

Appendix 2: Detailed Commissioning Intentions

Ambulance Services and 111 Directorate		
<u>Key Purpose of Commissioning Intentions</u>		
<ul style="list-style-type: none"> • To commission effective and efficient services for the Welsh population • The provider and its Commissioners will maximise the opportunities offered within the commissioning framework. • The provider and its Commissioners will secure and optimise sufficient service capacity to respond to system demand. • The provider and its Commissioners will maximise productivity from available resources and demonstrate continuous improvement. • The provider and its Commissioners will develop a Value-Based approach to service commissioning and delivery, which enables an equitable, sustainable and transparent use of resources to achieve better outcomes for patients. • The provider and its Commissioners will collaborate to reduce and prevent harm and improve quality of service and outcomes for patients. • The provider and its Commissioners will collaboratively develop and deliver services that allow the provider to contribute to the wider health system through the modernisation of service delivery 		
Aim	Commissioning Intention 2026-27	What will success look like
Commission effective and efficient Emergency Ambulance Services for the Welsh population	<p>Enhancing the productivity of emergency ambulance services</p> <p>Optimisation of ambulance services capacity to deliver revised ambulance performance measures</p> <p>The development and optimisation of the evolved clinical response model</p> <p>Implementation of the JCC decision on Manchester Arena Inquiry recommendations.</p> <p>Development of the rural response</p>	<p>Productivity gains achieved, evidenced by improved resource utilisation, reduced conveyance volumes where clinically appropriate, and optimised resource deployment.</p> <p>Manchester Arena Inquiry recommendations implemented in line with JCC decision on the WAST R106 Capability Report.</p> <p>Enhanced rural response capability, reducing variation in access and improving equity for rural communities.</p>

<p>Improvement of survival rates for out of hospital cardiac arrest</p>	<p>Save a Life Cymru (SALC) to deliver a registry to enable improved survival rates from out of hospital cardiac arrest through analysis of standardised data, benchmarking and enhanced quality of care.</p> <p>Delivery of the Out of Hospital Cardiac Arrest Action Plan</p> <p>Broader role of SALC in improving OOHCA</p>	<p>OHCA registry fully implemented and operational in Wales, capturing standardised OHCA data across Wales.</p> <p>Comprehensive data analysis and benchmarking in place, enabling identification of variation and targeted quality improvement.</p> <p>Improved survival rates for out-of-hospital cardiac arrest, demonstrated through year-on-year improvement trajectory against national and international benchmarks.</p>
<p>Commission effective and efficient Non-Emergency Patient Transport Services for the Welsh population</p>	<p>Delivery of the priorities outlined by the Health and Social Care Committee and NEPTS Future Vision</p> <p>Optimise resource capacity to Increase the availability of resources to respond to planned care and patient discharge requests</p> <p>Align NEPTS resource capacity to meet to the patient and system demand for NEPT services (planned care, enhanced care and discharge and transfer)</p> <p>Utilise technology and introduce alternative methods to streamline journey booking and coordination processes to improve efficiency, responsiveness and improve patient experience.</p>	<p>Resource capacity optimised and aligned, ensuring timely response with reduced cancellations and delays.</p> <p>Improved system flow and discharge efficiency, evidenced by reduced hospital delays and better coordination with Health Boards.</p> <p>Technology-enabled booking and coordination processes fully implemented, streamlining journeys, improving responsiveness, and enhancing patient experience.</p> <p>Alternative transport solutions introduced where appropriate, reducing reliance on traditional NEPTS vehicles and improving flexibility.</p>
<p>Commission effective and efficient 111 Services for the Welsh population</p>	<p>The right sizing of NHS 111 Wales service capacity to respond to demand</p>	<p>Service capacity better aligned to meet forecast demand, evidenced by reduced abandoned calls,</p>

