

NWJCC FOUNDATION PLAN IMPLEMENTATION - PROGRESS TRACKER Q4											
Strategic Priority	Unique Identifier (Strategic)	Unique Identifier (Local)	JCC Responsible Officer	Outcome	Deliverable/Output	Milestone	Starting Qtr	Delivery Qtr	RAG Rating G - On Track, A - Slight Slippage (Not all actions completed within Qtr), R - Significant Slippage (Project is more than 1 Qtr behind), B - Project Milestone Complete W - Project Not Yet Started	Progress Update / Comment	Included in Annual Plan 2026/27
Strategic Priority 1: Development of a JCC Strategy	SP1	SP1	Georgina Galletly	Develop a 5/10 Year Strategy for the NWJCC	Strategy document for Joint Committee approval	Strategy to Joint Committee Meeting	Q1	Q4	R	Q2 - Internal workshop held 09/06/2025 to explore future direction of travel from NWJCC staff perspective. One to one meetings with CEO members of the Joint Committee almost complete. Strategy session for Joint Committee towards the end of Financial Year will crystallise the final draft. Q3 - Development of a longer term strategy for the NWJCC will be determined by the strategic context within the JCC's IMTP (3 Year Plan). Critical factors influencing the strategic direction include the challenging financial landscape. Q4 - Development of the strategy is deferred to 2026-27 to reflect a number of key influencing factors including new incoming Chief Commissioner, development of a Clinical Strategy for NHS Wales and Senedd elections.	Yes
Strategic Priority 1: Development of a JCC Strategy	SP1	SP1	Georgina Galletly	Develop a 5/10 Year Strategy for the NWJCC	Framework to support Joint Committee decision-making	Framework in Strategy	Q3	Q4	R	Q3 - Development of a longer term strategy for the NWJCC will be determined by the strategic context within the JCC's IMTP (3 Year Plan). Critical factors influencing the strategic direction include the challenging financial landscape. The development of a framework will be a priority for Year 1 of the IMTP 2026-2029. Q4 - The development of a planning framework will be a priority for Year 1 of the IMTP 2026-2029.	Yes
Strategic Priority 1: Development of a JCC Strategy	SP1	AMB12	Ross Whitehead	NHS 111 Wales commissioned capacity is aligned with demand	Strategic Demand and Capacity Report on NHS Wales 111	Completion of a scoping document that clarifies the process and dependencies for the review	Q2	Q4	B	Q2, Q3 - This specific outcome and deliverable has been combined into the strategic review of ambulance services covered under SP 4.3. Q4 - Scoping document has been completed in Q3. Agreed for milestone to be marked complete.	No
Strategic Priority 1: Development of a JCC Strategy	SP1	AMB5	Ross Whitehead	Improved responsiveness to meet Health Board requirements in relation to ACCTS and improve clinical outcomes for the population.	Report including proposals on ACCTS service	Report to Joint Committee	Q2	Q3	B	Q2 - Review process has commenced and on track for delivery in Q3. Q3 - This has been included within the wider governance review of EMRTS and ACCTS. Draft report to be finalised with a Q4 delivery date (Q4). Q4 - Review report has been completed, however governance route has changed. To discuss with Host Organisation in Q1 2026/27 with outcome dependent on Host Organisation decision instead of reporting to JC. Outcome to be carried over as part of Annual Plan 2026-27 workplan. Agreed for milestone to be marked as complete.	No
Strategic Priority 1: Development of a JCC Strategy	SP1	AMB5	Ross Whitehead	Improved responsiveness to meet Health Board requirements in relation to ACCT and improve clinical outcomes for the population.	Report including proposals on ACCT service	Recommendations arising from the review	Q4	IMTP (now confirmed as an Annual Plan 2026/27)	G	Q4 - Preparation work underway based on discussions with Hosted Organisation under the new governance route identified through the review report. Milestone to be carried over as part of Annual Plan 2026-27 ACCT service workplan.	Yes
Strategic Priority 1: Development of a JCC Strategy	SP1	AMB6	Ross Whitehead	Deliver infrastructure and capacity improvements in relation to ACCT service.	Strategic Plan with recommendation to Joint Committee on future commissioning intentions for ACCT.	Strategic plan to Joint Committee	Q4	IMTP (now confirmed as an Annual Plan 2026/27)	A	Q4 - Starting Qtr delayed to Q1 2026/27 due to prioritisation and complexity in relation to hosting arrangement discussions. Milestone to be carried over as part of Annual Plan 2026-27 ACCT service workplan.	Yes
Strategic Priority 1: Development of a JCC Strategy	SP1	SS1	Mel Wilkey	To implement the preferred model for commissioning arrangements for plastic surgery.		Phase 1 outcome reported to SSCCG and CCLG.	Q2	Q2	B	Q2 - Reported to SSCCG on 07/08/2025. Supported to go forward to CCLG. Considered by CCLG on 26/08/2025, supported to go forward to JCC on 16/09/2025.	No

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Strategic Priority 1: Development of a JCC Strategy	SP1	SS1	Mel Wilkey	To implement the preferred model for commissioning arrangements for plastic surgery.	Options appraisal proposed to SSCCG	Development of options appraisal, including feedback from provider and project board	Q2	Q2	B	Q2 - Included within the Phase 1 report for SSCCG and CCLG. Supported to go forward to JCC on 16/09/2025.	No
Strategic Priority 1: Development of a JCC Strategy	SP1	SS1	Mel Wilkey	To implement the preferred model for commissioning arrangements for plastic surgery.		Recommended option presented to JCC for consideration	Q2	Q3	B	Q2 - Presented to JCC on 16/09/2025. JCC agreed the preferred model for commissioning arrangements.	No
Strategic Priority 1: Development of a JCC Strategy	SP1	SS1	Mel Wilkey	To implement the preferred model for commissioning arrangements for plastic surgery.	Implementation plan presented to CCLG	Development of an implementation plan.	Q4	IMTP (now confirmed as an Annual Plan 2026/27)	B	Q3 - Implementation proposals to be discussed at SSCG on 04/12/2025. If agreed as the way forward proposals will go to CCLG for implementation as part of the 2026-2029 IMTP. Q4 - The proposals were discussed and supported at SSCG in December 2025. No requirement to go to CCLG decided. The Commissioning Team will now take forward the commissioning of plastic surgery services as part of the IMTP 2026-29 workplan.	No
Strategic Priority 1: Development of a JCC Strategy	SP1	SS10	Mel Wilkey	Mechanical thrombectomy services for the Welsh population are delivered closer to home		Develop a Mechanical Thrombectomy service specification and policy.	Q2	Q3	A	Q2 - Service specification has been drafted and currently undertaking pre-engagement with the hyper-acute stroke services network and workshop planned October / November. Policy will be updated in line with service specification. Consultation will then be undertaken. Q3 - Service specification and policy are due to be taken to Policy Group on 16/12/2025 then on to a 6 week consultation. Intention is to publish policy and specification in early Q4 dependent on comments received. Q4 - Awaiting result of 6 week consultation. Intention is to publish policy and specification dependent on comments received. This milestone will be carried over as part of the Thrombectomy Deep Dive within the Annual Plan 2026/27 Workplan.	Yes
Strategic Priority 1: Development of a JCC Strategy	SP1	SS10	Mel Wilkey	Mechanical thrombectomy services for the Welsh population are delivered closer to home	Development of model/pathway	Reconfirm next steps for progression towards a 24/7 Thrombectomy service for S Wales.	Q2	Q3	A	Q2 - CVUHB have been asked to submit a revised business case setting out how they will extend hours of access in 2026/27 with line of sight towards the provision of a 24/7 service. Q3 - Discussions continue with CVUHB and North Bristol Trust on a partnership model towards the provision of a 24/7 service for S Wales. An options paper will be taken to Joint Committee in Q4. Q4 - Discussions continue with CVUHB and North Bristol Trust on a partnership model towards the provision of a 24/7 service for S Wales. An options paper will be taken to Joint Committee once discussions have completed. This milestone will be carried over as part of the Thrombectomy Deep Dive within the Annual Plan 2026/27 Workplan.	Yes
Strategic Priority 1: Development of a JCC Strategy	SP1	SS10	Mel Wilkey	Mechanical thrombectomy services for the Welsh population are delivered closer to home		Work with designated provider to implement phase 1 of the Mechanical Thrombectomy service.	Q2	Q2	B	Q2 - CVUHB commenced delivery of the S Wales Thrombectomy service from 01/07/2025.	No
Strategic Priority 1: Development of a JCC Strategy	SP1	SS14	Mel Wilkey	Commissioning implications of the Women's Health Plan are understood by the JCC	Womens health plan implementation requirements made explicit within JCC IMTP	Understand the requirements of the plan and how it relates to JCC commissioned services.	Q3	Q4	A	Q3 - Checking with Planning Team if this milestone responsibility is correct, if not need to link in with MW or AB (Specialised Services) for an urgent update in the IMTP for Q4. Q4 - Still seeking clarity on milestone responsibility.	No

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Strategic Priority 1: Development of a JCC Strategy	SP1	SS14	Mel Wilkey	Commissioning implications of the Women's Health Plan are understood by the JCC	Womens health plan implementation requirements made explicit within JCC IMTP	Womens Health Plan implications built into planning for IMTP	Q4	IMTP (now confirmed as an Annual Plan 2026/27)	A	Q3 - Checking with Planning Team if this milestone responsibility is correct, if not need to link in with MW or AB (Specialised Services) for an urgent update in the IMTP for Q4. Q4 - Still seeking clarity on milestone responsibility.	No
Strategic Priority 1: Development of a JCC Strategy	SP1	SS15	Mel Wilkey	Commissioned capacity is aligned with demand for unit-based Haemodialysis across Wales.	Undertake a demand and capacity analysis.	Demand & capacity Report to appropriate governance structure.	Q3	Q4	B	Q2 - Demand report presented at WKN Board on 24/09/2025. Q3 - Demand report has now been endorsed. Session on 10th December to go through the detail of demand report with each of the regions, this will inform future capacity requirements for each region. Q4 - Each of the regions have met with HEOR that has undertaken the capacity review. Report has been completed and findings shared with the regions and will now be used as a tool for future commissioning requirements.	No
Strategic Priority 1: Development of a JCC Strategy	SP1	SS15	Mel Wilkey	Commissioned capacity is aligned with demand for unit-based Haemodialysis across Wales.	Unit Dialysis implementation model	Develop an appropriate Unit Dialysis model to meet demand.	Q4	IMTP (now confirmed as an Annual Plan 2026/27)	B	Q2 - The modelling for the South West Wales Expansion Programme is concluded. Q3 - Modelling for the South East Wales Expansion Programme has commenced. Modelling for the North Wales Expansion Programme will be scoped 2026/27. Q4 - South East Wales Procurement - Project Procurement team has been developed and Project Board introduced, with meeting scheduled for 12/03/2026. Pre-engagement has commenced with bidders. Agreed to close milestone as will be included as a new milestone included within the Procurement Plan.	No
Strategic Priority 1: Development of a JCC Strategy	SP1	SS15	Mel Wilkey	Commissioned capacity is aligned with demand for unit-based Haemodialysis across Wales.	Commissioning policy & service specification	Get it Right First Time (GIRFT) recommendations implemented. Re-refresh current Commissioning Policy and Service Specification.	Q3	Q4	B	Q2 - Draft service specification and commissioning policy has been developed. Q3 - Draft service specification and commissioning policy has been developed to go through the JCC commissioning policy process by Q4. Q4 - South East Wales Procurement - Project Procurement team has been developed and Project Board introduced, with meeting scheduled for 12/03/2026. Unit Service Specification and Policy will be reviewed in line with the Procurement timescales. Agreed to close milestone as will be included as a new milestone included within the Procurement Plan.	No
Strategic Priority 1: Development of a JCC Strategy	SP1	SS16	Mel Wilkey	Linked to SS19. To increase Home Dialysis.	Implement the Value in Healthcare objectives linked to increasing Home Dialysis	Milestones aligned with ViH Programme	Q1	Q4	B	Q2 - Delivered the ViH Project with outcome of increased percentage of patients choosing home dialysis. Increased percentage of patients with documented transplant listing status and pre-emptive transplant. WKN have been successful in receiving confirmation from the Welsh Government of recurrent funding.	No
Strategic Priority 1: Development of a JCC Strategy	SP1	SS16	Mel Wilkey	Linked to SS19. To increase Home Dialysis.	Commissioning policy & service specification	Get it Right First Time (GIRFT) recommendations implemented. Re-refresh current Commissioning Policy and Service Specification.	Q2	Q3	B	Q2 - Commissioning Policy and Specification has been sent out for stakeholder consultation, closed on 11/09/2025. Currently reviewing stakeholder comments received. Growth in Home Therapies may need to be included in IMTP. Q3 - Policy and specification has completed consultation and went through Policy Group on 30/10/2025 for approval and publication.	No

