





QUARTER 4

UPDATE AGAINST NWJCC ADOPTED PLANS

Key

 Complete  Delayed started  Delayed not started  Paused due to in year financial decision

Progress Updates

Blue text denotes update received in quarter

Black text denotes updates received in previous quarters

CANCER & BLOOD				
Goal	Method	Outcome/s	Progress	Status
All Wales Acute Myeloid Leukemia (AML)				
To commission an All Wales Acute Leukaemia MDT as a recommendation from the Haematology specialised commissioning review	Develop an AML MDT commissioning policy and service specification.	All AML patients have access to expert AML opinion to inform their individual care pathway. Ensures patients receive the correct therapy in the timeliest and most cost efficient manner.	Commissioning policy and service specification complete.	Q4 Complete
	Designate a Health Board to host the All Wales AML MDT.	Allows more patients to be treated locally. Allows better use of resources at the tertiary centre. Improves communication between Welsh centres.	Currently unable to designate a provider due to NHS Wales financial position, although all possible enabling actions have been undertaken.	To be considered as part of the 2026-2029 IMTP
All Wales Acute Leukaemia - immunophenotyping	Develop an AML immunophenotyping service specification.	Ensures patients receive the correct therapy in the timeliest and most cost efficient manner. Improves efficiency of existing MDT by having all results available for discussion in a single MDT meeting.	All Wales Acute Myeloid Leukaemia and immunophenotyping service specifications developed and published	

		Brings Welsh immunophenotyping and genetic services into compliance with national and international standards.		
	Designate a Health Board for AML immunophenotyping.		JCC unable to designate due to complex interdependencies which need further discussions with Health Boards during 2025/26 in order to resolve the way forward. All JCC enabling actions have been delivered.	Carried forward into 2025/26
Bone Marrow Transplant (BMT)				
Strategic service development - implementation of haematology specialised commissioning review: To commission the full Bone marrow transplant (BMT) pathway (inc. management of long-term complications).	Review service specification.	Ensures patients with complications from treatment are provided with specialist care required.	Service specification has been reviewed and revised. .	Q4 Complete
	Identify existing funding through resource mapping for transfer to NWJCC.	Ensures consistency and equity across Wales. Provides a platform for development of optimal service model.	Q4 Update Resource mapping - Work to identify and map resources has proved to be highly complex and remains ongoing, supported by Health Board colleagues.	Delayed due to complexity of resource mapping will feed in to IMTP development for 2026-2029

Thrombotic thrombocytopenic purpura (TTP)				
To commission a Thrombotic thrombocytopenic purpura (TTP) pathway for south Wales.	Develop service specification.	Equitable access to specialist care. Better outcomes for patients with TTP. Equitable access to clinical trials.	Service has adopted NHS England specification.	Q4 – Complete
	Agree pathway and provider.		New pathway drafted with Bristol as provider of acute service.	Q4 – Complete
	Identify existing funding in the current service and any additional funding required.		Q4 Update: Additional funding needs have been identified; currently unable to commission a Thrombotic thrombocytopenic purpura (TTP) pathway for south Wales due to financial position in Q4 of 2024/25 moving in to 2025/2026.	No funding available to conclude final stage – will need consideration within 2026-2029 prioritisation process.
Plastic Surgery				
Plastic surgery commissioning project	Define specialised plastic surgery.	Achievement of best value from commissioning.	Definition of specialised plastic surgery has been developed	Q4

	Scope the opportunities for streamlining pathways.	Ensuring the specialist skills of plastic surgery are used prudently to improve outcomes for patients. Maximise opportunities for pathway development and innovation.	Scoping complete	Q4
	Scope the opportunities for promoting joint training.		Scoping complete	Q4
	Identify non-specialised procedures requiring a regional collaborative approach to provision and commissioning.		Procedures identified	Completion of project delayed due to the complexity of defining specialised plastic surgery. The project will move into a transition year in 2025/26, with shadow reporting and preparations for transfer of commissioning from April 2026.
Selective Internal Radiation Therapy (SIRT)				
To consider commissioning a local provider for Selective Internal Radiation Therapy (SIRT) for treatment of Hepatocellular Carcinoma (HCC).	To apply the WHSSC designation framework to commissioning a local provider of SIRT for HCC.	Improved patient experience due to care being delivered closer to home. Improved access to SIRT due to provision closer to home.	Service specification finalised. Designated Provider process undertaken and expression of interest received from C&VUHB. Further proposal being drafted by C&VUHB had been intended for submission to JCC in Q4, however has been	Whilst action here is achieved, there are further resulting actions in 2026

			delayed whilst further analysis is undertaken – as such there will be further actions in 2026.	
Stereotactic Ablative Body Radiotherapy (SABR)				
To continue to implement the expansion of SABR.	To increase the range of SABR indications commissioned from SBUHB for the population of south West Wales.	Improved patient experience due to care being delivered closer to home.	Action Complete.	Q2 Complete
	To apply the designation framework to commission SABR in BCUHB for the population of north Wales.		The designation of BCUHB was postponed while the Health Board addressed other priorities within its oncology service. Anticipated that the designation process will complete in Q1 2025/26, with a recommendation to CCLG in June 2025	Carried forward into Q1 of 2025/26 due to provider request
Thoracic Surgery				
To support the strategic	To continue to support the SBUHB project to	Equitable access to high quality and	The thoracic surgery project, led by Swansea Bay UHB, has been	Action to be encompassed within the cardiac review outlined within the

development of thoracic services.	establish a single Thoracic surgery centre at Morriston Hospital by providing commissioner input into the South Wales Adult Thoracic Surgical Services Programme.	sustainable thoracic surgery. To obtain best value from resources.	paused throughout 2024/25 while the outcome of the Outline Business Case is considered and relatively prioritised for capital funding by Welsh Government. Most recently, Welsh Government have confirmed that the business case will not be funded	strategic priorities of the Foundation Plan.
Hepatobiliary (HPB) Pancreatic Surgery				
To support the strategic development of hepatobiliary pancreatic (HPB) surgery for Welsh residents.	Continue to work with Health Boards towards transferring the commissioning of HPB surgery to NWJCC providing input into the HPB surgery project board.	Equitable access to high quality and sustainable HPB surgery.	Q4 Update: NWJCC continues to work with Health Boards concerning the transfer of commissioning of HPB surgery to NWJCC by means of project governance structures, the delivery of which will continue into 2025/26.	Carried forward to 2025/26 <i>No new services have been agreed to be transferred to NWJCC as part of the 2025-2026 Foundation Plan. This will be considered as part of the 2026-2029 IMTP process.</i>
All Wales Lymphoma Panel (AWLP)				
To implement the recommendations of the All Wales Lymphoma Panel Review.	Dependent on outcome of AWLP review (see Q4 update)	<i>Dependent on outcome of AWLP review (see Q4 update).</i>	Professor Chris Fegan presented the findings from his review of AWLP to NWJCC SLT in August 2024; agreed that the recommendations of the review should be implemented.	Due to changes in the NWJCC Executive Team and transition to a new organisational operating model, agreed that delivery of recommendations would

be carried over into 2025/26.

