

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

		CONSEQUENCE (C)					
		CxL	1 - Negligible	2 - Minor	3 - Moderate	4 - Major	5 - Catastrophic
LIKELIHOOD (L)	1 - Highly Unlikely						
	2 - Unlikely						
	3 - Likely						77 Commissioning of sufficient Emergency Ambulance Services capacity 80 JACIE accreditation - south Wales CAR T service 81 JACIE accreditation - south Wales BMT service
	4 - Highly Likely					28 Business Continuity 53 C&VUHB Neurosciences Staffing issues/level 61 Obesity surgery waiting times 65 Renal dialysis capacity across Wales 79 Type A Aortic Dissection 82 SBUHB Neuro-rehabilitation 86 C&VUHB Neurosciences National Standards 89 Paediatric Neurology service provision for Welsh patients 90 JCC Organisational Development through Effective Strategic Workforce Planning	69 Paediatric Radiology out of hours provision 78 Utilisation of Emergency Ambulance capacity 87 Acute Therapies MDT 88 South Wales Thrombectomy Equity 24/7
	5 - Almost Certain				03 Plastic surgery delays 83 Full commissioning of paediatric orthopaedic surgical service 84 Financial Break-even 2025/26	68 C&VUHB Specialist Auditory Hearing service waiting times	

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

JCC RISK REGISTER - RISKS WITH SCORES >15																	
Risk Ref	Risk Title	Risk Description	Strategic Risk Owner	Commissioning Team/ Directorate	JCC Strategic Objective	CTM Risk Domain	Provider/s	Controls in place	Action Plan	Assuring Committees / Sub-Committees	Rating (current)		Rating (Target)		Trend	Risk Opened	Last Reviewed
											C	L	C	L			
53 NCC062	C&VUHB Neurosciences Staffing issues/level (merged with NCC058)	If... Cardiff and Vale University Health Board is unable to recruit to a number of current vacancies in the Neuro-rehabilitation service Then... the gap in the number of posts that have been commissioned means that the service is not meeting the national standards Resulting in... patients requiring admission to the Inpatient Neuro-rehabilitation Unit are unable to access the specialist rehabilitation they require	Director of Commissioning for Specialised Services	Neurosciences	Ensure quality: with a commissioning approach that is fostered in a quality management system, provide quality outcome, evidence based service specifications for commissioned services and monitor delivery against these	Safety & Well-being - Patients/ Staff/ Public Quality/ Complaints/ Assurance/ Patient Outcomes	CVUHB	<ul style="list-style-type: none"> JCC (former WHSSC) quality team have met with C&VUHB Neurosciences lead nurse to discuss the staffing issues/level. Receiving quarterly repatriation delay information and monitor through the Neurosciences Risk, Recovery and Assurance meetings 	<ul style="list-style-type: none"> JCC to continue meeting quarterly with the C&VUHB team to understand the risks The concerns raised by the Rehabilitation team will be addressed in the Rehabilitation Strategy which is currently paused for review in 25/26. Development and delivery of the strategy has been paused due to capacity issues CVUHB have successfully recruited to the commissioned staffing establishment but remain below the minimum standards for the British Society Physical Rehabilitation Medicine. The risk will be reviewed at the next Commissioning Team meeting in July 25. <p>Update for August 2025 - Commissioning Team undertaken a review of this risk which remains unchanged</p>	<ul style="list-style-type: none"> Joint Commissioning Committee Quality, Safety & Outcomes Sub-Committee Senior Leadership Team CTMUHB Audit & Risk Committee 	16	4	4	4	↔	Aug-23	Aug-2025
65 WKN18	Renal Dialysis Capacity across Wales	If... the number of patients requiring dialysis continues to grow annually at a rate of 3-4% (or higher based on some projections) Then... the demand will exceed current capacity across Wales for both unit-based and home dialysis. Resulting in... <ul style="list-style-type: none"> Limited availability of unit-based dialysis slots Decreased accessibility to unit-based dialysis facilities near patients' homes Increased reliance on twilight (evening) dialysis slots, which are associated with elevated patient safety risks, such as fewer medical staff being available and patients traveling home late at night. Delays or limits on the number of patients accessing home dialysis, as the growing demand exceeds the capacity of the nursing workforce to provide timely training and ongoing monitoring. Increased pressure on the NEPTS service to transport a greater number of patients to and from dialysis session 3 times per week 	Director of Commissioning for Specialised Services	Welsh Kidney Network	Ensure quality: with a commissioning approach that is fostered in a quality management system, provide quality