	<p>Maximise the productivity of NHS 111 Wales commissioned capacity</p> <p>Undertake a strategic demand and capacity review of NHS 111 Wales</p> <p>Development of the online infrastructure for NHS 111 Wales</p>	<p>improved answer times, and resilience during peak periods.</p> <p>Productivity gains achieved, with optimal utilisation of commissioned capacity.</p> <p>Enhanced digital infrastructure implemented, enabling improved online access, self-care advice, and integration with NHS Wales digital platforms.</p> <p>More timely access to clinical advice, demonstrated by improved call answer performance, reduced call waiting times, and positive patient experience feedback.</p>
<p>Commission effective and efficient Emergency Medical Retrieval and Transportation Services for the Welsh population</p>	<p>Revision of the EMRTS Commissioning Framework</p> <p>Delivery of a transition plan for new base.</p>	<p>Revised EMRTS Commissioning Framework completed and approved, providing clear service standards, governance, and performance expectations.</p> <p>Transition plan for the new base developed ensuring operational readiness and continuity of service during relocation.</p>
<p>Commission effective and efficient Adult Critical Care and Transfer Services for the Welsh population</p>	<p>Development of the Adult Critical Care and Transfer Service to meet current and future health board requirements</p> <p>Implement recommended outcome following hosting review of the Adult Critical Care and Transfer Service.</p> <p>Undertake a strategic review aligned to Health Board clinical service redesign</p>	<p>Adult Critical Care and Transfer Service developed to better meet current and future Health Board requirements, ensuring equitable access and resilience across Wales.</p> <p>Hosting review recommendations implemented, delivering an agreed hosting model that supports governance, accountability, and operational efficiency.</p>

		Strategic review completed and aligned to Health Board clinical service redesign, providing a clear roadmap for service configuration and investment priorities.
Commission effective and efficient Major Trauma Services for the Welsh population	<p>Development of a 5-10 year strategy for major trauma</p> <p>Review the Major Trauma Centre provision in line with the outcome of Peer Review and Gateway 5 Review.</p>	<p>A 5–10 year strategic plan for Major Trauma Services developed and agreed, setting out clear priorities for service development, workforce, and infrastructure.</p> <p>Review the Major Trauma Centre provision in line with the outcome of Peer Review and Gateway 5 Review focusing on interventions that deliver the greatest impact on patient outcomes and system resilience.</p>
Commission effective and efficient Neonatal Transport Services for the Welsh population	Work with the provider health boards to maintain a 24-hour affordable service for the population of South Wales.	A sustainable, 24-hour Neonatal Transport Service maintained for South Wales, ensuring safe and timely transfer of babies requiring specialist care.
Maternal and Neonatal Transport Review	Support the project team in progressing the Maternal and Neonatal Transformation review.	<p>Maternal and Neonatal Transport Transformation Review progressed to agreed milestones, with clear recommendations for future service configuration.</p> <p>Comprehensive engagement completed with Health Boards and key stakeholders to ensure alignment with national maternity and neonatal priorities.</p>
Development of a commissioning approach for both hospices and specialist palliative care	People requiring hospice provided care in Wales are able to access this as close to home as possible	A streamlined approach to the commissioning of the hospices sector in Wales, hospices sector on a more sustainable footing and more prudent use of resource through a lens on value, recommissioning and efficiency.

<p>To ensure services for people following sexual assault are commissioned to high quality and optimum cost</p>	<p>There is good access to services for people following sexual assault across Wales</p> <p>Resources are used prudently and to optimum effect</p> <p>There is a robust SARC commissioning framework in place between health and policing partners in Wales</p>	<p>People requiring care, treatment and support following sexual assault are able to access these in a timely way</p>
<p>To ensure voluntary sector services in Wales are commissioned in the most effective means</p>	<p>People requiring care that is best provided from the voluntary sector are able to access this as close to home as possible</p>	<p>A streamlined approach to the commissioning of the hospices sector in Wales, hospices sector on a more sustainable footing and more prudent use of resource through a lens on value, recommissioning and efficiency.</p>

Mental Health, Learning Disabilities and Vulnerable Groups Directorate

Key Purpose of Commissioning Intentions

To develop a collaborative commissioning strategy for Mental Health, Learning Disabilities and Vulnerable groups via the Collaborative Commissioning Group that is:

- Based on population need
- Improves population health and defines clear outcomes
- Reduces Health inequalities and improves equitable access to consistently high-quality health care across the pathway
- Considers opportunities for a prevention-based approach
- Delivers Value for Money and considers value-based healthcare approaches
- Considers efficiency and sustainability