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Strategic Priority 1: Development of a JCC Strategy	SP1	SS16	Mel Wilkey	Linked to SS19. To increase Home Dialysis.	Home Dialysis Framework	Providing an appropriate route to market for home therapies equipment and consumables, demonstrating value for money.	Q2	Q4	B	Q2 - Utilising NHS Supply Chain Framework. Q3 - Benchmarking data has been received by Procurement, under evaluation with provider regions aiming to start on 1st of January. Q4 - The NHS Supply Chain Framework contract is live and call-offs for each region have been agreed.	No
Strategic Priority 1: Development of a JCC Strategy	SP1	SS17	Mel Wilkey	Optimum services are commissioned for the Welsh population on organ donation and transplantation.	Commissioning policy & service specification	Get it Right First Time (GIRFT) recommendations implemented. Re-fresh current Kidney Transplant Commissioning Policy and Service Specification.	Q3	Q4	B	Q2 - Initial draft developed with clinical leads. Q3 - Draft developed with clinical leads. Q4 - Policy and Service Specification have been refreshed and reviewed by WKN Clinical Leads and AMD. Been submitted to Policy Group for review.	No
Strategic Priority 1: Development of a JCC Strategy	SP1	SS18	Mel Wilkey	Strengthen National approach on information technology through the development of a Kidney Digital Strategy.	Digital Kidney Strategy recommended through appropriate governance route following review	Development of Kidney Digital Strategy	Q3	Q4	B	Q2 - An updated version is being presented at WKN Board on 24/09/2025 for endorsement. Q3 - Final version was presented at WKN Board on 24/09/2025 and endorsed.	No
Strategic Priority 1: Development of a JCC Strategy	SP1	SS18	Mel Wilkey	Strengthen National approach on information technology through the development of a Kidney Digital Strategy.	Digital Kidney Strategy and Implementation Plan	Implementation of strategy & agreed approach to the use of digital in supporting the commissioning and delivery of kidney services.	Q4	IMTP (now confirmed as an Annual Plan 2026/27)	B	Q4 - Recruitment of Deputy Head of Commissioning now in progress, financial review of the commissioning dashboard is being undertaken. Agreed to close milestone as will be included as a new milestone included within the Digital & Data Plan.	No
Strategic Priority 1: Development of a JCC Strategy	SP1	SS19	Mel Wilkey	Linked with SS16. Achievement of Value in Healthcare Programme	Achievement of milestones in ViHC Kidney Programme.	Reconfirm plan required to increase number of patients receiving a) transplantation b) home dialysis.	Q2	Q4	B	Q2 - Delivered the ViH Project with outcome of increased percentage of patients choosing home dialysis. Increased percentage of patients with documented transplant listing status and pre-emptive transplant. WKN have been successful in receiving confirmation from the Welsh Government of recurrent funding.	No
Strategic Priority 1: Development of a JCC Strategy	SP1	SS19	Mel Wilkey	Linked with SS16. Achievement of Value in Healthcare Programme		Monitor implementation of regional value in healthcare programmes, taking remedial action as required.	Q1	Q4	B	Q2 - Delivered the ViH Project with outcome of increased percentage of patients choosing home dialysis. Increased percentage of patients with documented transplant listing status and pre-emptive transplant. WKN have been successful in receiving confirmation from the Welsh Government of recurrent funding.	No
Strategic Priority 1: Development of a JCC Strategy	SP1	SS3	Iolo Doull	Welsh residents have equitable access to effective treatments (ATMPs) to maximise survival and quality of life.	ATMPs commissioned in line with guidance	Develop commissioning policies	Q3	Q4	B	Q3 - Commissioning policies being developed following NICE approval. Q4 - PPS304, Etranacogene dezaparovec or treating moderately severe or severe haemophilia B in adults, Policy Position Statement was agreed for publication on 03/03/2026. Commissioning policies continue to be developed developed following NICE approval as Business as Usual. Agreed to mark milestone as complete.	No
Strategic Priority 1: Development of a JCC Strategy	SP1	SS3	Iolo Doull	Welsh residents have equitable access to effective treatments (ATMPs) to maximise survival and quality of life.		Work with stakeholders to commission pathways and designate providers	Q3	IMTP (now confirmed as an Annual Plan 2026/27)	R	Q3 - Ongoing engagement but pathway set up limited by funding in Wales and lack of capacity in England to see additional Welsh patients. Q4 - Process in place to request funding, discussions ongoing.	Yes
Strategic Priority 1: Development of a JCC Strategy	SP1	SS4	Iolo Doull/Mel Wilkey	PET indications are available to the Welsh population leading to improved patient outcomes	Commissioning policy for PET	Update PET commissioning policy.	Q4	IMTP (now confirmed as an Annual Plan 2026/27)	B	Q3 - Policy criteria for new indications drafted with All Wales PET Advisory Group in August 2025. Policy agreed for stakeholder consultation between September and October. Policy published.	No

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Strategic Priority 1: Development of a JCC Strategy	SP1	SS4	Iolo Doull/Mel Wilkey	PET indications are available to the Welsh population leading to improved patient outcomes	Commission additional indications	Update appropriate contracting arrangements with provider	Q4	IMTP (now confirmed as an Annual Plan 2026/27)	B	Q3 - Policy criteria for new indications drafted with All Wales PET Advisory Group in August 2025. Policy agreed for stakeholder consultation between September and October. Policy published.	No
Strategic Priority 2: Centre of Commissioning Excellence	SP2	SP2	Georgina Galletly	The JCC will become the Centre of Commissioning Excellence on behalf of NHS Wales	Commissioning approach defined	Consideration at same time as strategy through JCC	Q3	Q4	G	Q3 - Comprehensive organisational development programme (OD) is under development with support from CTM People Services and HEIW. Programme will be drafted and discussed with Joint Committee with a view to finalising by financial year end. Implementation will commence April 2026. Q4 - The OD programme is being developed in partnership with CTM People Services with the aim of implementation in Q1 2026-27. Elements of the OD programme are already underway including a commissioning training webinar to be held on 25/03/2026.	Yes
Strategic Priority 2: Centre of Commissioning Excellence	SP2	SP2	Georgina Galletly	The JCC will become the Centre of Commissioning Excellence on behalf of NHS Wales	NWJCC Strategy to identify best practice and route map to achieve centre of excellence.	Early engagement with stakeholders and staff will take place in order to develop the vision and approach.	Q1	Q4	R	Q2 - Strategic Priority to be picked up and combined with SP1. Defining a Centre of Commissioning Excellence and the route map to achieving this will form a fundamental aspect of the long-term strategy for the NWJCC. Q3 - The OD programme for the NWJCC will be tested with stakeholders including staff to ensure that best practice is identified and built in. Q4 - Progressing slower than originally anticipated. All-staff away-day scheduled for January 2026 was stood down due to bad weather. The next opportunity to progress discussions will be the next scheduled date in May 2026. This will also dovetail into the development of the strategy.	Yes
Strategic Priority 2: Centre of Commissioning Excellence	SP2	SP2	Georgina Galletly	The JCC will become the Centre of Commissioning Excellence on behalf of NHS Wales		Development of a commissioning maturity matrix.	Q2	Q3	B	Q2 - NWJCC will utilise the planning maturity matrix issued by Welsh Government on 22/09/2025 to undertake a self assessment. We will use the learning to feed into the development of the NWJCC IMTP and Long-Term Strategy. Q3 - The recently issued WH Planning Maturity Matrix has been adopted by the NWJCC and will inform the continuous improvement and identify further areas for development. Milestone completed.	No

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Strategic Priority 3: Population Health Perspective	SP3	SP3	Iolo Doull	Population health based commissioning will underpin the work undertaken by the NWJCC through an increased population health perspective	Sessional time secured from a public health consultant	Appoint an Assistant Medical Director for Public Health, increasing leadership and influence in decision making within the organisation.	Q2	Q3	R	Q3 - New post, AMD Public Health due for recruitment delayed, held up by CTM. Role will be key in the clinical leadership of the JCC Strategy, Prioritisation and Decision-making to ensure population health focus. Q4 - There have been significant delays on recruitment but it is hoped that an appointment will be made in the next quarter.	Yes
Strategic Priority 3: Population Health Perspective	SP3	SP3	Iolo Doull	Population health based commissioning will underpin the work undertaken by the NWJCC through an increased population health perspective		With Public Health Wales develop a support and development framework that will further strengthen and embed a population health approach.	Q3	Q4	R	Q3 - Pending appointment of AMD. Q4 - There have been significant delays on recruitment but it is hoped that an appointment of an AMD will be made in the next quarter.	Yes
Strategic Priority 4: Strategic Service Reviews SP4.1 - Cardiac Service Review (Note dependency on SS5 & SS6 until this review has concluded and made recommendations)	SP4.1	SP4.1	Mel Wilkey	Cardiac services are reviewed for optimum commissioning/value/productivity/sustainability	Recommendations arising from review used to inform commissioning intentions for IMTP	<ul style="list-style-type: none"> <li>Commissioning Framework</li> <li>PID</li> <li>Establishment of Project Team</li> </ul>	Q1	Q2	B	Q2 - All complete and PID was presented to SSCG on 07/08/2025, also presented to CCLG on 26/08/2025 supported, and presented at JCC Strategy Workshop on 19/08/2025 and agreed with minor amendment to timescale.	No
Strategic Priority 4: Strategic Service Reviews SP4.1 - Cardiac Service Review (Note dependency on SS5 & SS6 until this review has concluded and made recommendations)	SP4.1	SP4.1	Mel Wilkey	Cardiac services are reviewed for optimum commissioning/value/productivity/sustainability	Recommendations arising from review used to inform commissioning intentions for IMTP	<ul style="list-style-type: none"> <li>Inaugural Project Board Meeting</li> <li>Demand and Capacity Modelling</li> <li>Self-Assessment against the Service Specification</li> </ul>	Q2	Q3	R	Q2 - First project delivery team meeting scheduled for 14/10/2025. Q3 - First Inaugural Project Board Board meeting took place on the 14/10/2025. Following the project board meeting the PID has been revised. Revisions include changes to the Project Board and Project Team membership and amended timescales. Agreed changes will be included in the project plan. Scoping for the demand and capacity work is underway, awaiting response back from a potential provider for this. This milestone is currently off-track for Q3 25/26, progression is subject to securing a provider proposal in Q4 25/26. The self assessment framework has been developed. The demand and capacity modelling framework has not yet being developed - current scoping for this work is underway and is subject to securing a suitable Provider. Self assessment will be sent to providers to complete in Q4. Q4 - Project Board Board meeting took place on the 10/03/2026. The Board focused on governance arrangements, board	Yes
Strategic Priority 4: Strategic Service Reviews SP4.1 - Cardiac Service Review (Note dependency on SS5 & SS6 until this review has concluded and made recommendations)	SP4.1	SP4.1	Mel Wilkey	Cardiac services are reviewed for optimum commissioning/value/productivity/sustainability	Recommendations arising from review used to inform commissioning intentions for IMTP	<ul style="list-style-type: none"> <li>Demand and Capacity Report</li> <li>Stakeholder Communications and Engagement Plan</li> </ul>	Q3	Q4	R	Q3 - This milestone is off-track and completion is dependent on the demand and capacity modelling being completed. This milestone is now scheduled to be completed in Q2 to Q3 26/27 as part of the IMTP. Q4 - This milestone is off-track and completion is dependent on the demand and capacity modelling being completed. This milestone is now scheduled to be completed in Q2 to Q3 26/27 as part of the IMTP.	Yes

