Agenda Item
3.2

Quality, Safety and Outcomes Sub-Committee

Director of Commissioning for Specialised Services

Dyddiad y Cyfarfod / Date of Meeting	24/08/2026
Statws Cyhoeddi / Publication Status	Open/ Public
	Not Applicable
Awdur yr Adroddiad / Report Authors	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 Gweithredol yr Adroddiad / Report Executive Sponsor	Melanie Wilkey, Director of Commissioning for Specialised Services

Pwrpas yr Adroddiad / Report Purpose	For Assurance Choose an item.

Committee / Group / Individuals	Date	Outcome
Senior Leadership Team	18/08/2026	Noted

1. SITUATION / BACKGROUND

This report provides the Quality Safety and Outcome Sub Committee (QSOC) with an update on key developments and quality risks of 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 4.6 and an update on the work of the Welsh Kidney network is reported in Agenda Item 4.2.

A detailed overview of Specialised Commissioned Activity is available in **Appendix 1** to provide context and background information to the updates provided in this report.

2. ASSESSMENT

2.1 Cancer and Blood

There are two key areas to highlight within the Cancer and Blood Portfolio these are Blood and Marrow Transplantation (BMT) and CAR-T in Cardiff and Vale University Health Board (CVUHB) and Plastic Surgery waiting times in Swansea Bay University Health Board (SBUHB) and Betsi Cadwaladr University Health Board (BCUHB).

<u>Blood and Marrow Transplantation (BMT) and CAR-T</u>

A **critical risk** remains regarding Joint Accreditation Committee of ISCT and EBMT (JACIE) certification for BMT and CAR-T services, requiring corrective action and long-term capital planning to achieve compliance and ensure continuity of provision within Wales.

The potential **impacts** if accreditation is not maintained are:

- CAR-T services from CVLHB would be suspended for patients due to pharmaceutical supply restrictions
- BMT services may also require alternative commissioning arrangements.

There are several **mitigating actions** being considered and implemented including:

- CVUHB has submitted its response to the JACIE findings, setting out the evidence for how the health board has addressed, or is addressing, the areas of non-compliance.
- Potential derogation for the delivery of local services and the development of pathways with English providers.

- Consideration by the NWJCC of additional workforce costs as part of the 2027/30 planning processes.

It is anticipated the outcome from JACIE will be received in September. **Assurance** is being provided through regular meetings with the provider.

Plastic Surgery waiting times

There is a **potential risk** that patient waiting times in the South Wales Plastic Surgery Service may exceed 104 weeks.

Mitigations ongoing include the utilisation of planned care funding for additional patient lists to maintain achievement of the target.

The NWJCC is currently **seeking assurance** from SBUHB that planned care funding will be remain available to fund the capacity throughout 2026/27. In parallel, the funding for capacity requirement to meet recurrent demand for plastic surgery will be considered through the IMTP process.

2.2 Cardiac

The cardiac portfolio holds several areas of risk which are described, alongside mitigations ongoing below.

2.2.1 Cardiac Surgery

Cardiac Surgery at CVUHB remains an area of risk and is currently in Escalation Level 2. The escalation reflects continuing issues in delivering GIRFT recommendations, particularly data collection, data quality, audit arrangements, NACSA reporting, SCTS benchmarking and the maintenance of the Cardiac Surgery Quality and Safety Dashboard.

Areas of **impact** because of this situation include:

- Potential impacts on quality, clinical outcomes and performance due to gaps in data quality, reporting and audit arrangements.
- Ongoing risk to the stabilisation of the cardiac surgery waiting list due to theatre cancellations, workforce shortages and limited surgical capacity.

There are several **mitigations and controls** that have been considered and are being implemented, including:

- CVUHB has submitted a formal action plan to respond to the escalation position.
- The action plan is being monitored through established Risk and Assurance arrangements.
- Further detail has been requested from the service on baseline data, evidence sources, milestones, timescales, RAG status and dependencies.

There are some **constraints to these mitigations** which include:

- Workforce constraints and difficulties recruiting to and retaining key data support posts.
- Theatre cancellations and limited cardiac surgical capacity.

Our **commissioning assurance** approach seeks assurance through:

- Ongoing systematic monitoring through established Risk and Assurance arrangements.
- Review of the CVUHB action plan and the additional information requested from the service.

There are a few issues for **Sub-Committee consideration**:

- The Sub-Committee is asked to note the continued Escalation Level 2 position for Cardiac Surgery at CVUHB.
- Sustainable improvement remains dependent on delivery of the action plan, improved data and audit arrangements, and the Health Board's ability to address workforce and capacity constraints.