outcome, evidence based service specifications for commissioned services and monitor delivery against these	Safety & Well-being - Patients/ Staff/ Public Quality/ Complaints/ Assurance/ Patient Outcomes	BCUHB, CVUHB, SBUHB	<ul style="list-style-type: none"> Value in Health Care funding secured to increase the number of transplant and home dialysis patients Monitoring through provider WKN meetings through the WKN commissioning performance dashboard Additional capacity provided in Welshpool and through the new Bridgend Dialysis Unit will be monitored through provider meetings A focus on increasing home therapies and transplant will increase capacity in the units, although a percentage of patients will return to unit dialysis for respite or due to kidney transplant failure, which needs to be accounted for when assessing capacity pressures The following strategic Prevention workstreams are expected to have a medium/long term effect, led by the WKN Clinical Prevention Lead: <ul style="list-style-type: none"> All Wales Community Healthcare Pathway for referrals for Chronic Kidney Disease have been agreed and introduced into Primary Care Regional actions plans have been developed for increasing patient numbers for home dialysis and transplantation, monitored through the WKN Regional performance meetings 	<ul style="list-style-type: none"> Prevention workstream medium/long term effect National Primary Care CKD optimisation project approved as a mandatory component of the new GMS contract for all GP practices in Wales £4.5m budget. Educational webinar to promote project is planned for September 2025 supported by regional workshops. Target metrics have been developed by DHCW and EMIS searches CKD e-learning module for primary care focusing on prevention, screening and optimisation for early CKD - CPD-approved is under construction with HEIW Community Cardiorenal clinic pilot being developed in SBUHB - start date to be confirmed Commissioned services <ul style="list-style-type: none"> Commission a distinct piece of work on Demand and Capacity Modelling, To develop a model of future activity/demand, and responding capacity, in order to inform future growth predictions which will be the basis of a) the Welsh Kidney networks commissioning intentions and b) the investment profile of the Welsh Kidney Network over the timescale set. HEOR have been commissioned to deliver on this work. Full workforce analysis with Regions and bench marking to quantify the various staffing costs per session. Monitor the variation between the 1.77% uplift applied as part of the IMTP Foundation plan and the projected 3.7% growth for dialysis across Wales - Qtr 4 2025/26 <p>Update for August 2025 - No regional meetings have taken place; these are due in September 2025</p>	<ul style="list-style-type: none"> Joint Commissioning Committee Welsh Kidney Network Board Quality & Patient Safety Sub-Committee Senior Leadership Team CTMUHB Audit & Risk Committee 	16	2	4	4	↔	Jan-24	Aug-2025
78	Utilisation of Emergency Ambulance Capacity	If... the capacity commissioned by the NWJCC is not utilised for its intended purpose Then... Health boards and their populations will not receive the services they require Resulting in... patients not receiving a timely emergency ambulance response, increasing the risk of harm, disability and death	Director of Commissioning for Ambulance Services and 111	Ambulance Services and 111	Ensure quality: with a commissioning approach that is fostered in a quality management system, provide quality outcome, evidence based service specifications for commissioned services and monitor delivery against these	Safety & Well-being - Patients/ Staff/ Public Quality/ Complaints/ Assurance/ Patient Outcomes	WAST	<ul style="list-style-type: none"> Implementation of Welsh Government ambulance handover targets for health boards NWJCC collaborative working with health boards and WAST to reduce conveyance to Emergency Departments 	<ul style="list-style-type: none"> The Ministerial Advisory Group report into NHS Wales Performance and Productivity (Recommendation 13) recommends Urgent action should be taken to reduce ambulance handover delays at emergency departments by implementing a national improvement programme, supported by real-time data, operational standards, and accountability mechanisms. JCC are working collaboratively to support implementation of this recommendation and support a weekly operational discussion regarding national ambulance handover performance with Welsh Government and NHS Wales Performance & Improvement including taking a lead on the development of a performance dashboard. Establishment of the clinically led National Improvement Delivery Group (National Handover-45 Taskforce) to reduce ambulance handover