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Strategic Priority 4: Strategic Service Reviews SP4.1 - Cardiac Service Review (Note dependency on SS5 & SS6 until this review has concluded and made recommendations)	SP4.1	SP4.1	Mel Wilkey	Cardiac services are reviewed for optimum commissioning/value/productivity/sustainability	Recommendations arising from review used to inform commissioning intentions for IMTP	<ul style="list-style-type: none"> <li>Options Appraisal for Interim and Future Models</li> <li>Business cases for interim and future options</li> </ul>	Q4	IMTP (now confirmed as an Annual Plan 2026/27)	R	<p>Q3 - Completion of this milestone is expected to be off-track as it is dependent on the demand and capacity modeling being completed. Due to this, the milestone is now scheduled to be completed in Q3 26/27 as part of the IMTP.</p> <p>Q4 - Completion of this milestone is expected to be off-track as it is dependent on the demand and capacity modeling being completed. Due to this, the milestone is now scheduled to be completed in Q3 26/27 as part of the IMTP.</p>	Yes
Strategic Priority 4: Strategic Service Reviews SP4.1 - Cardiac Service Review (Note dependency on SS5 & SS6 until this review has concluded and made recommendations)	SP4.1	SS2	Mel Wilkey	To review plans for a single thoracic surgery centre, given no capital has been secured.	To develop a scoping report on current plans for a single thoracic surgery centre. To consider the provision of equitable access and best value from resources (including consideration of interdependencies with the cardiac review).	<p>Scoping Report will include:</p> <ul style="list-style-type: none"> <li>Background to thoracic review, recommendation, current status</li> <li>Updated analysis of capacity, demand and outcomes</li> <li>Current strategic context (inc. lung screening, major trauma centre, interdependencies with cardiac review)</li> <li>Risks to sustainability, quality, equity of provision</li> </ul>	Q3	Q4	B	<p>Q3 - Work commenced to develop the scoping report.</p> <p>Q4 - Scoping report drafted, presented and discussed at the SSCG on 26/03/2026. Scoping report now delivered. Next phase of the work will be included within the 2026/27 Cancer &amp; Blood Workplan, including an options appraisal for the delivery model (particularly given the introduction of Lung Cancer Screening in the next 2 years). The work will consider the interdependencies with Cardiac Surgery and may need to be considered alongside the Cardiac Review.</p>	No
Strategic Priority 4: Strategic Service Reviews SP4.1 - Cardiac Service Review (Note dependency on SS5 & SS6 until this review has concluded and made recommendations)	SP4.1	SS5	Mel Wilkey	Equity of access for Welsh patients requiring cardiac devices and provision of care closer to home.	Consistent commissioning model for cardiac devices.	Review current provision across Health Boards.	Q2	Q3	R	<p>Q2 - Slight delay in project scoping due to competing priorities and capacity within the team.</p> <p>Q3 - This milestone is off-track. This work has been delayed due to staff constraints and concurrent priorities. Scoping work to commence in Q4.</p> <p>Q4 - This milestone is off-track. This work has been delayed by concurrent priorities and staffing pressures (notably Commissioning Team staff secondments). Scoping work to commence in 2026-2027 IMTP. The TAVI working group met on the 24/03/2026 and have begun analysing data to inform next steps.</p>	Yes
Strategic Priority 4: Strategic Service Reviews SP4.1 - Cardiac Service Review (Note dependency on SS5 & SS6 until this review has concluded and made recommendations)	SP4.1	SS5	Mel Wilkey	Equity of access for Welsh patients requiring cardiac devices and provision of care closer to home.	Consistent commissioning model for cardiac devices.	Detailed analysis of current provision and allocated resource, highlighting inequity and variation.	Q2	Q3	R	<p>Q2 - Slight delay in project scoping due to competing priorities and capacity within the team.</p> <p>Q3 - This milestone is off-track. This work has been delayed due to staff constraints and concurrent priorities. Scoping work to commence in Q4.</p> <p>Q4 - This milestone is off-track and has been delayed by concurrent priorities and staffing pressures (notably Commissioning Team staff secondments). Scoping work to commence in 2026-2027 IMTP. The TAVI working group met on the 24/03/2026 and have begun analysing data to inform next steps.</p>	Yes
Strategic Priority 4: Strategic Service Reviews SP4.1 - Cardiac Service Review (Note dependency on SS5 & SS6 until this review has concluded and made recommendations)	SP4.1	SS5	Mel Wilkey	Equity of access for Welsh patients requiring cardiac devices and provision of care closer to home.	Consistent commissioning model for cardiac devices.	Assess impact of differential arrangements and work to establish a consistent commissioning model, underpinned by agreed baselines.	Q3	Q4	R	<p>Q3 - This milestone is off-track. This work has been delayed due to staff constraints and concurrent priorities. Scoping work to commence in Q4.</p> <p>Q4 - This milestone is off-track and has been delayed by concurrent priorities and staffing pressures (notably Commissioning Team staff secondments). Scoping work to commence in 2026-2027 IMTP. The TAVI working group met on the 24/03/2026 and have begun analysing data to inform next steps.</p>	Yes

NWJCC FOUNDATION PLAN IMPLEMENTATION - PROGRESS TRACKER Q4											
Strategic Priority	Unique Identifier (Strategic)	Unique Identifier (Local)	JCC Responsible Officer	Outcome	Deliverable/Output	Milestone	Starting Qtr	Delivery Qtr	RAG Rating G - On Track, A - Slight Slippage (Not all actions completed within Qtr), R - Significant Slippage (Project is more than 1 Qtr behind), B - Project Milestone Complete W - Project Not Yet Started	Progress Update / Comment	Included in Annual Plan 2026/27
Strategic Priority 4: Strategic Service Reviews SP4.1 - Cardiac Service Review (Note dependency on SS5 & SS6 until this review has concluded and made recommendations)	SP4.1	SS5	Mel Wilkey	Equity of access for Welsh patients requiring cardiac devices and provision of care closer to home.	Consistent commissioning model for cardiac devices.	Report to Specialist Services Commissioning Group.	Q3	Q4	R	Q3 - This milestone is off-track and has been delayed due to staff constraints and concurrent priorities. Scoping work to commence in Q4. This milestone is now scheduled to be completed in Q4 26/27 following completion of the scoping work; the review of current provision; the detailed analysis of current provision being completed and the impact assessment required to establish a consistent commissioning model etc.  Q4 - This milestone is off-track and has been delayed by concurrent priorities and staffing pressures (notably Commissioning Team staff secondments). Scoping work to commence in 2026-2027 IMTP. This milestone is now scheduled to be completed in Q4 26/27 following completion of the scoping work; the review of current provision; the detailed analysis of current provision being completed and the impact assessment required to establish a consistent commissioning model etc. The TAVI working group met on the 24/03/2026 and have begun analysing data to inform next steps.	Yes
Strategic Priority 4: Strategic Service Reviews SP4.1 - Cardiac Service Review (Note dependency on SS5 & SS6 until this review has concluded and made recommendations)	SP4.1	SS6	Mel Wilkey	Identify optimal commissioning and delivery models for cardiac surgery and TAVI activity, to improve outcomes and efficiency Dependency – cardiac review needs to conclude first	New commissioning policy	Proposal for optimum commissioning and delivery model to SS Commissioning Group	Q4	IMTP (now confirmed as an Annual Plan 2026/27)	A	Q4 - This milestone is off-track and has been delayed by concurrent priorities and staffing pressures (notably Commissioning Team staff secondments). Scoping work to commence in 2026-2027 IMTP. The TAVI working group met on the 24/03/2026 and have begun analysing data to inform next steps.	Yes
Strategic Priority 4: Strategic Service Reviews SP4.2 - Neonatal Service Review	SP4.2	SP4.2 SS12	Mel Wilkey	Neonatal Model to be reviewed for optimum commissioning/value/productivity/sustainability	Recommendations arising from review to inform commissioning intentions for JCC & Health Board IMTPs	Develop the scope of the review	Q1	Q1	B	Q2 - Project initiated. Milestones set at JCC meeting held on 20/05/2025. CEO and CCLG lead engaged via email and meetings. Project manager has been identified and project scope completed. The Project Team has been identified and the first meeting arranged for 14/08/2025. Q3 -A scope and an Activity Brief has been completed to advise expediting a Neonatal Commissioning Reset Review for South Wales, focussing on existing findings to bring clarity, alignment, and actionable next steps for the commissioning of neonatal services in South Wales. Q4 - A scope and an Activity Brief has been completed to advise expediting a Neonatal Commissioning Reset Review for South Wales. This is to be reviewed once the outcome of the Neonatal Commissioning Reset Review has been presented to Joint Committee in March 2026.	No

NWJCC FOUNDATION PLAN IMPLEMENTATION - PROGRESS TRACKER Q4											
Strategic Priority	Unique Identifier (Strategic)	Unique Identifier (Local)	JCC Responsible Officer	Outcome	Deliverable/Output	Milestone	Starting Qtr	Delivery Qtr	RAG Rating G - On Track, A - Slight Slippage (Not all actions completed within Qtr), R - Significant Slippage (Project is more than 1 Qtr behind), B - Project Milestone Complete W - Project Not Yet Started	Progress Update / Comment	Included in Annual Plan 2026/27
Strategic Priority 4: Strategic Service Reviews SP4.2 - Neonatal Service Review	SP4.2	SP4.2 SS12	Mel Wilkey	Neonatal Model to be reviewed for optimum commissioning/value/productivity/sustainability	Recommendations arising from review to inform commissioning intentions for JCC & Health Board IMTPs	Identify & appoint project team	Q2	Q3	R	Q2 - Project Team membership has been changed due to potential conflict of interest. The meeting arranged for August did not go ahead. Awaiting JCC Chief Commissioner to meet with Welsh Government Chief Nursing Officer (CNO) to discuss the implications of the All Wales Maternity & Neonatal Review on this work in order to understand the consequences / effects. Q3 - Chief Commissioner and Director of Quality and Nursing have met with the CNO to discuss the implications of the All Wales Maternity & Neonatal Review on this work. Request NWJCC to expedite a neonatal commissioning reset review for S Wales, building on existing findings to decide next steps for the commissioning of neonatal services in S Wales. Director of Quality and Nursing and Director of Ambulance & 111 are leading this work and a report is expected to be presented at Joint Committee in March 2026. Q4 - Unable to appoint a Project Team due to awaiting the outcome of the National Commissioning Reset Review. This will be picked up in Q1 of the IMTP 2026-29.	Yes
Strategic Priority 4: Strategic Service Reviews SP4.2 - Neonatal Service Review	SP4.2	SP4.2 SS12	Mel Wilkey	Neonatal Model to be reviewed for optimum commissioning/value/productivity/sustainability	Recommendations arising from review to inform commissioning intentions for JCC & Health Board IMTPs	Develop PID	Q2	Q3	B	Q2 - Initial draft of PID developed, will need to be reviewed once the implications of the All Wales Review have been understood. Q3 - Scope has been updated and PID replaced by an activity brief.	No
Strategic Priority 4: Strategic Service Reviews SP4.2 - Neonatal Service Review	SP4.2	SP4.2 SS12	Mel Wilkey	Neonatal Model to be reviewed for optimum commissioning/value/productivity/sustainability	Recommendations arising from review to inform commissioning intentions for JCC & Health Board IMTPs	Revisit Phase 1 Demand and Capacity analysis	Q3	Q4	G	Q2 - Neonatal Phase 1 internal workshop arranged for 22nd October 2025 to discuss Phase 1 progression. Q3 - Workshop held but it was confirmed that the Maternity and Neonatal assurance assessment would be undertaken and therefore a decision was made to pause this work whilst awaiting the outcome of the assessment led by Director of Nursing & Quality and Director of Commissioning Ambulance and 111 in NWJCC. Q4 - This is to be reviewed once the outcome of the Neonatal Commissioning Reset Review has been presented to Joint Committee in March 2026.	Yes
Strategic Priority 4: Strategic Service Reviews SP4.2 - Neonatal Service Review	SP4.2	SP4.2 SS12	Mel Wilkey	Neonatal Model to be reviewed for optimum commissioning/value/productivity/sustainability	Recommendations arising from review to inform commissioning intentions for JCC & Health Board IMTPs	Develop implementation plan	Q4	IMTP (now confirmed as an Annual Plan 2026/27)	R	Q4 - Unable to develop an implementation plan due to awaiting the outcome of the National Commissioning Reset Review. This will be picked up in Q1 of the IMTP 2026-29.	Yes