2.2.2 Cardiology Emerging Issue

The NHS Wales JCC has been made aware of an incident relating to a BCUHB patient who has subsequently died.

It is believed **the issue** may have been a delay relating to the availability or accessibility of urgent echocardiography imaging at LHCH required for specialist review. At this stage, it is not known whether this delay contributed to the patient's death and this will need to be established through the investigation process.

Assurance and Controls: BCUHB are investigating and LHCH have been made aware of investigation. There have been ongoing discussions with BCUHB and LHCH around the sharing of images and the JCC continues to facilitate discussions around this.

2.2.3 Obesity Surgery

The risk of NWJCC not being able to commission an Obesity Surgery Service for BCUHB patients due to the previous Obesity Surgery Provider Northern Care Alliance Foundation Trust (NCA) ceasing provision has been largely mitigated by the successful transfer of patients to SBUHB.

Our **Commissioning Assurance** approach going forward will see the NWJCC

- Continue to work closely with SBUHB and BCUHB to ensure the impacts of the interim service on patient care are monitored and understood.
- The NWJCC will procure a sustainable long-term provider solution during 2026/27.

2.3 Neurosciences and Long Term Conditions and Rare Diseases

There are several issues across the Neuro and Long Term Conditions and Rare Diseases portfolio which QSOC are asked to note:

2.3.1 Neurosurgery

It was previously reported that neuromodulation surgery at CVUHB had been suspended due to the suspension of a member of staff. The **risks posed** by this are now reducing as the provider has now appointed a new Neurosurgeon who commenced in post in July and will commence operating shortly.

An **Infection Control Risk** has been reported by CVUHB who have reported patients with *Acinetobacter baumanii* which is carrying two carbapenemases (a multi drug resistant organisam).

This **impacts** the Neurosurgical Service in University Hospital Wales.

Mitigations and Controls are being put in place by the Health Board and outbreak meetings are underway with NWJCC in attendance. The Health Board IPC team is co-ordinating a full set of IPC audits and screening.

2.3.2 Services in Escalation

QSOC are asked to note the updated position below on the two services within this portfolio in escalation; Auditory Implant Device Service (detailed further in the escalation report) and the Electronic Assistive Technology Device Services (EAT) which is part of the Artificial Limb and Appliance Service) at Cardiff & Vale University Health Board.

Electronic Assistive Technology Device Services Escalation:
The **area of impacts** are:

- Significant waiting times
- Patient concerns (mainly related to these waiting times)
- Workforce and service sustainability

Mitigations and controls include:

- Improvement plans in place and being delivered by the provider
- Speech and Language Therapists are undertaking a review of the service; the findings and recommendations will be shared when completed to inform future actions.

Our **commissioning assurance** approach seeks assurance through:

- Ongoing systematic monitoring through established Risk and Assurance arrangements.
- Regular meetings with the provider.

2.3.3 ALAS Specialist Rehabilitation Centre at Swansea Bay University Health Board

- There is a **risk to provision** within the Artificial Limb & Appliance Centre (ALAC) due to the service being unable to recruit to a vacant receptionist post because of recruitment scrutinization in the health board.
- **The impact** is that the service is unable to safely managing patient flow and communication within the department which supports patients with complex needs including limb loss, reduced mobility, visual impairment, and cognitive vulnerability.
- Mitigations and controls include this issue has been escalated to the SBUHB Contract meeting with the NWJCC.

The **Sub-Committee are asked to note and consider**:

- The Sub-Committee is asked to note the range of active service risks across the portfolio.
- Sustainable improvement across the portfolio remains dependent on Health Board delivery of improvement actions, workforce stabilisation and continued monitoring through escalation and assurance arrangements.

2.4 Women and Children

The Women and Children portfolio continues to monitor Paediatric Neurology and Paediatric Gastroenterology, both of which are experiencing service and waiting times pressure linked to workforce, demand and capacity.

A recent site visit and quarterly assurance meeting for the CVUHB Paediatric and Perinatal Pathology Service provided positive engagement and direct service oversight.

Areas of **impact** because of this situation include:

- Paediatric Neurology workforce constraints are affecting outreach service planning, delivery and sustainability, increasing waiting times.
- Paediatric Gastroenterology is experiencing sustained pressure from increasing demand and clinical complexity, again increasing waiting times for Endoscopy.

