Agenda Item
3.3

Joint Commissioning Committee

NWJCC Annual Plan 2026/27 – Progress Against Delivery as at end Quarter 1

Dyddiad y Cyfarfod / Date of Meeting	21/07/2026
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	Choose an item.
Awdur yr Adroddiad / Report Author	Alexander Crawford – Deputy Director of Corporate Planning & PMO Emma King – Assistant Director of Planning & Programmes (Interim) James Evans – Programme Manager
Cyflwynydd yr Adroddiad / Report Presenter	Georgina Galletly - Director of Corporate Planning & Strategy
Noddwr yr Adroddiad / Report Sponsor	Georgina Galletly, Director of Corporate Planning & Strategy

Pwrpas yr Adroddiad / Report Purpose	For Assurance

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/Group)		
Committee / Group / Individuals	**Date**	**Outcome**
Senior Leadership Team	17/06/2026	Noted with amendments
Planning, Performance and Finance Sub-Committee	02/07/2026	Noted /For assurance

1. SITUATION/BACKGROUND

The purpose of this paper is to provide a summary update position on progress against the delivery of the Strategic Priorities of the 2026/27 Annual Plan as at end of quarter 1 2026.

The NHS Wales Joint Commissioning Committee (NWJCC) Annual Plan 2026/27 sets out the organisation's strategic commissioning intentions for the year ahead within a three-year planning context. It builds on the Foundation Plan 2025/26 and marks the next phase in the NWJCC's development as a national commissioning organisation with a focus on strategic priorities that are progressing through structured areas of work with clear governance, planning and assurance arrangements.

The strategic priority areas of work in the 2026/27 Annual Plan include strategic reviews, deep dives and enabling projects, each having a clear scope/activity brief that was received by the Joint Committee at their meeting on 26th May 2026. Each activity brief provides clarity on purpose, scope, deliverables, milestones, intended outcomes, risks, dependencies, leadership and stakeholder engagement and it is against these elements of the activity brief that progress will be monitored.

This report provides an overview of progress position across the strategic priority areas as at the end of quarter 1 2026, and an indication of delivery confidence for the remainder of the year based on emerging risks and planned mitigations.

It should be noted that a formal report following the end of Quarter 1 including progress against all priorities in the 2026/2027 NWJCC Annual Plan, will be presented through NWJCC assurance reporting as part of the integrated performance report.

2. ASSESSMENT

2.1. End Quarter 1 Position – Delivery Status

The Joint Committee should note that assurance on progress against the Plan was received through CCLG and the JCC's Planning, Performance and Finance Committee as at the end of May 2026 position. This has now been updated with latest delivery data, drawn from project highlight reporting, and confidence ratings to reflect an end of quarter 1 position.

All strategic priority areas have made progress in quarter 1 with the core foundations for delivery now in place.

Table 2.1 gives a high-level RAG rating overview of delivery up to end of June 2026 against the Quarter 1 deliverables for each of the Strategic Priorities:

RAG Rating: ***BLUE - Complete, GREEN - On Track, AMBER - Slight Slippage or caution around delivery, RED - Significant Slippage or significant caution around delivery, WHITE – Project Not Yet Started***		
Strategic Priority	Quarter 1 Deliverables	RAG
Ambulance / 111 Review	• Overview Report including productivity and baseline performance pack across the four commissioning domains **– Q1**. • Initial gap analysis between current commissioning information and what the framework requires. **– Q1** • Engagement plan with WAST and health board partners **– Q1** Amber on basis that deliverables not fully achieved, but progress is ongoing.	
Cardiac Review	• Commence work with Shared Services to reduce TAVI device costs – **Q1/Q2** • Collate comparative provider cost/activity data (Wales & England) - **Q1/Q2** • Provider self-assessment against the Cardiac Surgery Service Specification - **Q1/Q2**	
Neo-Natal Review	• Presentation of findings of Mat/Neo Assessment to QSOC 27/4/2026 **– Q1** • Baseline review of current Neonatal commissioning via the JCC **– Q1** Amber on basis that workforce data collection is ongoing.	
Renal Deep Dive	• Commercial contracts – **Q1** • Commissioning commitments between providers and WKN/JCC – **Q1** • Analysis of current flows and activity – **Q1/Q2** • Pathway impacts and interdependencies – **Q1/Q2** • Quality and Outcomes – **Q1/Q2**	
Mental Health Review	• Planning phase of project development, including baseline financial and placement positions near completion. Slight slippage on project set up – **Q1** • Summary of strategic context and evidence base for medium and low secure provision and assessment of population need and demand. This has started and will be developed further with a first draft by July. **Q1/Q2**	
IPFR Deep Dive	• Due to start in **Q2** – No deliverables identified for **Q1**	

