



**Agenda Item**

2.6

**Planning, Performance and Finance Sub-Committee**

**NWJCC Annual Plan 2026/27 – Progress Against Delivery**

<b>Dyddiad y Cyfarfod / Date of Meeting</b>	02/07/2026
<b>Statws Cyhoeddi / Publication Status</b>	Open/ Public
	Choose an item.
<b>Awdur yr Adroddiad / Report Author</b>	Alexander Crawford – Deputy Director of Corporate Planning & PMO Emma King – Assistant Director of Planning & Programmes (Interim) James Evans – Programme Manager
<b>Cyflwynydd yr Adroddiad / Report Presenter</b>	Georgina Gallerty - Director of Corporate Planning & Strategy
<b>Noddwr yr Adroddiad / Report Sponsor</b>	Georgina Galletly, Director of Corporate Planning & Strategy

<b>Pwrpas yr Adroddiad / Report Purpose</b>	For Assurance
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<b>Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/Group)</b>		
<b>Committee / Group / Individuals</b>	<b>Date</b>	<b>Outcome</b>
Senior Leadership Team	17/06/2026	Noted with amendments

## 1. SITUATION/BACKGROUND

The purpose of this paper is to provide a summary update position on progress against the delivery of the Strategic Priorities of the 2026/27 Annual Plan as at end of May 2026.

The NHS Wales Joint Commissioning Committee (NWJCC) Annual Plan 2026/27 sets out the organisation's strategic commissioning intentions for the year ahead within a three-year planning context. It builds on the Foundation Plan 2025/26 and marks the next phase in the NWJCC's development as a national commissioning organisation with a focus on strategic priorities that are progressing through structured areas of work with clear governance, planning and assurance arrangements.

The strategic areas of work in the 2026/27 Annual Plan include strategic reviews, deep dives and enabling projects, each having a clear scope/activity brief that was received by the Joint Committee at their meeting on 26<sup>th</sup> May 2026. Each activity brief provides clarity on purpose, scope, deliverables, milestones, intended outcomes, risks, dependencies, leadership and stakeholder engagement and it is against these elements of the activity brief that progress will be monitored.

This report provides an overview of progress position across the strategic priority areas as at the end of May 2026, and an indication of delivery confidence for the remainder of the year based on emerging risks and planned mitigations.

It should be noted that a formal report following the end of Quarter 1, that will include progress against all priorities in the 2026/2027 NWJCC Annual Plan, will be presented through NWJCC assurance reporting as part of the integrated performance report.

## 2. ASSESSMENT

### 2.1. End May 2026 Position – Delivery Status

All strategic priority areas have made progress during April and May 2026 with the core foundations for delivery now in place.

Table 2.1 gives a high-level RAG rating overview of delivery up to end May 2026 against the Quarter 1 deliverables for each of the Strategic Priorities:

<b>RAG Rating:</b> <b>BLUE - Complete, GREEN - On Track, AMBER - Slight Slippage or caution around delivery, RED - Significant Slippage or significant caution around delivery, WHITE – Project Not Yet Started</b>		
Strategic Priority	Quarter 1 Deliverables	RAG