delays of which the JCC is an active participant 6 Goals programme working to ensure All Health Boards in Wales establish Single Points of Access (SPOA) by September 2025 to facilitate more patients being streamed to the correct place to meet their needs. Increase the number of patients managed at Step 2 of the ambulance commissioning framework Investment in additional ambulance service capacity by pass-through 2024/25 uplift Developing of productivity improvement plan aligned to the 5 step ambulance pathway - maximising efficiency of commissioned capacity Introduction of rapid clinical screening from December 2024, to clinically optimise dispatch decisions Phased introduction of RICS (Remote Integrated Care Service) in Q4, providing consistency 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 ensuring patients can access the right response first time. Sustained reduction throughout Q1 2025/26 in the number of lost hours due to ambulance handover delays within a number of hospitals within NHS Wales is resulting in more emergency ambulance capacity being utilised for its intended purpose. Accelerated design events planned to take place during August/September 2025 to improve handover delays further. <p>Update for August 2025 - Ambulance & 111 Commissioning Team have reviewed the risk score which has remained unchanged.</p>	<ul style="list-style-type: none"> Joint Commissioning Committee Quality, Safety & Outcomes Sub-Committee Senior Leadership Team CTMUHB Audit & Risk Committee 	20	15	4	4	↔	Sep-24	Aug-2025
79	Type A Aortic Dissection	If... the recommendations of the 202 GIRFT review relating to the treatment of Type A Aortic Dissections cannot be implemented Then... patients from South Wales will not have access to the recommended single Type A Aortic Dissection treatment pathway and will continue to need to be transferred to England if identified as benefiting from the Frozen Elephant Trunk procedure Resulting in... suboptimal patient outcomes and inequity of service	Director of Commissioning for Specialised Services	Cardiac	Ensure quality: with a commissioning approach that is fostered in a quality management system, provide quality outcome, evidence based service specifications for commissioned services and monitor delivery against these	Safety & Well-being - Patients/ Staff/ Public Quality/ Complaints/ Assurance/ Patient Outcomes		<ul style="list-style-type: none"> Following the publishing of the GIRFT review recommendations, the NWJCC worked with the two South Wales providers to identify whether either would be interested in being the single provider of the Frozen Elephant Trunk procedure (mindful that this might also facilitate a move towards the provision of a single pathway), with neither centre expressing an interest 	<ul style="list-style-type: none"> Continue working with CVUHB and SBUHB to identify the means of implementing the GIRFT recommendation at the earliest possible opportunity. Present option of aligning delivery with the Cardiac Review by means of a forthcoming Joint Commissioning Committee paper that outlines the scope of Phase 2 of the cardiac review for which aortic dissection is included. The paper is being presented to SLT and the Joint Committee development session in August. The outcome will be to progress with an interim pathway to ensure ongoing service provision for these patients. <p>Update August 2025 - The Cardiac Commissioning team have reviewed the risk which remains unchanged. The risk score will be reviewed following the development / implementation of an interim pathway for these patients.</p>	<ul style="list-style-type: none"> Joint Commissioning Committee Quality, Safety & Outcomes Sub-Committee Senior Leadership Team CTMUHB Audit & Risk Committee 	16	4	4	4	↔	Mar-25	Aug-2025

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

Risk Ref	Risk Title	Risk Description	Strategic Risk Owner	Commissioning Team / Directorate	JCC Strategic Objective	CTM Risk Domain	Provider/s	Controls in place	Action Plan	Assuring Committees / Sub-Committees	Rating (current) (C x L)	Rating (Target) (C x L)	Trend	Risk Opened	Last Reviewed	