Aim	Commissioning Intention 2026-27	What will success look like
Establish a MHLDVG Strategic Approach to Collaborative Commissioning.	To develop a collaborative commissioning strategy based on population need for MH, LD/Neurodivergence and VG to inform evidence-based commissioning and exploration of opportunities for national commissioning and national or local service delivery to drive improved population health outcomes and efficiency / value across the health system.	Scope of strategic review agreed, aligned to Health Board and Strategic programme for MH priorities. Collaborative Commissioning Strategy in place. Implementation plan developed and agreed, setting out clear priorities for service development, improved population health outcomes with efficiency / value targets across the health system.
<p>Children & Young Peoples Mental Health - To review population need, evidence base and opportunities for national commissioning with local delivery, to improve patient outcomes and drive efficiencies across the system.</p> <p>To ensure existing commissioned services deliver evidenced based, high quality, efficient and effective outcome-based service provision.</p>	<p>Tier 4 CAMHS – Develop a commissioning plan based on population need and evidence base and ensure current model of service provision meets need and delivers safe, high quality, efficient and effective, outcome focused service provision.</p> <p>Eating Disorders - Review population need and evidence base and ensure model of service provision meets need and delivers safe, high quality, efficient and effective, outcome focused</p>	<p>Commissioning plans in place for:</p> <ul style="list-style-type: none"> - Tier 4 CAMHS - Eating Disorders - FACS <p>With clearly defined and measurable Population & Patient Outcomes.</p> <p>System level Pathway analysis complete with service improvement, commissioning / re-commissioning considerations,</p>

	<p>service provision. Commission new service to meet unmet need if applicable</p> <p>FACS - Review population need and evidence base and ensure current model of service provision meets need and delivers safe, high quality, efficient and effective, outcome focused service provision.</p>	<p>System level efficiencies and value-based health targets</p> <p>Service specification and performance management arrangements in place for all commissioned services to monitor & ensure delivery of evidenced based, high quality, efficient and effective outcome-based service provision.</p>
<p>Adult Mental Health - Review population need, evidence base and opportunities for national commissioning with local delivery to improve patient outcomes and drive efficiencies across the system.</p> <p>Ensure existing commissioned services deliver evidenced based, high quality, efficient and effective outcome-based service provision.</p>	<p>High Secure Mental Health - To continue to work collaboratively with NHS England to ensure evidenced based, quality service provision for Welsh patients requiring High Secure care.</p>	<p>Collaborative service improvement and performance management systems in place with NHS England to ensure evidence based, high quality, efficient and effective outcome-based service delivery for the Welsh population</p>
	<p>Medium Secure Mental Health – Develop a commissioning plan based on population need and evidence base and ensure current model of service provision meets need and delivers safe, high quality, efficient and effective, outcome focused service provision.</p>	<p>Commissioning plan in place for MSU which sets out how we will optimise occupancy in NHS commissioned MSU based on patient need, repatriate patients placed out of area, reduce use of costly out of area placements, & improve patient flow across the whole pathway, potentially via a single commissioner for secure services.</p> <p>Performance management system and service specification in place with clear outcome measures for each commissioned service</p>
	<p>Low Secure Mental Health - Review population need and evidence base collaboratively with Health Boards & P&I to</p>	<p>LSU Commissioning plan developed based on strategic review of service model and pathways with HB colleagues & P&I.</p>

	<p>develop a service model to meet need and commission as appropriate</p>	
	<p>Neuropsychiatry - Review population need and evidence base and ensure current model of service provision meets need and delivers safe, high quality, efficient and effective, outcome focused service provision.</p>	<p>Revised service specification produced based on service review. Performance management system established to ensure safe, high quality, efficient and effective, outcome focused service provision. Recommendation on appropriate commissioner, nationally via JCC or locally via HB.</p>
	<p>Adult Eating Disorder - Review population demand, need and model of care, to ensure that commissioned provision meets need and delivers safe, high quality, efficient and effective, outcome focused service provision.</p>	<p>Commissioning plan produced collaboratively with NHS Performance & Improvement and other stakeholders, which includes consideration of ED pathway reviews being undertaken by Royal College of Psychiatrists and NHS P & I.</p> <p>Clear priorities agreed, aligned to the strategic direction to enhance earlier intervention through enhanced community provision, with plans for service improvement, commissioning / re-commissioning and improved population and patient outcomes.</p>
	<p>Perinatal Mental Health & Mother & Baby Unit - Review population need and evidence base and ensure current model of service provision meets need and delivers safe, high quality, efficient and effective, outcome focused service provision.</p>	<p>Commissioning plan produced with clear service development/ improvement objectives</p> <p>Service specification with outcome-based measures in place.</p>