There are several **mitigations and controls** that have been considered and are being implemented, including:

- CVUHB has engaged with Health Boards across South Wales on future their Paediatric Neurology outreach plans.
- An interim approach has been developed to provide a proportionate level of Paediatric Neurology outreach clinics across the region.
- The commissioning team is exploring contingency arrangements for Paediatric Gastroenterology.

There are some **constraints to these mitigations** which include:

- Longer-term sustainability remains dependent on workforce expansion and recruitment to the vacant Paediatric Neurology consultant post.
- Paediatric Gastroenterology demand and clinical complexity are not expected to reduce in the short term and again Consultant capacity remains a key limiting factor.

Our **commissioning assurance** approach seeks assurance through:

- Continued review through established commissioning assurance routes.
- Ongoing discussion with CVUHB and Health Boards regarding Paediatric Neurology outreach arrangements.
- Monitoring of Paediatric Gastroenterology risks through the Health Board and proposed NWJCC risk register entries.
- A new risk is proposed for inclusion on the NWJCC risk register regarding the emerging Paediatric Gastroenterology issues.

There are a few issues for **Sub-Committee consideration**:

- The Sub-Committee is asked to note the continuing workforce, demand and capacity pressures in Paediatric Neurology and Paediatric Gastroenterology.
- Sustainable improvement is dependent on workforce expansion, recruitment and agreement of a proportionate approach to service delivery and risk management.

3. RECOMMENDATIONS

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

- **Note the current position** regarding quality, safety and outcomes risks within the Specialised Services portfolio and the actions being undertaken to manage these.
- Receive the report as **assurance**.

Appendix 1 – Overview of Commissioned Activity

Cancer and Blood

Blood and Marrow Transplantation (BMT) and CAR-T

A critical risk remains regarding Joint Accreditation Committee of ISCT and EBMT (JACIE) certification for BMT and CAR-T services, requiring corrective action and long-term capital planning to achieve compliance and ensure continuity of provision within Wales. In line with the timeline and requirements set by the JACIE committee, CVUHB has submitted its response to the JACIE findings, setting out the evidence for how the health board has addressed, or is addressing, the areas of non-compliance.

CVUHB is currently waiting for the JACIE committee to consider this evidence and decide on the accreditation status of the service. It is anticipated the outcome from JACIE will be received in September.

As previously noted, if accreditation is not maintained, it is understood that 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.

The JCC has received a business case from CVUHB to address issues raised by JACIE relating to workforce resilience and capacity. This case is currently being scrutinised by JCC with a view to inclusion with the IMTP process for 2026/27.

Plastic Surgery waiting times

In south Wales, due to demand exceeding capacity, approximately 260 patients are forecast to breach the maximum waiting time target of 104 weeks over the course of 2026/27. Over the first quarter, planned care funding has been made available by the health board for additional lists to maintain achievement of the target. JCC is currently seeking assurance that planned care funding will be available to fund the capacity needed to maintain the target throughout 2026/27. In parallel, the funding for capacity requirement to meet recurrent demand for plastic surgery will be considered through the IMTP process.

In North Wales, outreach clinics continue to face capacity challenges. JCC continues to work with BCUHB and Mersey & West Lancashire Trust (MWL) to agree a proposal (currently awaited from MWL) for outreach capacity to meet demand.

Cardiac

Cardiac Surgery

The Cardiac Surgery Service at Cardiff and Vale University Health Board (CVUHB) remains an area of concern and is currently in Escalation Level 2.

The service was initially placed at Escalation Level 1 due to a lack of progress in delivering the Getting It Right First Time (GIRFT) recommendations, particularly regarding data collection, data quality, reporting, and the development of robust audit systems. Progress has been delayed by ongoing workforce challenges, including difficulties recruiting to and retaining the Data Manager post.

Concerns regarding the quality and completeness of National Adult Cardiac Surgery Audit (NACSA) data, gaps in mortality and quality indicators, non-submission to the national Society for Cardiothoracic Surgery (SCTS) benchmarking system, and the inability to maintain the Cardiac Surgery Quality and Safety Dashboard are therefore impacting on the level of assurance required regarding the quality, clinical outcomes and performance of the service.

In addition, concerns remain regarding the stabilisation of the cardiac surgery waiting list, alongside the Health Board's ability to maintain improvements in the context of theatre cancellations, workforce shortages, and limited cardiac surgical capacity. Following review at an Extraordinary Cardiac Commissioning Team meeting, the service was escalated to Level 2 in June 2026, requiring CVUHB to develop a formal action plan, which will be subject to ongoing monitoring through the established Risk and Assurance arrangements.