82 NCC057	SBUHB Neuro-rehabilitation	If... patients requiring admission to the Inpatient Neuro-rehabilitation Unit (SBUHB) are unable to access specialist rehabilitation due to considerable staffing pressures across the whole of the multidisciplinary team Then... patient care will be compromised and the opportunity to avoid preventable complications (where specialist Neuro-rehabilitation intervention is needed but not available) will be lost Resulting in... poor patient experience and poor outcomes	Director of Commissioning for Specialised Services	Neurosciences	Ensure quality: with a commissioning approach that is fostered in a quality management system, provide quality outcome, evidence based service specifications for commissioned services and monitor delivery against these	Safety & Well-being - Patients/ Staff/ Public Quality/ Complaints/ Assurance/ Patient Outcomes	SBUHB	<ul style="list-style-type: none"> Recommendations to mitigate the current risks and medium to longer term staffing requirements by recruiting and maintaining a well-resourced and competent multidisciplinary team. SBUHB have reduced the number of Neuro-rehabilitation inpatient beds from 14 to 10 beds in the short term whilst recruitment gaps are resolved. Information re: delayed admissions/discharges to be shared with WHSSC – now completed Requested Bed Days lost data from NPT to identify efficiency savings and the identify the need for Level 2 step down facilities to improve clinical flow. Reinstated half yearly Performance meetings. JCC undertook writing a specialised rehabilitation strategy and the unit is to be included in this project. 	<ul style="list-style-type: none"> JCC drafted a specialised rehabilitation strategy, the unit is to be included in this project. The strategy has been paused for review in 25/26. Half yearly Performance meetings with NPT - Ongoing April 2025 - Commissioning team reviewed risk and score has increased due to delayed investment planned for 24/25 with no funding release to take forward in the 25/26 foundation plan. <p>Update for August 2025 - Commissioning Team undertaken a review of this risk which remains unchanged</p>	<ul style="list-style-type: none"> Joint Commissioning Committee Quality, Safety & Outcomes Sub-Committee Senior Leadership Team CTMUHB Audit & Risk Committee 	16	2	↔	Apr-25	Aug-2025	
											4	4	1	2		
80 CB12	JACIE accreditation - south Wales CAR T service	If... CVUHB does not achieve JACIE reaccreditation for its CAR-T service due to facilities not meeting standards Then... there will be no CAR-T service in Wales (as pharmaceutical companies will withdraw their approvals for CVUHB to administer their products) Resulting in... <ul style="list-style-type: none"> patients having to travel further to receive treatment at an accredited centre an increased risk of patients not receiving treatment in a timely manner leading to poorer patient outcomes; adverse impact on patient and family experience; significant increase in costs to NHS Wales; inability to deliver against the strategic intention of ATMP delivery in Wales therefore damaging reputation of NHS Wales; potential workforce issues with long term implications for re-starting the service and the future of ATMPs in south Wales; increase in administrative burden 	Director of Commissioning for Specialised Services	Cancer & Blood	Ensure quality: with a commissioning approach that is fostered in a quality management system, provide quality outcome, evidence based service specifications for commissioned services and monitor delivery against these	Safety & Well-being - Patients/ Staff/ Public Quality/ Complaints/ Assurance/ Patient Outcomes	CVUHB	<ul style="list-style-type: none"> No controls identified 	<ul style="list-style-type: none"> In conjunction with the provider, to advise Welsh Government on the implications for the service and patients if JACIE accreditation is not achieved. <p>Update for August 2025 - The risk has been reviewed and remains unchanged.</p>	<ul style="list-style-type: none"> Joint Commissioning Committee Quality, Safety & Outcomes Sub-Committee Senior Leadership Team CTMUHB Audit & Risk Committee 	15	5	↔	May-25	Aug-2025	
											5	3	5	1		
81 CB13	JACIE accreditation - south Wales BMT service	If... CVUHB does not achieve JACIE accreditation for its BMT service due to facilities not meeting standards Then... JCC will either be commissioning from an unaccredited centre or outsourcing patients to centres in England. Resulting in... If continue to commission Cardiff: Patients receiving treatment from a centre which is deemed not to reach national standards or the NWJCC service specification. If outsourcing: risk to patient safety due to delays in treatment and ability to have timely access to high quality care.	Director of Commissioning for Specialised Services	Cancer & Blood	Ensure quality: with a commissioning approach that is fostered in a quality management system, provide quality outcome, evidence based service specifications for commissioned services and monitor delivery against these	Safety & Well-being - Patients/ Staff/ Public Quality/ Complaints/ Assurance/ Patient Outcomes	CVUHB SBUHB	<ul style="list-style-type: none"> Stringent infection control measures are in place Appropriate governance arrangements would need to be in place if the service does not have JACIE accreditation. 	