NWJCC FOUNDATION PLAN IMPLEMENTATION - PROGRESS TRACKER Q4											
Strategic Priority	Unique Identifier (Strategic)	Unique Identifier (Local)	JCC Responsible Officer	Outcome	Deliverable/Output	Milestone	Starting Qtr	Delivery Qtr	RAG Rating G - On Track, A - Slight Slippage (Not all actions completed within Qtr), R - Significant Slippage (Project is more than 1 Qtr behind), B - Project Milestone Complete W - Project Not Yet Started	Progress Update / Comment	Included in Annual Plan 2026/27
Strategic Priority 4: Strategic Service Reviews SP4.2 - Neonatal Service Review	SP4.2	AMB9	Ross Whitehead	A sustainable service that supports the safe transport of babies when necessary.		Interim arrangements to ensure service continuity whilst strategic review is undertaken	Q2	Q3	R	Q2 - This project has been aligned with SP4.2 Neonatal Service Review project. Interim arrangements have been put in place to ensure service continuity whilst strategic review is undertaken. Awaiting JCC Chief Commissioner to meet with Welsh Government Chief Nursing Officer (CNO) to discuss the implications of the All Wales Maternity & Neonatal Review on this work in order to understand the consequences / effects. Q3 - Commissioning reset review approved by Joint Committee November 2025. Timeline reprofiled to complete in March 2026 (Q4). Q4 - Dependent on Neonatal Commissioning Reset Review and strategic review, due to be carried over as part of Annual Plan 2026-27 Neonatal service workplan.	Yes
Strategic Priority 4: Strategic Service Reviews SP4.2 - Neonatal Service Review	SP4.2	AMB9	Ross Whitehead	A sustainable service that supports the safe transport of babies when necessary.	Commissioning of a sustainable and efficient neonatal transport service for South Wales provided 24 hours a day.	Proposal on future service configuration is dependent on the wider Neonatal Services strategic review.	Q4	IMTP (now confirmed as an Annual Plan 2026/27)	G	Q4 - Dependent on Neonatal Commissioning Reset Review and strategic review, due to be carried over as part of Annual Plan 2026-27 Neonatal service workplan.	Yes
Strategic Priority 4: Strategic Service Reviews SP4.3 - Ambulance Model Review (Please note – Now includes SP7.3 – Ambulance Benchmarking and Contracting)	SP4.3 (SP7.3)	SP4.3 (SP7.3)	Ross Whitehead/Stacey Taylor	Ambulance Model to be reviewed for optimum commissioning/value/productivity/sustainability. SRO has decided to combine the Strategic review of ambulance and the benchmarking and contracting ambulance work into a single product.	Report to include recommendations on optimum service model for Ambulance Services	See milestones for SP4.3 below.	Q3	Q4	A	Q3 - Scope developed in conjunction with relevant stakeholders. The review has already commenced, having started during Q2. Progress will be reported to the Joint Committee in Q3. The original scope has been reviewed for deliverability, and a final draft has been developed for sharing with stakeholders. Q4 - The strategic productivity review of WAST delivered services continues to progress. The review will include all commissioned aspects of the WAST, with a focus on understanding productivity, remit, and affordability. The progress to date has included: - Reviewing of the existing commissioning frameworks - Review of historical baseline, investment and expenditure - Review of productivity and performance - IMTP delivery including commissioning intentions  The Ambulance Services and 111 Commissioning Team have also been liaising with NHS England regarding the development of an Opportunity Framework, focussed on Emergency Ambulance Services.  A Task and Finish Group with key colleagues within JCC and WAST has been established to progress the work collaboratively.  The Ambulance Services and 111 Commissioning group will consider the initial findings during April 2026. Due to	Yes
Strategic Priority 4: Strategic Service Reviews SP4.3 - Ambulance Model Review (Please note – Now includes SP7.3 – Ambulance Benchmarking and Contracting)	SP4.3 (SP7.3)	SP4.3 (SP7.3)	Ross Whitehead/Stacey Taylor	Ambulance Model to be reviewed for optimum commissioning/value/productivity/sustainability. SRO has decided to combine the Strategic review of ambulance and the benchmarking and contracting ambulance work into a single product.		Develop the scope of the review	Q1	Q1	B	Q2, Q3 - Scope developed in conjunction with relevant stakeholders. The review has already commenced, having started during Q2. Progress will be reported to the Joint Committee in Q3. The original scope has been reviewed for deliverability, and a final draft has been developed for sharing with stakeholders.	No

NWJCC FOUNDATION PLAN IMPLEMENTATION - PROGRESS TRACKER Q4											
Strategic Priority	Unique Identifier (Strategic)	Unique Identifier (Local)	JCC Responsible Officer	Outcome	Deliverable/Output	Milestone	Starting Qtr	Delivery Qtr	RAG Rating G - On Track, A - Slight Slippage (Not all actions completed within Qtr), R - Significant Slippage (Project is more than 1 Qtr behind), B - Project Milestone Complete W - Project Not Yet Started	Progress Update / Comment	Included in Annual Plan 2026/27
Strategic Priority 4: Strategic Service Reviews SP4.3 - Ambulance Model Review (Please note – Now includes SP7.3 – Ambulance Benchmarking and Contracting)	SP4.3 (SP7.3)	SP4.3 (SP7.3)	Ross Whitehead/Stacey Taylor	Ambulance Model to be reviewed for optimum commissioning/value/productivity/sustainability. SRO has decided to combine the Strategic review of ambulance and the benchmarking and contracting ambulance work into a single product.	Report to include recommendations on optimum service model for Ambulance Services	Identify project team	Q1	Q1	B	Q2, Q3 - Project team members identified as part of the scoping work. Joint arrangements agreed with Finance and Value Directorate to combine with benchmarking and contracting review.	No
Strategic Priority 4: Strategic Service Reviews SP4.3 - Ambulance Model Review (Please note – Now includes SP7.3 – Ambulance Benchmarking and Contracting)	SP4.3 (SP7.3)	SP4.3 (SP7.3)	Ross Whitehead/Stacey Taylor	Ambulance Model to be reviewed for optimum commissioning/value/productivity/sustainability. SRO has decided to combine the Strategic review of ambulance and the benchmarking and contracting ambulance work into a single product.		Develop PID	Q1	Q1	B	Q2 - Separate PID not required as scoping document has been developed setting out the requirements of the review.	No
Strategic Priority 4: Strategic Service Reviews SP4.3 - Ambulance Model Review (Please note – Now includes SP7.3 – Ambulance Benchmarking and Contracting)	SP4.3 (SP7.3)	SP4.3 (SP7.3)	Ross Whitehead/Stacey Taylor	Ambulance Model to be reviewed for optimum commissioning/value/productivity/sustainability. SRO has decided to combine the Strategic review of ambulance and the benchmarking and contracting ambulance work into a single product.		Develop implementation plan	Q2	IMTP (now confirmed as an Annual Plan 2026/27)	B	Q2, Q3 - Scoping document outlines the delivery plan for the review, outputs from the review will be delivered at the next step of the review and form part of the Annual Plan 2026/27. Q4 - Implementation has now been developed. Agreed for milestone to be marked complete.	No
Strategic Priority 4: Strategic Service Reviews SP4.3 - Ambulance Model Review (Please note – Now includes SP7.3 – Ambulance Benchmarking and Contracting)	SP4.3 (SP7.3)	SP4.3 (SP7.3)	Ross Whitehead/Stacey Taylor	Ambulance Model to be reviewed for optimum commissioning/value/productivity/sustainability. SRO has decided to combine the Strategic review of ambulance and the benchmarking and contracting ambulance work into a single product.		Report to Joint Committee	Q3	Q4	A	Q3 - Review has commenced and on track to deliver an update on progress during Q4 2026/27. Q4 - The strategic productivity review of WAST delivered services continues to progress. The review will include all commissioned aspects of the WAST, with a focus on understanding productivity, remit, and affordability. The progress to date has included: - Reviewing of the existing commissioning frameworks - Review of historical baseline, investment and expenditure - Review of productivity and performance - IMTP delivery including commissioning intentions  The Ambulance Services and 111 Commissioning Team have also been liaising with NHS England regarding the development of an Opportunity Framework, focussed on Emergency Ambulance Services.  A Task and Finish Group with key colleagues within JCC and WAST has been established to progress the work collaboratively.  The Ambulance Services and 111 Commissioning group will consider the initial findings during April 2026. Due to be carried over as part of Annual Plan 2026-27 Ambulance service workplan.	Yes

NWJCC FOUNDATION PLAN IMPLEMENTATION - PROGRESS TRACKER Q4											
Strategic Priority	Unique Identifier (Strategic)	Unique Identifier (Local)	JCC Responsible Officer	Outcome	Deliverable/Output	Milestone	Starting Qtr	Delivery Qtr	RAG Rating G - On Track, A - Slight Slippage (Not all actions completed within Qtr), R - Significant Slippage (Project is more than 1 Qtr behind), B - Project Milestone Complete W - Project Not Yet Started	Progress Update / Comment	Included in Annual Plan 2026/27
Strategic Priority 4: Strategic Service Reviews SP4.3 - Ambulance Model Review (Please note – Now includes SP7.3 – Ambulance Benchmarking and Contracting)	SP4.3 (SP7.3)	AMB1	Ross Whitehead	Produce a commissioning vision for Ambulance Services to enhance productivity of Emergency Ambulance Services. SRO has decided to combine the Strategic review of ambulance and the benchmarking and contracting ambulance work into a single product.	Commissioning Vision Statement for Ambulance Services	Vision Statement to Joint Committee	Q3	Q4	B	Q3 - Review has commenced on track to deliver vision statement for ambulance services in Q4. Q4 - Vision statement will be incorporated as part of a JCC-wide approach and included as part of the Annual Plan 2026-27 Ambulance service workplan. Agreed to mark milestone as complete.	No
Strategic Priority 4: Strategic Service Reviews SP4.3 - Ambulance Model Review (Please note – Now includes SP7.3 – Ambulance Benchmarking and Contracting)	SP4.3 (SP7.3)	AMB13	Ross Whitehead	Patients can access the right information via digital platform in a timely manner. SRO has decided to combine the Strategic review of ambulance and the		Consider urgent care policy direction from Welsh Government	Q3	Q4	B	Q3 - Urgent care policy direction not yet issued. Likely to be issued in next financial year.	No
Strategic Priority 4: Strategic Service Reviews SP4.3 - Ambulance Model Review (Please note – Now includes SP7.3 – Ambulance Benchmarking and Contracting)	SP4.3 (SP7.3)	AMB13	Ross Whitehead	Patients can access the right information via digital platform in a timely manner. SRO has decided to combine the Strategic review of ambulance and the benchmarking and contracting ambulance work into a single product.	Develop the online infrastructure for NHS 111 Wales.	Work with the provider to ensure an appropriate update and refresh of the NHS 111 Wales website including how the public access the service	Q3	Q4	A	Q3 - JCC secured non recurrent WG funding for 2025/26 which has been utilised to work in conjunction with the provider to improve the digital front end. Q4 - The Digital Front-End Plan aims to 'improve digital access to healthcare services through the development of a new front-end system for the 111 service', this includes a robust online symptom checker integrated with NHS 111 Wales, enhancing patient self-triage and streamlining clinical workflows. This is due to be delivered Q1 2026/27.	Yes
Strategic Priority 4: Strategic Service Reviews SP4.3 - Ambulance Model Review (Please note – Now includes SP7.3 – Ambulance Benchmarking and Contracting)	SP4.3 (SP7.3)	AMB13	Ross Whitehead	Patients can access the right information via digital platform in a timely manner. SRO has decided to combine the Strategic review of ambulance and the benchmarking and contracting ambulance work into a single product.		Update and improve symptom checker including opportunities for technology	Q3	Q4	A	Q3 - JCC secured non recurrent WG funding for 2025/26 which has been utilised to work in conjunction with the provider to improve the digital front end. Q4 - The Digital Front-End Plan aims to 'improve digital access to healthcare services through the development of a new front-end system for the 111 service', this includes a robust online symptom checker integrated with NHS 111 Wales, enhancing patient self-triage and streamlining clinical workflows. This is due to be delivered Q1 2026/27 (Q1 2026/27).	Yes
Strategic Priority 4: Strategic Service Reviews SP4.3 - Ambulance Model Review (Please note – Now includes SP7.3 – Ambulance Benchmarking and Contracting)	SP4.3 (SP7.3)	AMB13	Ross Whitehead	Patients can access the right information via digital platform in a timely manner. SRO has decided to combine the Strategic review of ambulance and the benchmarking and contracting ambulance work into a single product.		Relaunch the NHS 111 Wales website	Q3	Q4	A	Q3 - JCC secured non recurrent WG funding for 2025/26 which has been utilised to work in conjunction with the provider to improve the digital front end. Q4 - The Digital Front-End Plan aims to 'improve digital access to healthcare services through the development of a new front-end system for the 111 service', this includes a robust online symptom checker integrated with NHS 111 Wales, enhancing patient self-triage and streamlining clinical workflows. This is due to be delivered Q1 2026/27 (Q1 2026/27).	Yes