Advanced Therapy Medicinal Products (ATMPs)

<p>To commission new ATMPs for patients with cancer and blood disorders in alignment with national guidance. (Expected new NICE guidance in 2024/25 for blood cancers, haemophilia, hereditary anaemias.)</p>	<p>Develop commissioning policies. Commission pathways and designate providers.</p>	<p>Equitable access to effective treatments to maximise survival and quality of life.</p>	<p>Commissioning policies developed; new providers designated and pathways drafted.</p>	<p>Q4</p>
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<p>To commission new tests included within the test directories / to commission genomics necessary for approved NICE therapies.</p>	<p>Monitor implementation of associated investment.</p>	<p>Equitable access to genetic testing. Improved patient outcomes. To obtain best value from resources.</p>	<p>Investment monitored through quarterly meetings.</p>	<p>Q4</p>
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Positron Emission Tomography (PET)

<p>To commission new PET indications as part of the strategic development of PET (based on evidence</p>	<p>Update PET commissioning policy. Commission additional indications.</p>	<p>Improved patient outcomes. To obtain best value from resources.</p>	<p>Updated PET commissioning policy incorporating additional indications developed and published.</p>	<p>Q1</p>
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based expert advice from AWPET).				
Barrett's Oesophagus				
To commission a full endotherapy service for patients with Barrett's Oesophagus and early Oesophago-gastric cancer.	Dependent on Joint Committee decision regarding transfer of commissioning of endoscopic mucosal resection (EMR).	Dependent on Joint Committee decision regarding transfer of commissioning of EMR.	Transfer not taken forward due to absence of support from Management Group. Additional scoping work has been progressed since November 2024, which will need assessment by SSCG, and CCLG.	Carried forward into 2025/26 due to non-support and request for further assessment. <i>No new services have been agreed to be transferred to NWJCC as part of the 2025-2026 Foundation Plan. This will be considered as part of the 2026-2029 IMTP process.</i>
Long Term Ventilation (LTV) Service				
To recommission the long term ventilation (LTV) service.	Assess demand, develop service specification, agree service model.	Timely and equitable access to LTV. To obtain best value from resources.	Transfer of commissioning resources to NWJCC not yet complete as a result of re-prioritisation within portfolio. Recommissioning cannot be commenced until the transfer of resources has been finalised.	Carried forward into 2025/26 To be considered as part of the IMTP process, as likely to require investment.
Rituximab				
To commission Rituximab for the treatment of thrombocytopenic purpura (TTP)	Release of funding to the commissioned service.	Improved outcomes through preventing relapse in patients with TTP.	The policy "Rituximab for treatment of acute Thrombotic Thrombocytopenic Purpura" has been	Q4

			developed (Policy Position Statement 314). Implementation of the policy is dependent on the transfer of commissioning responsibility for TTP to the NWJCC to commission the agreed new model. However, since this was not funded in the Foundation Plan 2025/26, the policy cannot be implemented by JCC in 2025/26. It is anticipated that the transfer of TTP to the JCC will be considered as part of the development process for the IMTP 2026-29.	
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Cardiac

Goal	Method	Outcome/s	Progress	Status
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Obesity Surgery

Commission Level 4 obesity surgery services that integrate seamlessly with the All-Wales Weight Management Pathway and ensure	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.	Welsh Government and Public Health Wales have developed an addendum to the All Wales Weight Management Pathway to address the needs of patients who have received private procedures. Timescales for publishing are	Commissioning involvement complete, however ultimate deliverable dependant on WG/PHW
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equitable access for all Welsh patients.			outside the NWJCC's sphere of 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. Required capacity is currently being provided by the Welsh Institute of Metabolic and Obesity Surgery (WIMOS) on an interim basis.	Q1
	Explore potential for alternative English provider and scope for NW patients to undergo procedures in SW.	Equity of access for all Welsh patients.	The Welsh Institute of Metabolic and Obesity Surgery (WIMOS) has been allocated additional resource to receive referrals for patients from North Wales and North Powys. The service provided by Salford Royal has been placed into escalation owing to ongoing concerns with activity and waits; any requirement for an	Q1

			alternative English provider will be explored as a result of the outcome of this exercise.	
Inherited Cardiac Conditions (ICC)				
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.	Action paused due to Commissioning Team capacity. Team capacity reinstated in Q4 with scoping work reprofiled to Q1 of 2025/26.	Re-profiled to Q2 2025/26
Cardiac Devices				
To ensure that specialised cardiac device services are optimally, efficiently and consistently commissioned across Welsh Health Boards.	Review current provision across Health Boards.	Detailed analysis of current provision and allocated of resource, highlighting inequity and variation.	Action paused due to Commissioning team capacity Team capacity reinstated in Q4 with scoping work reprofiled to Q1 of 2025/26.	Q4 Has been incorporated into the Cardiac Review as part of the strategic priorities for 2025/26
	Assess impact of differential arrangements and work to establish a consistent commissioning model,	Equity of access for Welsh patients and provision of care closer to home.		Q4 Has been incorporated into the Cardiac Review as part of the strategic priorities for 2025/26

	underpinned by agreed baselines.			
Transcatheter aortic valve implantation (TAVI)				
Identify the future configuration of NWJCC-commissioned cardiac surgery and TAVI via the delivery of Phase 2 of the Cardiac Review.	Commission and deliver a population needs assessment	Identification of optimal configuration of NWJCC-commissioned cardiac surgery and TAVI activity. Reduction of variation in survival and improved outcomes as a result of greater specialisation Implementation of new commissioning and delivery model, optimising the service available to Welsh patients.	Complete	Q4 Complete
	Undertake demand & capacity modelling and national benchmarking Convene clinical working group to consider evidence and future trends, including alignment with interventional valve cardiology services		Agreed that RSSPPP along with JCC commissioning team will undertake required demand and capacity modelling	Q4 Has been incorporated into the Cardiac Review as part of the strategic priorities for 2025/26
	Develop new service specification		Complete	Q4 Complete
	Agree and implement new commissioning and delivery models.		Dependent on completion of preceding actions	Has been incorporated into the Cardiac Review as part of the strategic priorities for 2025/26

Type A aortic dissections				
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 a preferred provider.	Single provider for Type A aortic dissections and the Frozen Elephant Trunk technique, enabling improved care of Welsh patients closer to home.	Designated provider process undertaken - neither of the two South Wales Cardiac Surgery Centres able to respond.	Q3
	Commission single provider and manage period of transition and proctorship.		Agreed by JCC that further work required to identify a way forward. Workshop took place on 24 April 2025, with resulting action being identification of a range of options which will need to be progressed into 2025/2026.	Q3 Reprofiled to Q4 in 2025/2026
Pulmonary Hypertension (PH) Service				
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.	Completion of action delayed as a result of Commissioning Team capacity. Re-profiled for completion in Q1 2025/26.	Q2 Re-profiled to Q1 2025/26
Cystic Fibrosis (CF)				

<p>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.</p>	<p>Review and reconfigure WHSSC-commissioned CF services.</p>	<p>Welsh patients have access to CF services that support the needs of current patients and which can accommodate future clinical needs.</p>	<p>Service review 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 arrangements. Action complete.</p>	<p>Service review is complete. CF forms part of the Benchmarking and Contracting Strategic priority for 2025-2026</p>
<p>Cardiology</p>				
<p>Deliver high-quality and sustainable specialised cardiology services, improving access and realising the potential of regional approaches in order to sustainable, safe and high quality services for the people of Wales.</p>	<p>Work with Health Boards to develop proposals for the repatriation of specialised cardiology services, and to collaboratively develop proposals for regional provision.</p>	<p>Provision of accessible and responsive specialised cardiology services for the people of Wales; equity of access for patients; efficient use of available resources to maximise value.</p>	<p>Discussions concerning the optimisation of deliver high-quality and sustainable specialised cardiology services have continued through 2024/25. Although no substantive changes to current commissioning arrangements have ensued, the NWJCC will continue to work with</p>	<p>Action to be encompassed within the cardiac review outlined within the strategic priorities of the Foundation Plan.</p>

		providers on an ongoing basis.	
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Mental Health				
Goal	Method	Outcome/s	Progress	Action Status
Eating Disorders (ED)				
To commission sustainable provision for Eating Disorders.	Secure short term provision. Ensure framework placements for independent sector provision. Purchase of beds at new Independent Sector unit due to open in South Wales in October 2023. Implement robust quality and performance monitoring processes. Design and implement referral pathway into identified placements.	Welsh residents to have access to high quality eating disorder provision. Provision is as close to home as possible where this is appropriate. Long-distance or off framework placements are kept to a minimum. Established relationships with framework placements. Assurance of quality and performance of placements. Robust referral pathways in place.	Use of Local independent inpatient service has increased as use of services outside of Wales has decreased. Quality Assurance continues as per framework processes. Referral processes and gatekeeping processes continue to be under review.	
To commission sustainable provision for Eating Disorders.	Options appraisal on long term model. Consider Demand and Capacity report and	Dedicated Specialised eating disorders provision	Whilst eating disorder services remain a priority for the JCC, capacity within the team has	Reprofiled in to 2026-2029 IMTP.

