual Patient Funding Request (IPFR) process, providing pharmaceutical advice and the production of evidence reviews as appropriate.	Ensures the IPFR team and WHSSC IPFR panel have access to timely, evidence-based information to assist decision making.	<b>Ongoing support for IPFRs provided as required.</b>	
To provide a comprehensive, timely and accurate horizon scanning service (medicines and non-medical technologies).	Work with external agencies to identify new medicines and non-medical technologies.  Inform the WHSSC prioritisation process, WHSSC service development and financial planning within commissioning teams and supports other	Ensures that WHSSC and its commissioning teams have accurate and up-to-date information regarding all new medicines and non-medical technologies, including all mandated NICE and All Wales Medicine Strategy Group (AWMSG) approved medicines.	<b>Initial work to establish mechanisms complete and now move to business as usual</b>	Q3

Agenda Item 2.3.1

Appendix 1

	programmes within WHSSC and across NHS Wales.	Ensures that WHSSC is informed of future potential specialised services/treatments, ensuring that commissioning decisions are supported with robust evidence.		
		Provision of rapid evidence reviews to support prioritisation, policy development and specific projects across WHSSC commissioning teams and programmes.		
Imiglucerase (Cerezyme®) Commissioning of "Imiglucerase (Cerezyme®) as long-term enzyme replacement therapy		Clinical Policy CP55 Updated and in use across Wales to enable access to treatments	Complete	Q2

## 2. EASC IMTP (2024-27) Implementation of Q3 deliverables

Ambulance and 111 Commissioning Update – Q3				
NHS 111 Wales				
Commissioning Intention	Method	Outcome	Progress	Action Status
Clinical Response Model	Alignment of 111 clinical support pathways with 999 clinical support pathways	<b>Remote Clinical Support Function –</b> The development of an organisational remote clinical support infrastructure that has the ability to provide clinical and mental health advice, assessment and referral functions for health care professionals and patients.	<b>Completed. Work has been completed to develop the infrastructure to align 111 pathways to 999. In Q3, a single integrated CSP for 111 and 999 was implemented. Development of a comprehensive winter plan between 999 and 111 was developed to respond to increased demand during the period Q3 and Q4. Work will continue on system integration in Q4.</b>	Complete
Availability	New Strategic Workforce Plan	<b>Workforce Stability -</b> Maximising the availability of staff through the delivery of a strategic workforce plan, aligned to wider organisational strategic plans that incorporates the organisations approach to: Reducing sickness levels and absences, and increase workforce retention levels.	<b>Implementation of new Strategic Workforce Plan Implemented in Q3. Increased demand and high sickness levels during December 2024, resulting call abandonment rates increasing but remaining within up control limits.</b>	Complete
Emergency Ambulance Services (EMS)				



Commissioning Intention	Method	Outcome	Progress	Action Status
Clinical Response Model	EMS Operational Transformation Programme	<b>Right response first time</b> – Aligned to the ambitions of the inversion of the triangle, this aim seeks to improve patients’ clinical outcomes by ensuring the most appropriate clinical response is provided for each patient condition.	<b>Optimising conveyance plan: The Clinical Model Transformation programme, is being developed at pace with Rapid Clinical Screening (RCS) 3 and 2 going live in Q3 and RCS1 expected to go live in early February.</b>	Complete
Clinical Response Model	Winter Planning	<b>Right response first time</b> – Aligned to the ambitions of the inversion of the triangle, this aim seeks to improve patients’ clinical outcomes by ensuring the most appropriate clinical response is provided for each patient condition.	<b>A robust winter plan was developed to ensure that 999 services were able to appropriately respond to patients during periods of high demand.</b>	Complete
Wider Health System	Develop a new process for the prioritisation and management of inter-facility patient transfers	<b>Transfer and Discharge Service</b> – To take a partnership approach to the development and delivery of transfer service solutions that meets the requirements of health board service plans and patient needs.	<b>Introduction of a Medical Transfer Protocol Suite (MTPS), dedicated to the management of inter-facility transfers.</b>	Complete
Clinical Response Model	The JCC Ambulance and 111 Commissioning Team to provide an update on issues highlighted by health boards regarding ambulance performance	<b>Right response first time</b> – Aligned to the ambitions of the inversion of the triangle, this aim seeks to improve patients’ clinical outcomes by ensuring the most appropriate clinical response is provided for each patient condition.	<b>System pressures continue to present a significant challenge in the delivery of Emergency Ambulance Services, with ambulance handover delays in December 2024 exceeding 25,000 lost hours.</b>	Phases 1 & 2 complete  Phase 3 will take place in 2025/2026