NWJCC FOUNDATION PLAN IMPLEMENTATION - PROGRESS TRACKER Q4											
Strategic Priority	Unique Identifier (Strategic)	Unique Identifier (Local)	JCC Responsible Officer	Outcome	Deliverable/Output	Milestone	Starting Qtr	Delivery Qtr	RAG Rating G - On Track, A - Slight Slippage (Not all actions completed within Qtr), R - Significant Slippage (Project is more than 1 Qtr behind), B - Project Milestone Complete W - Project Not Yet Started	Progress Update / Comment	Included in Annual Plan 2026/27
Strategic Priority 4: Strategic Service Reviews SP4.3 - Ambulance Model Review (Please note – Now includes SP7.3 – Ambulance Benchmarking and Contracting)	SP4.3 (SP7.3)	AMB2	Ross Whitehead	Reduction in Ambulance hand-over delays resulting in improved ambulance response times for the population. SRO has decided to combine the Strategic review of ambulance and the benchmarking and contracting ambulance work into a single product.	Revised ambulance performance measures to support implementation of MAG recommendations	Development of a performance dashboard	Q2	Q2	B	Q2 - A performance summary dashboard has been developed to support oversight and improvement.  The associated data set is shared weekly with Welsh Government, Health Boards, and key stakeholders to ensure .  In addition, an operational dashboard have been created to enhance operational focus on performance against the 45-minute handover target.	No
Strategic Priority 4: Strategic Service Reviews SP4.3 - Ambulance Model Review (Please note – Now includes SP7.3 – Ambulance Benchmarking and Contracting)	SP4.3 (SP7.3)	AMB3	Ross Whitehead	Patients will have the right response from the Ambulance Service resulting in improved clinical outcomes for patients. SRO has decided to combine		Appointment of evaluation team	Q1	Q1	B	Q2 - An independent evaluation team has been appointed by WAST. The Director of Ambulance Services & NHS 111 is acting as joint Senior Responsible Officer (SRO).	No
Strategic Priority 4: Strategic Service Reviews SP4.3 - Ambulance Model Review (Please note – Now includes SP7.3 – Ambulance Benchmarking and Contracting)	SP4.3 (SP7.3)	AMB3	Ross Whitehead	Patients will have the right response from the Ambulance Service resulting in improved clinical outcomes for patients. SRO has decided to combine the Strategic review of ambulance and the benchmarking and contracting ambulance work into a single product.	The development and implementation of the evolved clinical response model	Development of quality and performance metrics	Q1	Q1	B	Q2 - Phase 1 of the clinical response model went live on 01 July 2025, and quality and performance metrics were agreed during the implementation process.	No
Strategic Priority 4: Strategic Service Reviews SP4.3 - Ambulance Model Review (Please note – Now includes SP7.3 – Ambulance Benchmarking and Contracting)	SP4.3 (SP7.3)	AMB10	Ross Whitehead	Existing capacity aligned to demand for NHS 111 Wales. SRO has decided to combine the Strategic review of ambulance and the benchmarking and contracting ambulance work into a single product.		Roster review	Q2	Q2	B	Q3 - Roster review is taking place with external modelling support and WAST. Delivery is planned for Q4 (Q4). Q4 - Roster review completed.	No
Strategic Priority 4: Strategic Service Reviews SP4.3 - Ambulance Model Review (Please note – Now includes SP7.3 – Ambulance Benchmarking and Contracting)	SP4.3 (SP7.3)	AMB10	Ross Whitehead	Existing capacity aligned to demand for NHS 111 Wales. SRO has decided to combine the Strategic review of ambulance and the benchmarking and contracting ambulance work into a single product.	Right size NHS 111 Wales Service capacity to respond to demand	Assurance that revised roster is implemented by WAST	Q3	Q4	A	Q3 - Provider has undertaken an independent 111 rostering practice review.  Q4 - Following the outcome of the review, all recommendations are being implemented (excluding those requiring additional resources) and the provider are proceeding to implementation during Q4. It is anticipated that the new rosters will be operational within Q1 2026/27 (Q1 2026/27).	Yes
Strategic Priority 4: Strategic Service Reviews SP4.3 - Ambulance Model Review (Please note – Now includes SP7.3 – Ambulance Benchmarking and Contracting)	SP4.3 (SP7.3)	AMB14	Ross Whitehead	Revision of EMRTS Commissioning Framework.	Revised commissioning framework	Review the current commissioning framework against the current expanded service  Undertake a review of the hosting arrangements for EMRTS and make recommendation to Joint Committee.	Q2	Q4	A	Q2, Q3 - Legal process relating to the JR has been completed  This priority has progressed to a wider review of the hosting arrangements for EMRTS with recommendation to be Joint Committee for consideration.  Q4 - Hosting arrangement review completed. Dependent on the outcome, but this will be carried over as part of Annual Plan 2026-27 EMRTS service workplan. Review of the current commissioning framework will form part of the Annual Plan 2026-27.	Yes

NWJCC FOUNDATION PLAN IMPLEMENTATION - PROGRESS TRACKER Q4											
Strategic Priority	Unique Identifier (Strategic)	Unique Identifier (Local)	JCC Responsible Officer	Outcome	Deliverable/Output	Milestone	Starting Qtr	Delivery Qtr	RAG Rating G - On Track, A - Slight Slippage (Not all actions completed within Qtr), R - Significant Slippage (Project is more than 1 Qtr behind), B - Project Milestone Complete W - Project Not Yet Started	Progress Update / Comment	Included in Annual Plan 2026/27
Strategic Priority 4: Strategic Service Reviews SP4.3 - Ambulance Model Review (Please note – Now includes SP7.3 – Ambulance Benchmarking and Contracting)	SP4.3 (SP7.3)	AMB14	Ross Whitehead	Revision of EMRTS Commissioning Framework.	Revised commissioning framework	Work with EMRTS & host body to update framework as necessary	Q2	Q4	A	Q2, Q3 - Legal process relating to the JR has been completed  This priority has progressed to a wider review of the hosting arrangements for EMRTS with recommendation to be Joint Committee for consideration.  Q4 - Hosting arrangement review completed. Dependent on the outcome, but this will be carried over as part of Annual Plan 2026-27 EMRTS service workplan. Review of the current commissioning framework will form part of the Annual Plan 2026-27.	Yes
Strategic Priority 4: Strategic Service Reviews SP4.3 - Ambulance Model Review (Please note – Now includes SP7.3 – Ambulance Benchmarking and Contracting)	SP4.3 (SP7.3)	AMB14	Ross Whitehead	Revision of EMRTS Commissioning Framework.	Revised commissioning framework	Present draft revised framework to EMRTS DAG	Q2	Q4	A	Q2, Q3 - Legal process relating to the JR has been completed  This priority has progressed to a wider review of the hosting arrangements for EMRTS with recommendation to be made to Joint Committee for consideration (IMTP).  Q4 - Hosting arrangement review completed. Dependent on the outcome, but this will be carried over as part of Annual Plan 2026-27 EMRTS service workplan. Review of the current commissioning framework will form part of the Annual Plan 2026-27.	Yes
Strategic Priority 4: Strategic Service Reviews SP4.3 - Ambulance Model Review (Please note – Now includes SP7.3 – Ambulance Benchmarking and Contracting)	SP4.3 (SP7.3)	AMB8	Ross Whitehead	Optimise resource capacity to increase the availability of NEPTs resources to respond to planned care and patient discharge requests	Joint Improvement Plan to improve efficiency with WAST & HBs on NEPTs	Support provider to undertake a review of current rostering practices.	Q3	Q4	B	Q3 - The Ambulance Services and 111 Commissioning Team is leading a weekly multi-stakeholder forum under the NEPTs Future Vision (2030) to improve strategic integration and discharge vehicle efficiency. A High Impact improvement plan has been developed as part of this.  This initiative supported urgent and emergency care resilience during winter, aligning with the Six Goals for UEC programme and the mid-December Two-Week Winter Sprint to maximise system-wide impact.  Q4 - Provider has been supported and has undertaken review. Milestone complete.	No
Strategic Priority 4: Strategic Service Reviews SP4.3 - Ambulance Model Review (Please note – Now includes SP7.3 – Ambulance Benchmarking and Contracting)	SP4.3 (SP7.3)	AMB8	Ross Whitehead	Optimise resource capacity to increase the availability of NEPTs resources to respond to planned care and patient discharge requests	Joint Improvement Plan to improve efficiency with WAST & HBs on NEPTs	Assurance that revised roster is implemented by WAST	Q3	Q4	A	Q4 - The roster review has now been completed.  Engagement with the impacted teams within WAST is ongoing with target for implementation of Q1 26/27.	Yes
Strategic Priority 4: Strategic Service Reviews SP4.3 - Ambulance Model Review (Please note – Now includes SP7.3 – Ambulance Benchmarking and Contracting)	SP4.3 (SP7.3)	AMB9	Ross Whitehead	Improved access to high quality non-emergency patient transport through system integration and efficiency gains.		Agreement of milestones for WAST to support delivery	Q2	Q2	B	Q2, Q3 - NEPTs Commissioning Assurance Group re-established in Q2. JCC to develop forum to support delivery of NEPTs Future Vision with a focus on efficiency and productivity of the interface between WAST and HBs.	No
Strategic Priority 4: Strategic Service Reviews SP4.3 - Ambulance Model Review (Please note – Now includes SP7.3 – Ambulance Benchmarking and Contracting)	SP4.3 (SP7.3)	AMB9	Ross Whitehead	Improved access to high quality non-emergency patient transport through system integration and efficiency gains.	Milestones for achievement of the NEPTs Future Vision set for WAST	Seek assurance from WAST on achievement of milestones	Q4	IMTP (now confirmed as an Annual Plan 2026/27)	G	Q4 - WAST is in the process of setting up a NEPTs Improvement Board as part of their IMTP. This will support the implementation of the future vision work.	Yes

NWJCC FOUNDATION PLAN IMPLEMENTATION - PROGRESS TRACKER Q4											
Strategic Priority	Unique Identifier (Strategic)	Unique Identifier (Local)	JCC Responsible Officer	Outcome	Deliverable/Output	Milestone	Starting Qtr	Delivery Qtr	RAG Rating G - On Track, A - Slight Slippage (Not all actions completed within Qtr), R - Significant Slippage (Project is more than 1 Qtr behind), B - Project Milestone Complete W - Project Not Yet Started	Progress Update / Comment	Included in Annual Plan 2026/27
Strategic Priority 4: Strategic Service Reviews SP4.4 - Mental Health Service Review	SP4.4	SP4.4	Adrian Clarke	Mental Health service model to be reviewed for optimum commissioning/value/productivity/sustainability	Recommendation on optimum service model for Mental Health Services	Develop the scope of the review	Q4	IMTP (now confirmed as an Annual Plan 2026/27)	G	Q2 - Project Not Yet Started Action to be completed after each of the individual service reviews have been completed during the Foundation phase. This will be the refresh of the current Mental Health Strategy and form the development of the MHLDVG Collaborative Commissioning Strategy. Timescale to be adjusted to commence in Q4 and transfer to IMTP. Q4 - This is a commissioning intention in the new IMTP. Discussions at JCC and CCLG have agreed that the scope for the Strategic Review of MH and the development of the Commissioning Strategy will be developed in Q1. This will have CEO and MH Exec Level project sponsors. Further timescales will follow from this.	Yes
Strategic Priority 4: Strategic Service Reviews SP4.4 - Mental Health Service Review	SP4.4	MHLD1	Adrian Clarke	Commissioned activity for patients in medium secure placements (adults) and CAMHS (Tier 4) are optimised.		Explore alternative funding models for various commissions.	Q2	Q4	G	Q2 - Timescale has slipped slightly as a result of recruitment into Assistant Director post. Delivery date changed to Q4. Service reviews to be undertaken and alternative funding models to be explored as part of this. Q3 - Caswell review commenced in Q2 and was completed in October 2025. Service currently in escalation and an action plan has been developed to address issues identified. Review of Ty Llewellyn completed in Q3. Review of CAMHS provision commenced in Q3 to be completed by end of Q4. Q4 - Tier 4 CAMHS - Key Strategic Priority in the new IMTP	Yes
Strategic Priority 4: Strategic Service Reviews SP4.4 - Mental Health Service Review	SP4.4	MHLD1	Adrian Clarke	Commissioned activity for patients in medium secure placements (adults) and CAMHS (Tier 4) are optimised.		Discuss possible commissioning options with relevant providers in order to agree the most appropriate way forward.	Q4	IMTP (now confirmed as an Annual Plan 2026/27)	G	Q2, Q3 - Options appraisal papers to be produced during Q4/IMTP following completion of service reviews. To inform commissioning options and an implementation plan. Q4 - Ongoing priority.	Yes
Strategic Priority 4: Strategic Service Reviews SP4.4 - Mental Health Service Review	SP4.4	MHLD1	Adrian Clarke	Commissioned activity for patients in medium secure placements (adults) and CAMHS (Tier 4) are optimised.	New contractual model agreed	Consider provider risks/impact of implementing alternative models, such as, occupancy-based funding.	Q4	IMTP (now confirmed as an Annual Plan 2026/27)	G	Q2, Q3 - Consider provider risks/impact of implementing alternative models, such as, occupancy-based funding. Q4 - Ongoing priority.	Yes
Strategic Priority 4: Strategic Service Reviews SP4.4 - Mental Health Service Review	SP4.4	MHLD1	Adrian Clarke	Commissioned activity for patients in medium secure placements (adults) and CAMHS (Tier 4) are optimised.		Introduce new agreed commissioning arrangements	Q4	IMTP (now confirmed as an Annual Plan 2026/27)	G	Q2, Q3 - Commissioning arrangements will be implemented following review findings. Q4 - This will continue to be progressed as part of the new IMTP.	Yes
Strategic Priority 4: Strategic Service Reviews SP4.4 - Mental Health Service Review	SP4.4	MHLD2	Adrian Clarke	NHS Wales capacity is optimised for JCC commissioned mental health in-patients.		Implementation Plan developed with providers to increase repatriation and mitigate any blocks to admission	Q4	IMTP (now confirmed as an Annual Plan 2026/27)	G	Q2, Q3 - Implementation plan will be developed following service reviews. Service reviews to be completed by Q4. Q4 - Implementation and repatriation plan in place with Caswell.	Yes
Strategic Priority 4: Strategic Service Reviews SP4.4 - Mental Health Service Review	SP4.4	MHLD2	Adrian Clarke	NHS Wales capacity is optimised for JCC commissioned mental health in-patients.	Bed utilisation in NHS Wales is optimised and prioritised before out of area placements are made	Implementation of agreed new commissioning arrangements.	Q4	IMTP (now confirmed as an Annual Plan 2026/27)	G	Q2, Q3 - Commissioning arrangements will be developed following service reviews. Service reviews to be completed by Q4. Q4 - Work ongoing. Medium Secure model and provision is a key priority in the new IMTP for Q1 and Q2 26/27.	Yes