<b>Ambulance / 111 Review</b>	<ul style="list-style-type: none"> <li>• Overview Report including productivity and baseline performance pack across the four commissioning domains – <b>Q1</b></li> <li>• Initial gap analysis between current commissioning information and what the framework requires – <b>Q1</b></li> <li>• Engagement plan with WAST and health board partners – <b>Q1</b></li> </ul>	
<b>Cardiac Review</b>	<ul style="list-style-type: none"> <li>• Commence work with Shared Services to reduce TAVI device costs – <b>Q1/Q2</b></li> <li>• Provider self-assessment against the Cardiac Surgery Service Specification - <b>Q1/Q2</b></li> </ul>	
<b>Neo-Natal Review</b>	<ul style="list-style-type: none"> <li>• Presentation of findings of Mat/Neo Assessment to QSOC 27/4/2026 – <b>Q1</b></li> <li>• Baseline review of current Neonatal commissioning via the JCC – <b>Q1</b></li> </ul>	
<b>Renal Deep Dive</b>	<ul style="list-style-type: none"> <li>• Commercial contracts – <b>Q1</b></li> <li>• Commissioning commitments between providers and WKN/JCC – <b>Q1</b></li> <li>• Analysis of current flows and activity – <b>Q1/Q2</b></li> <li>• Pathway impacts and interdependencies – <b>Q1/Q2</b></li> <li>• Quality and Outcomes – <b>Q1/Q2</b></li> </ul>	
<b>Mental Health Review</b>	<ul style="list-style-type: none"> <li>• Planning phase of project development, including baseline financial and placement positions near completion. Slight slippage on project set up – <b>Q1</b></li> <li>• Summary of strategic context and evidence base for medium and low secure provision and assessment of population need and demand. This has started and will be developed further with a first draft by July. <b>Q1/Q2</b></li> </ul>	
<b>IPFR Deep Dive</b>	<ul style="list-style-type: none"> <li>• Due to start in Q2 – No deliverables identified for Q1</li> </ul>	
<b>Thrombectomy Deep Dive</b>	<ul style="list-style-type: none"> <li>• Undertake review and document previous decisions, timelines and phasing. – <b>Q1</b></li> <li>• Undertake review and utilisation of existing commissioned services and constraints to achieving the expected thrombectomy rates. – <b>Q1</b></li> <li>• Link with NHS P&amp;I to understand aims and timelines for the Stroke Regionalisation programme. – <b>Q1</b></li> </ul>	
<b>Pathways &amp; Referral</b>	<ul style="list-style-type: none"> <li>• Analyse patient pathways and identify opportunities for change: - <b>Q1/Q2</b> <ul style="list-style-type: none"> <li>○ Identify pathway improvement and development opportunities across all products (provider/specialty/HB combinations).</li> <li>○ Continue to investigate the potential around a referral management system and process with a clear benefits realisation case. This will include expected KPIs targets for reduction in referrals that can be factored into JCC IMTP Planning and LTA discussion with providers for 2027/28.</li> </ul> </li> </ul>	

	<ul style="list-style-type: none"> <li>○ Continue to develop internal Dashboards to support analysis and understanding, including potential access to Referral data.</li> </ul>	
<b>Sustainability &amp; Efficiency</b>	<ul style="list-style-type: none"> <li>• Collate insights and outputs from the 'Value and Sustainability' workshop to inform the development of an initial programme or project brief for further consideration by SLT. – <b>Q1</b></li> <li>• Establish projects which will deliver savings. - <b>Q1</b></li> </ul>	

Table 2.1: Reporting against deliverables within the Strategic Priorities up to end of May 2026

## 2.2. Assurance, Mitigations and Confidence Rating

Table 2.2 provides an indication of delivery confidence for the remainder of the year for each strategic priority area based on emerging risks and planned mitigations as at end of May 2026.

This confidence rating will be closely monitored and updated in future reporting to ensure transparency across the portfolio.

<b>Delivery Confidence Rating:</b> <b>HIGH - On Track to achieve all deliverables</b> <b>MEDIUM - Caution around delivery/some deliverables may not be achieved</b> <b>RED – Significant caution around delivery/deliverables unlikely to be achieved</b>		
Strategic Priority	Assurances and Mitigations	Delivery Confidence Rating for 2026/27
<b>Ambulance / 111 Review</b>	<ul style="list-style-type: none"> <li>• Quarter 1 milestones on track with the exception of a slight delay to one outstanding action regarding the engagement plan which has been more in depth than anticipated. This has been addressed and mitigated to ensure no impact on the project.</li> <li>• Data and capacity dependencies may impact delivery against future milestones. This has been identified early in the project and mitigation actions are being developed.</li> </ul>	Medium
<b>Cardiac Review</b>	<ul style="list-style-type: none"> <li>• Cardiac project governance is in place and CEO Sponsor, Lay Member, Clinical representative in attendance when required at the Project Board. Project Team meetings are in place tracking the key milestones and deliverables.</li> <li>• A self-assessment process aligned to the Cardiac Surgery Service Specification has been developed and will be sent to providers to complete (anticipated over a 4 week) period by early July</li> </ul>	Medium

