

Agenda Item

4.1

Quality Safety and Outcomes Sub-Committee
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Director of Commissioning for Specialised Services

Dyddiad y Cyfarfod / Date of Meeting	15/12/2025
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	Not Applicable
Awdur yr Adroddiad / Report Author	Heads of Commissioning and Quality Leads for Cancer & Blood, Cardiac, Neurosciences & Long-Term Conditions and Women & Children Commissioning Portfolios
Cyflwynydd yr Adroddiad / Report Presenter	Melanie Wilkey, Director of Commissioning for Specialised Services
Noddwr yr Adroddiad / Report Sponsor	Melanie Wilkey, Director of Commissioning for Specialised Services.

Pwrpas yr Adroddiad / Report Purpose	For Noting
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Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/Group)		
Committee / Group / Individuals	Date	Outcome
	Click or tap to enter a date.	Choose an item.

Acronyms / Glossary of Terms	
BCUHB	Betsi Cadwaladr University Health Board
BMT	Bone Marrow Transplant
CAR-T	Chimeric Antigen Receptor T-Cell Therapy
CCLG	Collaborative Commissioning Leadership Group
CQC	Care Quality Commission
CVUHB	Cardiff and Vale University Health Board
DBS	Deep Brain Stimulation
IMTP	Integrated Medium-Term Plan
JACIE	Joint Accreditation Committee of ISCT Europe
JC	Joint Commissioning Committee
LHCH	Liverpool Heart and Chest NHS Foundation Trust
MHRA	Medicines and Healthcare products Regulatory Agency
MWLNT	Mersey and West Lancashire NHS Trust
NWJCC	NHS Wales Joint Commissioning Committee
PET-CT	Positron emission tomography computerised tomography
PSMA	Prostate-Specific Membrane Antigen
QSO	Quality, Safety and Outcomes
RSSPPP	Regional and Specialised Services Provider Planning Partnership
SBUHB	Swansea Bay University Health Board
SRH	Salford Royal Hospital

1. SITUATION/BACKGROUND

The NHS Wales Joint Commissioning Committee (NWJCC) plans and commissions specialised and tertiary services on behalf of Health Boards in order to reduce duplication and ensure consistency.

This report provides the Quality Safety and Outcome Sub Committee (QSO) with an update on the work of the specialised services commissioning portfolios for:

- Cancer & Blood;
- Cardiac;
- Intestinal Failure;
- Neurosciences & Long-Term Conditions; and
- Women & Children.

Incidents and concerns related to specialised services are reported in Agenda Item 5.6.

2. SERVICES IN ESCALATION

One new service has been placed in escalation since the last report and two other services remain in escalation in Level 3 or above and are summarised as follows.

Appendix 1 provides an escalation trajectory to support the narrative below:

2.1 South Wales Specialist Auditory Implant Device Service

South Wales Specialist Auditory Implant Device Service is a new service that has been placed into escalation for this reporting period. It has been escalated to level 3 due to long-standing concerns with the waiting list and activity levels. The Health Board was formally notified on the 6th October and an acknowledgment letter received on the 23rd October. An action plan, trajectory and timescale will be agreed at the escalation meeting on 3rd December 2025.

2.2 Children's Hospital for Wales Neonatal Services

Whilst this service remains in escalation level 3 there are no new patient safety risks to report. At this stage no further progress can be made regarding cot configuration until the Maternity and Neonatal Assessment commissioned by the Cabinet Secretary has reported at the end of the year. Further work has been agreed and endorsed by the Joint Commissioning Committee on the 25th November 2025. An escalation meeting with the service is due to take place on the 2nd December to review the dashboard data and if there is sustained improvement then the level of escalation will be considered by the commissioning team.

2.3 Obesity Surgery Services Northern Care Alliance NHS Foundation Trust Salford Royal Hospital Obesity Surgery

On the 16 September 2025 a letter was received from the Northern Care Alliance (NCA) informing the NWJCC that the NCA will no longer be able to provide the Obesity Surgery Service at Salford Royal due to a number of operational challenges, including capacity issues and increased levels of demand. This letter included a formal six-month notice period, with the final date for accepting referrals being 31 March 2026. The letter included a commitment to treat the BCUHB patients who have already been referred and accepted by the NCA along with any further patients who are referred on or before this date. The NWJCC will also be contacting the BCUHB obesity weight management service leads/clinical teams regarding the management of the waiting list and patient referrals for obesity surgery etc. The NWJCC will be exploring other Provider options as a matter of urgency and will engage BCUHB fully in this process. The Welsh Institute of Metabolic and Obesity Surgery (WIMOS) at SBUHB continues to progress with receiving a small number of referrals from North Wales. The service has implemented a 'one stop shop' clinic for patients minimising the need to travel on several occasions.