	<p>recommendations as part of strategy development.</p> <p>Identify options for long term eating disorder provision for NHS Wales patients.</p> <p>Conduct full options appraisals for future eating disorders placements.</p> <p>Development of any business cases for the preferred option.</p> <p>Options appraisal on long term model.</p>	<p>for NHS Wales patients.</p> <p>Welsh residents to have access to high quality eating disorder provision.</p> <p>Provision is as close to home as possible where this is appropriate.</p> <p>Long-distance or off framework placements are kept to a minimum.</p> <p>Assurance of quality and performance of provision.</p> <p>Robust referral pathways in place.</p>	<p>delayed this action progressing.</p>	
Secure Services				
<p>Welsh patients requiring secure service provision are able to access high quality services with an effective pathway across the entire system.</p>	<p>Consider Demand and Capacity report and recommendations as part of strategy development.</p>	<p>To enhance the patient pathway and flow between differing components of the secure service for both men and women (inclusive of</p>	<p>Demand and capacity work undertaken as part of strategy</p> <p>Options appraisal led to suggestion that JCC commission all secure services.</p>	<p>Re-profiled to 2026/29 plan</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>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>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. Medium Secure/Low Secure and Gatekeeping specifications are being reviewed by both NHS Wales and NHS England by the end of 2025.</p>	
	<p>Consider pathways for men's secure MH services as part of strategy development.</p>	<p>Ensure flow within the service and that patients are in the most appropriate placements for their needs.</p> <p>Ensuring links with Ministry of Justice for pathways between health and MoJ services.</p> <p>Flow of patients between prison and</p>	<p>Risk issues associated with fire within one of the units has limited capacity across the system This action will therefore need to be re-profiled into 2025/26.</p> <p>Delayed transfer of care (DeToC) issues continue, with a number of them currently in the system.</p> <p>Changes to Mental Health act in recently passed Bill will consider how to ensure that Transfer</p>	<p>Q4</p> <p>Re-profiled to 25/2026</p>

		NHS mental health services.	Waiting Times from prison to hospital do not exceed 28 days	
Welsh patients requiring secure service provision are able to access high quality services with an effective pathway across the entire system.	Consider pathways for women's secure MH services as part of strategy development.	<p>Ensure flow within the service and that patients are in the most appropriate placements for their needs.</p> <p>Ensuring links with Ministry of Justice for pathways between health and MoJ services. Flow of patients between prison and NHS mental health services.</p>	New specification for Women's Secure Services are being completed by NHSE & NHSW by end of 2025 – this action will need to take these in to account	Re-profiled to Q4 2025/26
	Consider pathways for Learning Disabilities secure MH services as part of strategy development.	<p>Ensure flow within the service and that patients are in the most appropriate placements for their needs.</p> <p>To ensure patients with a Learning Disability have their needs met in mainstream services</p>	Specifications for commissioned services being revised to ensure inclusivity for people with learning disability or neurodivergence.	Re-profiled to Q3 25/26 Foundation Plan

		<p>where this is appropriate.</p> <p>Ensuring links with Ministry of Justice for pathways between health and MoJ services. Flow of patients between prison and NHS mental health services.</p> <p>Upskilling of secure services staff to ensure safe and effective care and treatment is in place for patients with a learning disability.</p>		
Welsh patients requiring secure service provision are able to access high quality services with an effective pathway across the entire system.	To set up and implement the Secure Services Single Commissioner Project which includes the commissioning arrangements for low, medium and high secure services.	<p>To remove a significant impediment to the effective use of resources.</p> <p>To improve, and expedite, the patients journey through secure care.</p>	Single commissioner programme has been put on hold. No current Medium or Low secure specification to commission against. JCC will join NHSE to look at designing a specification for medium and Low secure services. Once spec has been developed, NHS Wales medium	Re-profiled to Q4 2025/26

		<p>To ensure patients' needs are met by the right level of security.</p> <p>To reduce delays in transfer.</p> <p>To remove perverse incentives for change.</p> <p>To take more of a strategic view of capacity across the secure services system.</p>	<p>secure and low secure services will be reviewed against those specifications before changes to the commissioning responsibilities are reconsidered</p>	
Perinatal Inpatient Services				
<p>To ensure mothers requiring specialist mental health services have access in a timely way.</p>	<p>To work with NHSE on the development of the Mother and Baby Unit for North Wales patients.</p>	<p>Mothers requiring support are able to access this as close to home as possible in a timely manner.</p>	<p>Mother and Baby unit for at Countess of Chester Hospital is due to be completed and open in October 2025. Recruitment currently underway. Input into the build, staff interviews, website etc. has included Staff from NW Perinatal service, Expert By Experience and JCC.</p>	

	<p>To review the South Wales Mother and Baby Unit based at Tonna Hospital.</p> <p>To link to the SBUHB Estates Review.</p>	<p>To ensure adequate facilities within the estates footprint.</p> <p>To ensure family space and facilities available.</p> <p>Mothers requiring support are able to access this as close to home as possible in a timely manner.</p>	<p>Facility reviewed, and deemed adequate.</p> <p>Confirmed family space available, including overnight facilities.</p> <p>Resource challenges have delayed on site review of service. Commissioning Team to arrange a review of Quality of the service with Nursing and Quality Directorate.</p>	<p>Further additional workstreams identified into 2025/2026 Foundation Plan.</p>
Child and Adolescent Mental Health Services (CAMHS)				
<p>To ensure that Child and Adolescent Mental Health Services (CAMHS) services are available and delivered in compliance with the WHSSC JCC ?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 for future service development.</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 appropriate for individual need.</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>

Neuropsychiatry All-Wales Liaison Model				
To progress the Neuropsychiatry All-Wales Liaison Model	<p>Develop services within the Neuropsychiatry provision for Acquired Brain Injury through a phased business case model to develop therapeutic intervention and expertise advice.</p> <p>To implement phase 2a of the model in order to recruit to a wider MDT team including Psychologists, Speech and Language therapists, Physiotherapists and Occupational Therapists.</p> <p>To implement Phase 2b of the model in order to provide a fully functioning All-Wales Liaison Service including a discharge liaison post and an</p>	<p>Therapeutic provision available for both inpatient services and outreach services.</p> <p>Fully operational liaison model to ensure equity of service across Wales.</p>	<p>Phase 2 recruitment suspended until review of service model and staffing can be undertaken by JCC.</p>	<p>Q4</p> <p>Re-profiled to Q3 25/26</p>

	enhanced MDT provision. This is currently on pause and will be reviewed for 2024-25.			
Vulnerable Groups				
Goal	Method	Outcome/s	Progress	Action Status
Gender Identity Service				
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.	Welsh Gender Service provision in place. Ongoing monitoring in place.	Complete
	Increase capacity of the Welsh Gender Service to reduce waiting times and increase access across Wales. This investment is currently on pause and will be reviewed in 2024 -25 (Phase 3 CIAG).	Adults on the NHS Wales pathway have timely and equitable access to gender identity services.	Welsh Adults have access to Gender Identity Service via primary care referral. Waiting list for service is shorter than waits for NHSE services	Complete
	Repatriation of open cases from the London Gender Identity Clinic	Adults on the NHS Wales pathway have timely and equitable	Repatriation process is underway.	Q2

	(Tavistock and Portman NHS Foundation Trust) to the Welsh Gender Service.	access to gender identity services.		
To commission high quality gender identity services for the children and young people of Wales.	Ongoing access to the NHS England commissioned national referral support service for children and young people in Wales.	Provide children and young people and their families/guardians access to the national referral support service provided by Arden and GEM NHS Commissioning Support Unit.	Children and Young People have access to an increasing amount of assessment clinics throughout England. New South West England clinic has opened and have assessed Welsh patients with a local satellite clinic now in situ in Cardiff. North Wales patients to access Alder Hey service; satellite clinic in BCUHB being explored.	Q4
	Continue to represent the interests of Welsh residents and NHS Wales through the NHS England Children's Gender Dysphoria Work programme and work streams through active participation in project progression.	The national transformation programme considers the needs of children and young people in Wales.	Childrens Gender Dysphoria Board attended by JCC as members. Monthly meetings with Arden and Greater East Midlands.	Q4