	<p>2026. Progress will be reported to the Project Board in July 2026.</p> <ul style="list-style-type: none"> <li>• Risk in delivery has been identified within the demand and capacity modelling, this has experienced delays due to provider capacity and scope of the review. This risk is being reviewed and mitigations are being developed. Board will continue to be updated and impact on milestones delivery monitored.</li> </ul>	
<b>Neo-Natal Review</b>	<p>Whilst work is ongoing through the project team, the delivery confidence going into Q2 is cautious at this stage to reflect the activity that needs to happen in July, including the decision to proceed with and procure a demand and capacity review. The following activity progressing will increase the confidence level:</p> <ul style="list-style-type: none"> <li>• Confirm project workstreams at July project team and board meetings</li> <li>• Progress the Demand &amp; Capacity review alongside evidence gathering. Work will build on existing analysis, focusing on updated data, outcomes, and service effectiveness.</li> <li>• Re-engage external providers within the confines of a competitive process</li> <li>• Update BAPM-aligned data</li> <li>• Progress neonatal transport arrangements through ongoing discussions with health board clinical leads</li> </ul>	Medium
<b>Renal Deep Dive</b>	<ul style="list-style-type: none"> <li>• The Welsh Kidney Network held an initial meeting to progress the deliverables in the agreed activity brief on 3rd June 2026.</li> <li>• An initial review of the commercial contracts and commissioning commitments between providers and analysis of current flows and activity has identified some early recommendations.</li> <li>• Consistency in contract monitoring data submitted by regional providers is required, to enable comparison and transparency, the structure of LTAs for the commissioned services of the WKN need to be standardised to allow benchmark activity across NHS Wales.</li> <li>• There is an inconsistency in the 'unit' and 'marginal' values of the commissioned services of the WKN that need to be understood further.</li> </ul>	High
<b>Mental Health Review</b>	<ul style="list-style-type: none"> <li>• Project established and on track.</li> <li>• Baseline position in development.</li> <li>• Quarter 1 milestones on track with the exception of a slight delay to finalising project documentation.</li> <li>• Summary of strategic context, and integrated map of medium and low secure service provision</li> </ul>	High

	<p>for Welsh patients, including Independent Sector, Framework Providers – Wales and Out of Area beds is on track for completion in Q2.</p> <ul style="list-style-type: none"> <li>• Data requirements from Health Boards on LS NHS placements may impact delivery against future milestones. This has been identified early in the project and engagement with Heads of Commissioning is in place.</li> <li>• Integrated overview of commissioned activity, financial investment, service activity, performance and outcomes across the system for medium and low secure patients at an all-Wales level on track for Q2.</li> <li>• A workshop to map Wales current process for referral management, placement sign off, and to interrogate data on length of stay and case management arrangements for inpatient provision in both independent sector and NHS beds is planned for Q2.</li> </ul>	
<b>IPFR Deep Dive</b>	<ul style="list-style-type: none"> <li>• The IPFR have met with finance colleagues to review a draft Power BI dashboard based on the data required for this deep dive. There are some functional additions needed which are currently underway. In addition, there is some work being carried out by finance, ahead of typical schedule, to make the 25-26 activity available for this deep dive. Once complete the IPFR team can then begin to build high level summaries which will form the basis of the deep dive.</li> <li>• The project has an amber status given the data position.</li> </ul>	Medium
<b>Thrombectomy Deep Dive</b>	<ul style="list-style-type: none"> <li>• The project is progressing well with alignment on scope and approach. Data remains the key constraint.</li> <li>• The work will focus on full pathway optimisation and delivering a robust, context-rich deep dive to support informed commissioning decisions.</li> </ul>	High
<b>Pathways &amp; Referral</b>	<ul style="list-style-type: none"> <li>• Project is fully established and on track.</li> <li>• Project is progressing well with alignment to scope and approach.</li> <li>• Total spend, waiting times data, total number of patients referral destination (provider) per speciality, demographic referrals have been reviewed and analysed.</li> <li>• Phase 1 and 2 preliminary report with recommendations now completed to be presented at Project Board.</li> </ul>	High
<b>Sustainability &amp; Efficiency</b>	<ul style="list-style-type: none"> <li>• Project established and on track</li> </ul>	Medium

	<ul style="list-style-type: none"> <li>• Clarified financial context and identified early opportunities</li> <li>• Delivery success will depend on: <ul style="list-style-type: none"> <li>○ Rapid clarification of scope and boundaries</li> <li>○ Establishment of a robust financial tracking model</li> <li>○ Strong prioritisation discipline</li> <li>○ Effective integration with existing programmes and finance processes.</li> </ul> </li> </ul>	
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Table 2.2: Reporting against delivery confidence within the Strategic Priorities as at end of May 2026

### 2.3. Key Risks and Dependencies

At end of May 2026, issues and potential risks are emerging, the most common of which relate to **data analysis and capacity constraints** within the JCC to deliver the data analytics required for the large projects. Options are being explored within each of the priority areas with a view to increase capacity to support specific data analysis for these time-limited pieces of work. A broader, collective review of JCC capacity in this area will also be undertaken to identify opportunities to mitigate the emerging risk to the delivery of the strategic priority areas of work.

Other themed issues emerging include:

- Reliance on commissioning and clinical capacity in the NWJCC across programmes alongside business as usual and directorate led delivery of annual plan deliverables;
- Dependency on stakeholder engagement with Health Boards and system partners and the need to formalise engagement approaches where initial informal engagement has begun;
- The need for programmes to transition from mobilisation into delivery at pace;
- External dependencies such as consultancy support and funding approvals in specific areas.