3. COMMISSIONING RISKS

The Specialised Services Commissioning Teams manage a portfolio of risks by means of the organisational risk register, reporting risks and any services placed in escalation. In addition to the services in escalation the following risks are highlighted to be of particular note to the QSO Sub-Committee and have been reported to the Joint Commissioning Committee (JC) on 25th November, 2025. The NWJCC Risk Register (risks with a risk score >15 that are assigned to the QSO Sub-Committee) is presented as item 3.1 of the agenda.

3.1 Cancer and Blood Commissioning Risks

Plastic surgery waiting times in South Wales have improved significantly, with SBUHB treating all patients waiting over 104 weeks by March 2025. This achievement has been sustained into Q3 with support from Welsh Government planned care funding, and additional capacity is being planned to ensure no patients wait longer than 26 weeks for their first outpatient appointment.

3.1.1 Plastic surgery outreach clinics in North Wales

In North Wales, outreach clinics managed by BCUHB and delivered by Mersey and West Lancashire Trust (MWL) continue to face capacity challenges. A funding model for 2025–26 is being finalised, and a proposal is expected from MWL for additional capacity in 2026-27 to address the capacity gap. Further waiting list initiatives have been delivered to eliminate the backlog while routine capacity is increased.

3.1.2 PET-CT for prostate cancer

Demand for PET-CT scanning continues to grow, with annual increases of 13%, 12%, and 8% over the past three years. PSMA PET scanning turnaround time performance remains volatile due to radioisotope supply issues, with mutual support and prioritisation measures in place. Significant progress has been made in creating an All-Wales PET Patient questionnaire, with robust engagement with the Patient Experience teams at CVUHB, SBUHB and BCUHB. The plan is to trial a pilot at CVUHB in the first instance and further progress will be undertaken once advice has been received from CEDAR.

3.1.3 JACIE Accreditation for BMT and CAR-T Services

The significant risk regarding JACIE certification for Blood and Marrow Transplantation (BMT) and CAR-T services at CVUHB and SBUHB has been previously reported to the committee. The inspection took place on 19 September 2025, and the report is awaited. If certification is not maintained, CAR-T services would be suspended due to pharmaceutical supply restrictions, and BMT services may require alternative commissioning arrangements. Mitigation includes potential derogation for the delivery of local services and the development of pathways with English providers.

3.1.4 Hereditary anaemias

The hereditary anaemias service at CVUHB faces capacity pressures due to a doubling of the patient population over five years. The service is fragile, relying on a single consultant, and risks delayed care and staff burnout. The commissioning team has recommended increased capacity in the 2026-29 IMTP process.

3.2 Cardiac Commissioning Risks

3.2.1 Obesity Surgery Waiting Times

In response to the letter of notice received from Salford an NWJCC internal meeting was arranged, and several actions were agreed. Work will progress to look at alternative commissioning options and ensuring patients currently on the waiting list are not adversely affected by this change.

3.2.2 Intestinal Failure

JCC are awaiting confirmation from CAVUHB IF team on the start date for migrating existing patients to the new suppliers. A follow up communication has been sent to the team reiterating the potential cost savings and benefits to patients.

4. ADDITIONAL COMMISSIONING TEAM HIGHLIGHTS FOR CONSIDERATION

4.1.1 Deep Brain Stimulation (DBS)

The NWJCC met with clinicians and stakeholders on the development of a service specification for a Functional Neurosurgical Service for Movement Disorders (including DBS) on 24th October 2025. The presentation included outcomes from the temporary pathway, developed using a Functional Neurosurgery Model, along with key considerations for designing an optimal delivery model for South Wales. The service specification was published for stakeholder consultation on 24th November and will be utilised in the provider designation process, which is planned to conclude by the end of March 2026.

4.1.2 South Wales Mechanical Thrombectomy Capacity

The South Wales service was launched on 1 July 2025. Key risks include low referral rates, lack of 24/7 access, and financial exposure from a block contract with North Bristol Trust to maintain current access times. The commissioning team are closely monitoring activity to manage flow across between Health Boards, the South Wales Thrombectomy Centre and Southmead Hospital from a value for money perspective. A revised business case is in development by Cardiff and Vale University Health Board, setting out how they propose to increase hours of access towards a 24/7 service at a faster pace than set out in the original business case agreed by JC in January 2024. Discussions continue between Cardiff and Vale University Health Board and North Bristol Hospital NHS Trust regarding a partnership approach towards the establishment of a 24/7 service.

4.1.3 Service Innovation and Improvement events

The commissioning team supported the Nursing and Quality team in NWJCC in September in relation to a Paediatric Cardiology Service Improvement and Innovation event, held at the Children's Hospital for Wales. Paediatric cardiology is a highly specialised area of commissioning and services for Welsh patients are currently delivered by three main providers: Children's Hospital for Wales, Alder Hey Children's Hospital and Bristol Royal Hospital for Children. The event brought together the three providers to share learning, review current provision, and explore opportunities for improvement. The objectives were to share patient stories, review current specifications, identify key challenges and work collaboratively to develop shared solutions. Key themes were identified and a summary of the event will be produced.