<ul style="list-style-type: none"> In conjunction with the provider, to advise Welsh Government on the implications for the service and patients if JACIE accreditation is not achieved. <p>The following actions would be undertaken if accreditation is not renewed by JACIE:</p> <ul style="list-style-type: none"> Increased reporting re IP&C and plans and progress regarding reaccreditation via updates with capital investment Implement enhanced patient consenting To place the service in escalation level 3 <p>If outsourcing:</p> <ul style="list-style-type: none"> Outsourcing framework to be agreed and in place. <p>Update for August 2025 - The risk has been reviewed and remains unchanged.</p>	<ul style="list-style-type: none"> Joint Commissioning Committee Quality, Safety & Outcomes Sub-Committee Senior Leadership Team CTMUHB Audit & Risk Committee 	15	5	↔	May-25	Aug-2025	
											5	3	5	1		
83 P/21/27	Full commissioning of paediatric orthopaedic surgical service	If... the paediatric orthopaedic surgical service is not fully commissioned by the NWJCC (which requires a full transfer of the existing service) Then... the NWJCC will not be able to performance manage the service Resulting in... potential lack of equity and quality of service provision for the population of South Wales	Director of Commissioning for Specialised Services	Women & Children	Ensure quality: with a commissioning approach that is fostered in a quality management system, provide quality outcome, evidence based service specifications for commissioned services and monitor delivery against these	Safety & Well-being - Patients/ Staff/ Public Quality/ Complaints/ Assurance/ Patient Outcomes	CVUHB	<ul style="list-style-type: none"> Quarterly assurance meetings with the service. 	<ul style="list-style-type: none"> The health board surgical board have committed to submitting a paper to the JCC which includes activity and costs, paediatric orthopaedic costs, theatre activity and a breakdown of coded activity. This will aid the next steps for commissioning of the service. The paper is expected by the 30th June. <p>Update for August 2025 - Awaiting receipt of agreed paper. Not received at time of report. The W&C Commissioning team have reviewed the risk which remains unchanged. Further chaser emails have been sent to the leads in the service. It was agreed in our commissioning team meeting that a meeting will be scheduled with the service to progress.</p>	<ul style="list-style-type: none"> Joint Commissioning Committee Quality, Safety & Outcomes Sub-Committee Senior Leadership Team CTMUHB Audit & Risk Committee 	15	4	↔	May-25	Aug-25	
											3	5	2	2		
86 NCC066	C&VUHB Neurosciences National Standards	If... Cardiff and Vale University Health Board is unable to meet the current commissioned nursing establishment of the unit and therefore not meeting BSRM standards Then... the gap in the number of posts that have been commissioned means that the service is not meeting the national standards Resulting in... patients requiring admission to the Inpatient Neuro-rehabilitation Unit are unable to access the specialist rehabilitation this also includes tracheostomy patients, due to the number of patients that can be cared for safely	Director of Commissioning for Specialised Services	Neurosciences	Ensure quality: with a commissioning approach that is fostered in a quality management system, provide quality outcome, evidence based service specifications for commissioned services and monitor delivery against these	Safety & Well-being - Patients/ Staff/ Public Quality/ Complaints/ Assurance/ Patient Outcomes	CVUHB	<ul style="list-style-type: none"> JCC to continue meeting with CVUHB Neurosurgery Service to discuss performance, staffing issues/level and risks JCC receiving and monitoring performance information Performance reporting and oversight via Risk assurance and recovery meetings, SLA meetings and to Management Group and JCC 	<ul style="list-style-type: none"> New risk added in May 2025 following identification of this risk through the provider risk based assessment for the foundation plan. JCC has arranged further performance meetings with the service <p>Update for August 2025 - The Neurosciences Commissioning Team has reviewed the risk which remains unchanged.</p>	<ul style="list-style-type: none"> Joint Commissioning Committee Quality, Safety & Outcomes Sub-Committee Senior Leadership Team CTMUHB Audit & Risk Committee 	16	4	↔	May-25	Aug-2025	
											4	4	2	2		

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

Risk Ref	Risk Title	Risk Description	Strategic Risk Owner	Commissioning Team / Directorate	JCC Strategic Objective	CTM Risk Domain	Provider/s	Controls in place	Action Plan	Assuring Committees / Sub-Committees	Rating (current) (C x L)	Rating (Target) (C x L)	Trend	Risk Opened	Last Reviewed