	Seek to secure a regional provider for Wales.	Children and Young People in Wales have access to specialist gender incongruence services closer to home.	South West England clinic now in place with Satellite clinic in Cardiff. North Wales patients to access Alder Hey service and satellite clinic in BCUHB being explored.	Q4
Forensic Adolescent Consultation Service (FACS)				
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 (planned for 2023-24 but may extend into 2024-25 subject to stakeholder engagement).	The FACS for Youth Justice Service's service specification is informed by an evaluation.	Service specification drafted. Evaluation to be conducted in Q4. Review of FACS to be undertaken by Q4 25/26 as per IMTP Resource challenges have impacted on the Directorate's ability to commence a review of this service	Q3 Re-profiled to Q4 25/26
		Access for complex children and young people that may not be in receipt of	To be considered further once service specification is published. Resource challenges have impacted on the	Q3 Re-profiled to Q4 25/26

		mental health services	Directorate's ability to commence a review of this service	
NEUROSCIENCES, LONG TERM CONDITIONS AND RARE DISEASES				
Goal	Method	Outcome/s	Progress	Action Status
Specialist Auditory Hearing Service				
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 complete.	Complete
To commission a Middle Ear Implant service for Wales as part of the developing Specialist	Work with Health Boards and the service to develop a service model which provides a high	Ensure value for money in commissioning. Ensure equity of provision for Welsh residents.	Included in the Specialist Auditory Implant Device Service Specification (SS235).	Complete

Auditory Hearing Implant Service.	quality sustainable service.			
To establish a preferred provider for the Cochlear Implant and Bone Conduction Hearing Implant service for South East Wales, South West Wales and South Powys.	Preferred model agreed and proceed to implementation.	Ensure equity of provision for Welsh residents. Ensure value for money in commissioning.	Service model develop and clinical engagement undertaken, alongside work to ameliorate ongoing performance concerns	Complete
	Launch and implement the newly developed Specialist Auditory Hearing Implant Service.	Compliance with the British Cochlear Implant Group (BCIG) quality standards and the Bone Conduction Hearing Implant Guidelines. Providing care closer to home aligning with the NHS and whole system core values which have been set out in A Healthier Wales (2018).	Cardiff & Vale University Health Board were invited to submit a fully costed proposal for the service in August 2024. A minimum extension of 6 months was requested by the health board. The JCC continue to await an indication from the health board regarding a submission date.	Re-profiled to Q3 2025/26
	Development of PROMS and PREMS for the Bone Conduction Implant Service.		Dependent on completion of preceding actions	To be considered as part of the 2026-2029 IMTP process
Neurosurgery				

<p>To enhance provision of Acute Neurosurgery Therapy.</p>	<p>NWJCC to receive a business case from CVUHB to enable an NWJCC funding release and implementation of enhanced provision.</p>	<p>Improved patient flow across the acute neurosurgery service pathway enabling early discharge and repatriation. Improved patient outcomes. Patients receive the appropriate intensity of rehabilitation in the timeliest and most cost efficient manner. Compliance with British Society of Rehabilitation (BSRM) standards.</p>	<p>A funding release was planned for Q4 24/25 however paused as a result of in-year funding pressures. The Commissioning Team will continue to work with the service to identify how the service might be enhanced.</p>	<p>Q4</p>
<p>Neuro Rehabilitation ODN</p>				

Development of Rehabilitation Operational Delivery Network (ODN) - To strengthen the discharge and repatriation process for adult rehabilitation service across organisation boundaries.	Work with Health Boards to develop a service model which provides a high-quality sustainable service to improve access and flow.	Enhanced patient flow across the pathway ensuring patients can access the right service at the right time and in the most appropriate place.	The Specialist Rehabilitation Strategy has yet to be refined and resubmitted to Joint Committee as a result of commissioning team capacity	Q4 This remains on pause and will be considered as part of the 2026-2029 IMTP
	Develop a new service specification to operationalise the ODN.	Reduction in unwanted variation and inequity between trauma and non-trauma rehabilitation patients.	Action paused pending strategy approval; see project update above	
	Promote and support cross-organisational and clinical multi-professional collaboration. Setting objectives through an annual plan with the ODN.	A designated core group of staff from all professions can be easily identified for additional support and training,	Action paused pending strategy approval; see project update above	

	<p>Landing pads or landing pad team as part of the service model development to ensure that there was a single point of contact to support repatriation and discharge.</p>	<p>Staff would be able to maintain these skills, They would have access to the skilled tertiary outreach teams (following business case approval for additional</p>	<p>Action paused pending strategy approval; see project update above</p>	
	<p>Develop a Memorandum of Understanding between the ODN and Health Boards to ensure delivery of the new rehabilitation service model.</p>	<p>investment) to support this training, Concentrates the training over a smaller number of staff, which serves an advantage where for complex patients there is a likelihood that skills fade between cases.</p>	<p>Action paused pending strategy approval; see project update above</p>	

	Using the All Wales Repatriation Policy Develop a 48 hour discharge policy similar to the Major Trauma framework for all Rehabilitation patients trauma and non- trauma.	Ensure patients receive the appropriate intensity of rehabilitation in the timeliest and most cost efficient manner. Improve patient pathway flow across the rehabilitation service. Compliance with British Society of Rehabilitation (BSRM) standards.	Action paused pending strategy approval; see project update above	
Deep Brain Stimulation (DBS)				
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	Improved patient flow across the DBS service pathway. Increased staff skills and knowledge.	Due to a temporary urgent service change, the future permanent service model work has been delayed.	Reprofiled to Q3 2025-2026, included in the strategic priorities.

	<p>work for the south Wales population, using the Designated Provider Framework. Work with Neurology and Gerontology teams across the south Wales region to help identify the surgical patient cohort.</p>			
Neurophysiology				
<p>To commission the Neurophysiology Service for Wales.</p>	<p>Work with Health Boards to develop a service model which provides a high quality sustainable service.</p>	<p>Patients receive the appropriate intensity of rehabilitation in the timeliest and most cost efficient manner. Improved patient flow across the</p>	<p>A service specification has been drafted, including the service model which will define the workforce required in order for a transfer of resources from health boards to the NWJCC.</p>	<p>Q4 Re-profile to Q1 2025/26</p>

	Utilise the NWJCC Designated Provider process to determine a provider.	rehabilitation service pathway. Effective utilisation of resource.	The Designated Provider Framework will be employed to determine a provider once the service model has been determined and commissioning responsibility clarified.	Dependent on the above
Thrombectomy				
To commission a Thrombectomy Service for the South Wales region.	Review and update the current policy.	All Thrombectomy patients get access to expert Thrombectomy treatment and opinion. Equity of provision, and effective use of resource.	Policy reviewed, publishing paused as a result of delivery challenges. This will be developed in conjunction with the service specification.	Q3 Re-profiled to Q3 2025/26
	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.	Compliance with National Clinical Guidelines for Stroke standards for Thrombectomy services.	Dependent on commencement of Phase 1 investment for the Delivery of Mechanical Thrombectomy Capacity in South Wales.	Reprofiled to Q3 following delays to the initiation of the CAV thrombectomy service.