		Clear performance management arrangements established.
	Models of Care for Females - Review population need, evidence base and current models of care for women within JCC commissioned MHLDVG services and identify any unmet need/ improvement plan for specific services or commissioning to meet gaps where appropriate.	Improved provision of specialised MH/LD provision for women in Wales, including secure care and perinatal provision. Repatriation plan and trajectory for patients placed out of area.
	Prison Mental Health Transfer - Support / lead Welsh workstream to reduce the delays in transfers from prison to mental health (MH) hospital and remission from MH hospital to prison - 1) Understand need and baseline 2) Identify service and system improvements within commissioned services.	Reduction in delays of transfers from prison to Mental Health//learning Disability hospitals for prisoners/patients who require assessment and/or treatment. Robust system of monitoring in place.
Specialist Learning Disabilities & Neurodivergence	To understand population need and evidence base and consider commissioning options at an all-Wales level for this population group. Ensure LD and ND needs are considered within JCC portfolio of commissioned services.	To ensure that the services commissioned by the MHLDVG division are able to meet the needs of people who are Neurodiverse and/or have a Learning Disability. Repatriation plan and trajectory for patients placed out of area.
Vulnerable Groups	Children & Young People Gender Provision - Review population need and evidence base and ensure current model of service provision meets need and delivers safe, high quality, efficient and effective, outcome focused service provision	Ensure that commissioned services are relevant to the current need of the population. Ensure that commissioned services are safe and meet appropriate quality thresholds.
	Adult Gender Service - Review population need and evidence base and ensure current model of service provision meets need and	Ensure that commissioned services are relevant to the current need of the population.

	delivers safe, high quality, efficient and effective, outcome focused service provision	Ensure that commissioned services are safe and meet appropriate quality thresholds.
	Gender Surgery – Participate in the planned review of the Gender Surgery Pathway that is due to be undertaken by NHSE in 2026. This will lead to a new specification being produced for gender surgery.	<p>Ensure that commissioned services are relevant to the current need of the Welsh population.</p> <p>Ensure that commissioned services are safe and meet appropriate quality thresholds.</p> <p>Establish some surgical provision within Wales if possible.</p>
	Skin Camouflage – To deliver the pilot programme for the Skin Camouflage Service in Wales, capturing appropriate performance data and reviewing the service after an initial 12 months	<p>Understand the data provided via the pilot project and understand the need for commissioning the service post April 2027</p> <p>Recommendations for commissioning 27/28.</p>
	Substance Misuse - Explore opportunities and resourcing for national commissioning in line with All Wales MH Strategy	<p>Strengthen understanding of stakeholder requirements with a view to commissioning National, regional and local provision where required.</p> <p>Agree resource requirements if national commissioning is required and supported by JCC.</p>
	Early onset dementia - Understand Population Need across Wales and explore feasibility and models for commissioning across Wales	Strengthen understanding of stakeholder requirements with a view to commissioning National, regional and local provision where required.

		Agree resource requirements if national commissioning is required and supported by JCC.
Frameworks	<p>Care Home Framework – The National Care Home Framework will be extended in 2026 and renewed in 2027. The Framework will be developed in collaboration between Health Boards and the JCC.</p> <p>The JCC will monitor and assess Care Homes on the Framework, to provide a rating for commissioners on their ability to provide safe, quality services whilst also ensuring best value for Wales.</p>	<p>Continued assurance that the National agreement remains legally compliant, is compliant regarding procurement regulation</p> <p>To ensure that all standards within the framework, are subject to current guidelines and best practice</p> <p>To ensure that all providers that are entered onto the framework, can meet the requirements of the framework agreement and are monitored to ensure ongoing compliance</p>
	<p>Hospital Framework – The National MH & LD Hospital Framework will be renewed in 2027. The Framework will be developed in collaboration between Health Boards and the JCC.</p> <p>The JCC will monitor and assess Hospitals on the Framework, to provide a rating for commissioners on their ability to provide safe, quality services whilst also ensuring best value for Wales.</p>	<p>Assurance that the National agreement remains legally compliant, is compliant regarding procurement regulation</p> <p>To ensure that all standards within the framework, are subject to current guidelines and best practice</p> <p>To ensure that all providers that are entered onto the framework, can meet the requirements of the framework agreement and are monitored to ensure ongoing compliance</p>
Futures Programme	Prevention Based Health Care - Explore opportunities within existing provision and on an	Improved physical & mental wellbeing, mortality, morbidity and patient outcomes