NWJCC FOUNDATION PLAN IMPLEMENTATION - PROGRESS TRACKER Q4											
Strategic Priority	Unique Identifier (Strategic)	Unique Identifier (Local)	JCC Responsible Officer	Outcome	Deliverable/Output	Milestone	Starting Qtr	Delivery Qtr	RAG Rating G - On Track, A - Slight Slippage (Not all actions completed within Qtr), R - Significant Slippage (Project is more than 1 Qtr behind), B - Project Milestone Complete W - Project Not Yet Started	Progress Update / Comment	Included in Annual Plan 2026/27
Strategic Priority 4: Strategic Service Reviews SP4.4 - Mental Health Service Review	SP4.4	MHLD3	Adrian Clarke	All MHLd services commissioned by the NWJCC are reviewed to ensure optimum commissioning.		Collect regular and relevant data for each commissioned service.	Q2	Q2	B	Q2 - On target. Review of data collation and reporting has commenced. Progress has been impacted by staff capacity. Assistant Director commenced in post 11.8.25. Q3 - Developed a draft dashboard and data capture will continue to be refined to inform future decisions.	No
Strategic Priority 4: Strategic Service Reviews SP4.4 - Mental Health Service Review	SP4.4	MHLD3	Adrian Clarke	All MHLd services commissioned by the NWJCC are reviewed to ensure optimum commissioning.	Systematic approach is in place that will ensure continuous review of MHLd services commissioned by the NWJCC (starting with Perinatal).	Development of programme for systematic review	Q2	Q2	B	Q2 - Timescales for review of all commissioned services in development. Q3 - Following review, regular service development meetings with providers and commissioners will be scheduled in January 2026. Q4 - Scheduled service development meetings are now in place for all commissioned services.	No
Strategic Priority 4: Strategic Service Reviews SP4.4 - Mental Health Service Review	SP4.4	MHLD3	Adrian Clarke	All MHLd services commissioned by the NWJCC are reviewed to ensure optimum commissioning.		Complete and publish report relating to first review completed in this portfolio (Perinatal demand and Capacity)	Q1	Q1	B	Q2 - Perinatal review completed and published.	No
Strategic Priority 4: Strategic Service Reviews SP4.4 - Mental Health Service Review	SP4.4	MHLD3	Adrian Clarke	All MHLd services commissioned by the NWJCC are reviewed to ensure optimum commissioning.		Complete reviews of other portfolio services (Neuropsychiatry, Eating Disorder Outreach, Forensic Adolescent Consultation Service)	Q3	Q4	A	Q2, Q3 - Service reviews to be undertaken for each of the following by end of Q4: •Neuropsychiatry •Eating Disorders Review •FACS •CAMHS – Tier 4  Q4 - Neuropsychiatry review and Eating Disorder review commenced. Target completion Q1 26/27.  FACS and CaMHS - Tier 4 to progress Q1/Q2 26/27.	Yes
Strategic Priority 4: Strategic Service Reviews SP4.4 - Mental Health Service Review	SP4.4	MHLD4	Adrian Clarke	MHLd commissioning is driven by robust performance & activity data to inform Commissioning		Agree relevant data set for all commissioned services	Q2	Q2	B	Q2, Q3 - Initial KPI data set agreed with commissioned services. Being refined and further developed with providers as data output analysed.	No
Strategic Priority 4: Strategic Service Reviews SP4.4 - Mental Health Service Review	SP4.4	MHLD4	Adrian Clarke	MHLd commissioning is driven by robust performance & activity data to inform Commissioning	Data dashboard	Data to be collected from all relevant services at regular intervals.	Q2	Q2	B	Q2 - Data being collected from services on a monthly basis. Q3 - Data collection has commenced since July 2025.	No
Strategic Priority 4: Strategic Service Reviews SP4.4 - Mental Health Service Review	SP4.4	MHLD4	Adrian Clarke	MHLd commissioning is driven by robust performance & activity data to inform Commissioning		Development of a single dashboard.	Q3	Q4	G	Q2, Q3 - On target to deliver Q4. Q4 - Draft dashboard developed. Performance Management group established to further develop with performance and finance team.	Yes
Strategic Priority 4: Strategic Service Reviews SP4.4 - Mental Health Service Review	SP4.4	MHLD4	Adrian Clarke	MHLd commissioning is driven by robust performance & activity data to inform Commissioning		Data will be reviewed, analysed and utilised for performance management and future commissioning.	Q4	IMTP (now confirmed as an Annual Plan 2026/27)	G	Q2, Q3 - On target to deliver Q4. Q4 - System in place. Development ongoing.	Yes
Strategic Priority 4: Strategic Service Reviews SP4.4 - Mental Health Service Review	SP4.4	MHLD5	Adrian Clarke	Repatriation of medium-secure case management to NWJCC to enable the provision of a consistent service across NHS and independent services.		Consider and address any TUPE implications with CTM	Q2	Q2	B	Q2 - Cwm Taff HR lead identified and action plan in development for Transfer of Undertakings (Protection of Employment) (TUPE) of staff. Q3 - Legal advice is in the process of being obtained to determine which posts will be subject to TUPE due to the complexity of the staff group mix. Work underway to resolve by Q4. Q4 - TUPE Complete for the three Case Managers in Swansea Bay. Postholders transferred to JCC 1.4.26. BCUHB Case Manager consultation period extended to 1.5.26	No

NWJCC FOUNDATION PLAN IMPLEMENTATION - PROGRESS TRACKER Q4											
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Strategic Priority 4: Strategic Service Reviews SP4.4 - Mental Health Service Review	SP4.4	MHLD5	Adrian Clarke	Repatriation of medium-secure case management to NWJCC to enable the provision of a consistent service across NHS and independent services.	Directly employed case managers within the JCC	Define process for repatriation of case management personnel from relevant Health Boards.	Q2	Q3	B	Q2, Q3 - On target for Q3	No
Strategic Priority 4: Strategic Service Reviews SP4.4 - Mental Health Service Review	SP4.4	MHLD5	Adrian Clarke	Repatriation of medium-secure case management to NWJCC to enable the provision of a consistent service across NHS and independent services.		Enact re-alignment of employment subject to agreement and following due HR processes as required.	Q3	Q4	G	Q2, Q3 - On target for completion of TUPE by year end. Q4 - Three Case Managers transferred to JCC on the 1.4.26. BCUHB Case Manager consultation period extended to 1.5.26.	Yes
Strategic Priority 4: Strategic Service Reviews SP4.4 - Mental Health Service Review	SP4.4	MHLD6	Adrian Clarke	More inclusive services for those with Learning Disability or Neuro-Divergence.		Review service specifications for commissioned services to ensure that neurodivergent people and People with a Learning disability have equitable access to services	Q2	Q3	A	Q2 - Review service specifications for existing commissioned services and any new to ensure Learning Disabilities and Neurodivergent needs are included within inclusion criteria not exclusion criteria.  Q3 - Work has been undertaken to ensure that where possible services are neurodivergent and Learning Disability have inclusion not exclusion criteria. However, there is a broader piece of work that needs to commence as part of the IMTP to ensure that the model of provision overall is fit for purpose. This is a commissioning intention within the draft IMTP.  Q4 Update - As above. This is a commissioning intention in the new IMTP.	Yes
Strategic Priority 4: Strategic Service Reviews SP4.4 - Mental Health Service Review	SP4.4	MHLD6	Adrian Clarke	More inclusive services for those with Learning Disability or Neuro-Divergence.	Revised MHL D service specifications	Implement all revised specifications	Q3	Q4	A	Q2, Q3, Q4 - IMTP Action. As above any proposed changes to inclusion / exclusion criteria will need to be developed with service providers.	Yes
Strategic Priority 4: Strategic Service Reviews SP4.4 - Mental Health Service Review	SP4.4	MHLD6	Adrian Clarke	More inclusive services for those with Learning Disability or Neuro-Divergence.		Commence a process to ensure that services are enabled to treat and care for neuro divergent people and people with a Learning Disability.	Q4	IMTP (now confirmed as an Annual Plan 2026/27)	A	Q2, Q3, Q4 - IMTP Action. As above any proposed changes to inclusion / exclusion criteria will need to be developed with service providers	Yes
Strategic Priority 4: Strategic Service Reviews SP4.4 - Mental Health Service Review	SP4.4	MHLD7	Adrian Clarke	All MHL D services are commissioned and monitored against agreed policies and specifications.		Work with Governance team to review policies.	Q2	Q2	G	Q2, Q3, Q4 - Initial meeting held in Q2 to discuss existing policies. Continuous process.	Yes
Strategic Priority 4: Strategic Service Reviews SP4.4 - Mental Health Service Review	SP4.4	MHLD7	Adrian Clarke	All MHL D services are commissioned and monitored against agreed policies and specifications.	Complete suite of service specifications	Review specifications and policies relating to commissioned services to ensure all are up to date and remain relevant.	Q2	Q4	G	Q2, Q3, Q4 - Review specifications and ensure in place for all commissioned services.	Yes
Strategic Priority 4: Strategic Service Reviews SP4.4 - Mental Health Service Review	SP4.4	MHLD7	Adrian Clarke	All MHL D services are commissioned and monitored against agreed policies and specifications.		Ensure all policies are up to date.	Q3	Q4	G	Q2, Q3, Q4 - On target.	Yes
Strategic Priority 5: Pathway and Referral Management	SP5	SP5	Stacey Taylor	Develop a Framework for referrals to English providers to ensure value, quality and equity.		Develop scope review	Q1	Q1	B	Q1 - Complete.	No
Strategic Priority 5: Pathway and Referral Management	SP5	SP5	Stacey Taylor	Develop a Framework for referrals to English providers to ensure value, quality and equity.	Agree and implement new commissioning and delivery models.	Identify project teams	Q1	Q1	B	Q1 - Project Team arranged and meetings scheduled. Project Board and Working Group meeting are also now in place and scheduled.	No