	Develop a separate service specification to include new access criteria, patient outcome measures and value based healthcare to shape our commissioning decisions.		Service Specification in development but partially dependent on commencement of Phase 1 investment for the Delivery of Mechanical Thrombectomy Capacity in South Wales.	Re-profiled to Q3 2025/26
	Utilise Stroke national clinical guidelines to shape the commissioning of Thrombectomy services.		Dependent on commencement of Phase 1 investment for the Delivery of Mechanical Thrombectomy Capacity in South Wales.	See above

	Work in partnership with health boards and clinical networks to improve standardisation across patient pathways		Dependent on commencement of Phase 1 investment for the Delivery of Mechanical Thrombectomy Capacity in South Wales.	See above
Sacral Nerve				
To commission the Sacral Nerve Service for Wales.	Work with Health Boards to develop a service model which provides a high quality sustainable service. Utilise the NWJCC Designated Provider process to determine a provider. Develop a commissioning policy to ensure all patients have timely access to this procedure	Ensure value for money in commissioning. Ensure equity of provision. Compliance with National Standards.	Three indications were reviewed through the JCC clinical prioritisation panel, only 1 of which was supported (faecal incontinence). This has not progressed due to a lack of funds available in 2024/25.	Q4 <i>No new services have been agreed to be transferred to NWJCC as part of the 2025-2026 Foundation Plan. This will be considered as part of the 2026-2029 IMTP process.</i>
Women and Children				
Goal	Method	Outcome/s	Progress	Action Status
Neonatal Service				

<p>To undertake strategic planning for Neonatal Services – Phase 2 neonatal review to undertake strategic planning on the service model and designation of cots including maternity services</p>	<p>Work with Health Boards on maternity implications.</p> <p>Formal Consultation and Engagement of any proposed changes.</p>	<p>Ensure optimal outcomes for babies in South Wales within an efficient service delivery model.</p>	<p>Report to Joint Committee May 2024 seeking approval for the resources required to successfully deliver the programme, as well as scope, remit and timescale.</p> <p>Not progressed due to absence of programme capacity</p>	<p>Q4</p> <p>Carried forward to 2025/26.</p> <p>Has been incorporated into the Neonatal Review as part of the strategic priorities for 2025/26</p>
<p>Neonatal Transport Service in South Wales (CHANTS) - To commission a sustainable and efficient neonatal service for South Wales, 24 hours a day.</p>	<p>Work with the provider health boards to maintain a 24-hour affordable service for the population of South Wales</p>	<p>A sustainable service that supports the safe transport of babies when necessary.</p>	<p>A revised Standard Operating Procedure (SOP) relating to the 24-hour service was produced by the three provider health boards and discussed at the NWJCC's Delivery Assurance Group in October 2024. The purpose of the revised SOP was to make the criteria for uplift out of</p>	<p>Carried forward to 2025/26.</p> <p>Rationale for non-delivery/delay: Commissioning responsibility for Neonatal transport has transferred to the Ambulance/111 team from 1st April 2025 and discussions will be held directly with the</p>

			hours clearer. There was agreement in principle that the SOP was an improvement and that it should be trialled for 6 months.	provider health boards to progress. The Director of Commissioning for Specialised Services is aware.
Paediatric Infectious Diseases				
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	Business case to commission Paediatric Infectious Diseases approved by Management Group May 2024. Provider now undertaking recruitment to the service.	Complete
Paediatric Orthopaedic Surgery				
Entire Paediatric Orthopaedic Surgery pathway is commissioned effectively.	Undertake Needs assessment and gap analysis to inform future requirements. Consideration by Implementation Board prior to	Equitable access with equitable waiting times for all patients monitored through activity numbers and waiting times for treatment	Needs assessment and gap analysis conducted; funding release approved.	Complete

	formal NWJCC process (SLT / MG)			
Service Reviews				
To ensure Paediatric Endocrinology 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. Publish Service Specification for each reviewed service	Request to services for additional information that will inform the planned contract re-basing requested and in progress.	Q2 Re-profiled to Q1 2025/26 Rationale for non-delivery/delay: The return of the information from the service is imminent and will inform the review report. Updates are provided at the Paediatric Strategy Implementation Board meetings, which health boards attend and are chaired by the Director of Commissioning for Specialised Services.
	Individualised quality indicators published and reported against for each reviewed service	Efficient models of delivery for all paediatric services. Equitable access to services in line with the STEEEP (Safe, timely, efficient, effective, equitable, patient centred quality framework.	Request to services for additional information that will inform the development of individualised quality indicators (including outreach clinics, benefits realisation, improvement plan, proposed performance indicators and peer) requested and in progress.	

<p>To ensure Paediatric Oncology 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>Improved access to paediatric services for all patients across Wales.</p> <p>Publish Service Specification for each reviewed service.</p>	<p>Service specification developed and published 2024; request to services for additional information that will inform the planned contract re-basing requested and in progress.</p>	<p>Q3</p> <p>Re-profiled to Q1 2025/26</p> <p>Re-profiled to Q2 2025/26</p>
	<p>Individualised quality indicators published and reported against for each reviewed service.</p>	<p>Efficient models of delivery for all paediatric services. Equitable access to services in line with the STEEEP (Safe, timely, efficient, effective, equitable, patient centred quality framework.</p>	<p>Q4 Update: Request to services for additional information that will inform the development of individualised quality indicators (including outreach clinics, benefits realisation, improvement plan, proposed performance indicators and peer reviews) requested and in progress.</p>	

<p>To ensure Cleft Lip and Palate 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>Improved access to paediatric services for all patients across Wales.</p>	<p>Contract re-basing for service complete.</p>	<p>Complete</p>
	<p>Individualised quality indicators published and reported against for each reviewed service.</p>	<p>Publish Service Specification for each reviewed service.</p> <p>Efficient models of delivery for all paediatric services. Equitable access to services in line with the STEEEP (Safe, timely, efficient, effective, equitable, patient centred quality framework.</p>	<p>Individualised quality indicators published and reported against for service.</p>	
<p>Paediatric Ophthalmology</p>				

<p>To ensure paediatric ophthalmology services are available for the people of Wales.</p>	<p>Formally Commission Paediatric Ophthalmology.</p> <p>Work with provider to develop business case; followed by consideration by the Specialised Paediatric Strategy Implementation Board.</p>	<p>Equitable access to Specialised Paediatric Ophthalmology for the population of Wales.</p>	<p>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.</p> <p>Service specification in development and Specialised Paediatric Strategy Implementation Board updated in January 2025 meeting.</p> <p>Commissioning Team awaiting return of information from providers ahead of deciding scope of specialised service and finalising the service specification.</p> <p>Number of additional actions agreed with Health Boards that will need to be delivered prior to formal</p>	<p>Q3</p> <p>Re-profiled to Q3 2025/26</p>
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			commissioning of Paediatric Ophthalmology.	
Children's Hospital for Wales				
Review of Children's Hospital for Wales including operational management, optimal service configuration and appropriateness of governance arrangements.	Benefits analysis against the intended scope of the Children's Hospital for Wales.	Ensure value for money against investment has been realised. Assurance in a changing landscape that optimum outcomes are being delivered through an efficient and	Individual service reviews conducted of the Children's Hospital have supported overarching action, however full scale delivery will require additional resource across the JCC	Q4 This has not been included in the 2025-2026 Foundation Plan and will be considered for the development of the 2026-2029 IMTP

		<p>equitable model of delivery.</p> <p>Appropriate governance arrangements to provide required assurances to the Commissioner and referring Health Boards.</p>		
	Develop sustainable workforce model for each reviewed service.	Sustainable staffing levels that meet the needs of the patient population.	Commissioning Team unable to allocate sufficient resource to activity to deliver in full during 2024/25.	<p>Q4</p> <p>See above</p>
Fertility				
<p>To formally commission:</p> <ul style="list-style-type: none"> - Fertility preservation for service users with ovarian tissue who are at high/very high risk of infertility and cannot store mature eggs. 	Work with NHS England on Nationally Commissioned service.	Equitable access to fertility preservation for paediatric patients in Wales.	<p>Commitment to work with NHSE to commission a Fertility Preservation and Restoration Service for those at high and very risk of infertility following surgery or cancer treatment with NHSE.</p> <p>The most recent communication from</p>	<p>Q4</p> <p>We will continue to work with NHS England aligned to their timescales and will re-profile this work when further information is available.</p>

<ul style="list-style-type: none"> - Fertility preservation for service users with testicular tissue who are at high/very high risk of infertility and cannot store sperm. - Fertility and endocrine restoration using cryopreserved ovarian tissue. 			<p>NHS England was they had gone out for Expressions of Interest from providers no further progress has been forth coming from NHS England.</p>	
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Welsh Kidney Network (WKN)