88	South Wales Thrombectomy Equity 24/7	<p>If...a 24 hour / 7 day per week mechanical thrombectomy service is not provided for South Wales and South Wales patients in a timely manner</p> <p>Then...there is a risk of continued inequity compared to patients in North East Wales and North Powys that have access to a 24/7 Mechanical Thrombectomy Service</p> <p>Resulting in...the potential for poorer patient outcomes in South Wales and South Powys</p>	Director of Commissioning for Specialised Services	Neurosciences	Ensure quality: with a commissioning approach that is fostered in a quality management system, provide quality outcome, evidence based service specifications for commissioned services and monitor delivery against these	Safety & Well-being - Patients/ Staff/ Public Quality/ Complaints/ Assurance/ Patient Outcomes	CVUHB	<ul style="list-style-type: none"> Business case received from CVUHB 4 phase plan to provision of 24/7 service Ongoing discussions with North Bristol Hospital Trust (NBHT) being held regarding service provision. 	<ul style="list-style-type: none"> JCC continue to monitor CVUHB progress against the phase 1 investment and timely progression towards a 24/7 service. JCC to continue to meet Cardiff service regularly as required (currently fortnightly) to monitor activity. <p>Update for August 2025 - The Neurosciences Commissioning Team has reviewed the risk which remains unchanged.</p>	<ul style="list-style-type: none"> Joint Commissioning Committee Quality, Safety & Outcomes Sub-Committee Senior Leadership Team CTMUHB Audit & Risk Committee 	20	4	↔	Jul-25	Aug-2025
89 P/21/28	Paediatric Neurology Service provision for Welsh Patients	<p>If...neurology services in Alder Hey continue to be reduced</p> <p>Then...North Wales paediatric patients will not have access to the full range of Paediatric services.</p> <p>Resulting in...Inequity of care, poor patient experience and poor outcomes, which may lead to a commissioned service unable to implement JCC policies in terms of access to drugs and treatments, thus not providing a high-quality service required by JCC.</p>	Director of Commissioning for Specialised Services	Women & Children	Ensure quality: with a commissioning approach that is fostered in a quality management system, provide quality outcome, evidence based service specifications for commissioned services and monitor delivery against these	Safety & Well-being - Patients/ Staff/ Public Quality/ Complaints/ Assurance/ Patient Outcomes	Alder Hey	<ul style="list-style-type: none"> The service are under capacity and delivering a restricted service. Internal meetings in JCC to discuss the current outreach provision have been held. Next meeting planned for October when the new Assistant Director of Commissioning commences who will take this work forward with Alder Hey. 	<p>Update for August 2025 - W&C Commissioning Team have reviewed the risk which remains unchanged. A dedicated meeting to address the outreach model has been scheduled for the 7th October 2025. This will be a JCC meeting with BC UHB to discuss the Alder Hey outreach provision. The meeting will include; the new Assistant Director of Commissioning, head of commissioning, quality and business outcomes manager, associate medical director and commissioning manager from the JCC plus Asst. Director Health Strategy Planning, operations manager CYP and the Director of Performance and Commissioning from BC UHB.</p>	<ul style="list-style-type: none"> Joint Commissioning Committee Quality, Safety & Outcomes Sub-Committee Senior Leadership Team CTMUHB Audit & Risk Committee 	4 5	4 2	↔	Jul-25	Aug-25
											4 4	2 2			

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

JCC RISK REGISTER FOR NEW RISKS >15													
Datix ID	Risk Title	Risk Description	Strategic Risk owner	Commissioning Team / Directorate	JCC Strategic Objective	CTM Risk Domain	Provider(s)	Controls in place	Action Plan	Assuring Committees / Sub-Committees	Rating (current) C x L	Rating (Target) C x L	Month Added
88	South Wales Thrombectomy Equity 24/7	<p>If...a 24 hour / 7 day per week mechanical thrombectomy service is not provided for South Wales and South Wales patients in a timely manner</p> <p>Then...there is a risk of continued inequity compared to patients in North East Wales and North Powys that have access to a 24/7 Mechanical Thrombectomy Service</p> <p>Resulting in...the potential for poorer patient outcomes in South Wales and South Powys</p>	Director of Commissioning for Specialised Services	Neurosciences	<p>Ensure quality: with a commissioning approach that is fostered in a quality management system, provide quality outcome, evidence based service specifications for commissioned services and monitor delivery against these</p>	Safety & Well-being - Patients/ Staff/ Public Quality/ Complaints/ Assurance/ Patient Outcomes	CVUHB	<ul style="list-style-type: none"> Business case received from CVUHB 4 phase plan to provision of 24/7 service Ongoing discussions with North Bristol Hospital Trust (NBHT) being held regarding service provision. 	