CVUHB submitted the action plan on 10 July 2026. The plan was discussed with the service at the July Risk and Assurance Meeting, and the service has subsequently been asked to provide further information regarding baseline data, evidence sources, milestones, timescales, RAG status, and dependencies. A response is expected in advance of the September Risk and Assurance Meeting.

TAVI

Demand for Transcatheter Aortic Valve Implantation (TAVI) continues to increase, with sustained overperformance in TAVI activity reported across both CVUHB and Swansea Bay University Health Board (SBUHB). Whilst this has supported improvements in patient waiting times, it continues to create financial and capacity pressures. This is being considered as part of the strategic Cardiac Review, which is underway.

Obesity Surgery

Another area of pressure relates to the provision of Obesity Surgery Services for North and Mid Wales patients following the withdrawal of services by Northern Care Alliance NHS Foundation Trust (Salford Royal Hospital) in March 2026.

Interim arrangements with the Welsh Institute of Metabolic and Obesity Surgery (WIMOS), SBUHB are in place to ensure continuity of care for patients on the waiting list and for new patients referred during 2026/27 whilst a longer-term provider solution is secured.

The transfer of patients from Northern Care Alliance NHS Foundation Trust to WIMOS is progressing well, and now in its final stages, and completion of the transfer arrangements is anticipated shortly. The NWJCC has working closely with the WIMOS team to facilitate this transfer. Procurement of a sustainable long-term provider solution is being progressed during 2026/27.

Neurosciences and Long Term Conditions and Rare Diseases

Neurosurgery Service at Cardiff & Vale Health Board

The Health Board has appointed a Neurosurgeon following the suspension of a member of staff earlier in the year that led to a temporary cessation of neuromodulation surgery. The postholder started on 29th July and will commence operating shortly.

The Health Board has reported cases of patients with *Acinetobacter baumanii* which is carrying two carbapenemases (a multi drug resistant organisam) impacting the Neurosurgical Service in University Hospital Wales. Outbreak meetings are underway with NWJCC in attendance. The Health Board IPC team is co-ordinating a full set of IPC audits and screening.

Services in Escalation

There are 2 services in escalation within the portfolio, are the Specialist Auditory Implant Device Service (detailed further in the escalation report) and the Electronic Assistive Technology Device Services (EAT) which is part of the Artificial Limb and Appliance Service) at Cardiff & Vale University Health Board.

The EAT Service has been put into level 1 of the escalation framework because of a significant increase in waiting times and patient concerns. The commissioning team last met with the service on 14th July 2026 and are closely monitoring progress against an improvement plan through monthly updates, the first of which is expected week commencing 17th August 2026 which will inform the future escalation level. An independent Speech and Language Therapist has undertaken a review of the service; the findings and recommendations will be shared when completed.

Specialist Auditory Implant Device Service in Betsi Cadwaladr University Health Board

The specialist team has reported an increase in referrals, including more complex referrals and older patients linked to improved awareness and outreach and post pandemic delays in Ear Nose and Throat pathways. This may lead to future 26-week breaches.

ALAS Specialist Rehabilitation Centre at Swansea Bay University Health Board

There is an ongoing risk within the Artificial Limb & Appliance Centre (ALAC) due to the service being unable to recruit to a vacant receptionist post because of recruitment scrutinization in the health board. The service supports patients with complex needs including limb loss, reduced mobility, visual impairment, and cognitive vulnerability. As such, the receptionist role is critical for safely managing patient flow and communication within the department. The service has reported that the absence of a staffed reception has resulted in patients not being appropriately directed to clinical areas; Clinicians being unaware of patient arrival; and delays in treatment and risk of missed appointments.

This issue has been escalated to the Swansea Bay University Health Board SLA meeting with the NWJCC.

Women and Children

The Women & Children commissioning team recently combined a site visit to **CVUHB Paediatric and Perinatal Pathology service** at the University Hospital of Wales Cardiff, with the quarterly assurance meeting. This provided the team with an opportunity to see first-hand the facilities and directly speak with staff working in the service. The visit demonstrated positive engagement and the team welcomed the opportunity.

Paediatric Neurology

A follow up meeting has been held with the clinical lead for the Paediatric Neurology service, in addition to discussions with the Children's Hospital for Wales management team. CVUHB has been meeting with the other health boards across South Wales to discuss future outreach plans and service delivery arrangements within their respective areas. In response to current workforce constraints, the remaining consultants have developed an interim plan to deliver a proportionate level of outreach clinics across the region.