Goal	Method	Outcome/s	Progress	Action Status
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Unit Dialysis

<p>To meet the demand for growth across Wales.</p>	<p>Undertake a demand and Capacity analysis</p> <p>Develop an appropriate Unit Dialysis model to meet demand</p> <p>Re-refresh current Commissioning Policy and Service specification.</p>	<p>Patients who choose unit dialysis are closer to home.</p> <p>There is equitable service provision across Wales.</p> <p>Reduction in variation across Independent Service Providers across Wales.</p>	<p>Additional capacity has been commissioned through the opening of a new dialysis unit in Bridgend (under SBUHB) and additional sessions approved in Welshpool (under BCUHB)</p> <p>Re-refresh of the commissioning policy and service specification are</p>	<p>Re-profiled to Q4 2025/26</p> <p>Rationale for non-delivery/delay: Demand report took longer than initially anticipated, due to the complexity of the consideration of the range of scenarios that needed to be explored. NWJCC has agreed an inflationary</p>
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			<p>predicated on the unit demand model and NWJCC investment plan.</p>	<p>uplift to the current budget, which will require management of demand for unit dialysis which will have a bearing on the current delivery model of Haemodialysis in Wales.</p>
	<p>Under the new entity for National Commissioning (24/25) will enable closer working with commissioning team responsible for Non-Emergency Patient Transport (NEPTS)</p> <p>Active representation and participation of the WKN on Ambulance Care Programme Board.</p>	<p>There is equitable service for provision across Wales.</p> <p>A transportation service is aligned to Unit Dialysis Service provision.</p> <p>A transportation services meets the 30:30:30 service specification.</p> <p>Up to date Commissioning Policy and service specification.</p>	<p>Q4 update: Under the newly formed NWJCC structure there is closer collaboration between the Ambulance 111 Commissioning team and the provider WAST.</p> <p>A WAST representative is now a WKN Board member.</p>	<p>Q4</p>
<p>Vascular Access</p>				

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.	Q4 update: Vascular Access Commissioning Policy and Service Specification currently out for stakeholder consultation with a closing date of 17.04.2025	Re-profiled to Q2 2025/2026 Rationale for non-delivery/delay: There was a gap of Clinical leadership within Vascular Access from May to November 2024. When a new lead was appointed, they brought suggested changes to the documents resulting in the delay of publishing for stakeholder consultation. Highlighted to the Director of Commissioning for Specialised Services and the WKN Board
Home Dialysis				
Increase Home Dialysis.	Develop Commissioning Strategy and	There is equitable access and service provision of Home Dialysis across	Q4 update: The Home Dialysis Service Specification is in draft. It will be reviewed by all Wales Home	Q4 Re-profiled for Q3 2025/2026

	Service Specification.	Wales. Up to date Commissioning Policy and service specification. Referral pathways to Home Dialysis are lean and prudent.	Therapies group during Q1 25/26, once agreed the documents will go through the NWJCC Policy consultation process following this	Rationale for non-delivery/delay: The Clinical Lead role is currently vacant, resulting in the WKN All Wales Clinical Lead stepping into the role in addition to the national role. This has resulted in a delay in supporting the development of the Commissioning Strategy and service specification. Highlighted to the Director of Commissioning for Specialised Services and the WKN Board
	Development of a Home Dialysis Framework.	A Framework that is aligned to patient need rather than equipment centric A framework that embeds Value and	Q4 update: There is a current and compliant home therapies framework in place through NWSSP Procurement Services.	Q4

		<p>Outcomes approach.</p> <p>Achieve Value for Money (VfM) through economies of scale.</p> <p>A framework that is sustainable and equitable, fit for purpose acting as an enabler to support the Home Dialysis strategy.</p>		
Transplantation				
Strategy Transplantation.	Refresh Transplantation Commissioning Policy and Service specification.	Up to date Commissioning Policy and service specification.	<p>Q4 update: There was a gap of Clinical leadership within Kidney Transplantation from May to November 2024 resulting in the delay of reviewing and refreshing the commissioning policy and service specification for Kidney Transplantation.</p>	<p>Q4</p> <p>Re-profiled to Q4 2025/2026 as a result of the delays.</p>

	<p>Collaborative working to deliver the Organ Donation and Transplantation plan for Wales 2022-2026, supplemented by Organ Utilisation Group Recommendations. (NHS England)</p>	<p>To embed best practice and equity of service for patients across Wales.</p> <p>Delivering Get it Right First Time (GIRFT) recommendations.</p> <p>A strengthened collaborative working ethos with the 4 home nations.</p>	<p>Q4 update: Work progressed for collaborative working with the Welsh Transplant Clinical Reference Group, overseeing the delivery of the Organ Donation and Transplantation Plan for 2022-2026. This is a multi-year work plan.</p>	<p>Q4</p> <p>Re-profiled Q4 2025/2026</p> <p>Rationale for non-delivery/delay: Delay in appointing Transplant Clinical Lead in the Network.</p> <p>Highlighted to the Director of Commissioning for Specialised Services; operational arrangement for transplantation to be agreed following conclusion of JCC Organisational Change Programme.</p>
<p>Build upon current Patient and 3rd Sector participation.</p>	<p>Increase participation within Commissioning Strategy, Service development.</p>	<p>The practice of co-production is developed and applied to the design and delivery of WKN</p>	<p>Q4 update: The WKN has strong patient representation through the 3rd sector partnerships.</p>	<p>Q4</p>

		<p>commissioned services.</p> <p>Patients feel empowered to become actively involved in the development and delivery of care within the WKN Commissioned services.</p> <p>A sustainable 3rd Sector provision to support Kidney patients in Wales.</p>	<p>Established working through the Collaborative Group.</p> <p>The WKN's integrated work plan identifies areas of work which requires patient engagement and 3rd sector support.</p>	
<p>Strengthen national approach on Information Technology.</p>	<p>Development of Renal Digital Strategy.</p>	<p>Increasing and enabling standardisation where appropriate.</p> <p>Utilising existing systems to achieve maximum benefit.</p> <p>Reduction of inconsistent reporting on funded and</p>	<p>Q4 update: Digital Health Care and Wales (DHCW) is now supporting the digital review and development of a Kidney Digital Strategy by extending the scope to include sustainability of systems and workforce.</p>	<p>Q4 re-profiled Q4 2025/2026</p> <p>Rationale for non-delivery/delay: Following on from the initial report, it was recommended that an independent review through DHCW was</p>

		<p>unfunded capacity throughout Wales, through the development of digital intelligence solutions</p> <p>An increased offering of a digitised provision of Kidney Services in Wales.</p> <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>The extension of the review follows receipt of the initial draft document, Welsh Kidney Network: IT System Integration and Workforce Analysis, drafted by the Head of Informatics within the NWJCC and shared with WKN Information Technology Lead.</p> <p>Task and Finish Group to be established once the review is completed to implement the recommendations.</p>	<p>required and endorsed by the NWJCC Committee Secretary, and Associate Director of Corporate Services due to the complexity of existing systems and integration with wider national ICT strategies.</p> <p>Highlighted to the Director of Commissioning for Specialised Services and the WKN Board.</p>
<p>Deliver on Value in Healthcare programme.</p>	<p>Continuation of regional ViHC projects.</p>	<p>Increase in the number of patients choosing home dialysis and</p>	<p>Q4 update: Quarterly reporting into WG Value in Health Care team is now in place.</p>	<p>(Q1-4)</p>

		<p>achieving >30% of patients at home.</p> <p>Improving the patient pathway for home dialysis by early support identifying barriers and finding solutions.</p> <p>Increasing the number of patients choosing pre-emptive transplant.</p>		
<p>Provide educational resource to Health care professionals, patients & carers.</p>	<p>Increased development and maintenance of WKN Website.</p> <p>Collaborative working with wider colleagues and 3rd Sector on material.</p>	<p>Increasing the number of patients choosing the appropriate Kidney Replacement Therapy through informed decision-making process</p> <p>Capturing patients earlier within the pathway, focusing</p>	<p>Q4 update: Delay to proposed completion is as a consequence of a member of the WKN team being seconded for three months partially to the corporate Communication and Engagement team.</p>	<p>Q4</p> <p>Re-profiled Q3 2025/2026</p>