<ul style="list-style-type: none"> JCC continue to monitor CVUHB progress against the phase 1 investment and timely progression towards a 24/7 service. JCC to continue to meet Cardiff service regularly as required (currently fortnightly) to monitor activity. <p>Update for July 2025 - New risk added following a Risk Register CTM meeting.</p>	<ul style="list-style-type: none"> Joint Commissioning Committee Quality, Safety & Outcomes Sub-Committee Senior Leadership Team CTMUHB Audit & Risk Committee 	20 (4x5)	4 (2 x2)	Jul-25
89 P/21/28	Paediatric Neurology Service provision for Welsh Patients	<p>If...neurology services in Alder Hey continue to be reduced</p> <p>Then...North Wales paediatric patients will not have access to the full range of Paediatric services.</p> <p>Resulting in...Inequity of care, poor patient experience and poor outcomes, which may lead to a commissioned service unable to implement JCC policies in terms of access to drugs and treatments, thus not providing a high-quality service required by JCC.</p>	Director of Commissioning for Specialised Services	Women & Children	<p>Ensure quality: with a commissioning approach that is fostered in a quality management system, provide quality outcome, evidence based service specifications for commissioned services and monitor delivery against these</p>	Safety & Well-being - Patients/ Staff/ Public Quality/ Complaints/ Assurance/ Patient Outcomes	Alder Hey	<ul style="list-style-type: none"> The service are under capacity and delivering a restricted service. Internal meetings in JCC to discuss the current outreach provision have been held. Next meeting planned for October when the new Assistant Director of Commissioning commences who will take this work forward with Alder Hey. 	<p>Update for July 2025 - New Risk added. Discussed in Specialised service team meeting, with agreement received from Director of Specialised Services to add to risk register.</p>	<ul style="list-style-type: none"> Joint Commissioning Committee Quality, Safety & Outcomes Sub-Committee Senior Leadership Team CTMUHB Audit & Risk Committee 	16 (4x4)	4 (2x2)	Jul-25

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

JCC RISK REGISTER FOR DE-ESCALATED RISKS >15													
Datix ID	Risk Title	Risk Description	Strategic Risk owner	Strategic Objective	Risk Domain	Controls in place	Action Plan	Assuring Committees	Rating (current)	Rating (Target)	Month De-escalated	De-escalation Rationale	
55 P/21/22	Neonatal Workforce	<p>If...the impact of the available workforce within UHW, to support the current intensive care demand continues to be difficult</p> <p>Then...neonates who require tertiary regional neonatal support in South Wales may be inappropriately cared for</p> <p>Resulting in...a neonate being cared for in an inappropriate care setting, where the necessary skills and/or equipment are not available</p>	Director of Commissioning for Specialised Services	Ensure quality: with a commissioning approach that is fostered in a quality management system, provide quality outcome, evidence based service specifications for commissioned services and monitor delivery against these	Safety & Well-being - Patients/ Staff/ Public Quality/ Complaints/ Assurance/ Patient Outcomes	<ul style="list-style-type: none"> Phase 1 rebasing of contract activity to support meeting national clinical standards (BAPM) undertaken and agreed by the previous WHSSC JC resulting in investment of £5m in 2023/24 Continue to monitor at Quarterly Commissioner Assurance Meeting encouraging an open dialogue in the interim, as necessary, with all providers, to understand refusal rates, staffing numbers and implementation of Phase 1. New cot day tariff implemented Phase 2 programme agreed by JCC in May 2024 to review the service model across South and West Wales - will take at least 2 years Continue to monitor through Performance Management Framework Re-set meeting to discuss and agree actions/objectives in collaboration with the health board on 18th September 2024. Actions/objectives agreed. Meetings to be held every 6 weeks to monitor progress. 	