NWJCC FOUNDATION PLAN IMPLEMENTATION - PROGRESS TRACKER Q4											
Strategic Priority	Unique Identifier (Strategic)	Unique Identifier (Local)	JCC Responsible Officer	Outcome	Deliverable/Output	Milestone	Starting Qtr	Delivery Qtr	RAG Rating G - On Track, A - Slight Slippage (Not all actions completed within Qtr), R - Significant Slippage (Project is more than 1 Qtr behind), B - Project Milestone Complete W - Project Not Yet Started	Progress Update / Comment	Included in Annual Plan 2026/27
Strategic Priority 5: Pathway and Referral Management	SP5	SP5	Stacey Taylor	Develop a Framework for referrals to English providers to ensure value, quality and equity.	Referral Framework	Develop implementation plans e.g. action plans and task and finish project	Q2	Q2	B	Q2 - Scope describing the Implementation Plan in place and Task and Finish Group and Project Board TOR and meetings in place. Action Logs also in place.	No
Strategic Priority 5: Pathway and Referral Management	SP5	SP5	Stacey Taylor	Develop a Framework for referrals to English providers to ensure value, quality and equity.		Initial Data review and analysis of phase 1 scope	Q2	Q2	B	Q2 - Total spend, waiting times data, total number of patients, referral destination (provider) per speciality, demographic referrals have been reviewed and analysed.	No
Strategic Priority 5: Pathway and Referral Management	SP5	SP5	Stacey Taylor	Develop a Framework for referrals to English providers to ensure value, quality and equity.		Ongoing Data review and analysis of phase 1 scope.	Q3	Q3	B	Q3 - Phase 1 has been completed with input from Commissioning Teams and through the Working Group reported up to the Referral Management Board. Reviewing the prioritising of resources to narrow down the scope in relation to greatest benefit. Q4 - Narrowed down the scope in relation to the greatest benefit being agreed with the project board. Final report for Phase 1 completed and to be presented to CCLG and SSCG in March 2026.	No
Strategic Priority 6: Manchester Arena Inquiry Response	SP6	SP6	Ross Whitehead	Enable a NWJCC Commissioner response to the Manchester Arena Inquiry		Develop review scope	Q1	Q1	B	Q2 - Review scope developed in line with the scope for the collaborative assessment workshop held on 27/06/2025	No
Strategic Priority 6: Manchester Arena Inquiry Response	SP6	SP6	Ross Whitehead	Enable a NWJCC Commissioner response to the Manchester Arena Inquiry	Commissioner response to 106 recommendations from MAI review	Identify project teams	Q1	Q1	B	Q2 - Project team identified and meetings in place as per project requirement. Regular update reports made to CCLG and JCC.	No
Strategic Priority 6: Manchester Arena Inquiry Response	SP6	SP6	Ross Whitehead	Enable a NWJCC Commissioner response to the Manchester Arena Inquiry		Develop PIDs	Q1	Q1	B	Q2 - PID developed and signed off by SLT	No
Strategic Priority 6: Manchester Arena Inquiry Response	SP6	SP6	Ross Whitehead	Enable a NWJCC Commissioner response to the Manchester Arena Inquiry		Make recommendations to Joint Committee	Q1	Q4	A	Q2, Q3 - Recommendations will be presented to the Joint Committee following the completion of the legal review, the independent external review, and stakeholder workshops. Q4 - Report and assessment completed and commissioner assessment will be considered at CCLG and PPF sub-committee in Q1 2026/27.	No
Strategic Priority 6: Manchester Arena Inquiry Response	SP6	SP6	Ross Whitehead	Enable a NWJCC Commissioner response to the Manchester Arena Inquiry		Seek legal advice on recommendations	Q1	Q1	B	Q2 - Legal advice received on the 24/06/2025 and initial feed back has been provided via the relevant mechanisms. Advice will be used to form part of the final recommendations to be made to the Joint Committee	No
Strategic Priority 6: Manchester Arena Inquiry Response	SP6	SP6	Ross Whitehead	Enable a NWJCC Commissioner response to the Manchester Arena Inquiry		Broader assessment workshop with WG/DOPs	Q2	Q2	B	Q2 - A series of workshops was delivered by WAST to Health Boards' Directors of Planning, Commissioning, and EPRR on 06/03, 13/03, 20/03, and 17/04. A discussion workshop with Health Boards was held on 27/06, and a further workshop with Health Boards and WAST was held on 26/09.	No

NWJCC FOUNDATION PLAN IMPLEMENTATION - PROGRESS TRACKER Q4											
Strategic Priority	Unique Identifier (Strategic)	Unique Identifier (Local)	JCC Responsible Officer	Outcome	Deliverable/Output	Milestone	Starting Qtr	Delivery Qtr	RAG Rating G - On Track, A - Slight Slippage (Not all actions completed within Qtr), R - Significant Slippage (Project is more than 1 Qtr behind), B - Project Milestone Complete W - Project Not Yet Started	Progress Update / Comment	Included in Annual Plan 2026/27
Strategic Priority 6: Manchester Arena Inquiry Response	SP6	SP6	Ross Whitehead	Enable a NWJCC Commissioner response to the Manchester Arena Inquiry		Commission and undertake independent assessment	Q2	Q3	B	Q2, Q3 - Slight delay due to the single tender process. An independent reviewer has been identified, and expected to complete their findings in Q4 (Q4). Q4 - Assessment complete.	No
Strategic Priority 6: Manchester Arena Inquiry Response	SP6	SP6	Ross Whitehead	Enable a NWJCC Commissioner response to the Manchester Arena Inquiry		Proposed response to Joint Committee for approval	Q3	Q3	A	Q4 - Report and assessment completed and commissioner assessment will be considered at CCLG and PPF sub-committee in Q1 2026/27.	No
Strategic Priority 6: Manchester Arena Inquiry Response	SP6	SP6	Ross Whitehead	Enable a NWJCC Commissioner response to the Manchester Arena Inquiry		Formally respond to WAST on recommendations	Q4	Q4	A	Q4 - Report and assessment completed and commissioner assessment will be considered at CCLG and PPF sub-committee in Q1 2026/27. Formal response to WAST will be made following the above governance process.	No
Strategic Priority 7: Focus on Benchmarking and Contracting	SP7	SP7	Stacey Taylor	Services commissioned by the JCC will be compared to those elsewhere in Wales and the UK to ensure cost parity, access equity and performance equality.	Deliverables included in individual services (SP7 B&C7.1 to SP7 B&C7.4)	Milestones included in individual services (SP7 B&C7.1 to SP7 B&C7.4)	Q1	Q3	B	Q2 - Individual services have been reviewed and compared and updates have been taken to CCLG. Expectation that this moves into delivery. Q3 - Progress on benchmarking has stalled due to ongoing rebasing of costs by Welsh providers, this is likely to require consideration as part of the development of the IMTP 2026 - 2029. Q4 - Now considered as part of the IMTP 2026 - 2029 through a commissioning lens. Agreed to mark milestone as complete as part of the workplan linked to the Foundation Plan.	No
Strategic Priority 7: Focus on Benchmarking and Contracting	SP7	B&C 7.1	Stacey Taylor/Mel Wilkey	ALAS		Develop scope for the ALAS review	Q1	Q1	B	Q2 - There is a delay in agreeing on the CEO and CCLG leads and arranging engagement to discuss the scope. Work on the scope for the ALAS review has currently been paused, awaiting direction from SRO and CEO sponsor. Q3 - The Commissioning Team have proposed that the ALAS Review is included as a commissioning intention in the 2026-2029 IMTP to signal the need for an external resource to support the review. Q4 - Following further discussions with the Director of Commissioning for Specialised Services it has been agreed to refocus efforts in other areas to drive better value and will therefore not be progressing the ALAS review at this stage. Agreed to mark milestone as complete.	No

NWJCC FOUNDATION PLAN IMPLEMENTATION - PROGRESS TRACKER Q4											
Strategic Priority	Unique Identifier (Strategic)	Unique Identifier (Local)	JCC Responsible Officer	Outcome	Deliverable/Output	Milestone	Starting Qtr	Delivery Qtr	RAG Rating G - On Track, A - Slight Slippage (Not all actions completed within Qtr), R - Significant Slippage (Project is more than 1 Qtr behind), B - Project Milestone Complete W - Project Not Yet Started	Progress Update / Comment	Included in Annual Plan 2026/27
Strategic Priority 7: Focus on Benchmarking and Contracting	SP7	B&C 7.1	Stacey Taylor/Mel Wilkey	ALAS		Identify project team	Q1	Q1	B	Q2 - The identification of the Project Manager and Team is pending and is required as soon as possible, the project scope is incomplete, and a team meeting needs to be arranged. Work on the scope for the ALAS review has currently been paused, awaiting direction from SRO and CEO sponsor. Q3 - The Commissioning Team have proposed that the ALAS Review is included as a commissioning intention in the 2026-2029 IMTP to signal the need for an external resource to support the review. Q4 - Following further discussions with the Director of Commissioning for Specialised Services it has been agreed to refocus efforts in other areas to drive better value and will therefore not be progressing the ALAS review at this stage. Agreed to mark milestone as complete.	No
Strategic Priority 7: Focus on Benchmarking and Contracting	SP7	B&C 7.1	Stacey Taylor/Mel Wilkey	ALAS		Develop PID	Q2	Q2	B	Q2 - Work on the scope for the ALAS review has currently been paused, awaiting direction from SRO and CEO sponsor. Q3 - The Commissioning Team have proposed that the ALAS Review is included as a commissioning intention in the 2026-2029 IMTP to signal the need for an external resource to support the review. Q4 - Following further discussions with the Director of Commissioning for Specialised Services it has been agreed to refocus efforts in other areas to drive better value and will therefore not be progressing the ALAS review at this stage. Agreed to mark milestone as complete.	No
Strategic Priority 7: Focus on Benchmarking and Contracting	SP7	B&C 7.1	Stacey Taylor/Mel Wilkey	ALAS		Develop implementation plan	Q2	Q3	B	Q2 - Work on the scope for the ALAS review has currently been paused, awaiting direction from SRO and CEO sponsor. Q3 - The Commissioning Team have proposed that the ALAS Review is included as a commissioning intention in the 2026-2029 IMTP to signal the need for an external resource to support the review. Q4 - Following further discussions with the Director of Commissioning for Specialised Services it has been agreed to refocus efforts in other areas to drive better value and will therefore not be progressing the ALAS review at this stage. Agreed to mark milestone as complete.	No

NWJCC FOUNDATION PLAN IMPLEMENTATION - PROGRESS TRACKER Q4											
Strategic Priority	Unique Identifier (Strategic)	Unique Identifier (Local)	JCC Responsible Officer	Outcome	Deliverable/Output	Milestone	Starting Qtr	Delivery Qtr	RAG Rating G - On Track, A - Slight Slippage (Not all actions completed within Qtr), R - Significant Slippage (Project is more than 1 Qtr behind), B - Project Milestone Complete W - Project Not Yet Started	Progress Update / Comment	Included in Annual Plan 2026/27
Strategic Priority 7: Focus on Benchmarking and Contracting	SP7	B&C 7.4	Mel Wilkey	Immunology		Develop scope for Immunology Review	Q1	Q1	B	Q2 - Scope completed.	No
Strategic Priority 7: Focus on Benchmarking and Contracting	SP7	B&C 7.4	Mel Wilkey	Immunology		Prepare a report to summarise findings and recommend next steps	Q2	Q2	B	Q2 - Report completed and presented to CCLG on 26/08/2025. Recommendations were discussed and noted at CCLG, will go back in November 2025 for sign off. Q3 - Report produced and formal support given at Joint Committee on 25/11/2025. Milestone closed, for the next stage of implementation the work will be co-led by the Medical and Specialised Services Directorates.	No
Strategic Priority 7: Focus on Benchmarking and Contracting	SP7	B&C 7.4	Mel Wilkey	Immunology		Identify working group	Q1	Q1	B	Q2 - An internal working group was established to develop the report that was presented to the CCLG on 26/08/2025. The implementation plan will set out the structure for taking forward the recommendations.	No
Strategic Priority 7: Focus on Benchmarking and Contracting	SP7	B&C 7.2	Mel Wilkey/Stacey Taylor	Cystic Fibrosis		Cardiac Commissioning team to review report for support	Q1	Q1	B	Q2 - Report of the review findings has been completed which can be used for phase 2. It has been shared with the working group which includes the service for comments. It has also been supported by the cardiac commissioning team. It also awaits support from women and children commissioning team which is due in July. Report and proposed next steps have been presented and have now been finalised. Report presented to SSCG on 07/08/2025 and CCLG on 26/08/2025, supported but no formal confirmation of this currently. Report will direct the intentions for Phase 2.	No

