

Agenda Item

4.5

Quality Safety and Outcomes Sub-Committee
Escalation Trajectory Report

Dyddiad y Cyfarfod / Date of Meeting	30/10/2026
Statws Cyhoeddi / Publication Status	Open/ Public
	Not Applicable
Awdur yr Adroddiad / Report Author	Adele Roberts Assistant Director of Nursing & Quality Assurance
Cyflwynydd yr Adroddiad / Report Presenter	Adele Roberts Assistant Director of Nursing & Quality Assurance
Noddwr yr Adroddiad / Report Sponsor	Carole Bell, Director of Nursing & Quality Assurance

Pwrpas yr Adroddiad / Report Purpose	For Assurance
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Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/Group)		
Committee / Group / Individuals	Date	Outcome
Senior Leadership Team Meeting	14/10/2026	Noted

1. SITUATION/BACKGROUND

The purpose of this report is to provide a summary of the services in escalation (as reported within the Director of Commissioning reports) under the NHS Wales Joint Commissioning Committee (NWJCC) escalation framework that are level 3 or above. Deescalated services will also be reported.

The escalation summaries are attached as **Appendix 1** to this document.

A copy of the escalation summaries will accompany the Sub-Committee Chairs report to the Joint Commissioning Committee (JC). The expectation will that the summary reports will be shared within the Health Boards to gain assurance on commissioned services or any remedial actions required.

2. SPECIFIC MATTERS FOR CONSIDERATION

NWJCC scrutinises the following sources of evidence and where concerns are identified the escalation process is triggered:

- Performance monitoring: This includes data such as Referral to Treatment Times (RTT), and maintenance of cancer treatment targets.
- Routine process indicators: This includes length of stay and delayed transfers of care.
- Routine outcome indicators: These will vary from specialty to specialty but might include mortality indicators, complication rates etc.
- Patient reported outcomes and experience;
- Clinical incidents: these might include incidents related to individual patients or to units such as infection outbreaks;
- Complaints or claims;
- Reviews undertaken either internally by providers or by external agencies such as CQC or HIW;
- Notification of service disruption;
- Failure to deliver services in line with the commissioning intentions; and
- Any other sources of quality and safety concerns.

There are two services in escalation level 3. One new service has been added in August 2026 the Welsh Gender Service. Detail of this is included within the escalation table and within the Mental Health Director's report on the MHLDVG.

3. KEY RISKS / MATTERS FOR ESCALATION

The following table provides a summary of each of those services outlining the mitigating actions and risks. These will have been discussed in full in the presentation of the Directors reports in previous sections of the agenda. A copy of the escalation summaries will accompany the Sub-Committee Chair's Report to the JC.

4. RECOMMENDATIONS

Members of the Quality, Safety and Outcomes Sub-Committee are asked to:

- **Note** the content of the report; and
- Receive the report as **assurance**.

Strategic and Regulatory Assessment

Objectives / Strategy	
Dolen i Amcan (au) Strategol CBC / Link to JCC Strategic Objectives(s)	Improve Equity and Population Health
	Ensure Quality
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
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
	Data to Knowledge Whole-Systems Perspective
Dolen i Feysydd Ansawdd <i>(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) / Link to Domains of Quality</i> (Duty of Quality Statutory Guidance (gov.wales))	Person Centred
	Effective Efficient Timely Safe Equitable
Effaith Amgylcheddol/ Cynaliadwyedd (5R) /	No - Not Applicable
	If more than one applies please list below:

Environmental / Sustainability Impact (5Rs)	
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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: ☐	No: ☒
	Outcome:	If no, please include rationale below: Impact on patient covered within discussions and a assessment would be undertaken if required
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: ☐	No: ☒
	Outcome:	If no, please include rationale below: As above
Cyfreithiol / Legal	There are no specific legal implications related to the activity outlined in this report.	
Enw da / Reputational	There is no direct impact on the reputation of the Joint Committee as a result of the activity outlined in this report.	
Effaith Adnoddau <i>(Pobl / Ariannol) /</i> Resource Impact <i>(People / Financial)</i>	Yes (Include further detail below)	
	Any financial impacts will be detailed within the report where applicable	

Acronyms

Acronyms / Glossary of Terms	
CQC	Care Quality Commission
HIW	Health Inspectorate Wales
JCC	Joint Commissioning Committee
RTT	Referral to Treatment Times
MHLDVG	Mental Health Learning Disabilities and Vulnerable groups