Thrombectomy Deep Dive	• Undertake review and document previous decisions, timelines and phasing. – **Q1** • Undertake review and utilisation of existing commissioned services and constraints to achieving the expected thrombectomy rates. – **Q1** • Link with NHS Performance and Improvement (P&I) to understand aims and timelines for the Stroke Regionalisation programme. – **Q1** Amber on basis that data review taking more time to progress than original planned timescales and further engagement with NHS P&I / networks required.	

Pathways & Referral	• Analyse patient pathways and identify opportunities for change: - **Q1/Q2**
	  ○ Identify pathway improvement and development opportunities across all products (provider/specialty/HB combinations).
	  ○ Continue to investigate the potential around a referral management system and process with a clear benefits realisation case. This will include expected KPIs targets for reduction in referrals that can be factored into JCC IMTP Planning and LTA discussion with providers for 2027/28.
	  ○ Continue to develop internal Dashboards to support analysis and understanding, including potential access to Referral data.	

Sustainability & Efficiency	• Collate insights and outputs from the 'Value and Sustainability' workshop to inform the development of an initial programme or project brief for further consideration by SLT. – **Q1** • Establish projects which will deliver savings. **- Q1** Amber on basis that whilst project governance has been established there is medium to low confidence in delivery across some key schemes and the focus is now to ensure a line of sight to improving confidence of delivery across the pipeline of savings opportunities.	

Table 2.1: Reporting against deliverables within the Strategic Priorities up to end of Quarter 1 2026/27

2.2. Assurance, Mitigations and Confidence Rating

Table 2.2 provides an indication of delivery confidence for the remainder of the year for each strategic priority area based on emerging risks and planned mitigations as at end of quarter 1.

This confidence rating will be closely monitored on a monthly basis and updated in future reporting to ensure transparency across the portfolio in a timely manner.

Delivery Confidence Rating: ***HIGH - On Track to achieve all deliverables*** ***MEDIUM - Caution around delivery/some deliverables may not be achieved*** ***RED – Significant caution around delivery/deliverables unlikely to be achieved***		
Strategic Priority	Assurances and Mitigations	Delivery Confidence Rating for 2026/27
Ambulance / 111 Review	• Engagement framework has been completed and inaugural meeting of the project board scheduled. • There has been some slippage due to the delay in establishing project organisation arrangements and the inability of securing dates for the inaugural project board. Work has however been recalibrated in order to develop a range of materials in advance of the meeting, that recovery of timescales can be made.	**Medium**
Cardiac Review	• Cardiac project governance is in place and CEO Sponsor, Lay Member, Clinical representative in attendance when required at the Project Board. Project Team meetings are in place tracking the key milestones and deliverables. • A self-assessment process aligned to the Cardiac Surgery Service Specification has been developed implemented and sent to providers to complete and return in early July 2026. Progress will be reported to the Project Board in July 2026. • Comparative provider cost and activity data for Wales and England has been collated and reviewed. Initial analysis has identified material cost and activity variances, which are being validated to ensure like-for-like comparison. Findings will inform further analysis and recommendations. • Risk in delivery has been identified within the demand and capacity modelling, this has experienced delays due to provider capacity and scope of the review. New potential providers have now been identified, and formal agreement will be subject to confirmation to deliver the commissioner brief. Meetings arranged for July 2026. A Demand and Capacity Modelling Funding SBAR has been drafted in readiness. Sign-off is dependent on provider cost estimations and is subject to receiving the full proposal by 31 July 2026.	**Medium**
Neo-Natal Review	Whilst work is ongoing through the project team, the delivery confidence going into Q2 is cautious at this	**Medium**