	<p>all-Wales basis for prevention-based health care approaches.</p> <p>Sharing recommendations with delivery partners.</p>	<p>including length of stay for population and existing patient cohort through consideration of prevention-based health care approaches and measures</p>
	<p>Nutrition - Implementation of Royal Psych recommendations within existing commissioned services</p>	<p>Improved physical & mental wellbeing, mortality, morbidity and patient outcomes including length of stay for population and existing patient cohort through consideration of prevention-based health care approaches and measures</p>
	<p>Physical Activity - Implementation of Royal Psych recommendations within existing commissioned services</p>	<p>Improved physical & mental wellbeing, mortality, morbidity and patient outcomes including length of stay for population and existing patient cohort through consideration of prevention-based health care approaches and measures</p>
	<p>Smoking - Implementation of Royal Psych recommendations within existing commissioned services</p>	<p>Improved physical & mental wellbeing, mortality, morbidity and patient outcomes including length of stay for population and existing patient cohort through consideration of prevention-based health care approaches and measures</p>
<p>Systems</p>	<p>Gatekeeping – The JCC will consider how access to the services that they commission is managed. Alternative models of access for Medium Security, CAMHS, Eating Disorders, Perinatal inpatient services and Neuropsychiatry will be considered.</p>	<p>Improved processes in place to ensure that access to specialised Mental Health & Learning Disabilities are decided in a fair and appropriate manner and that decisions are made by suitably qualified professionals following similar processes</p>

	<p>Review Need for all Wales approach to MH transport</p>	<p>Improved understanding of requirements of Health Boards in relation to the safe transport of patients between Mental Health/Learning Disabilities services.</p>
	<p>Performance Management & Value Based Health Care</p>	<p>Establishment of robust performance management system for commissioning of services for mental health, learning disabilities and vulnerable groups Establishment of value-based health care approach to the commissioning of mental health, learning disabilities and vulnerable groups</p>
	<p>Risk & Governance - Ensure robust risk and governance processes are in place for all MHLDVG commissioned services including review of serious incidents, complaints and compliments to identify unmet need and inform future commissioning of services</p>	<p>Processes in place to seek assurance from providers that commissioned services are safe and meet appropriate quality thresholds.</p>
	<p>Early Intervention & Prevention Opportunities – Explore opportunities for development of national commissioning but local delivery of early intervention & prevention interventions for at risk population groups</p>	<p>Lead National Alternative to Admissions programme for Children and Young People to ensure earlier intervention and prevention and quality of life outcomes for children, young people and families</p> <p>Lead Commissioning of digital online therapies work programme to ensure earlier intervention and prevention opportunities are maximised</p>

Specialised Services Directorate

Purpose of Commissioning Intentions:

To commission effective and efficient services for the Welsh population within the following specialised services commissioning teams:

- Cancer & Blood
- Cardiac
- Intestinal Failure
- Neurosciences, Long Term Conditions & Rare Diseases
- Welsh Kidney Network
- Women & Children

Aim	Commissioning Intention 2026-27	What will success look like
Cancer and Blood Commissioning Team		
To commission effective and efficient Selective Internal Radiotherapy (SIRT) for Hepatocellular Carcinoma (HCC) Services for people in Wales	Repatriation of service utilising designated provider process	Improved patient safety and outcomes and the reduce the burden of travel and inequality in access for patients
To commission effective and efficient Advanced Therapy Medicinal Products (ATMP) Services for people in Wales	To ensure access to new genetic diagnostics and new NICE approved advanced therapies	JCC medical director, as exec lead for ATMPs, is currently confirming Welsh Government's position with regard to service costs for ATMP delivery. If Welsh Government will not meet these costs directly, they will need to be included in the IMTP prioritisation process. Direct Funding from WG
To commission effective and efficient All Wales Medical Genomics Service	To ensure access to new genetic diagnostics and new NICE approved advanced therapies	Patients have equitable access to ATMP and genomic services in line with NICE and NHE recommendations.
To commission effective and efficient Hereditary Anaemias Services for people in Wales	To ensure patients with hereditary anaemias have timely, equitable access to high quality care to meet their needs and maximise their health outcomes	Patients in Wales have equitable and timely access to care and service's sustainability is assured.