<ul style="list-style-type: none"> Quarterly meetings with each provider to monitor implementation of Phase 1 cot re-configuration - ongoing Working with C&V UHB team to develop a plan to implement new baseline - ongoing Through quarterly assurance meetings with all neonatal units in the South & West of Wales it has been reported that there has been increased pressure across the network for cot availability which has increased the likelihood and raised the risk to 20 - May 24 Re-set meeting agreed to discuss and agree revised process and objectives in collaboration with the Health Board to be arranged - Meetings to be held every 6 weeks. Date of next meeting 25th February 2025 to monitor progress. Decision made by the W&C commissioning team and the JCC executive lead that improvements have been recognised but further improvements against the agreed objectives are required prior to the team considering de-escalation. The health board acknowledged the decision. The next level 3 escalation meeting is scheduled for 23rd September 2025. The August meeting has been stood down at the request of the JCC Director of Commissioning for Specialised Services so finance discussions can take place prior to the next meeting. C&V UHB say they are underfunded for their activity. The commissioning team has now been tasked with facilitating the finance discussions. 	<ul style="list-style-type: none"> Joint Commissioning Committee Quality, Safety & Outcomes Sub-Committee Senior Leadership Team CTMUHB Audit & Risk Committee 	12 (Risk reduced from 20)	4	Jul-25	The W&C Commissioning Team have reviewed the risk. Even though they remain at escalation level 3 this is not related to their current work force. During the escalation meetings the health board have explained that they have no current concerns with their nursing work force. The team agreed to reduce the risk from 20 to 12 (C4 x L3).	

Closed Risks from the Organisational Risk Register (Risks Graded 15 and Above) - August 2025

	A	B	C	D	E	F	G	H	I	J	K
1	JCC RISK REGISTER FOR CLOSED RISKS >15										
2	Datix ID	Risk Title	Risk Description	Strategic Risk Owner	Strategic Objective	Risk Domain	Controls in place	Action Plan	Assuring Committees	Month Closed on Org RR	Closure Rationale
3	56 P/21/23	Neo-natal Infection Control	<p>If...Infection, Prevention & Control issues within the clinical area are not addressed</p> <p>Then...neonates within the Neonatal Intensive Care Unit environment within UHW, are at greater risk of infections, whilst safer practice monitoring is being embedded</p> <p>Resulting in...increased neonatal morbidity</p>	Director of Commissioning for Specialised Services	Ensure quality: with a commissioning approach that is fostered in a quality management system, provide quality outcome, evidence based service specifications for commissioned services and monitor delivery against these	<p>Safety & Well-being - Patients/ Staff/ Public</p> <p>Quality/ Complaints/ Assurance/ Patient Outcomes</p>	<ul style="list-style-type: none"> • Re-set meeting to discuss and agree actions/objectives in collaboration with the health board (September 2024) • Re-set meeting to discuss and agree actions/objectives in collaboration with the health board on 18th September 2024. Actions/objectives agreed. • Meetings to be held every 6 weeks to monitor progress. 	<ul style="list-style-type: none"> • Executive to Executive meeting scheduled with C&VUHB - Completed • Action Plan requested as part of escalation framework - Completed • This risk is part of the wider neonatal escalation process and at the time of the meeting there are no further updates as the health board have not given us assurances that this risk has been mitigated. Risk rating to remain the same in the interim until a new action plan has been agreed between the NWJCC and the health board • Re-set meeting agreed to discuss and agree revised process and objectives in collaboration with the Health Board to be arranged - Meetings to be held every 6 weeks. Date of next meeting 25th February 2025 to monitor progress. • Decision made by the W&C commissioning team and the JCC executive lead that improvements have been recognised but further improvements against the agreed objectives are required prior to the team considering de-escalation. The health board acknowledged the decision. The next level 3 escalation meeting is scheduled for 1st July. 	<ul style="list-style-type: none"> • Joint Commissioning Committee • Quality, Safety & Outcomes Sub-Committee • Senior Leadership Team • CTMUHB Audit & Risk Committee 	Jul-25	The W&C Commissioning Team have reviewed the risk. The health boards position with blood stream infections has improved. The MRSA outbreak has been downgraded and a closure form has been received from the health board to support this decision. Cardiff have an operational meeting in place and there have been no further escalations. The JCC Quality Team have met with health board service leads and they have agreed to close this from a QPS perspective. The W&C commissioning team agreed that this risk can be closed and removed from the register.