An All-Wales Posture and Mobility Service Innovation and Improvement Day took place on 24th September, bringing together providers from Betsi Cadwaladr University Health Board, Swansea Bay University Health Board and Cardiff & Vale University Health Board to share learning and identify opportunities for improvement.

The Intestinal Failure commissioning team supported an Intestinal Failure Service Improvement and Innovation event on 3rd November 2025, held at the University Hospital for Wales. This included both adult and paediatric services from the areas that provide the care, including CVUHB, Salford Royal, BCUHB and AHCH and Birmingham Children's Hospital. The day was dedicated to strengthening the quality, safety and effectiveness of care for patients with IF. Patient stories were shared throughout the day, they served as a powerful reminder that the core of our work is always patient focused and highlighted the complexities in caring for IF patients. By bringing the multidisciplinary team, service leaders and commissioners together, the day provided protected time to reflect, on service models, identify the service strengths and key challenges to plan for the future of the service.

4.1.4 Swansea Bay Maternity and Neonatal Learning and Improvement Conference

SBUHB hosted a Maternity and Neonatal Learning event on the 19th November 2025 following the findings of the independent review of services within the Health Board. The Health Board provided an unreserved apology to the families that had been let down by their service and provided an update on the improvements they had made to address the areas of concern identified in the report. The day provided the opportunity for stakeholder feedback on their lived experiences and journeys whilst accessing the services. The conference also heard from a number of experts in the field including inspectors and regulators and from staff working within the services.

5.0 NHS ENGLAND SPECIALISED COMMISSIONING, HEALTH AND JUSTICE, AND ARMED FORCES NATIONAL QUALITY AND GOVERNANCE GROUP

NHS England hosted a National Quality Workshop on the 13th November which was attended by members of the NWJCC Nursing & Quality team. The workshop provided a useful insight into the proposed governance structures and case studies related to quality improvement methodology. The NWJCC is currently in the process of reviewing the Commissioning Assurance Framework and alignment to this work will be critical to enable benchmarking and reporting to reduce duplication and enhance assurance processes.

The next National Quality and Governance Group Meeting is scheduled for the 11th December, 2025.

6. ASSESSMENT

Objectives / Strategy	
Dolen i Amcan (au) Strategol CBC / Link to JCC Strategic Objectives(s)	Ensure Quality
	Improve Equity and Population Health
Dolen i Ddeddf Llesiant Cenedlaethau'r Dyfodol – Nodau Llesiant / Link to Wellbeing of Future Generations Act – Wellbeing Goals 150623-guide-to-the-fg-act-en.pdf (futuregenerations.wales)	A Healthier Wales
	A More Equal Wales
Dolen i Hwyluswyr Ansawdd <i>(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) / Link to Enablers of Quality</i> (Duty of Quality Statutory Guidance (gov.wales))	Learning, Improvement & Research Leadership
Dolen i Feysydd Ansawdd <i>(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) /</i>	Effective
	Efficient Equitable Person Centred

Link to Domains of Quality <i>(Duty of Quality Statutory Guidance (gov.wales))</i>	Timely Safe
Effaith Amgylcheddol/ Cynaliadwyedd (5R) / Environmental /Sustainability Impact (5Rs)	No - Not Applicable

Impact Assessment		
Ansawdd <i>Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Ansawdd? /</i> Quality <i>Have you undertaken a Quality Impact Assessment Screening?</i>	Yes: <input type="checkbox"/>	No: <input checked="" type="checkbox"/>
	Outcome:	Individual Quality Impact Assessments are carried out as necessary and can be requested.
Cydraddoldeb <i>Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Gydraddoldeb? /</i> Equality <i>Have you undertaken an Equality Impact Assessment Screening?</i>	Yes: <input type="checkbox"/>	No: <input checked="" type="checkbox"/>
	Outcome:	Individual Equality Impact Assessments are carried out as necessary and can be requested.
Cyfreithiol / Legal	There are no specific legal implications related to the activity outlined in this report.	
Enw da / Reputational	Yes (Include further detail below)	
	Reputational impact of delivering those activities delegated to the NHS Wales Joint Commissioning Committee	
Effaith Adnoddau (Pobl /Ariannol) / Resource Impact (People / Financial)	Yes (Include further detail below)	
	Any resource implications associated with current specialised commissioning activities described in the in the paper are described within the body of the text	

7. RECOMMENDATIONS

The Quality, Safety and Outcomes Sub Committee is asked to:

- **Note** the specialised commissioning updates summarised in this report; and
- **Note** the summary of specialised risks described and escalate as necessary.