NWJCC FOUNDATION PLAN IMPLEMENTATION - PROGRESS TRACKER Q4											
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Strategic Priority 7: Focus on Benchmarking and Contracting	SP7	B&C 7.2	Mel Wilkey/Stacey Taylor	Cystic Fibrosis		Report of work and findings shared with project team for information and outline of next steps for final review	Q2	Q2	B	Q2 - Report of work and findings and next steps shared with project team and service and outline of next steps for final review completed.	No
Strategic Priority 7: Focus on Benchmarking and Contracting	SP7	B&C 7.2	Mel Wilkey/Stacey Taylor	Cystic Fibrosis		Future proofing and update of the dashboard	Q2	Q2	B	Q2 - Dashboard now in place and functioning.	No
Strategic Priority 7: Focus on Benchmarking and Contracting	SP7	B&C 7.2	Mel Wilkey/Stacey Taylor	Cystic Fibrosis		Submission of final report to SCCG to complete phase 1	Q2	Q2	B	Q2 - Final report submitted to SSCG on 07/08/2025 and CCLG on 26/08/2025 awaiting formal feedback.	No
Strategic Priority 8: Continuing Healthcare and Third Sector SP8.1 - Specialised Palliative Care	SP8	SP8.1	Adrian Clarke	The commissioning of the hospice sector in Wales is streamlined	Hospices Phase 1 - To develop appropriate governance and assurance for the allocation of an additional £3m to the sector by December 2025	<ul style="list-style-type: none"> <li>Hospices PID</li> <li>Scope developed</li> <li>Establishment of project team</li> <li>Planning and development of PID for phase 2</li> <li>Commissioning options paper</li> <li>Allocation of £3m to the sector - letters and emails with Welsh Gov</li> </ul>	Q2	Q2	B	Q2 - Almost complete - briefings currently taking place within Welsh Government. Funding to be released from WG and enabled through existing HB contracts. Q3 - 16/12/2025 Complete.	No
Strategic Priority 8: Continuing Healthcare and Third Sector SP8.1 - Specialised Palliative Care	SP8	SP8.1	Adrian Clarke	The commissioning of specialist palliative care in Wales is commissioned effectively	Hospices Phase 2 -To develop a hospice commissioning framework and associated guidance by April 2026	<ul style="list-style-type: none"> <li>First project team meeting</li> <li>Exploration and development of procurement approach</li> <li>High level commissioning approach outlined</li> <li>Engagement workshops with Health Boards, with hospices and broader stakeholders</li> <li>Options paper to JCC</li> </ul>	Q2	Q3	B	Q2 - On Target. Q3 - 16/12/25 slight slippage due to capacity constraints - impacted areas are Approach outlined - revised timeline. Q4 - Completed approved by Joint Committee published by Welsh Government.	No

NWJCC FOUNDATION PLAN IMPLEMENTATION - PROGRESS TRACKER Q4											
Strategic Priority	Unique Identifier (Strategic)	Unique Identifier (Local)	JCC Responsible Officer	Outcome	Deliverable/Output	Milestone	Starting Qtr	Delivery Qtr	RAG Rating G - On Track, A - Slight Slippage (Not all actions completed within Qtr), R - Significant Slippage (Project is more than 1 Qtr behind), B - Project Milestone Complete W - Project Not Yet Started	Progress Update / Comment	Included in Annual Plan 2026/27
Strategic Priority 8: Continuing Healthcare and Third Sector SP8.1 - Specialised Palliative Care	SP8	SP8.1	Adrian Clarke	The commissioning of specialist palliative care in Wales is commissioned effectively	Hospices Phase 3 - Develop a commissioning framework for Specialist Palliative Care by April 2027	<ul style="list-style-type: none"> <li>Finalise commissioning framework</li> <li>Outline process for full procurement process</li> <li>Liaison with Health Boards re extant contract arrangements, end points and opt out possibilities</li> <li>Market testing (workshops – resource intensity)</li> <li>Development of National Service Specification <b>Quarter 1 2026</b></li> <li>Commence procurement process (12-18 months)</li> <li>Develop PID for phase 3 (will also have a programme of activity for approx. 18 months)</li> </ul>	Q3	Q4	B	Q2 - On Target. Q3 - Not started 16/12/2025 Q1 of 2026-27 activity, capacity constraints - particularly for baseline work (escalated to SROs) Q4-Discussions ongoing with Welsh Government regarding implementation of the hospices commissioning framework through 2026/2027, as such this action likely to be reprofiled/renegotiated	No
Strategic Priority 8: Continuing Healthcare and Third Sector SP8.2 - Voluntary Sector Framework	SP8	SP8.2	Adrian Clarke	Commissioning of the volunteer sector is streamlined	Voluntary Sector Framework: Develop a NHS Framework for commissioning national and regional services provided to Health Boards and NHS Trusts by Third Sector organisations in Wales	<ul style="list-style-type: none"> <li>PID Development</li> <li>Review initial and basic baseline mapping</li> <li>Establish cross Health Board/JCC project arrangements</li> </ul>	Q2	Q2	G	Q2, Q3 - Some slippage due to capacity and availability of information. Chief Commissioner Report reprofiled to Q3 2026 Q4 - Health Board project arrangements in place, engagement sessions with all County Voluntary Councils initial baseline mapping on target for 31/03/2026. Framework development reprofiled to Q1 26/27.	Yes
Strategic Priority 8: Continuing Healthcare and Third Sector SP8.3 - CHC/Direct Payments	SP8	SP8.3	Adrian Clarke	JCC to offer support to Powys in implementation of direct payments	Role of JCC or otherwise still to be finalised	<ul style="list-style-type: none"> <li>Development of PID</li> <li>Identification of project support</li> <li>Workstreams being led by Powys Project Manager</li> </ul>	Q3	Q4	B	Q3 - •Draft PID under development •Project support secured Q4 - Limited input required from JCC due to governance and capacity being within Powys Health Board	No
Legacy Priorities	LP	LPAMB7	Ross Whitehead	Delivery of NEPTs Future Vision to improve access to high quality patient transport through system integration and efficiency gains.		Future Vision Statement	Q4 (2024-2025)	Q4 (2024-2025)	B	Q4 (2024-2025) - Milestone complete.	No
Legacy Priorities	LP	LPAMB7	Ross Whitehead	Delivery of NEPTs Future Vision to improve access to high quality patient transport through system integration and efficiency gains.	NEPTS Future Vision Statement approved by Joint Committee	NEPTS Future Vision Statement approved by Joint Committee	Q4 (2024-2025)	Q2	B	Q4 - NEPTS Future Vision Statement approved by Joint Committee in March 2025. Milestone complete.	No

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Legacy Priorities	LP	LPSS14	Mel Wilkey	Equitable access to Specialised Paediatric Ophthalmology for the population of Wales.		Development of future model	Q2	Q3	R	Q2 - Workshop held with all HBs as well as Alder Hey in February 2025. The specialised / non-specialised Ophthalmic services for children from the Royal College of Ophthalmologists were discussed in order to collate information from the HBs regarding their current service provision. Further work is required before agreeing the scope of the tertiary service. These details will be used to develop the draft service specification. Q3 - Workshop held with Health Boards on 20/11/2025, draft service specification discussed and developed. To be taken to the Policy Group on 16/12/2025, and if approved will go out for consultation. Q4 - Service specification has gone out for consultation, closing on 24/03/2026. Comments will be considered and further updates made where required. Regarding the development of a future model, as this is not expected to be cost neutral then it is likely to be considered further in 2027-28 IMTP, pending approval from Joint Committee.	No
Legacy Priorities	LP	LPSS14	Mel Wilkey	Equitable access to Specialised Paediatric Ophthalmology for the population of Wales.	Recommendations to Specialised Services Commissioning Group and then to JCC on commissioning model	Proposal for implementation to SS Commissioning Group	Q4	IMTP (now confirmed as an Annual Plan 2026/27)	R	Q4 - Service specification has gone out for consultation, closing on 24/03/2026. Comments will be considered and further updates made where required. Regarding the development of a future model, as this is not expected to be cost neutral then it is likely to be considered further in 2027-28 IMTP, pending approval from Joint Committee.	No
Legacy Priorities	LP	LPSS8	Mel Wilkey	To designate a provider for the Specialist Auditory Implant Device Service for South East Wales, South West Wales and South Powys.		Revised designated provider submission	Q2	Q2	B	Q2 - In August 2024, CVUHB requested a 6 month pause to the designation of provider process to conduct an internal review of all audiology pathways. A revised submission was not received. Ongoing performance concerns has led to the recommendation by the Commissioning Team to the Director of Specialised Services that the S Wales service is put into Level 3 of the escalation framework. As such the designated provider process is on hold. Q3 - The service is now in Escalation Level 3. The JCC is holding monthly meetings with the provider to gain assurance via an action plan and revised trajectory. Q4 - The service remains in Escalation Level 3, the designated process remains paused. Therefore, recommendation to mark this milestone as closed with a view that provider escalation management at C&V will continue for 2026/27	No
Legacy Priorities	LP	LPSS8	Mel Wilkey	To designate a provider for the Specialist Auditory Implant Device Service for South East Wales, South West Wales and South Powys.		Re- commence designated provider process.	Q3	Q4	B	Q3 - Unable to proceed until the service has been de-escalated. Q4 - The service remains in Escalation Level 3, the designated process remains paused. Therefore, recommendation to mark this milestone as closed with a view that provider escalation management at C&V will continue for 2026/27.	No
Legacy Priorities	LP	LPSS8	Mel Wilkey	To designate a provider for the Specialist Auditory Implant Device Service for South East Wales, South West Wales and South Powys.	Conclude designated provider process	Designate provider.	Q4	IMTP (now confirmed as an Annual Plan 2026/27)	B	Q3 - Unable to proceed until the service has been de-escalated. Q4 - The service remains in Escalation Level 3, the designated process remains paused. Therefore, recommendation to mark this milestone as closed with a view that provider escalation management at C&V will continue for 2026/27.	No

NWJCC FOUNDATION PLAN IMPLEMENTATION - PROGRESS TRACKER Q4											
Strategic Priority	Unique Identifier (Strategic)	Unique Identifier (Local)	JCC Responsible Officer	Outcome	Deliverable/Output	Milestone	Starting Qtr	Delivery Qtr	RAG Rating G - On Track, A - Slight Slippage (Not all actions completed within Qtr), R - Significant Slippage (Project is more than 1 Qtr behind), B - Project Milestone Complete W - Project Not Yet Started	Progress Update / Comment	Included in Annual Plan 2026/27
Legacy Priorities	LP	LPSS9	Mel Wilkey	A Functional Neurosurgery Service for Welsh residents with movement disorders is secured.		Conclude urgent temporary service change arrangements.	Q2	Q3	B	Q2 - North Bristol Pathway for deep brain stimulation was reopened 21/08/2025 and temporary pathway to University College London Hospital (UCLH) extended to March 2026 to ensure continuity of care.	No
Legacy Priorities	LP	LPSS9	Mel Wilkey	A Functional Neurosurgery Service for Welsh residents with movement disorders is secured.		Develop future policy, service model and service specification.	Q3	Q4	A	Q2 - Policy for deep brain stimulation has been approved by Policy Group, paper in development to outline proposals for an FNS to be taken through the JCC governance process from October 2025. Clinical workshop on service specification development planned for late October. Q3 - Service specification has been sent out for consultation on the 25/11/2025 for 6 weeks. Q4 - Specification consultation is underway and will be managed as part of the FNS designated provider process.	No
Legacy Priorities	LP	LPSS9	Mel Wilkey	A Functional Neurosurgery Service for Welsh residents with movement disorders is secured.	Proposal to JCC on designated provider against agreed service model for South Wales	Commence designated provider process, consider any new model specifications and any implications that require engagement/consultation.	Q4	IMTP (now confirmed as an Annual Plan 2026/27)	A	Q3 - Designated provider process planning has commenced with expressions of interest to be invited from providers by 06/01/2026. There may be a potential delay to start of designation process as further assurance requested by SSCG. Q4 - Designated process will start in Q1 2026-27, current temporary pathway has been extended to accommodate to this new timeline so patient impact is fully managed.	No
Legacy Priorities	LP	LPSS9	Mel Wilkey	A Functional Neurosurgery Service for Welsh residents with movement disorders is secured.	Proposal to JCC on designated provider against agreed service model for South Wales	Designate provider.	Q4	IMTP (now confirmed as an Annual Plan 2026/27)	A	Q4 - Milestone delayed start - Designated process will start in Q1 2026-27, current temporary pathway has been extended to accommodate to this new timeline so patient impact is fully managed. Provider will be designated by Q3 2026/27.	No