To commission effective and efficient Bleeding Disorders (including Blood Products and drug therapies) Services for people in Wales	IBD Blood Products	Sustainable resourced services to ensure timely access to treatment for patients.
To commission effective and efficient Clinical Immunology (Primary Immune Deficiency) Services for people in Wales	Immunoglobulin capacity review as a result of activity in 24/25 and forecast activity in 25/26 exceeding the baseline and supply chain issues/inflationary costs Development of Commissioning Framework	Immunology services are equitable across Wales and access to immunoglobulins is equitable and evidence based.
To commission effective and efficient Liver Surgery for cancer Services for people in Wales	Liver surgery: resection for primary and metastatic liver cancer review as activity has increased in recent years from 120 (historic baseline) in 22/23 to 180 in 24/25 (forecast further increase in 25/26). Clinical lead expects this increase to be recurrent.	To ensure sustainable resourcing to deliver timely Liver Surgery for cancer.
To commission effective and efficient Positron Emission Tomography (PET) Scan Services for people in Wales	To commission increasing demand for PET scan service in line with NHS England	To enable equitable activity to England. Access for new indications approved by the All-Wales PAT Advisory Group is enabled through the opening of fixed scanner sites in North Wales and Swansea.
To commission effective and efficient Plastic Surgery Services for people in Wales	To ensure achievement of targets for plastic surgery services in South Wales and to ensure patients in north Wales have timely and equitable access to plastic surgery out-patient appointments and minor procedures	Achievement of waiting times targets with help of planned care funding.
To address the impact of new Lung Cancer Screening Services for people in Wales	To meet increased demand for specialised services (thoracic surgery, SABR, PET) due to introduction of lung cancer screening (Y2-3)	Increased capacity is commissioned to sustainably meet the new levels of demand.
To commission effective and efficient Haematology Services for people in Wales	To implement recommendations from the Haematology review conducted by the predecessor organisation.	Haematology services for Wales are equitably commissioned, and services are

	<ul style="list-style-type: none"> • Commissioning the All-Wales acute leukaemia MDT • Commissioning the Thrombotic Thrombocytopenic Purpura pathway 	sustainable to deliver care for the population.
Cardiac Commissioning Team		
To Commission equitable, effective and efficient Obesity Surgery services for Wales	To recommission Obesity Surgery services for patients from North and Mid wales as a result of notice given on the previous Salford contract	Tier 4 Obesity services continue to be available equitably for the welsh population
To commission equitable, effective and efficient Cardiac Surgery Services for people in Wales	Work with providers to plan for and accommodate the changes in demand for interventional cardiology, longstanding cardiac surgery staffing pressures, and evident infrastructure pressures across both cardiac surgery and interventional cardiology. Potential capital investment - project to be developed following Phase 2.	To deliver Phase 3 of the NWJCC Cardiac Review
To commission equitable, effective and efficient Cardiac Devices Services for people in Wales	Ensure that Cardiac Device services are consistently and equitably commissioned across all Welsh Health Boards through the conclusion of the review of Cardiac Device services and work with Health Boards to implement any required changes to service configuration.	Provision is consistently funded and equitably provided
To commission equitable, effective and efficient Cystic Fibrosis Services for people in Wales	Implement the recommendations of the NWJCC Cystic Fibrosis Review. In view of the ongoing impact of modulator therapies, this will likely necessitate a reconfiguration of the service specification and subsequent recommissioning exercise to ensure that the service remains aligned with patient needs and appropriately funded.	Service specification updated in line with service developments. Services commissioned to provide best outcomes and value.
Intestinal Failure		

To ensure effective and efficient Intestinal Failure (IF) services are provided to the population of Wales	To conclude work to ensure sustainability and efficiency within the IF commissioning portfolio, including to maximise the best use of the available compounding capacity and improving value and access to home nursing support.	IF services are equitably provided and are robust, sustainable and delivery value.
Neurosciences and Rare Diseases Commissioning Team		
To commission effective and efficient Thrombectomy Services for people in Wales	Expansion of Mechanical Thrombectomy Service to 24/7 (South Wales) improved rates of access into the services.	To provide equity of access to a 24/7 mechanical thrombectomy service for the population and deliver improved rates of access in line with best practice.
To commission effective and efficient Functional Neurosurgical Service for Movement Disorders (includes DBS) for people in Wales	Functional Neurosurgical Service for Movement Disorders - South Wales (east and west) & South Powys populations	To provide access to a sustainable, safe, timely and equitable service by designating a provider for DBS for the South Wales and South Powys population using a Function Neurosurgical for Movement Disorders Model.
To commission effective and efficient Neuro Rehabilitation Services for people in Wales	Commission the development of Neuro Rehabilitation Services to meet BRSM standards which provide a structured, evidence-based framework for delivering safe, effective, and patient-centred care	To meet minimum national standards (British Society of Physical Rehabilitation Medicine standards) which is currently inequitable to North West and North Powys based patients that access services through NHSE providers.
To commission effective and efficient Bone Conduction Hearing Implant (BCHI) Middle Ear Implant and Cochlear Implant Services for people in Wales	To conclude the designation of provider process and commission a permanent provider for the Specialist Auditory Implant Device Service for South East Wales, South West Wales and South Powys (Y2)	A designated provider is in place to deliver an equitable service for South wales.
Acute Neurosurgery MDT – Increasing AHP Provision (CVUHB) (Spend to Save)	To implement the previously approved proposal to increase AHP provision within the Acute Neurosurgical MDT.	To enable improve patient flow across the acute neurosurgery service pathway enabling early discharge and repatriation.