Whilst an interim plan is in place, longer-term sustainability will depend on workforce expansion. Recruitment to the vacant consultant position remains ongoing.

The commissioning team will continue to review the situation and a risk entry relating to these matters is contained in both the health board and NWJCC risk registers.

Paediatric Gastroenterology

The Women & Children commissioning team recently met with the team at CVUHB in relation to a continuing increase in both patient demand and clinical complexity, which has created sustained pressure on available capacity. Maintaining timely access to specialist paediatric gastroenterology services and reducing endoscopy waiting times is of critical importance. The health board team

had highlighted a shortage of consultant capacity within the service, leading to a proposal that the creation of an additional consultant post should be considered as a potential solution.

It is noted that the team appear to be facing a long-term demand challenge rather than a short-term operational issue, with the increasing patient complexity not expected to reduce. Furthermore, data presented during the meeting demonstrated a consistent upward trend in demand. Potential contingency plans are being explored.

The Women & Children commissioning team propose to add a new risk to the NWJCC risk register on this issue, whilst this risk is already included on the health boards risk register relating to endoscopy waiting times.

Strategic and Regulatory Assessment

Objectives / Strategy	
Dolen i Amcan (au) Strategol CBC / Link to JCC Strategic Objectives(s)	Not Applicable
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
	If more than one applies please list below: A more equal Wales
Dolen i Hwyluswyr Ansawdd *(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) /* **Link to Enablers of Quality** *(Duty of Quality Statutory Guidance (gov.wales))*	Data to Knowledge
	If more than one applies please list below: Whole systems perspective Leadership Learning, improvement and research
Dolen i Feysydd Ansawdd *(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) /* **Link to Domains of Quality** *(Duty of Quality Statutory Guidance (gov.wales))*	Effective
	If more than one applies please list below: Efficient Equitable Patient centred Timely Safe
Effaith Amgylcheddol/ Cynaliadwyedd (5R) / Environmental /Sustainability Impact (5Rs)	No - Not Applicable
	If more than one applies please list below:

Impact Assessment		
Ansawdd *Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Ansawdd? /* **Quality**	Yes: ☐	No: ☒
	Outcome:	If no, please include rationale below:

Have you undertaken a Quality Impact Assessment Screening?		Reporting on quality matters from last JCC meeting.
Cydraddoldeb *Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Gydraddoldeb? /* **Equality** *Have you undertaken an Equality Impact Assessment Screening?*	Yes: ☐	No: ☒
	Outcome:	If no, please include rationale below: Reporting on performance matters and the impact on the wider health system. Quality and safety matters also considered.
Cyfreithiol / Legal	There are no specific legal implications related to the activity outlined in this report.	
Enw da / Reputational	Yes (Include further detail below)	
	Ambulance performance of significant concern to the public and impacts on health boards reputation	
Effaith Adnoddau *(Pobl /Ariannol) /* **Resource Impact** *(People / Financial)*	There is no direct impact on resources as a result of the activity outlined in this report.	

Acronyms

Acronym	Definition
ALAC	Artificial Limb and Appliance Centre
ALAS	Artificial Limb and Appliance Service
BCUHB	Betsi Cadwaladr University Health Board
BMT	Blood and Marrow Transplantation
CAR-T	Chimeric Antigen Receptor T-cell Therapy
CVUHB	Cardiff and Vale University Health Board
EAT	Electronic Assistive Technology
EBMT	European Society for Blood and Marrow Transplantation
GIRFT	Getting It Right First Time
IMTP	Integrated Medium Term Plan
IPC	Infection Prevention and Control
ISCT	International Society for Cell and Gene Therapy
JACIE	Joint Accreditation Committee of ISCT and EBMT
JCC	Joint Commissioning Committee
LHCH	Liverpool Heart and Chest Hospital
MWL	Mersey and West Lancashire Teaching Hospitals NHS Trust
NACSA	National Adult Cardiac Surgery Audit
NCA	Northern Care Alliance NHS Foundation Trust
NHS	National Health Service
NWJCC	NHS Wales Joint Commissioning Committee
QSOC	Quality, Safety and Outcomes Sub-Committee
RAG	Red, Amber, Green
SBUHB	Swansea Bay University Health Board
SCTS	Society for Cardiothoracic Surgery
SLA	Service Level Agreement
TAVI	Transcatheter Aortic Valve Implantation
UHW	University Hospital of Wales
WIMOS	Welsh Institute of Metabolic and Obesity Surgery