			Health Boards have raised issues relating to discharge and transfer capacity to support effective system flow, within ED and planned care. The JCC are working with partners to identify opportunities in reconfigure and increase resource capacity for Q4.	
Non-Emergency Patient Transport Services (NEPTS)				
Commissioning Intention	Method	Outcome	Progress	Action Status
System Transformation	Development of a Future Vision for the Non-Emergency Patient transport in Wales	To develop a new Future Vision for NEPTS, outlining a strategic approach for the commissioning and delivery of patient transport services, to meet the needs of health boards and the population of Wales.	Draft Non-Emergency Patient Transport Future Vision completed. To be presented to the JCC in January 2025 for comment.	Re-profiled to Q4
Capacity	Undertake a review of existing NEPTS rosters	<b>Transforming Capacity</b> - Implement processes to increase NEPTS capacity within current internal and external resources including workforce and fleet.	Roster review undertaken with new roster keys agreed. New roster keys to be implemented in Q4.	Complete
Capacity	Undertake a Resource Capacity Review	<b>Reducing Lost Capacity</b> - Implement improvement plans and oversight arrangements to deliver reduction in lost capacity due to system inefficiencies.	WAST and health boards have engaged in dialogue to review discharge practices and appointment cancellation processes to reduce lost capacity. This work will be further in Q4.	Complete

Agenda Item 2.3.1

Appendix 1

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<b>Emergency Medical Retrieval and Transfer Services (EMRTS) / Adult Critical Care Transfer Services (ACCTS)</b>				
<b>Commissioning Intention</b>	<b>Method</b>	<b>Outcome</b>	<b>Progress</b>	<b>Action Status</b>
Service Expansion	Full Implementation of the EMRTS Service Expansion Programme	<b>Planning</b> – Build on the implementation and consolidation of Phase 1 of the EMRTS Service Expansion project, working collaboratively with commissioners to plan the implementation of the remaining phases of the EMRTS Service Expansion programme in line with the outcome of the EMRTS Service Review.	The recommendations from the EMRTS Service Review were approved at JCC in April.  EMRTS Service Expansion: Plans for service expansion are in hold subject to completion of the EMRTS Service Review and the related Judicial Review.	
Evaluation and Review	Undertake an evaluation of the Adult Critical Care Transfer Service	<b>Evaluation and Review</b> – Building on the ACCTS Service Evaluation, the ACCTS team will ensure that lessons are learned and anticipated outcomes and benefits are realised and will work with stakeholders to deliver a service that contributes to the needs of the wider health system.	Adult Critical Care Transfer Service: The finalised Adult Critical Care Transport Service (ACCTS) Service Evaluation was presented to and approved by the EMRTS DAG members in September. <b>Learning from the evaluation has helped shaped the development of the ACCTS business case, being developed by the JCC.</b>	Complete
Engagement	Development of ACCTS Business Case, aligned to the outcomes of the service evaluation	<b>Engagement</b> – Continue to build on established relationships and to engage with all stakeholders to review and strengthen the service model(s) implemented to maximise the clinical outcomes, value, quality and safety of service delivery.	<b>The JCC Ambulance and 111 Commissioning Team, along with ACCTS have developed a business case, outlining the requirements to expand the service in order to meet the needs of health boards within the</b>	Q4

			south west region of Wales.	
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### 3. NCCU Workplan – Implementation of Q3 deliverables

Goal	Method	Anticipated Outcome	Progress	Delivery by
Obesity /Weight Management/Healthy Diet	to develop spotlight report on Obesity with people with serious mental illness	To publish report on state of Obesity with people with serious mental illness	Report completed and being proof read	01/11/2024
Substance Use review	Baseline assessment of NHS Substance Use services	To ensure these designated services can meet the needs of Substance Use service users	Work programme agreed with WG and RCPsych. Series of reports to be completed throughout 2025.	01/09/2024 Reprofiled to Q3 2025/26
Smoking Cessation	To support patients with serious and enduring mental illness to cease smoking	To undertake smoking cessation baseline review in targeted services	Draft report complete	01/11/2024
111#2 Sustainability	RCRP planning	NHS111#2 MH can meet current and new demand	Additional Welsh Government funding distributed following Demand & Capacity analysis.	01/01/2025
111#2 and Vulnerable Groups	Training of call takers in interactions with Deaf/hearing impaired	NHS111#2 MH can meet the needs of the deaf/hearing impaired community	Discussions with Swansea University re commissioning training package for staff.	30/02/2024
Alternative to Admission for Children and Young People (CYP)	To commission services for CYP in crisis away from Emergency Departments (EDs).	To meet the needs of CYP in crisis and reduce demand on EDs.	<b>All services now open, formal Ministerial openings of final 3 HB services in Q3.</b>	31/03/25

Agenda Item 2.3.1  
Appendix 1