These risks are currently being managed and additional capacity is being explored with partners but will continue to be actively monitored to ensure mitigations are identified and actioned to ensure delivery of intended outcomes continues as planned.

### 3. REPORTING PROGRESS

The following key milestones have been set for reporting to Joint Committee on progress against the Strategic Priorities of the Annual Plan:

- **July - August 2026:** Findings of Deep Dives tested at CCLG ahead of Joint Committee workshop.
- **August 2026:** Workshop on findings of Deep Dives at Joint Committee.
- **September 2026:** Final Deep Dive reports and recommendations presented for sign-off and decision making at Joint Committee.

- **September 2026:** Mid-year report on initial findings of Strategic Reviews, assessment and recommendations presented to Joint Committee.
- **December 2026:** Findings of Strategic Reviews presented and discussed at CCLG and sub-Committees ahead of final report circulation.
- **January 2027:** Final Strategic Review reports and recommendations formally signed off, alongside socialisation of the implementation plan, at Joint Committee.

Formal quarterly reporting on progress against all priorities within the 2026/2027 Annual Plan will include exception reports on issues for escalation as appropriate and be included in the integrated performance report for scrutiny by the Planning, Performance & Finance Committee and subsequently to Joint Committee.

#### 4. ASSESSMENT

<b>Objectives / Strategy</b>	
<b>Dolen i Amcan (au) Strategol CBC / Link to JCC Strategic Objectives(s)</b>	Maximise Value
	If more than one applies please list below: Ensure Quality Reduce Duplication Improve Equity and Population Health Facilitate Integration
<b>Dolen i Ddeddf Llesiant Cenedlaethau'r Dyfodol – Nodau Llesiant / Link to Wellbeing of Future Generations Act – Wellbeing Goals</b> <a href="#">150623-guide-to-the-fg-act-en.pdf</a> <a href="#">(futuregenerations.wales)</a>	A Healthier Wales
	If more than one applies please list below:
<b>Dolen i Hwyluswyr Ansawdd</b> <i>(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) / Link to Enablers of Quality</i> <a href="#">(Duty of Quality Statutory Guidance (gov.wales))</a>	Data to Knowledge
	If more than one applies please list below: Culture and Valuing People Leadership Learning, Improvement & Research Whole-systems Perspective
<b>Dolen i Feysydd Ansawdd</b> <i>(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) /</i>	Effective
	If more than one applies please list below: Efficient Equitable Person Centred

<b>Link to Domains of Quality</b> <i>(Duty of Quality Statutory Guidance (gov.wales))</i>	Timely Safe
<b>Effaith Amgylcheddol/ Cynaliadwyedd (5R) / Environmental /Sustainability Impact (5Rs)</b>	No - Not Applicable
	If more than one applies please list below:

<b>Impact Assessment</b>		
<b>Ansawdd</b> <i>Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Ansawdd? / Quality</i> <i>Have you undertaken a Quality Impact Assessment Screening?</i>	Yes: <input type="checkbox"/>	No: <input checked="" type="checkbox"/>
	Outcome:	If no, please include rationale below: QIA will be completed for the IMTP itself
<b>Cydraddoldeb</b> <i>Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Gydraddoldeb? / Equality</i> <i>Have you undertaken an Equality Impact Assessment Screening?</i>	Yes: <input type="checkbox"/>	No: <input checked="" type="checkbox"/>
	Outcome:	If no, please include rationale below: EQIA will be completed for the IMTP itself
<b>Cyfreithiol / Legal</b>	There are no specific legal implications related to the activity outlined in this report.	
<b>Enw da / Reputational</b>	There is no direct impact on the reputation of the Joint Committee as a result of the activity outlined in this report.	
	At this stage reporting on track with some areas of caution moving into Q2.	
<b>Effaith Adnoddau</b> <i>(Pobl /Ariannol) / Resource Impact</i> <i>(People / Financial)</i>	There is no direct impact on resources as a result of the activity outlined in this report.	
	There are capacity challenges in some activity areas, but these are being managed.	

## 5. RECOMMENDATIONS

Members of the Planning, Performance and Finance Sub-Committee are asked to:

- **Note** progress against the strategic priority areas of the NWJCC 2026/27 Annual Plan as at end of May 2026,
- **Take assurance** that delivery has commenced and is on track,
- **Note** the current RAG position and absence of material escalation issues,
- **Note** the delivery confidence for each strategic priority area noting key risks mitigations and dependencies,
- **Note** that the formal position at end of Quarter 1 detailing progress against all areas of the Annual Plan will be included in the NWJCC Integrated Performance Report.