		<p>on a preventative approach.</p> <p>A standardised approach to educational resource for patients and health care professionals across Wales, reducing variation and delivery methods.</p>		
Renal Service				
<p>Develop a sustainable Renal workforce.</p>	<p>Review workforce within each Commissioned area</p> <p>Work on a demand and capacity model within the commissioned areas</p>	<p>Having a sustainable workforce model that is reflective of the commissioned services, aligning to local variations where appropriate.</p> <p>Increasing recruitment and retention numbers of nursing staff within the speciality of Kidney Services,</p>	<p>Q4 update: Understanding the workforce modelling has proved complex and the review will take longer to complete</p>	<p>Q4</p> <p>Priority to be reconsidered by the WKN Network Board as part of the delivery of the WKN Strategy</p> <p>Rationale for non-delivery/delay: Differences in commissioning models and commissioning currencies employed by existing providers</p>

		<p>providing a development pathway supporting succession planning.</p> <p>Ensuring the appropriate funding is made available along within the different sources of funding Delivery of the GIRFT recommendations for a Multi-Disciplinary Team renal workforce</p>		<p>has contributed to complex delivery, with review now scheduled for completion during 2025/26. Highlighted to the Director for Commissioning for Specialised Services.</p>
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Major Trauma				
Goal	Method	Outcome/s	Progress	Action Status
Continued delivery of planned South Wales Major Trauma Network and Major Trauma Centre evaluations.	Undertake Gateway5 external assurance post implementation review.	Welsh Government and WHSSC assured that planned benefits are being achieved and that strategic outcomes are being me.	Welsh Government gateway review undertaken Q1, resulting in a green delivery confidence rating. of Green against the original Business Case.	Q2

Consolidation of major trauma service model at a time of significant financial Pressure.	Use of peer review and evaluation to identify new and extant service gap.	Major trauma service to be optimally configured to meet challenges of delivery without recourse to further investment.	Q4 update: Actions delivered throughout 2024/25 to Consolidate the major trauma service model, heedful of ongoing financial pressures. Business Case submitted by the Major Trauma Centre paused pending development of NWJCC Foundation Plan, but scheduled to be taken forward during Q1 2025/26. 2025/26 will also offer an opportunity to review the current NWJCC Major Trauma Policies and Service Specifications.	Q4
	Provision of advice and data intelligence to commissioners that drives service configuration, staffing complement and enhanced utilisation of existing resource.			
	Continue to undertake long-term planning which ensures that new capabilities can be brought into core operations as quickly and efficiently as possible.			
Robust commissioner oversight, facilitated by revised reporting.	Development of annual report, measuring performance against	Demonstrable and measurable health gains, equity, clinical and skills	Annual report developed that measures performance against service	Q1

	<p>service specification and PBC investment objectives.</p> <p>Proactively identify and ameliorate potential underperformance or divergence from requirements of service specification.</p>	sustainability, and value for money.	specification and PBC investment objectives	
Spinal Services				
Goal	Method	Outcome/s	Progress	Action Status
Complete planned implementation of South Wales Spinal Services Network.	<p>Development, delivery and implementation of standards and pathways.</p> <p>Promotion of and support for cross-organisational and clinical multi-professional collaboration.</p> <p>Provision of advice to commissioners that that shapes the</p>	Implementation of an Operational Delivery Network that ensures the delivery of safe, effective and sustainable spinal services across the patient pathway.	Q4 update: South Wales Spinal Services Network now fully implemented	Q4

	future delivery and commissioning of services for patients with spinal conditions.			
Delivery of specified requirements and standard.	Consolidation of Network-wide collaborative approach.	Improved patient experience and outcomes across the Network.	Q4 update: Undertaken as part of the full implementation of the South Wales Spinal Services Network	Q4
	Implement a network wide continuous process of system evaluation, governance, performance and quality improvement.			
	Undertake benchmarking with NHS England (NHSE) spinal surgery networks and disseminate best practice.			

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	Q1
	Development of annual report that provides system evaluation, governance, performance and quality improvement.		Annual report has been submitted and will be reviewed by NWJCC governance structures as required	Q1
To build capacity for expert commissioning across NHS Wales.	Detailed programme of activity including master classes, shadowing and on-line resources.	Increased capacity and competency in NHS Wales for commissioning.	Q4 update: Actions undertaken throughout 2024/25 to build commissioning capacity	Complete
Cross Cutting				
Goal	Method	Outcome/s	Progress	Action Status
Molecular Radiotherapy (MRT)				
Develop the all-Wales strategic plan for the delivery of	Set up appropriate programme infrastructure using	Allows service providers and commissioners to	Molecular Radiotherapy programme infrastructure	Q2


Molecular Radiotherapy (MRT) services in Wales.	established methodology.	prepare for the introduction of clinically and cost effective MRT treatments for Welsh patients.	established and Molecular Radiotherapy strategic plan developed. Funding request to Welsh Government for programme continuation to establish a research centre of excellence has been approved	
Advanced Therapeutic Medicinal Products (ATMPs)				
Establish a new programme to evaluate the clinical and cost effectiveness and utility of Advanced Therapeutic Medicinal Products (ATMPs).	Set up appropriate programme infrastructure using established methodology.	Ensures high quality, relevant information is presented back to the service to inform future planning.	Q4 update: Regular meetings with service have been established as part of the ATMP Outcome Programme	Complete
		Ensures that patient reported outcome measures (PROMs) are shared back with patients/patient groups and support further	Q4 update: PROMs collection is ongoing and will be undertaken via Promptly as part of the ATMP Outcome Programme. Additional pathways to be established as new ATMPs are approved.	Complete

		patient collaboration/ engagement.		
		Supports shared decision-making by providing patients and clinicians with comprehensive information on the outcomes of ATMPs by supplying linked data on PROMs, PREMs and clinical outcomes and a common point of access to this information.	Q4 update: This is being undertaken in CAR-T and Haemophilia services as part of the ATMP outcome programme	Complete
To commission all ATMPs in alignment with national guidance.	Develop commissioning policies, pathways and designate providers.	Equitable access to effective treatments to maximise survival and quality of life.	Q4 update: Memorandum of Understanding with Advanced Therapies Wales is in development and commissioning pathways developed. NWJCC internal ATMP	Complete

			coordination group established	
Inform a future programme of work for a NWJCC 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.	ATMP Outcomes Programme in progress. Discussions around expanding to other areas planned	Complete
To provide NWJCC with a comprehensive and effective medicines optimisation resource.	Continue to provide a robust and efficient Blueteq process for all medicines that are commissioned by NWJCC.	Strengthens financial governance and supports greater value for specialised medicine spend in NHS Wales.	Blueteq process in place and medicines optimisation team fully staffed.	Complete
		Ensures equitable access to medicines across Wales.		