	stage to reflect the activity that needs to happen in Q2, including the decision whether to proceed with and procure a demand and capacity review. The following activity progressing will increase the confidence level: • Confirm project workstreams at July project team and board meetings • Progress the Demand & Capacity review alongside evidence gathering. Work will build on existing analysis, focusing on updated data, outcomes, and service effectiveness. • Re-engage external providers within the confines of a competitive process • Update BAPM-aligned data • Progress neonatal transport arrangements through ongoing discussions with health board clinical leads	
Renal Deep Dive	• The Welsh Kidney Network held an initial meeting to progress the deliverables in the agreed activity brief on 3rd June 2026. • An initial review of the commercial contracts and commissioning commitments between providers and analysis of current flows and activity has identified some early recommendations. • Consistency in contract monitoring data submitted by regional providers is required, to enable comparison and transparency, the structure of LTAs for the commissioned services of the WKN need to be standardised to allow benchmark activity across NHS Wales. • There is an inconsistency in the 'unit' and 'marginal' values of the commissioned services of the WKN that need to be understood further. • Initial outline of presentation tested with Independent member and Executive lead within the WKN, presentation presented at Welsh Kidney Network meeting 8th July 2026	**High**
Mental Health Review	• Project established and on track. • Baseline position in development. • Quarter 1 milestones on track with the exception of a slight delay to finalising project documentation. • Summary of strategic context, and integrated map of medium and low secure service provision for Welsh patients, including Independent Sector, Framework Providers – Wales and Out of Area beds is on track for completion in Q2. • Data requirements from Health Boards on Low Secure NHS placements may impact delivery	**High**

	against future milestones. This has been identified early in the project and engagement with Heads of Commissioning is in place. • Integrated overview of commissioned activity, financial investment, service activity, performance and outcomes across the system for medium and low secure patients at an all-Wales level on track for Q2. • A workshop to map Wales current process for referral management, placement sign off, and to interrogate data on length of stay and case management arrangements for inpatient provision in both independent sector and NHS beds is planned for Q2. Green on basis that deliverables due for completion in Q2 are in progress, but there is some slippage.	
Individual Patient Funding Requests (IPFR) Deep Dive	• The IPFR team has met with finance colleagues to review a draft Power BI dashboard based on the data required for this deep dive. There are some functional additions needed which are currently underway. In addition, there is some work being carried out by finance, ahead of typical schedule, to make the 2025-26 activity available for this deep dive. Once complete the IPFR team can then begin to build high level summaries which will form the basis of the deep dive. • The project has an amber status given the data position and is a change to the original planned timescales.	**Medium**
Thrombectomy Deep Dive	• The Thrombectomy Deep Dive is progressing in line with the agreed scope and remains positioned as an informative exercise to support future commissioning decisions rather than immediate decision-making. • The June Project Team discussion confirmed use of the project plan and RAID log, and the need for the output to provide a context-rich narrative around activity, pathway constraints, transport, benchmarking and cost variation. • The status is Medium because delivery remains dependent on timely access to reliable and comparable data, resolution of known data quality and interpretation issues, and securing further pathway, Bristol and WAST/transport inputs during July.	**Medium**
Pathways & Referral	• Project is fully established and on track. • Project is progressing well with alignment to scope and approach.	**High**

	• Initial compendium of services has been completed and passed out to commissioning leads to work on. • IPC Power BI report completed and published - This report details all non-contract approvals and payments for commissioners to examine in relation to patient pathways. • Finalised 'Pathways & Referral Management Activity Brief / Scoping Document' and 'Business as Usual vs Project Activity Report' presented to Project Board to clarify the outputs required for the remaining phases of the project.	

Sustainability & Efficiency	• Project established with governance arrangements in place
	• Clarified financial context and identified early opportunities
	• Delivery success will depend on:
	  ○ Rapid clarification of scope and boundaries
	  ○ Engagement with directorates, utilising existing mechanisms such as Deputy Leadership Team (DLT)
	  ○ Establishment of a robust financial tracking model
	  ○ Strong prioritisation of resource to ensure capacity to deliver
	  ○ Effective integration with existing programmes and finance processes.
		Medium

Table 2.2: Reporting against delivery confidence within the Strategic Priorities as at end of May 2026

2.3. Key Risks and Dependencies

The main risk that arises across the programmes concerns access to **data / data analysis** and capability within the JCC to deliver the data analytics required for the large projects. This is an area where we need to seek support from wider Health Board teams, whilst we work to build this capacity and capability within our own, internal teams. Meanwhile, options are being explored collaboratively within each of the priority areas with a view to increase capacity to support specific data analysis for these time-limited pieces of work.