		Compliance with British Society of Physical Rehabilitation Medicine (BSPRM) standards.
ALAS – Prosthetics Service - Micro Processor Knees (MPK) Replacements – move to years 2&3	To implement the replacement programme for MPK with WAG funding.	A fully funded commissioned replacement programme is in place alongside services to deliver new MPKs
Implement a Specialist Rehabilitation Operational Delivery Network	Implement the findings of the specialist rehabilitation strategy including the development of an overarching Specialist Rehabilitation Clinical Network model (Operational Delivery Network) aligned with the Major Trauma and Complex Spinal Networks. to support pathway flow	Specialist Rehabilitation Operational Delivery Network introduced to improve value and flow.
Welsh Kidney Network		
Roll-over commitment to SBUHB (was already within 2025/26 and needs to remain in 2026/27 financial position) for new Independent Service Provider (ISP) contract (previously committed funding, not funded - in finance plan)	Maintain the previously approved roll over funding commitment to SBUHB for the new Independent Service Provider (ISP) dialysis contract, including Bridgend and the planned Neath Port Talbot unit opening in May 2026.	Unit Dialysis Better haemodialysis patient survival and quality of life aligning with patient values and preferences Fewer dialysis related hospitalisations More patients remaining suitable for kidney transplant Improved patient experience metrics
Dialysis – Unit and Home Therapies (Demand, Inflation, Capacity) (in finance plan)	Address inflationary pressures, demand growth, and implement a strategic shift to increase home dialysis capacity aligned with GIRFT recommendations and service specifications.	Support people whilst on the transplant waiting list. Improved patient experience metrics. More patients remaining suitable for kidney transplant.

	<p>Home Dialysis To promote home dialysis through shared decision making and commission an increase in capacity for home dialysis, which is more cost effective than unit dialysis.</p> <p>The aim is to increase home therapy programmes to 20 percent (as per Getting it Right First Time (GiRFT) recommendations) in the first instance then aspire for 30 percent as per the service specification.</p> <p>Unit Dialysis Address the on-going increase in demand for patients requiring dialysis by providing equitable unit dialysis provision for patients in Wales through the planned South East Wales (contracts expire in 2027) and North Wales Regions (contracts expire in 2029) tenders, whilst considering new evidence-based technology.</p>	<p>Delivering value for money through commissioning and best practice procurement.</p> <p>Home Dialysis Increase in home therapy programmes for efficiency and reduced cost</p> <p>Safe, regular consistent treatment provision as close to patients' homes as possible</p> <p>Increased uptake in home therapies aligning with patient values and preferences</p> <p>Fewer patients on unit haemodialysis</p> <p>Better patient outcomes, improved quality of life, more cost-effective care</p> <p>Unit Dialysis Decreased reliance on twilight (evening) dialysis slots, which can be associated with elevated patient safety risks (for those who are less independent), such as fewer medical staff being available and patients requiring transport home.</p> <p>Environmental changes to reduce transmission of multi-drug-resistant organisms</p>
--	---	---

		<p>Better haemodialysis patient survival and quality of life aligning with patient values and preferences</p> <p>Fewer dialysis related hospitalisations</p> <p>More patients remaining suitable for kidney transplant</p> <p>Improved patient experience metrics</p>
Renal surgery – increased demand experienced in 25/26 - This is not a directly commissioned or funded by the WKN	<p>Recognise increased activity above the LTA in 25/26 and adjust financial planning accordingly.</p> <p>This figure is made up of the FU, OP, IP and Day Cases within SBUHB - not within the commissioned services of the WKN</p>	To include in the commissioned services of the WKN going forward, review and incorporate in the financial plan
Nephrectomy – manage increased demand in BCU in 25/26	<p>Reinstate nephrectomy (£653k) as a pass-through funding pressure related to Royal Free Hospital.</p> <p>Related to finance led scheme to ensure recurrent funding for BCU pass through payment for activity conducted by Royal Free Hospital</p>	
Manage increased demand in BCUHB over a number of years.	Currently BCUHB is on a block contract, this would be the financial investment to move into a cost & volume contract to cover additional demand and extended provision.	<p>Home Dialysis</p> <p>Increased uptake in home therapies aligning with patient values and preferences</p> <p>Fewer patients on unit haemodialysis</p> <p>Better patient outcomes, improved quality of life, more cost-effective care</p>