		Improves communication between NWJCC and clinicians.		
	Identify efficiency savings in relation to medicine use.	Identifies any potential savings to currently commissioned treatments.	Q4 Update: Savings identified against targets (approx. saving of £1.2m, awaiting validation) and optimisation plans in place including moving to homecare where appropriate and switch to bio-similars.	Complete
	Support the NWJCC Individual Patient Funding Request (IPFR) process, providing pharmaceutical advice and the production of evidence reviews as appropriate.	Ensures the IPFR team and NWJCC IPFR panel have access to timely, evidence-based information to assist decision making.	Ongoing support for IPFRs provided as required.	Complete
Continue to provide a robust and efficient policy development process for all	Follow the NWJCC methodology for policy development	Ensures that NWJCC published policies accurately reflect	Q4 Update: Memorandum of Understanding with Health Technology Wales in Place to	Complete

NWJCC commissioning activity, ensuring that policies are accurate and accessible.	and update, including:	commissioned services, are evidence based and are developed according to published NWJCC methodology.	support evidence appraisals and agreement with the Centre for Healthcare Evaluation (CEDAR). Medical team continue to support	
	<ul style="list-style-type: none"> Maintenances of the Policy Register Effective engagement with NWJCC commissioning teams Facilitate the effective running of the NWJCC Policy Group Provision of up to date, high quality evidence to support policy content 	A planned update of the NWJCC 'Policy for Policies' will ensure a consistent, transparent and efficient process is in place for future policy development. This will include new advice on when to issue NWJCC policies for a full public consultation.	Q4 Update: Process for Policies updated and reviewed by SLT. Further refinement needed to ensure meets the needs of the three commissioning teams	Complete
To provide a comprehensive, timely and accurate horizon scanning	Work with external agencies to identify new medicines and	Ensures that NWJCC and its commissioning teams have	Initial work to establish mechanisms complete and now move to business as usual	Q3

<p>service (medicines and non-medical technologies).</p>	<p>non-medical technologies.</p> <p>Inform the NWJCC prioritisation process, NWJCC service development and financial planning within commissioning teams and supports other programmes within NWJCC and across NHS Wales.</p>	<p>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.</p>	
		<p>Ensures that NWJCC is informed of future potential specialised services/treatments, ensuring that commissioning decisions are supported with robust evidence.</p>	
		<p>Provision of rapid evidence reviews to support prioritisation,</p>	

		policy development and specific projects across NWJCC commissioning teams and programmes.		
To facilitate the annual NWJCC prioritisation process for new interventions and technologies.	Maintain the annual NWJCC prioritisation process (including optimal methodology) – identify topics, provide comprehensive evidence reviews and ensure appropriate membership of the Prioritisation Panel.	Provides comprehensive, evidence-based decision making on the introduction of new interventions to NHS Wales.	Q4 Update: Prioritisation held in September 2024 and planning for 2025 approach in progress	Ongoing
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

1. EASC IMTP (2024-27) Implementation of Q4 deliverables

Ambulance and 111 Commissioning Update – Q4				
NHS 111 Wales				
Commissioning Intention	Method	Outcome/s	Progress	Action Status
Clinical Response Model	Alignment of 111 clinical support pathways with 999 clinical support pathways	Remote Clinical Support Function – 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.	Q4 update: Work to develop the infrastructure to align 111 pathways to 999 has been completed. In Q4, Remote Integrated Care Service (RICS) has been implemented in a phased approach. Development work has been undertaken with health boards around direct referral pathways. Preparation work undertaken for 111 Press 2 transferring to the Ambulance Services and 111 commissioning portfolio. Development of a WAST Easter Plan. Delivery of Winter Plan between 999 and 111 responding to increased demand during Q4. Work will continue on system integration through 2025-26 in line with the	Complete

			evolved clinical response model.	
Availability	New Strategic Workforce Plan	Workforce Stability - 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.	Q4 update: Continued implementation of new Strategic Workforce Plan in Q4. Working with WAST as the provider around the strategic workforce plan to support delivery of the evolved clinical response model. Continuing to engage with Health Education and Improvement Wales to reflect the workforce requirements of the organisation.	Complete
Emergency Ambulance Services (EMS)				
Commissioning Intention	Method	Outcome/s	Progress	Action Status
Clinical Response Model	EMS Operational Transformation Programme	Right response first time - Aligned to the ambitions of the inversion of the triangle, this aim seeks to improve patients' clinical outcomes by ensuring the most	Q4 update: RICS went live in Q4, providing functionality for 111 and 999 to remotely clinically assess patients via a single point and appropriately refer patients to a direct pathway (where available). This ensures	Complete

		appropriate clinical response is provided for each patient condition.	ensuring patients can access the right response first time.	
Clinical Response Model	Winter Planning	Right response first time – 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.	Concluding update: The implementation of the WAST Winter Plan and the development of the Easter Plan.	Complete
Wider Health System	Develop a new process for the prioritisation and management of inter-facility patient transfers	Transfer and Discharge Service – 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.	Q4 update: Continued use of the Medical Transfer Protocol Suite (MTPS). Additional transfer and discharge resources in place across Wales as part of the Winter Plan to support additional demand and to ensure patient flow across the system.	Complete

<p>Clinical Response Model</p>	<p>The JCC Ambulance and 111 Commissioning Team to provide an update on issues highlighted by health boards regarding ambulance performance</p>	<p>Right response first time – 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.</p>	<p>Q4 update: System pressures continue to present a significant challenge in the delivery of Emergency Ambulance Services, with ambulance handover delays in March 2025 at almost 22,000 lost hours.</p> <p>The introduction of Rapid Clinical Screening has increased the volume of patients clinically assessed before dispatch, 2025/26 actions will build on this opportunity to tailor response to patients individual need.</p> <p>Health Boards have raised issues relating to discharge and transfer capacity to support effective system flow, within ED and planned care.</p> <p>The JCC continue to work with partners to identify opportunities to reconfigure and increase resource capacity.</p>	<p>Complete</p>
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			Recognising the challenges that still exist, the Cabinet Secretary approved the implementation of the next phase of the evolved clinical response model with a new category for cardiac arrest.	
Non-Emergency Patient Transport Services (NEPTS)				
Commissioning Intention	Method	Outcome/s	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.	<p>Q4 Update: NWJCC's Non-Emergency Patient Transport Future Vision completed. Approved by JCC in March 2025 and circulated to stakeholders.</p> <p>WAST to develop a blueprint for delivering against the vision.</p>	Completed
Capacity	Undertake a review of existing NEPTS rosters	Transforming Capacity - Implement processes to increase NEPTS	<p>Q4 update: NEPTS roster review exercise undertaken, outcomes of the work have been reviewed with</p>	Complete

		capacity within current internal and external resources including workforce and fleet.	workforce, operations and staff side representatives. Further discussions required. Q3-Q4 delivery in 2025-26.	
Capacity	Undertake a Resource Capacity Review	Reducing Lost Capacity - Implement improvement plans and oversight arrangements to deliver reduction in lost capacity due to system inefficiencies.	Q4 update: WAST and health boards have engaged in dialogue to review discharge practices and appointment cancellation processes to reduce lost capacity. This work will be undertaken throughout 2025-26 in line with the NEPTS Future Vision.	Complete

Emergency Medical Retrieval and Transfer Services (EMRTS) / Adult Critical Care Transfer Services (ACCTS)				
Commissioning Intention	Method	Outcome/s	Progress	Action Status
Service Expansion	Full Implementation of the EMRTS Service Expansion Programme	Planning – Build on the implementation and consolidation of Phase 1 of the EMRTS Service Expansion project, working collaboratively with	Q4 update: The recommendations from the EMRTS Service Review were approved at JCC in April. Plans for service expansion remain in hold subject to completion of the EMRTS Service Review	Re-profiled in to 2025/2026 Delivery will be dependent on outcome of the Judicial Review.

		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.	and the related Judicial Review. This is not within the control of the JCC and will be an ongoing priority into 2025/26	
Evaluation and Review	Undertake an evaluation of the Adult Critical Care Transfer Service	Evaluation and Review – 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.	The finalised Adult Critical Care Transport Service (ACCTS) Service Evaluation was presented to and approved by the EMRTS DAG members in September. Learning from the evaluation has helped shaped the development of the ACCTS business case, being developed by the JCC.	Complete

Engagement	Development of ACCTS Business Case, aligned to the outcomes of the service evaluation	Engagement – 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.	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 South West region of Wales.	Q4
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NCCU Workplan – Implementation of Q4 deliverables

Goal	Method	Anticipated Outcome/s	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	Q3 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.	Re-profiled to Q3-2025

			Resource issues have seen a slight delay in completion	
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	Q3 2024
111#2 Sustainability	RCRP planning	NHS111#2 MH can meet current and new demand	Additional Welsh Government funding distributed following Demand & Capacity analysis.	Q 4 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.	Q4 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.	All services now open, formal Ministerial openings of final 3 HB services in Q3.	Q4 2024

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