3. REPORTING PROGRESS

The following key milestones have been set for reporting to Joint Committee on progress against the Strategic Priorities of the Annual Plan:

- **July - August 2026**: Findings of Deep Dives tested at CCLG ahead of Joint Committee workshop (noting caution around IPFR).
- **August 2026**: Workshop on findings of Deep Dives at Joint Committee.
- **September 2026**: Final Deep Dive reports and recommendations presented at Joint Committee.

- **September 2026**: Mid-year report on initial findings of Strategic Reviews, assessment and recommendations presented to Joint Committee.
- **December 2026**: Findings of Strategic Reviews presented and discussed at CCLG and sub-Committees ahead of final report circulation.
- **January 2027**: Final Strategic Review reports and recommendations formally received, alongside socialisation of the implementation plan, at Joint Committee.

Formal quarterly reporting on progress against all priorities within the 2026/2027 Annual Plan will include exception reports on issues for escalation as appropriate and be included in the integrated performance report for scrutiny by the Planning, Performance & Finance Committee and subsequently to Joint Committee.

4. ASSESSMENT

Objectives / Strategy	
Dolen i Amcan (au) Strategol CBC / Link to JCC Strategic Objectives(s)	Maximise Value
	If more than one applies please list below: Ensure Quality Reduce Duplication Improve Equity and Population Health Facilitate Integration
Dolen i Ddeddf Llesiant Cenedlaethau'r Dyfodol – Nodau Llesiant / Link to Wellbeing of Future Generations Act – Wellbeing Goals *150623-guide-to-the-fg-act-en.pdf (futuregenerations.wales)*	A Healthier Wales
	If more than one applies please list below:
Dolen i Hwyluswyr Ansawdd *(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) /* **Link to Enablers of Quality** *(Duty of Quality Statutory Guidance (gov.wales))*	Data to Knowledge
	If more than one applies please list below: Culture and Valuing People Leadership Learning, Improvement & Research Whole-systems Perspective
Dolen i Feysydd Ansawdd *(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) /*	Effective
	If more than one applies please list below: Efficient Equitable Person Centred

Link to Domains of Quality *(Duty of Quality Statutory Guidance (gov.wales))*	Timely Safe
Effaith Amgylcheddol/ Cynaliadwyedd (5R) / Environmental /Sustainability Impact (5Rs)	No - Not Applicable If more than one applies please list below:

Impact Assessment		
Ansawdd *Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Ansawdd? /* **Quality** *Have you undertaken a Quality Impact Assessment Screening?*	Yes: ☐	No: ☒
	Outcome:	If no, please include rationale below: QIA will be completed for the IMTP itself
Cydraddoldeb *Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Gydraddoldeb? /* **Equality** *Have you undertaken an Equality Impact Assessment Screening?*	Yes: ☐	No: ☒
	Outcome:	If no, please include rationale below: EQIA will be completed for the IMTP itself
Cyfreithiol / Legal	There are no specific legal implications related to the activity outlined in this report.	
Enw da / Reputational	There is no direct impact on the reputation of the Joint Committee as a result of the activity outlined in this report.	
	At this stage reporting on track with some areas of caution moving into Q2.	
Effaith Adnoddau *(Pobl /Ariannol) /* **Resource Impact** *(People / Financial)*	There is no direct impact on resources as a result of the activity outlined in this report.	
	There are capacity challenges in some activity areas, but these are being managed.	

5. RECOMMENDATIONS

Members of the Joint Commissioning Committee are asked to:

- **Note** progress against the strategic priority areas of the NWJCC 2026/27 Annual Plan as at end of Quarter 1 2026 (also noting that this is the most

up to date position, where sub-committee had reviewed end May 2026 position);

- **Take assurance** that delivery has commenced across all priority areas and is on track;
- **Note** the current RAG position;
- **Note** the delivery confidence for each strategic priority area noting key risks mitigations and dependencies;
- **Note** that the formal position at end of Quarter 1 detailing progress against all areas of the Annual Plan will be included in the NWJCC Integrated Performance Report;
- **Note and discuss** request for analytical support from Health Boards and **provide direction** on progressing this.