		<p>Unit Dialysis Better haemodialysis patient survival and quality of life aligning with patient values and preferences</p> <p>Fewer dialysis related hospitalisations</p> <p>More patients remaining suitable for kidney transplant</p> <p>Improved patient experience metrics</p>
<p>Kidney Transplant - Equitable Access</p>	<p>Maintain transplant-first commissioning principles ensuring equitable access across Wales.</p>	<p>Kidney Transplant first is deemed the most effective and efficient treatment; transplanted kidneys deliver the best patient outcomes</p> <p>Pre-emptive live donor transplant has better long-term success rates than a deceased donation</p> <p>Increased pre-emptive/living kidney donor transplantation</p> <p>Early identification and timely work up of all potential transplant recipients and donors</p> <p>Fewer patients starting dialysis without a transplant plan or being on waiting lists</p> <p>Fewer people needing long term dialysis</p>

		<p>Improved patient survival, better quality of life, fewer hospitalisations and lower treatment cost</p> <p>Monitor and improve delays in the transplant workup pathway</p>
Vascular Access for Adults requiring Haemodialysis	<p>Reduce waiting lists for vascular access to improve timely dialysis initiation and outcomes.</p> <p>Provide equity of access and consistency in standards of care, addressing unwanted variation and ensure services deliver value for money through the commissioning policy and service specification.</p>	<p>Timely dialysis access</p> <p>Decreasing the percentages of patients starting with lines rather than an arterio-venous fistula</p> <p>Decreases the risk of complications (infection rates - review the service spec)</p> <p>Reduction in significant cost to patients' health and the wider system, with the potential increases in required interventional radiology services and acute unplanned admissions</p> <p>Fewer dialysis related hospitalisations</p> <p>Further work to be completed in Yr1 to inform Years 2&3</p>
Conservative Management/ Palliative Care	<p>Support patients through open and honest shared decision making and standardised support regarding treatment of their kidney disease (patients/ family/carers), whilst ensuring collaborative pathways with palliative care.</p>	<p>Appropriate patients feel well supported on a non-dialysis pathway</p> <p>End of life care in the setting respecting patient wishes</p> <p>Fewer hospitalisation of patients not for dialysis</p>

		<p>Recognise increasing frailty in patients on dialysis and facilitation of cessation when appropriate</p> <p>Develop and embed Advanced Care Planning</p> <p>Aging population</p>
Prevention	To actively support and influence the avoidance of people developing advanced Chronic Kidney Disease (CKD) in Wales through both primary and secondary prevention and reduce inequalities in access to screening.	<p>Fewer people with advanced CKD in future years</p> <p>Mitigate against people needing expensive acute and long-term kidney replacement treatments in future years</p> <p>Improve screening in Primary Care (PC)</p> <p>Timely interventions to prevent the progression of CKD</p> <p>Optimise Acute Kidney Injury (AKI) care</p> <p>Nationally endorsed educational material in PC</p> <p>Public health messaging (Diabetes)</p>
CKD Care	Ensure patients with kidney disease are referred appropriately and in a timely manner by developing care pathways to reduce variation.	<p>Access to services delivered equitably across Wales</p> <p>Appropriate patient waits based on clinical priority</p> <p>Fewer patients starting dialysis having been known to Nephrology for less than 90 days</p>

		<p>Fewer people progressing to End Stage Kidney Disease</p> <p>Reduction in AKI</p>
Women and Children's Commissioning Team		
To ensure correct neonatal cot configuration for Welsh Patients	Implement Phase 1 of the Neonatal cot configuration project	Correct neonatal cot configuration for Welsh Patients is fully commissioned
Support the progression of the Maternal and Neonatal Transformation review	Continue the strategic priority contained in 2025/26 Foundation Plan. The Review includes maternity, transitional care and neonatal care and work will recommend an optimal commissioning model for services across South Wales.	Services are commissioned for the population needs of South Wales ensuring that there is an efficient and sustainable model in place to support the optimal outcomes for mothers and babies in Wales.
<p>Concluded the remaining commissioning elements of the Paediatric Strategy including:</p> <ul style="list-style-type: none"> - Paediatric Neurology - Paediatric Ophthalmology - Paediatric Orthopaedics - Paediatric HDU 	Concluded the existing priority action contained within the JCC's 5 year commissioning strategy for specialised paediatric services.	Paediatric Services are fully commissioned by the JCC and meet minimum standards, are enabled to deliver improved outcomes and are effective and efficient.